

Category <sup>1</sup>	Description	Actions for the Contact	Actions for Public Health/NITC/DHB	Actions for Secondary Contacts
Healthcare workers who have been exposed to a case should follow instructions from their employer whilst at work and refer to 'Risk Assessment and Categorisation of Healthcare Workers Exposed to COVID-19'.				
No contact	General public and surveillance testing	<ul style="list-style-type: none"> <li>Asymptomatic: self-monitor for symptoms</li> <li>Symptomatic: get a test, and stay at home until a negative test result AND until 24 hours after symptoms resolve</li> </ul>	<ul style="list-style-type: none"> <li>None</li> </ul>	<ul style="list-style-type: none"> <li>Not applicable</li> </ul>
Casual contact	People who have had exposure to a case, but do not meet the Close Contact criteria	<ul style="list-style-type: none"> <li>Self-monitor for symptoms for 10 days</li> <li>If symptoms develop, get a test and stay at home until a negative test result AND until 24 hours after symptoms resolve</li> </ul>	<ul style="list-style-type: none"> <li>Inform via media, apps or other public communication</li> <li>Self-identify through inbound call e.g. to Healthline</li> <li>Not recorded in NCTS</li> </ul>	<ul style="list-style-type: none"> <li>No action required</li> <li>If a household member of a Casual contact develops symptoms, they follow the 'No contact' [green] pathway: get a test, and stay at home until a negative test result AND until 24 hours after symptoms resolve</li> </ul>
Casual Plus contact	<b>ONLY</b> for use within education and workplace settings, refer to specific guidance for those settings where available. <b>Unvaccinated</b> - stay at home for 7 days, test on day 5; <b>vaccinated</b> - monitor for symptoms. NITC to manage contacts.			
Close contact	<b>Household</b> members with ongoing contact with case <b>(irrespective of vaccination status)</b>  <i>Further advice is being sought regarding appropriate testing and quarantine requirements for these contacts.</i>	<ul style="list-style-type: none"> <li>Test immediately when case identified and on case's day 5</li> <li>Self-isolate at home until case released AND for an additional <b>10 days</b> post case release</li> <li>Test on <b>days 5<sup>2</sup> and 8</b> post case release</li> <li>Daily symptom checks via email or phone call</li> <li>If symptoms develop at any time, get an additional test immediately</li> <li>Released after 10 days isolation post case release, provided no new or worsening symptoms AND negative day 8 test</li> <li>Repeat entire management plan if new case identified in the household</li> </ul>	<ul style="list-style-type: none"> <li>Record Primary Close Contact in NCTS</li> <li>Inform contact</li> <li>Monitor &amp; follow-up test results (day 7 test not acceptable for release; must be day 8 or later)</li> <li>Ensure welfare needs are identified and referred</li> <li>Clinical assessment, final symptom check and release</li> </ul>	<ul style="list-style-type: none"> <li>Not applicable: all household members are Primary Close Contacts of the case</li> </ul>
	<b>Household-like<sup>3</sup></b> who have no ongoing contact with case <b>(irrespective of vaccination status)</b>  <b>All others: Unvaccinated</b> (no dose, one dose or <7 days since second dose of Pfizer vaccine) and includes all children under the age of 12 yrs	<ul style="list-style-type: none"> <li>Self-isolate at home for <b>10 days</b> post last exposure</li> <li>Test <b>immediately</b> and on <b>days 5 and 8</b> post exposure</li> <li>Daily symptom checks via email or phone call</li> <li>If symptoms develop at any time during the 10 days, get an additional test immediately</li> <li>Released after 10 days of self-isolation post exposure, provided no new or worsening symptoms AND negative day 8 test</li> </ul>	<ul style="list-style-type: none"> <li>May self-identify through inbound call e.g. to Healthline</li> <li>Record Primary Close Contact in NCTS</li> <li>Inform contact</li> <li>Monitor &amp; follow-up test results (day 7 test not acceptable for release; must be day 8 or later)</li> <li>Ensure welfare needs are identified and referred</li> <li>Clinical assessment, final symptom check and release</li> </ul>	<ul style="list-style-type: none"> <li><b>Vaccinated Secondary Contacts do not have to take any action</b></li> <li><b>Unvaccinated Secondary Contacts do not need to stay at home, but should avoid health care facilities, aged residential care facilities, disability care facilities, and correctional facilities until Primary Close Contact returns negative day 5 test.</b></li> <li><b>Secondary Contacts should minimise contact with others outside of their household bubble until the Primary Close Contact returns negative day 5 test and wear a face covering in shared indoor settings outside home.</b></li> <li>If the Primary Close Contact develops symptoms, it is recommended that their Secondary Contacts <b>(either vaccinated or unvaccinated)</b> should stay at home until the Primary Close Contact returns an additional negative test</li> <li>If a Secondary Contact <b>(either vaccinated or unvaccinated)</b> develops symptoms, they should test and stay at home until negative test result AND until 24 hours after symptoms resolve</li> </ul>
	<b>All others: Vaccinated</b> (≥7 days since second dose of Pfizer vaccine)	<ul style="list-style-type: none"> <li>Self-isolate at home for <b>7 days</b> post last exposure</li> <li>Test <b>immediately</b> and on <b>day 5</b> post exposure</li> <li>Daily symptom checks via email or phone call</li> <li>Self-monitor for symptoms for 10 days</li> <li>If symptoms develop at any time during the 10 days, get an additional test immediately and stay at home until negative test result AND until 24 hours after symptoms resolve</li> <li>Released after 7 days, provided no new or worsening symptoms AND negative day 5 test</li> </ul>	<ul style="list-style-type: none"> <li>May self-identify through inbound call e.g. to Healthline</li> <li>Record Primary Close Contact in NCTS</li> <li>Inform contact</li> <li>Monitor &amp; follow-up test results (day 4 test not acceptable for release; must be day 5 or later)</li> <li>Ensure welfare needs are identified and referred</li> <li>Clinical assessment, final symptom check and release</li> </ul>	<ul style="list-style-type: none"> <li>No action required</li> <li>If the Primary Close Contact develops symptoms, it is recommended that their Secondary Contacts <b>(either vaccinated or unvaccinated)</b> should stay at home until the Primary Close Contact returns an additional negative test</li> <li>If a Secondary Contact <b>(either vaccinated or unvaccinated)</b> develops symptoms, they should test and stay at home until negative test result AND until 24 hours after symptoms resolve</li> </ul>

