

Te Tira Ārai Urutā

Royal Commission of Inquiry into COVID-19 Lessons Learned

Official interview transcript: Brook Barrington

23 May 2025

Present:	Grant Illingworth KC	GI	<i>Chair of the Inquiry</i>
	Anthony Hill	AH	<i>Commissioner of the Inquiry</i>
	Judy Kavanagh	JK	<i>Commissioner of the Inquiry</i>
	Nicolette Levy KC	NL	<i>Counsel assisting the Inquiry</i>
	Inquiry Secretariat member	IS1	-
	Brook Barrington	BB	<i>Former Chief Executive of DPMC</i>
	Victoria Casey KC	VC	<i>Legal representative for the All-of-Government Response – DPMC</i>
	Ministry of Defence representative	MOD	-
	Crown Law Office representative	CLO	-
	Department of the Prime Minister and Cabinet representative	DPMC	-

	[introductory remarks redacted]
GI	Yes, Dr Barrington, thank you so much for making your time available on a voluntary basis. As I think you've been advised, we are just starting to record and transcribe the interview and I assume you've been told about that and consent to it.
BB	I do, I have, and I do.
GI	So just for the record could you just tell us your full name and current occupation please.
BB	Brook Francis Barrington, I'm currently the Secretary of Defence.
GI	And you're aware that our Terms of Reference confine our inquiry generally to the period from February 2021 to October 2022?
BB	Mmhm.
GI	And can you tell us please your position during that period of time.
BB	I was the Secretary of the Department of Prime Minister and Cabinet, with various associated roles, but I should note that I was on leave from 20 December 2021 until 1 August 2022 so for 70% of the second year of this inquiry I was absent [redacted]
GI	Thank you. So your role as Secretary for DPMC meant that you were also the Chief Executive of that Department?

BB	That's correct.
GI	And you mentioned your other roles, was one of those roles Chair of an organisation, acronym ODESC?
BB	That's correct.
GI	Can you tell us...
BB	It's not an organisation, it's a Committee, it's a different thing.
GI	So what was the role of that Committee during the period that you are able to tell us about?
BB	The Officials Committee for Coordination of Domestic and External Security is a standing Committee in a sense, mandated by Cabinet. It's established in the 1970s. It's an ad hoc Committee in one sense that it is convened, if I look at it in the context of COVID, it's convened when there is a domestic or international security issue of complexity such that it requires a degree of coordination that goes beyond a single Department. So that's the genesis of ODESC and in the COVID context it was really stood up in a sense at the start of 2020, so outside the Terms of Reference of this inquiry and standing structures were put in place under the ODESC mandates that started with the Quint which you'll be familiar with and then it became All of Government and then it became the COVID Group within DPMC. But ODESC in a sense was the driving force at the start of the COVID response to try and put in place a system by which government could both execute government policy and advise government on that policy. In a sense it fell into abeyance quite early in 2020 as more mature standing structures were put in place.
GI	Right, so ODESC can be set aside for the purposes of the period under inquiry?
BB	I think that's correct, yes.
GI	And so by February 2021 the COVID Response Group had been formed to take over the role the ODESC and the Quint had previously performed?
BB	Sorry, would you repeat that question?
GI	Sure. By February 2021 the functions initially performed by ODESC and the Quint had been superseded by a Committee called the COVID Response Group?
BB	The COVID Response Group was not a Committee. The COVID Response Group was a business group within the Department of Prime Minister and Cabinet.

GI	So more accurate to call it a business unit?
BB	A business unit, yes.
GI	And so was that business unit in place by February 2021?
BB	It evolved but the short answer to your question is yes, there was a business group responsible for COVID inside the Department of Prime Minister and Cabinet by February 2021, yes.
GI	The traditional way to deal with infectious diseases was to have lead agency which would have been the Ministry of Health. Did that lead agency model prove to be unsuitable?
BB	It did, but that decision was reached early in 2020.
GI	And is that why an All of Government response was formulated within DPMC?
BB	Yes and no. If I cast my mind back to the start of COVID in 2020 it became quite clear that a global pand... let me - reverse the point. The lead agency model works best for quite narrowly defined, temporarily limited, acute events in which an agency in itself has by and large the resources and the legs to sustain a response. The judgment was reached early in 2020, certainly by me, that this was going to be a chronic event with all of nation and international ramifications that went far beyond the ability of one agency, a lead agency, to manage and that a system needed to be put in place. That system began with the Quint, it evolved into the All of Government Group in a sense, which was a spill outside of DMPC and then by the end of 2020 and certainly by the start of the Terms of Reference of this inquiry, that had evolved into the COVID-19 Group as a business unit within DPMC.
GI	Now, what was your role as at February 2021 in the COVID Response Group?
BB	Very little.
GI	And why was that?
BB	DPMC runs a federated model in a sense, so it has a number of different business groups, most of which operate in a fully or quasi-independent way insofar as the Secretary and Chief Executive of that Department is concerned. So for example, the unit that was responsible for the health reforms was nested inside the Department but essentially ran itself and had direct lines with ministers. Similarly, the Children's Unit within DPMC. Similarly the Cabinet Office where in fact the Cabinet Secretary has a degree of statutory independence. Similarly the Head of the National Assessments Bureau where again, that person has a degree of

	<p>legislative independence. And so when I look at the COVID-19 Group within DPMC it was the entity that provided first opinion advice to government and to ministers. It was the leadership of that Group that would attend the various meetings that were to be found across the system. I attended no such meetings. My job was to chair the COVID Chairs Board. My job was to chair the National Response Leadership Team and my job was to provide, in this context, third opinion advice to the Prime Minister. So in a sense all of those business units within DPMC over a considerable period time exercised a degree of independence which reinforced the notion of a separation between first opinion advice, second opinion advice which was provided by the Policy Advisory Group and then third opinion advice which would be provided by me if necessary as the Secretary of the Department. That graded approach in a sense was orthodox and ensured that at least within the Department there was a fair degree of check and balance and scrutiny in the development of advice. I would hope Mr Chair at some point you might come back, if you would, to this notion of a system that was put in place because it was quite a complicated system that went well beyond DPMC. I say that only because I had a role in that broader... my job was a system job, not a departmental job, if you see what I mean.</p>
<p>GI</p>	<p>I'll come to that point in just a minute. We have heard from the Public Service Commissioner and we've looked in the public service legislation to the role the Public Service Commissioner has, but it seems that the Public Service Commissioner doesn't have the role that you've just described and didn't have that role during the COVID pandemic. Is that a point you'd agree with?</p>
<p>BB</p>	<p>Well not entirely. If I understand your question correctly, we have a devolved system so ministerial accountability and chief executive accountability is very strong in this country and it's held departmentally, as indeed our appropriations flow through departmentally, so in a sense the Public Service Commissioner had very limited, if any, powers outside of a very narrow remit to direct an agency any more than the Chair of ODESC did or indeed, the Chair of the CCB or indeed, the Secretary of the Department of Prime Minister and Cabinet. There is no ability to direct, either under the Public Service Act, or indeed under any of the Cabinet mandates which establish those COVID-related bodies. It just happens to be the nature of our system. High degrees of independence at an agency level matched by specific and quite high degrees of accountability that tend to exist at an agency level. Unless it's an agency like DPMC which has a kind of confederated approach to it where the accountabilities tend to be driven down further in that agency than in many others.</p>

GI	<p>My question was designed to clear away any idea that an agency other than DPMC had an across-the-board coordination role. Am I right in thinking that DPMC ended up being the coordinator for government response?</p>
BB	<p>There's quite a lot in that question. No, not really. If you're using government response in as a term of art, the response, which is kind of what the National Response Leadership Team did, then I was Chair of the NRLT team but I was Chair of that almost as the Chair of ODESC rather than as the Secretary of the Department of Prime Minister and Cabinet. Similarly, the CCB. So in a sense the Department sits over here and a whole lot of stuff was happening in the Department and it would just happen. And then you had the COVID Group nested in the Department providing first opinion advice. That was the kind of departmental responsibility. My responsibilities at a system level did not really spring out of DPMC, they sprang out of Cabinet mandates that appointed me to various positions. It just so happened that I was also the Secretary of the Department. I might not, by the way, have got those positions had I not been Secretary of the Department. I'm not pretending there's not some kind of de facto connection but it wasn't a consequence of being the Secretary I think is the point that I'm making.</p>
GI	<p>Right, well if we come back to your point about the system, can you describe that system as you see it please?</p>
BB	<p>So let me go back half a step, which is in October 2020 the Kitteridge Review recommended that responsibilities for COVID across the board, response and policy and strategy, be devolved back to line agencies as much as possible with an interagency coordination and system assurance function provided by the COVID Group. But Kitteridge said that as a rule of thumb existing and orthodox structures and frameworks should be used where possible. If you roll that forward to February '21, a steady ecosystem was by then in place. It had taken about a year to find a stable, orthodox system. We had returned to clear ministerial and agency accountabilities. We had returned to first, second and third opinion advice. We had returned, incontrovertibly to Cabinet government. And so if I just map that system at a reasonably high level we had Cabinet, we had democracy, a Cabinet-led government, and the Prime Minister is the Chair of Cabinet. The kind of peak decision-making body, the body to which advice was developed and furnished, either on our own recognisance or in response to demand. Then you had the Prime Minister's Office and so here you have, if I can put the kind of political firmament, you're all familiar with it, it's what we're used to in New</p>

Zealand – political firmament, the peak decision-making body, Cabinet, the Prime Minister, the Prime Minister’s Office, and I should also mention the Chief Science Advisor kind of off to the side. And then below that was the COVID-19 Ministerial Group. So in a sense that’s what I would call the above the line peak system. And that system was informed in an orthodox way.

Ministerial submissions, Cabinet submissions, Cabinet decisions, Cabinet Office minutes promulgated down through the system. Beneath that we had a variety of bureaucratic structures. We had appropriations ministers and individual agencies. Perhaps if I just pause here for a moment Mr Chair, when I try and describe government I talk about agency sector system. So you have this thing called an agency, the Department of Prime Minister and Cabinet or the Ministry of Health. It’s appropriated, it has a minister or more than one, and it has a certain set of accountabilities. You then have a sector which, for example, in today’s terms you have economic chief executives, for example, the primary sector. And then you have a system which is big chunks, if not all, of government where DPMC, The Treasury and PSC kind of a have a system leadership role. That’s in peacetime. But it’s a useful, I think, decomposition because it also applies in wartime, if I can use that analogy for COVID. And so you have the ministerial firmament as I have described it and then underneath that you have the sector level COVID-related entities. For example, you had a Border Chief Executive’s Group, which I never attended. That was at sector level, I was involved in the system. I wasn’t interested in the sector. Those are chief executives experienced with their own accountabilities.

So you have the Border Chief Executives, you have the Economic Chief Executives, you have the Caring for Community Chief Executives, you have Reconnecting New Zealanders Chief Executives and the then Secretary of Foreign Affairs and Trade would, as required, convene a group of International Chief Executives. So you have the peak governance sitting at Cabinet and ministers. You have a set of sector level arrangements – border, economic, social, international and reconnecting New Zealanders. Then underneath that or perhaps slightly off to the side and certainly informing the political decision-makers you have the International Continuous Review Group chaired by Brian Roche, you had the Strategic Public Health Advisory Group first chaired by David Skegg, you had the Community Panel chaired by Sarah Sparks, you had the Business Leaders Forum chaired by Rob Fyfe and you had the COVID Modelling Governance Group.

	<p>So I'm trying to paint a picture whereby at the sector level you had quite a complicated ecosystem. And then underneath that you had individual agencies and regional leaders and then again kind of off to the side you had the National Response Leadership Group in the event of a resurgence and you had the COVID Chairs Board which was a group of, I don't know, ten perhaps, chief executives which was trying to provide some degree of shared situational awareness and drive where required to make that system work. And the COVID-19 Group, if I can circle back Mr Chair to your opening questions, in a sense provided first opinion advice but it also was the touch point into that system and sector set of arrangements. Cheryl Barnes would have attended the Border CEs, Economic CEs and if she didn't, one of her staff would have. They were the touch point for that. I did not, as a matter of good public administration but also deliberateness. If one person were to attend all of those meetings I don't know where governance and leadership would take place because it's a hugely complicated... no, that's not true, it's not a hugely complicated system but it's a webbed system and so it was important that people played to role in that, otherwise you would end up as an individual getting swamped in that web I think, to mix my metaphors.</p>
GI	<p>Thank you for that, that's very helpful and just clarifies a number of points that we are very interested in. In particular, we're interested in how decision-makers who were making key decisions during the course of the period under inquiry were being informed about relevant issues. We know that Ministry of Health was providing granular health advice throughout the whole period. What we need to know is what other advice as being put up to Cabinet and who was coordinating that other advice. Can you just tell us how that worked within the system that you've described please?</p>
BB	<p>Well, there were many advice chains. So an agency would put up advice to its minister on that agency's concerns. So for example, I don't know if this is a real example but it easily could be – Ray Smith, the then Secretary of Primary Industries might well have put up advice to his minister about the fact that the border settings were stopping artificial inseminators coming over the border to inseminate the dairy herd. That was a Primary Industries matter, it went from the Department to the Minister. The Minister would either be able to make a decision or not themselves and if it required something wider then might ask for a wider piece of advice to be provided and if it was a peak piece of wide advice, might ask for a Cabinet paper to be prepared. But by and large there's something that just happens at an agency level, a chief executive conducting business with a minister and a minister having the authority or the accountability to take a decision. So that's at one end of the spectrum. At</p>

the other end of the spectrum there are Cabinet decisions that need to be taken and so for example something you'll perhaps come on to later, a vaccine mandate. That's a big issue. It involves politics and policy. It's a Cabinet level decision because it's not trivial and so the way that that not only would work, did work, is that there are a range of departments and ministers with an interest in something like that, it's a complicated issue. And so the Cabinet Manual requires that advice to Cabinet be fully consulted.