All close contacts (irrespective of vaccination status or age, including <5yrs old) that refuse testing or who do not have a negative day 5 release (fully vaccinated) or day 8 release (all others) test result, have their self-isolation **extended to 14 days**.

<sup>1</sup> The classification of contacts and the use of these contact categories, as applied to individuals and exposure, are clinical decisions of the local medical officer of health with advice from the Office of the Director of Public Health.

<sup>2</sup> If contact is a child under 5yrs old and there is resistance to testing, the day 5 test is mandatory whenever possible; immediate and day 8 tests may be made optional.

<sup>3</sup> Household-like contacts are defined as those who have had frequent or prolonged indoor interactions, including sexual contacts, overnight guests, shared living spaces, shared custody arrangements. At the discretion of a medical officer of health (or delegate), any close contact at higher risk may be upgraded to Household-like in order to be actively managed for 10 days e.g., immunocompromised individuals, residents in residential care or correctional facilities.

Category	Description	Actions for the Case	Actions for Public Health/NITC/DHB	Actions for Secondary Contacts
Case	<b>Vaccinated</b> (≥7 days since second dose of Pfizer vaccine) and <b>immunocompetent</b>	<ul style="list-style-type: none"> <li>Self-isolate at home if possible</li> <li>Self-isolate away from other household members where possible, in particular away from unvaccinated household members</li> <li>Wear mask and physical distance in shared spaces</li> <li>Released after <b>10 days</b> of isolation and provided previous <b>72 hours symptom free</b></li> </ul>	<ul style="list-style-type: none"> <li>Inform case</li> <li>Daily symptom checks via email or phone call</li> <li>Manage non-compliance</li> <li>Ensure welfare needs are identified and referred</li> <li>Clinical assessment, final symptom check and release</li> <li>Note that symptom free should be interpreted as free from most acute COVID-19 symptoms and/or COVID-19 symptoms improving</li> <li>Consider a managed isolation facility (MIF) if indicated from initial assessment, for case and/or household members, especially if circumstances make it difficult to isolate away from household members.</li> </ul>	<ul style="list-style-type: none"> <li>Not applicable</li> </ul>
	<b>Unvaccinated</b> (no dose, one dose or <7 days since second dose of Pfizer vaccine)	<ul style="list-style-type: none"> <li>Self-isolate at home if possible</li> <li>Self-isolate away from other household members where possible, in particular away from unvaccinated household members</li> <li>Wear mask and physical distance in shared spaces</li> <li>Released after <b>14 days</b> of isolation and provided previous <b>72 hours symptom free</b></li> </ul>		

## Contact risk assessment

The following table should be used to guide assessment and management of contacts exposed during a case's infectious period.