And so you would have an agency that would hold the pen, be the primary drafter of a Cabinet paper. Very often that happened to be the COVID-19 Group. The COVID-19 Group in a sense, in that context, has two functions. The first is that it might itself have a view on the merits or demerits of parts of a policy issue insofar as it touches on the mandate of that group. So public communications, for example, or COVID strategy. So the COVID-19 Group has its own interest in informing the public policy process.

But it had a second function which was to write an All of Government Cabinet paper of a kind and in a timeframe that would allow Cabinet to take informed decisions. And so it's obliged, as I say required under the Cabinet Manual, to ensure that all interested agencies on any given policy matter, all relevant interested agencies on any given paper going to Cabinet, are consulted. And so the COVID-19 Group would therefore talk to the Ministry of Health, it would talk to the Ministry for Primary Industries, it would talk to Foreign Affairs, it would talk to all and every agency that had an interest in the piece of advice being furnished. It might also ask, or those agencies might themselves determine, that one of those sector groups might give consolidated advice. So, for example, economic CEs might choose to furnish consolidated advice or the border CEs might choose to furnish consolidated advice. Part of that consultation process also included, or could also include, depending on the matter at hand, the Strategic Public Health Advisory Group, the Business Leaders Forum, the Modelling Group, so they would also be consulted if required, plus iwi Māori, plus business. In a sense consultation, when developing a Cabinet paper, can be quite narrow if the issue is quite narrow or it can be quite broad if the issue is quite broad and that was the same for COVID – sometimes the consultation could be quite narrow, it touched only on the interests of a few, or it could be extensive because it touched on the interests of many. A Cabinet paper would then be completed. A Cabinet paper, by the way, is owned by a minister, it's not owned by a department, so it would be provided to the relevant minister and the relevant minister would determine whether the composition and advice of that paper was such that it should therefore go to Cabinet. Ministers would then determine

	<p>if any ministerial consultation was required, or indeed any other consultation with input parties beyond what the drafters of the paper have initially determined. It would then be put on the Cabinet agenda. The Chair of Cabinet would then get two pieces of advice, or many by the way, but formally in my world, two pieces of advice. The Prime Minister’s Office would provide a view on the merits and demerits of the paper and its recommendations and the Policy Advisory Group within DPMC would provide second opinion advice on the merits and demerits of the paper and its recommendations such that the Prime Minister, who has often hundreds and hundreds of pages to read before Cabinet, would be given a view on every paper, not just a COVID paper by the way, this is a longstanding process, it’s been going on for decades. The Prime Minister would get what is called a PAG note.</p> <p>I should go back and perhaps emphasise that very often in COVID we would also have a Crown Law opinion and a BORA, Bill of Rights, review opinion as part of a standard Cabinet paper. But all of that is designed to ensure that ministers get clear advice with clear recommendations identifying the pros and cons, fully consulted, sponsored by a minister, with first opinion advice in the paper itself, second opinion advice from the Policy Advisory Group and third opinion advice, if required, either by the Deputy Secretary responsible or the Deputy Chief Executive responsible for the Policy Advisory Group or indeed, me as the Secretary of the Department but also as a system lead for COVID. Again, that sounds quite complicated but there’s quite a lot of muscle memory and reflex in that. It’s actually orthodox in a sense, so people kind of knew the swim lane that they were in.</p>
GI	<p>Dr Barrington we have a problem that I’m going to share with you and I’m going to ask you how you would handle it. We have been tasked in relation to all of the key decisions that were made by government during the period under inquiry for us to consider whether those key decisions were well-informed and the problem that that presents is unless we know what material was provided to Cabinet or perhaps individual ministers we are, to a certain extent, shooting in the dark. And so how would you ensure...</p>
VC	<p>Grant I’m going to step in here. The issue of the PAG notes and legally privileged advice I think is an issue that we’re dealing with directly with you and the Inquiry and I’m not happy for direct questions on that issue to go to Dr Barrington.</p>
GI	<p>I’m not going to ask anything about the PAG notes.</p>
VC	<p>Or the legal advice.</p>

GI	Or the legal advice.
	[redacted]
GI	So leaving aside those two issues, how would we ascertain the full extent of the advice that was given to Cabinet on, for example, the decision to extend the lockdowns in Auckland in the latter period of 2021?
BB	<p>I can perhaps furnish you with the approach that I took because in a strange way, Mr Chair, I was facing the same problem then that you're facing now, which is a great many decisions needing to be taken, many interconnected, with high degrees of complexity and a large number of interested parties in a sense, all of whom have a view. So how to square that circle? Process is your friend. My concern was on any Cabinet paper, has this gone through an orthodox process? Is this paper properly consulted? If I look at the consultation paragraph in that paper, does it tick the boxes that all of the agencies and entities that should have been consulted were consulted? Is the argumentation in the paper clear? Are the recommendations clear? Can they be implemented? Is it clear who implements them? Is it clear who's accountable for what? Has government and ministers or Cabinet been given adequate time to consider this paper? In a sense, the system... that's why I keep... I did then and I come back now to this notion of orthodoxy. Orthodoxy stemming from the Cabinet Manual is the friend of high-quality decision-making. That is what that exists for, whether it's in a COVID context or any other context, the Cabinet Manual is designed to ensure that the peak decision-making and accountable body, the Cabinet, is properly informed in ways such that it can make a well-informed and implementable decision.</p> <p>So the question that I ask myself is, is the system working well, including second opinion advice and if necessary, third opinion advice? If the system is working well you don't need to interrogate the mass of material. It's the system that should be interrogated because if the system is well-founded and operating as it should the advice train will be... you can agree or disagree with the recommendations and the decisions taken but the question is were ministers in a position to take an informed decision? And the advice chain, the orthodox advice system, should ensure that.</p>
GI	Are you aware of any situations in which that advice chain didn't work well during the period under inquiry?

BB	<p>No, and that’s partly because you know, I and my colleagues worked hard to try and ensure that that system was in place. The days of scrambling at the start of this in 2020 had passed. By the time that this inquiry begins we had a steady state orthodox system but I caveat that in one sense – pace and complexity had not miraculously disappeared. To impose and then extend a lockdown is not straightforward. To introduce a COVID protection framework and abandon alert levels and elimination, these are not trivial matters and so pace and complexity had not disappeared. But I come back to my point that a system and its orthodox well-run way, even in context of pace, complexity and pressure, the demands of the Cabinet Manual are such that high quality Cabinet papers still needed to be prepared, and were.</p>
GI	<p>If we look at the Cabinet papers that were prepared during the period under inquiry there seems to be a very heavy focus, as one would expect, on protecting public health. One criticism that has been mounted of the decision-making process is that that topic became so dominant that other important topics weren’t weighted very well and I’m thinking here of the economic consequences of decisions. Your system analysis, I suggest doesn’t cope very well with unusual situations such as the ones that were the subject of decision-making during the period under inquiry and the question of getting the right balance remains extremely difficult. Do you agree with that?</p>
BB	<p>Well let me deconstruct the two parts to that question. The first part addresses the comprehensiveness, if you like, of the advice given to Cabinet. And I think there are two answers to that. The first is it remained government policy that the primary response posture to COVID was a public health posture. That was not a decision taken by officials, that was a Cabinet mandated decision and it ran almost throughout the entire COVID response. So it’s perhaps not surprising in one sense that Cabinet papers started from that point because that word “servant” in the notion of being a public servant is something which is real – we are servants of government decision-making and the government had determined that the COVID response was first and foremost a public health response. The second part is that Cabinet papers are designed to ensure that there is a range of views and if you just go back into the system, we have economic CEs for example, which was a standalone group chaired by the then Secretary to the Treasury. And the Treasury was consulted in the development of Cabinet papers. If that advice did not come through strongly enough, and I put PAG notes to one side, but just in the Cabinet paper itself, then that was not a failure of the system in my view. The system was still designed and indeed,</p>

	<p>was delivering, a plurality of views against that backdrop of this being predominantly, as Cabinet had mandated, a health-led response.</p> <p>So I don't think there's necessarily a system failure in that. If the social voice or the economic voice did not come through strongly enough then I don't think that's because the Cabinet Manual did not invite it and the subordinate structures were not there to provide it. It's because the voice of those particular sectors might not have been assertive enough in articulating a view, although I note, I think it was in August 2021, that the Treasury were still saying officially that the best economic response was a strong public health response. So the Treasury itself had reached that conclusion. My last point perhaps is that I cannot comment on how that unfolded in most of 2022. I came back in August of '22 but by then we were really looking at embers rather than fires I think. All I can say is that if I use your example, Mr Chair, of the Auckland lockdown in August 2021, the National Response Group in its matrix of considerations had to consider economic consequences. It was part of the matrix. It was also one of the eight issues that was in their remit formally to consider and then provide advice to the National Response Leadership Team. The National Response Leadership Team including the Secretary to The Treasury.</p> <p>So we were thinking about economic consequences in that very narrow environment of do we or do we not advise government to change an alert level. Back then, once that decision had been taken there were weekly Cabinet papers to government about alert levels and those weekly Cabinet papers, as I say should and indeed were, fully consulted. But I do think it's important, well, maybe it's not for me to say what's important, it's for you to say what's important, but I do myself make a distinction between the arrival and ferocious impact of the Delta variant at the end of 2021 which, quite rightly in my view, forced the system back into this being essentially a public health response and then the arrival of Omicron in 2022 where I think the questions you're asking may be more relevant but I cannot say that with any determination, simply because I was not there at the time and do not have a particularly clear view of what happened after 20 December '21.</p>
GI	<p>Thank you. So just on that point of what advice was given in relation to the lockdowns, alert level settings in August 2021, there's a paper that went up to Cabinet via the COVID Response Minister which contained some economic assessments and which included the idea that an Alert Level 4 in Auckland and Waikato and Alert Level 3 for the rest of the country would result in a billion dollars reduction in economic activity per week. You'd be</p>

	familiar with that kind of analysis that was being given to Cabinet and to the COVID Response Minister.
BB	I haven't seen that precise...
GI	Just using that as an example.
BB	But yes, yes. There's no doubt that lockdowns, especially at Alert Level 4, have an economic impact.
GI	You might not be the right person to answer this question but it could be argued that telling Cabinet what the reduction in economic activity per week was, was not sufficient to alert Cabinet to the long term impacts of the economic consequences. So for example, what might happen to the economy in the longer term. Do you agree that ideally Cabinet should have been alerted to that kind of issue?
BB	Well first of all I'm not the right person to answer that question in an economic sense. Secondly, this Cabinet had been fighting COVID since January 2020. They had gone down more than one lockdown. They had a very clear view of what the costs and benefits of a lockdown were at whatever level. Thirdly, around the Cabinet table you have Ministers for Economic Development and you have Ministers of Finance who are being advised by their own agencies about a position to take on any given Cabinet paper. The cabinet was not either existentially, nor in terms of advice, blind to the economic consequences of a lockdown and indeed, at both a Cabinet level and individual minister level around the Cabinet table, there were many advice streams. Thirdly, or perhaps it's fourthly, I don't think you can separate out the August lockdown from what was happening with Delta and I think, Mr Chair, that you and, if I can be so bold, you and your co Commissioners in the first part of the inquiry, I thought the conclusions you reached were accurate in identifying the existential threat that Delta posed at that time and the need for firm and indeed justifiable action. My last point is and I don't know, forgive me, I think this is from the first inquiry, it is indeed the first inquiry, on pages 127 and 128, this relates to the May 2020 lockdown – I myself found it instructive and probably knew it at the time but if I had I'd forgotten, that 52% of Auckland could still work in Alert Level 3 and Alert Level 4. That 73% could work at Alert Level 3 but not Alert Level 4. That only 27% of the Auckland workforce could not work in the lockdown. And although that hit small and medium enterprises harder I would want to dispel any suggestion that even under AL4 there was not significant economic activity taking place in Auckland and more generally and I think it's on the same pages in that first

	<p>report that 62% of industry on average was still able to operate at Alert Level 4, so it just seems to me, and you really do need to talk to the economic advisors because I'm just reading what you wrote, or was written to be more accurate, I don't mean to be... that's a little unkind. But I do think in the context of understanding the full impact of lockdowns plus the full impact of Delta makes for quite a complicated decision-making matrix in that August, September, October timeframe of '21.</p>
GI	<p>Coming back to our difficulty in seeing the full spectrum of advice that was given, if you were looking for advice on the long term economic effects of keeping Auckland and Northland under Alert Level 4 during August/September etc 2021, and you were trying to find out whether government were alerted to the possibility of very long term harm to the economy of New Zealand, where would you like to find that advice, leaving aside PAG notes and Crown Law Advice?</p>
BB	<p>I'd look at what submission the Treasury prepared for the Minister of Finance and that MBIE prepared for their ministers. I'd look at the relevant Cabinet papers to see the extent to which that was captured, i.e. as I have said, I would go back to orthodoxy and I would look at orthodox advice chains. The PAG, I'm conscious of the quarantining of PAG notes, but it would be normal for the PAG to provide some view on such matters. Just in terms of your interpretation, is it true... it might be true by the way, but were the economic impacts of the Auckland lockdown so long term and severe? That is a question that I myself would be inclined to ask of the Treasury.</p> <p>The fiscal impacts of COVID I think are clear but I have seen quite a lot of international studies that show that New Zealand rebounded from COVID faster than many other countries in the OECD and we had in fact recovered the year one loss of GDP. We went deeper but rebounded higher than most. And I think from memory, but this is only memory, that our economic performance absolute and relative, by 2022 was actually back to something that looked like our long run levels of economic activity and GDP output. I may well be wrong, Mr Chair, and it's a long time since I've done economics and it's a long time since I've looked at this material, but I just wonder whether the assumptions behind that question are right. I'm not saying they're wrong, I just am encouraging you to make sure that they are right, that's all.</p>
GI	<p>Appreciate that and I can indicate that we have not reached the point of making any findings about that issue or, for example, the fiscal impacts of the wage subsidies and so on. It's an</p>