The following table is **NOT** for:

- household or household-like contacts - they are always managed on a 10-day pathway due to high risk
- contacts in schools or workplaces - separate guidance has been developed for these settings; or
- contacts in healthcare - refer to **Risk Assessment and Categorisation of Healthcare Workers Exposed to COVID-19**.

NOTE: An individual public health risk assessment should be carried out for contacts in residential facilities including aged care, correctional centres or other settings where cases and contacts interact frequently with people at high risk of severe illness.

It may also be required in other circumstances such as some indoor settings including events attended by large numbers of people.

	Close					Casual			
	Close range contact			Higher risk indoor contact		Low risk contact			
	Contact was ≤ 1.5m from case			Contact was > 1.5m away from case & no close-range contact		Contact had no close range contact or higher risk indoor contact			
Type of interaction	Direct contact with respiratory secretions or saliva (indoors or outdoors) <b>OR</b> Face to face contact with a case who is forcefully expelling air/secretions <b>FOR ANY DURATION OF TIME REGARDLESS OF MASK USE</b>	Indoor face to face contact for more than <b>15 minutes</b>	Non-face to face contact for more than <b>1 hour</b> in an indoor space	Indoor settings without good airflow/ventilation: <ul style="list-style-type: none"> <li>a small space (&lt; 100m<sup>2</sup>) for more than <b>15 minutes</b></li> <li>a medium sized space (100-300m<sup>2</sup>) for more than <b>1 hour</b></li> </ul>	Indoor settings at higher risk of transmission when present for more than <b>1 hour</b> : <ul style="list-style-type: none"> <li>case behaviours such as singing, shouting, smoking/vaping, playing wind/brass instruments, dancing, exercise</li> <li>large numbers of people and crowding</li> </ul>	Large indoor settings (bigger than 300m <sup>2</sup> ) if none of the previous close criteria are present	Small/medium sized indoor venues (less than 300m <sup>2</sup> ) with good air flow/ventilation for up to <b>2 hours</b>	Brief indoor (<15 minutes) contact regardless of distance from case	Outdoor settings any distance from case <b>FOR ANY DURATION OF TIME</b>
Examples	Kissing, spitting, hongi, sharing cigarettes or vapes, sharing drinks/utensils Singing, shouting, coughing, sneezing Contact sports (heavy breathing related to exertion)	Having a conversation Sitting across a table from someone	Sitting within 1.5m of someone but not having a conversation	Small offices, toilet blocks Close contact businesses such as hairdressers Buses, trains, taxis School classrooms Restaurants, cafes, bars	Bars and pubs Social gatherings Indoor, high intensity sports Gyms and indoor recreation settings Church sessions	School and community halls, exhibition centres, hardware stores, supermarkets	Well ventilated classrooms/offices/waiting rooms	Conversations <15 mins Passing each other in the corridor Sharing an elevator Collecting takeaways, click & collect services	Most outdoor recreation activities, including outdoor dining Non-contact outdoor sports Petrol station Forecourts

### Vaccination status

Vaccination status has not been used to 'down categorise' contacts. However, the management pathway of close contacts will differ by vaccination status (see page 1 for details). This is under ongoing review and may change as more evidence becomes available.

### Mask use

Mask use is not included in this table currently but is included in the tables developed for workplaces and schools. This is because in order to provide sufficient protection to warrant down-categorisation of contacts, masks must be of sufficient quality (e.g. medical masks or cloth masks of sufficient thickness) and must be worn consistently. This is difficult to confirm outside of settings such as schools and workplaces where there are mask wearing policies and multiple observers of compliance.

In addition, mask use does not provide indefinite protection from infection. Evidence suggests the protective effect of mask use is unlikely to last beyond 2 hours, and is likely to be less if the case wearing the mask has high risk behaviours such as singing, shouting, heavy exertion.

It is anticipated that as the COVID-19 Protection Framework comes into effect, it is possible that the risk of inconsistent mask use will be more tolerated. At that time, mask use may be added to this contact risk assessment table.