	<p>issue that we're interested in that we're inquiring into and we are helped by the information that you've provided to it. Can I turn now please to a document that hopefully you've got in front of you which is the COVID-19 National Resurgence Response Plan and the version that I have in front of me is dated December 2020, it's Version 1. And although this is before our period of inquiry I think you may be able to help us on some points that could prove important. Do you have that document sir?</p>
BB	I do, thank you.
GI	So if we look at page 4, paragraph 1.1.
BB	Yes.
GI	<p>New Zealand's national COVID-19 strategy is to eliminate COVID-19 from New Zealand until a vaccination programme is implemented or the virus attenuates sufficiently to be managed in other ways. So that gives us a snapshot of where we were up to with the virus struggle at the time that this was published and we're obviously anticipating vaccination, etc. And further down that page there's reference to the DPMC COVID-19 Group and Ministry of Health developing a series of aligned likely scenarios. Now, as you will have perhaps seen from the Phase One Report, the Phase One Commissioners, including technically me, promoted the idea of scenario planning and different event horizons being used in the scenario planning. Is that something that to your knowledge was done by the COVID-19 Group?</p>
BB	Yes, it was.
GI	But I take it you don't have detailed knowledge of how that was done?
BB	No. I didn't attend any but it did occur.
GI	Now, there is a section at 1.1.3 on national objectives and I take it that you can confirm that those objectives were part of the COVID-19 Group's mission?
BB	<p>Well, no, I can't necessarily do that. This document and those that followed were pulled together, this particular one, at the end of 2020 to ensure that if there were to be an outbreak while everybody was at the beach, what would we do, who would do what, to ensure that genie did not get out of the bottle? So this doesn't have a Cabinet mandate and in fact, it's a tool and it's been pulled together to ensure that the people who read it who are really officials and indeed, it was circulated to ministers, have some sense of why we're</p>

	<p>doing what we're doing and then who does what. So by and large, what is at 1.1.3 is, by my quick read, a more or less accurate statement of national objectives. I just make the point though, this is not a kind of Cabinet mandated document. It's not like Cabinet sat down and said "yes, we endorse this plan and those national objectives". It's really an inhouse tool to ensure that we were not caught by surprise over that summer period. That may be an inadequate answer to your question and I apologise for that but I think it's important we see the document for what it is really.</p>
GI	<p>Part of why I'm asking you about this document is to ascertain its status and that's a helpful answer, but if we can go down to 1.2 on page 6, you'll see that by that time Cabinet had agreed to governance and decision-making structures based on the roles and functions described in a Cabinet paper that's described and is appended as Annex 1. And so on the basis of that Cabinet decision there are several governance structures which are key in the decision-making and implementation processes of the plan. Do you follow there?</p>
BB	<p>Yes.</p>
GI	<p>And then the bullet point list below refers to several different agencies.</p>
BB	<p>Yes.</p>
GI	<p>Now, as you'll probably guess, I'm wanting to find out what the status was of that decision-making list as at the beginning of our period of inquiry which is a couple of months after this document was formulated.</p>
BB	<p>I'm happy to go through each of those bullet points if that would be helpful.</p>
GI	<p>Yes, but before you do, let me take you down to the next page which does have some explanatory material concerning those levels of work.</p>
BB	<p>Is this the diagram?</p>
GI	<p>The diagram, correct.</p>
BB	<p>Yes.</p>
GI	<p>Now, we went through this with Cheryl Barnes and got some helpful information but can you tell me whether the list on page 6 and the diagram on page 7 were still in place as potential response organisations or agencies for a resurgence of the COVID virus into 2021?</p>

BB	I can confirm that if I'm looking at the diagram on page 7, then the entities listed in the lefthand side under the icon of the Beehive were all in place during certainly until 20 December 2020 and I doubt very much if they stopped thereafter.
GI	Right. So what we appear to have from looking at the diagram is a top-level National Response Leadership Team which included you as CE of DPMC?
BB	Correct, I was the Chair of that.
GI	The Deputy Chief Executive of All of Government?
BB	Mmhm.
GI	Who would that have been at the time?
BB	Cheryl Barnes.
GI	And obviously the Director-General of Health would have been Ashley Bloomfield. The Commissioner of Police and the Secretary of Treasury, so there was economic advice available through the Secretary in that National Response Leadership Team?
BB	Correct.
GI	And also the Chief Executive of NEMA.
BB	Correct.
GI	Now, NEMA was the administering agency for the Civil Defence Emergency Management Act.
BB	Correct.
GI	So was there a function that NEMA was intended to carry out as part of that National Response Leadership Team and if so, what was that?
BB	NEMA was largely responsible... if you take a step back and think about Civil Defence in New Zealand, it's a community-based operation and so NEMA was there with various hats on. First of all, they brought some expertise to the table in terms of response. Secondly, they were a link back to the community or regional civil defence and emergency management groups, so NEMA was both telling the CDM groups what was going on, but also hearing back from the regional CDM groups about what was happening in the regions. So it was a reasonably efficient way to try and join central government with the regions. Thirdly, NEMA still had a statutory responsibility and I'm not sure when the various states of emergency

	were lifted, I can't recall, but it made sense for NEMA given that we might have needed it at any time to have reimposed some states of emergency, to have NEMA in that space.
GI	I'm just interested in NEMA because we've heard quite a lot of evidence about the need to include community groups in a response to a pandemic. Is it your view that NEMA was an efficient way of engendering that support, or could that be dealt with differently in future?
BB	Yes and yes. They were reasonably efficient but they were not a monopolist. So we had the Caring for Communities Group for example, which was led by MSD, which was also in touch with communities up and down the country. And we had the Community Panel chaired by Sarah Sparks. So if I have an overarching theme it's this notion of a system, and so in that community space you actually had a kind of NEMA role and you had an MSD role and you had an iwi Māori role and you had a Whānau Ora provider role and you also had the Community Panel. So it was a system within a system, but NEMA definitely had a role to play in that context.
GI	In a future pandemic do you consider that the structure that we see here would be appropriate to use again, or do you think it could be improved and if so, how?
BB	With particular reference to the National Response Leadership Team or to the community aspect, Mr Chair?
GI	No, to the whole system that we see described on page 7.
BB	Yes.
VC	Sorry, just a clarification, sorry to interrupt, but the system on page 7 is describing the system for the resurgence plan?
BB	Correct.
VC	I just wanted to make sure, Mr Chair, because your question might have implied that this was the system for leading the COVID response, which I don't think it is.
GI	Yes, okay, well let's just back up and I meant to introduce this plan and its ongoing status with more particularity. So can you tell us please, Dr Barrington, whether this plan actually came into force and was implemented or whether some variety of this plan was actually used in practice.

BB	This particular plan had no need to be implemented because we did not have a resurgence over the summer of 2020. It evolved over time so the plan so that I actually was working off in my own preparation was that prepared in quarter three of 2021, which is more...
VC	In relation to this interview?
BB	For this interview.
VC	Thank you.
BB	<p>It was in quarter three of 2021 which more squarely falls within your Terms of Reference but also it is more closely aligned to the lockdown of August to November of that year. By which, for example, the membership of the National Response Leadership Team had evolved to include the Secretary of Customs, the Chair of the National Response Group, the Solicitor-General, and when it related to quarantine-free travel it had evolved to include the Secretary of Foreign Affairs and the Secretary of Transport. So I say that to demonstrate that as the system evolved over time to become more mature, and certainly by the time it was in place for the lockdown at the end of 2021, it had evolved so I wouldn't necessarily freight too much on this document of December 2020. That's partly to answer your question, Mr Chair.</p> <p>The second part of the answer is yes, nonetheless, by the time we got to the Auckland lockdown the National Response Group was stood up. It was providing advice to the National Response Leadership Team, the National Response Leadership Team was providing advice to ministers around lockdown and alert levels and then once an alert level change had been promulgated Cabinet would then consider that on a weekly basis. So in one sense, at a macro sense, the kind of structure that was envisaged in this plan of December 2020 was in place, broadly speaking, but the elements of it were in place by August 2021.</p>
GI	Can you tell us, the version that you've got has a version number on the title page?
BB	I don't have that I'm afraid. Are you asking me about the version that you're referring to or the version from Q3?
GI	The version that you are referring to in Q3 because I don't have that in front of me.
BB	I'm afraid to say that I do not, I've just got this offline. All I can tell you – it's title, which is "The COVID-19 National Response Plan Quarter Three 2021".

GI	That's very helpful, thank you. So we have this structure which has, as you say, matured and evolved, but it has been approved by Cabinet and it is therefore an official structure for responding to a resurgence of the virus.
BB	I'm not sure that this document itself was ever approved by Cabinet.
GI	I'm sorry, no, my question is incorrect. What I'm talking about are the agencies that are intended to be decision-making or information-providing agencies in the event of a resurgence.
BB	Correct.
GI	Now, in 2021 we do have a resurgence because we had the Delta outbreak and so presumably a version of this plan was kicked into operation at that stage. Am I right about that?
BB	Yes and no. By that stage we were quite well versed. When the Delta outbreak took place I never went back and looked at this resurgence plan, whether it was this one or the Q3 resurgence plan. We'd gone through quite a lot of real life experience whereby the National Response Group would give advice the NRLT and we would give advice to ministers and to Cabinet. So I never had cause to dust off this plan at all in the Auckland lockdowns.
GI	Well perhaps you can just unpack it a little for us because it seems a bit odd to have a plan that wasn't actually used and I'll just ask you to explain that a little bit more for us please.
BB	It may well have been used, it just wasn't used by me. I was at the peak of the system so I was rehearsing this on a weekly basis, I didn't need to go back and look at the plan. It was promulgated, it might well have been looked at avidly by a thousand other people, but I had no cause to look at it.
GI	Right, but you've got no reason to think that the structure included in these resurgence plans had become otiose?
BB	Not at all.
GI	And I think I'm right that your point is that you were involved in the top level team, you had no reason to address issues of structure in those organisations that were below your level?
BB	I think I'd phrase it slightly differently. I come back to this theme. The point was to put a system in place that was orthodox, replicable and that could operate efficiently and at short notice. Once that machine was put in place and had practised over what was by then nearly

	two years, I had to ensure that the system was working and that ministers and Cabinet were getting good quality advice from senior officials. In a sense, I then didn't have to lift the bonnet to make sure that all of the spark plugs were clean. I just wanted to make sure that when I turned the key the engine ticked over.
GI	Very good. Alright, now just let me pause for a minute. I'll just explain that the original plan was to have an offsider ask some questions and he became ill overnight and is unable to participate so I'm dealing with his role as well as what was intended to be my own. I'll just take a minute to review where we're up to if that's okay.
BB	Mmhm.
GI	Within that system that you've described, how did DPMC obtain access to specialist expertise on pandemic response matters? Was DPMC advised by specialist experts or did your expertise come from another direction?
BB	I just want to make that a little more concrete if I can. In terms of how the National Response Leadership Team operated?
GI	I think the question is more whether the COVID response as a whole obtained expertise from appropriate experts during the period under inquiry.
BB	<p>I see. I come back to my starting point about what that system looked like. So by the time your terms of reference begin we had a relatively mature system in place. So you had government departments which had a breadth and depth of expertise which was particular to them and would feed that expertise into the system particularly via Cabinet papers. You had specialised advisory groups, so for shorthand, you the Skegg Group, the Fyfe Group, the Roche Group, the Sparks Group, providing a range of expertise. You had sector level groups such as the Economic CEs Group and the Border CEs Group and the Reconnecting New Zealanders CEs Group, all of which, by the way, would have had their own internal and external advice chains so they weren't operating in a vacuum, so if you think about, for example, the Reconnecting New Zealanders Group, which I think was chaired by Carolyn Tremain, and also the Border CE's Group chaired by Christine Stevenson, the Secretary of Customs, they were out talking to airlines and to business and to exporters the whole time. They themselves had their own variegated and extensive sources of advice.</p> <p>So you end up having a department which has many channels of advice going to it, then you have a sector, the CE groups, which had their own many channels of advice, then you have</p>

	<p>the peak groups which are either the COVID Chairs Board or Cabinet or the Ministerial COVID Group. Each of them also has their own source of advice, plus the system channels advice, so I don't think we were short of advice. To which I would add if you cast your minds back we probably had ten epidemiologists who were never short on giving us advice. We also had the Fourth Estate. We had international comparatives which we were watching on our screens or reading about daily. We had the parliament where we had a plurality of views. And we had modellers. And half the Cabinet were electorate MPs holding their clinics once a week. So I'm not making light of it, Mr Chair, in fact as I kind of talk about that I sometimes wonder rather whether we... there was a lot of advice, let's put it that way.</p>
GI	<p>A lot of advice which needed to be synthesized to make it meaningful for the decision-makers?</p>
BB	<p>Often, yes.</p>
GI	<p>And was it DPMC's role to synthesize that advice?</p>
BB	<p>It was the COVID-19 Group by and large for all the Cabinet papers held, for the kind of strategic Cabinet papers, they would hold the pen. So if Primary Industries needed to write a Cabinet paper relating to a rather narrower part of the COVID response then they would often hold the pen and it would become a narrow Cabinet paper. But where it was an All of Government piece of advice to Cabinet the COVID-19 Group would hold the pen for that and synthesize, yes.</p>
GI	<p>Looking back with the benefit of hindsight how well do you think the COVID-19 Group performed that particular synthesizing role?</p>
BB	<p>Well.</p>
GI	<p>And in relation to the future, would you yourself recommend the same system be employed within DPMC or is there another way things could be done?</p>
BB	<p>Difficult issues have a longstanding habit of gravitating to DPMC.</p>
GI	<p>Why is that?</p>
BB	<p>Because the Prime Minister's weight and mana is such that it allows that department if necessary to cut through and often issues come to that department because the Prime Minister needs to show the electorate that he or she is leading their way through it. So if you think about John Key for example and the Christchurch recovery, that ended up going</p>

	<p>into the Prime Minister’s Department. We ended up getting NEMA for the same reason out of DIA and into the Prime Minister’s Department because the Prime Minister of the day needed to be able to show that he and through him, his Department, were leading. It is possible to take those structures out of DPMC and in fact, we did think about making the COVID-19 Group a departmental agency, formally, but time was just not on our side. To promulgate a departmental agency takes House time and appropriations need to be changed and it’s quite complicated and in the middle of fighting a global pandemic we simply had to take the quickest route, really, which was to essentially create the COVID-19 Group as a departmental agency with high degrees of independence, but without formally warranting it as such because we simply didn’t have the time in which to do that. That’s one answer to your question.</p> <p>A second answer is I think that one of the comments made in the first report was that we fell behind the curve on developing our COVID strategy. I disagree with that, as it happens, but this is perhaps not the place to litigate that. What I did think was a more useful point in the first inquiry was to work a little bit harder to create some air gap between the doers and the thinkers and by and large, the doers and the thinkers became one. I think in an ideal world creating a bit of distance of that kind would be helpful but I keep asking myself the question – who are these people that we’re going to dragoon to do the thinking while others do the doing? Because we’re such a small public service at the kind of peak level and you needed people at the peak level. It’s not like we had contingent resource just lying off to one side poorly used. We were running full tilt at this so I think the theory of that air gap is right, the practice might be a little harder to achieve.</p>
GI	<p>So a couple of questions arising out of what you’ve just said. In the Phase One Report the Commissioners recommended that a central agency function be created for infectious diseases. Now, I was only involved in the very last couple of months of that stage of the inquiry so I’m not professing any greater knowledge than anyone else about it but it seems to me that the way things were actually run, as you have explained them and as we’ve learned from others, in effect was a central agency function comparable to the way NEMA operates in relation to the Civil Defence Emergency Management Act? Do you agree with that, or do you think there is more to be said about it?</p>
BB	<p>I think to establish an agency dedicated only to infectious diseases is to be too narrow in its scope. I think for a country which is as prone to natural disasters as this country is, in a world which is now prone to complex, chronic All of Government responses as is now the case and</p>

	<p>I'm thinking about - and it could be in the future – AI, or it could be space weather, you now, we can run our fingers down the list, I think we're not particularly well structured to deal with long-run all of country and more chronic responses. And my worry, if I can be frank – creating this system to fight COVID was a huge effort. It was basically to take the system of government, to try and retain orthodoxy, and yet to regear it in a profound way, that is certainly true for the first year. It saw a relatively small number of people act heroically in order to achieve that. I don't think anybody in their right mind, Mr Chair, would put their hand up to do it again. I would not. I would absolutely not do it again. It just about killed me and I'm not exaggerating when I say that. And I am not alone when I say that.</p> <p>So my worry is if we don't think about this a structure and as a system and we kind of muddle our way through and assume that the heroism of a few, political and public service, will kind of recreate this again, it will not happen. People are too tired, people are too cynical I think, if I can be blunt, a bit wounded by this. You will not get the discretionary effort from the best people across government to do this again. So if I'm right, then you have to think of a structured way to organise ourselves so that you're not having to call on discretionary effort against because it will not eventuate, or be sustained in anything like the way it was in COVID, I think this was a one shot. It was a one bullet gun and that bullet's been fired.</p>
GI	So what is the structure that we could put in place?
BB	<p>I think that the overall architecture of the COVID response as it emerged was sound. Cabinet government, system sector agency, specialist groups off to the side informing that, I think that that's right. I think if I were to do it again, and I'm not ever going to do it again, I would pay a little more attention to the community aspect of this. I think bureaucratically we fell over each other a bit and I think we were less open for longer than we should have been to the reality that a good number of community groups, not just iwi Māori or Pacifica, but more generally, understood their communities well and actually could have delivered Wellington mandated services to their constituents well. Possibly faster, possibly with lower overheads. We could have done better I think, there.</p>
GI	So how would we adjust the structure of government to take advantage of community groups, about which we have heard from others, as well as you?
BB	Well the first thing I would do would be try and unpack that quite complicated matrix between NEMA, looking at things at a community level. MSD, looking at things at a community level. The regional leaders and whether they were adequately mandated.

	<p>Whether the population agencies and in particular, TPK and Ministry for Pacific, were brought into that matrix firmly enough, I think. I'll come back to that because you still want a small group at the centre, you don't want to be falling over each other, you don't want groups of 20 making decisions, you really want it to be tight. But I do think we could have brought those population agencies in in a more orderly way and I think we could have used existing structures such as Whānau Ora and community groups to better use. It's not without its challenges by the way, but nonetheless.</p> <p>So the first thing I would do would be to unpack that skein of tangled wool around those various agencies, more tangled than it needed to be. It still delivered, by the way. This is not a counsel of despair, this is a counsel of improvement. It absolutely delivered. But I think that would be helpful. Secondly, I think if you go back to my notion of orthodoxy in Cabinet papers, whether we needed to beef up some of those formal sections in Cabinet papers – which were there by the way, but whether we needed to ensure that ministers were in a more deliberate way getting that kind of community angle coming through more strongly in Cabinet papers. Don't reinvent the wheel, just make the wheel revolve, with a bit more lubrication. Revolve more efficiently. And thirdly, I never had very much to do with the Ministerial COVID Group. I tried to operate at the Cabinet level, so what I'm about to say may be completely wrong. Please apply a discount rate. But I do wonder if in that ministerial group we had enough of a ministerial community – a minister in charge of community voice coming through. So there's something around advice to Cabinet, there's something around how Cabinet itself operated at the ministerial level and there's something at the bureaucratic level, I think. Without too much effort I think all of those changes could be made and deliver benefit.</p>
GI	<p>We will be interviewing Sir Ashley Bloomfield and we'll get his explicit views on this issue, but he has mentioned that one of his regrets is that government didn't listen more to what was coming back from the community. In the structure that was in existence in 2021 and 2022, where were the ears of government supposed to be? Where was the role of hearing the community supposed to be within the system that you've described?</p>
BB	<p>Let me first go back to this resurgence plan. If you read that plan it's quite clear that quite a lot of what it's saying is in the first 30 minutes, one hour, 1.5 hours and 2 hours. This is a crisis response plan, this is not a plan allowing us to say let's go out and get a plurality of</p>

	<p>views. This is the house is at risk of burning down, what needs to be done right here and right now to help Cabinet make decisions.</p> <p>So this plan is not the place for those ears, or at least the bulk of it, and if you go back right at the end, and it's down to 30 minutes slots, it's a very particular document. More generally in terms of hearing views I can only say what I've already said, which is agencies are listening to communities, sector groups are wired to listen to communities. Cabinet has Cabinet ministers many of whom are MPs listening to communities. The community group chaired by Sarah Sparks. I'm not as worried myself that the system was not necessarily getting a community view. What is a community view? That's the difficulty I think. How do you winnow and weight a plurality of views? For those that disagreed with the Auckland lockdown and if not its start, its duration, others are saying I'm 86 and you're saving me from COVID. It's the plurality of views that it seems to me is hard to weave your way though and officials are not necessarily well designed for that, that's what Cabinet exists for.</p>
GI	<p>Another way of looking at the community aspect is to say organisations within the community should have been used more in a bottom-up way rather than in a top-down controlling type way. Do you have any views on that?</p>
BB	<p>It's not binary. There still needs to be direction from the centre. There still needs to be money appropriated and then distributed in lawful and efficient ways such that the public can have trust and confidence that we're not simply doling out money to community groups that then waste it. Those are realities. But I do think that at the level of service delivery some community groups have an advantage over central government in some circumstances and we could have done more to make use of that advantage. There are other moments where MSD is actually a better place to do it, or there are other moments when it's NEMA through its community grants is a better place to do it. It's a complicated system. I think all of those things and more have their place. I do, however, think we came late to the realisation that some community groups were being underutilised and I think we could have done better there. But you know, Mr Chair, I think one of the things that makes this a very complicated story to tell – I can tell you exactly how part of the narrative would have gone. Let's say central government had earlier given quite a lot of money to Whānau Ora, to John Tamihere, to distribute. I use him only as an example by the way, there are many others. For everybody that said that's a great thing, John understands his constituents, there's someone else would be saying why are you giving money to Whānau Ora to distribute? And then by the way some Māori would be saying why are you privileging JT over this group? And then Pacific would</p>

	<p>be saying why are you privileging every Māori over Pacific? And the Pakeha would be saying well hang on, we've got our own community groups, why aren't you doing this?</p> <p>And so if you play that out at an even larger level and you think about the COVID protection framework and its introduction to try and get Auckland out of lockdown, iwi chairs are saying we're going to take you to the Waitangi Tribunal. The Waitangi Tribunal are saying the CPF is wrong and breach of the Treaty. And various epidemiologists are saying it's too early. There are no good choices here. There are only bad and worse choices. And it was the luckless responsibility of government and senior officials to try and navigate their way through bad choices and worse choices. There were no good choices. [redacted]</p>
GI	[redacted] I think I need to hand over to other Commissioners to ask if they have any questions. So Judy Kavanagh?
JK	<p>Thank you Grant. I don't have any specific questions that I would like to ask at this stage but I certainly have lots of questions which are floating around in my mind and as we look to interview other CEs coming up in the schedule, but your description of the system and your insights about what it would take and what structures would need to be in place in the event of another crisis are very well taken so thank you very much for that. One of the observations that I would make is that if you stand up a group for a pandemic which might never happen it's a very sort of thankless job and capability certainly would decline over time and I'm thinking about the kinds of structures and networks I suppose, networks of people who get to do their day jobs which maintain their capability that can be brought together in the event of a crisis and I think what you're explaining to me is something in the way of that happened. And then you have got the two co-tensions in here – the need for the specific response and the orthodoxy. I like that word, it describes it very well. And I think that Commissioners will be deliberating on those two things as we go forward so yes, lots to think about and thank you very much.</p>
BB	Thank you Judy.
GI	Commissioner Hill?
AH	I've not met you, I only know you by reputation, I'm sorry about that. But it's profoundly clear why you were where you were and it's a matter of great relief that you were...
BB	That's very kind.

<p>AH</p>	<p>I just want to acknowledge the work that was done and the pain of that time. I think, as my colleagues have expressed, the way in which you've expressed the orthodoxy and the operation of a system under pressure is profound for us. There are several long conversations I would like to have with you. I'm slightly alarmed as I think about the future for the New Zealand Public Service to be honest, but that's a different conversation. But at the risk of asking you an inanelly simple question that seems a whole lot less important in the scope of what we've just talked about, one of the things that I'm reflecting on is the role that ministers played in this inordinately hard array of bad choices and no good choices and a multiplicity of voices, all conflictual, we do know that at times ministers grew frustrated and I'm guessing everybody grew frustrated, so this is in the nature of a hypothetical question because I'm not going to ask you for a specific stance so feel free to say no, but if, for example, the Minister of Health was getting frustrated with the Department in the course of this process, and that might be around a failure to generate options as quickly as she would like, it might be about activating some, like possibilities as quickly as she would like, what would be the pathway that that Minister might actuate to resolve that? Conscious that the dynamics were extraordinary during that time and the power of the Ministry of Health was rightly forefront, closely attached to the Prime Minister, rightly because of the focus on public health. But how would a Minister of Health, thinking and feeling like that, what would be the pathway for them?</p>
<p>BB</p>	<p>I'm going to answer that by saying peacetime and wartime. So in peacetime, this type of existential long run chronic crisis, a minister can direct a department to be better, to be faster, to deliver better and if that department is underperforming, can go to the Public Service Commissioner and say I'm not happy with the performance of the department or the chief executive and things have to be done. And by and large the centre would wrap around. I mean PSC first and if that was not enough, the centre would wrap around.</p> <p>In my experience, public servants want to deliver and chief executives want to deliver. So my theory has always been what's the underlying. What punts the underlying anxiety, why is this not working? This is in peacetime, it's quite easy to say to a chief executive "do better, work harder, deliver faster". So why are they not? What's the problem that needs to be solved? And it might be a lack of clear commissioning from a minster. So a minister thinks they've asked for something and then you go into it and you think well, I have no idea what that minister's asking so the department has not a chance of delivering. So poor commissioning. Or ministerial offices get a commission and then they adjust and they adapt</p>

	<p>and they shift timeframes and they change scope and the department is constantly scrambling. So there's something around how a minister in the office works. There's something around resourcing. And there's something around leadership it seems to me and I'm a bit commandy and controlly to be perfectly honest. It just seems to me if something needs to be done then bloody tell them to do it. And ministers are quite reluctant in this country to be too directive and so too are chief executives. But there's something to be said about being directive. If you translate that into wartime, I think some of that still pertains. There's something around clear commissioning. What is it exactly that a minister is asking for? There's something about setting a timeframe, making sure it's reasonable even if it's tight, and then sticking to it. There's something about ambit and scope and trying not to change that. Because these are a small number of people who are really hard up against it. There's something about resourcing. What's going on inside that department that means that they're not doing it? Do they have the right people? Do they need more help? There's something about all of that but I also think there's just a reality. I kind of think to myself at any given moment across the system in the bureaucracy there might have been 20 people across every government department – not 20 people each department, I'm talking about 20 people, who have the experience, the wit, the drive, the commitment, to make this work. If not 20, not 50, I'd be hard pressed to say 30.</p> <p>So when you're asking the Ministry of Health to do 20 different things, where are these people? I'm not Ali Barber, I can't just rub a lamp, where are these people? They are not to be found. And so by the end of it we were buggered and that's just a fact. And so we just all have to suck it up and say actually, we just have to ask that person again, to dig deep, again, to deliver what needs to be done again, and if it's three hours late it's three [redacted] hours late. Because otherwise this person's going to be in hospital. Big country response with a small country population, that's hard maths.</p>
AH	Yeah, and a perennial challenge for us.
BB	And a perennial challenge for us.
	[redacted]
GI	[IS1], do you have anything to follow up?
IS1	No, no further questions, thank you.
BB	Thank you very much.

GI	<p>Alright, well it just remains to me, Dr Barrington, to express our thanks for your extraordinary contribution and we're conducting a lot of interviews and I can tell you that this one will stand out in all of our memories. You have contributed in a way that is extremely intelligent, extremely helpful and in a way that will provide us with really helpful guidance in terms of the findings and recommendations that we eventually make. So thank you very much. And on that note I will draw this meeting to a close and invite [IS1] to set up a separate session in about ten minutes time just to debrief, thank you.</p>
BB	<p>Thank you very much Mr Chair and Commissioners, I appreciate those kind words, thank you very much.</p>
<p>End of interview</p>	