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The documents titled “Canada Border Services Agency – Coronavirus Contact tracing Options” and “Canada Border Services Agency – Isolated Workforce Response Measures” have been removed from this file as they are being provided in the CBSA submission. This page serves as a placeholder.

Nayeri, Gita (HC/SC)

From: Nayeri, Gita (HC/SC)
Sent: 2020-02-10 12:53 PM
To: [REDACTED]
Cc: Rassi, Daniel (HC/SC)
Subject: RE: Final Federal Annotated Agenda
Attachments: HMM Feb10 Q&As Final.docx; List of Participants - CALL-IN LIST 10-02-2020.docx

Hi again

Pls find attached updated list of participants and Q/As as supporting material, for this afternoon.
gita

From: Nayeri, Gita (HC/SC)
Sent: 2020-02-10 12:42 PM
To: [REDACTED]
Subject: Final Federal Annotated Agenda
Importance: High

Hi
Final Annotated agenda for the Minister- updated from last night.
Thanks,
Gita

Questions and Answers

Additional self-isolation measures

[Responsive, if asked what PHAC is doing to advance next steps on requiring travellers from Hubei to self-isolate]

- To support advanced planning, PHAC is exploring what might be required for further measures related to advice and measures for travellers.
- This could include collecting information from travellers to support local public health follow up, requiring self-isolation by individuals, or requiring mandatory reporting by travellers to local public health.
- Additional measures could require another Emergency Order under the Quarantine Act. PHAC is analyzing the benefits and drawbacks of requiring any such measures, including implications for implementation in airports and public health system resources for traveller follow-up, based on expected volumes of travellers.
- Any potential further measures will need to be considered carefully both at a federal level and through the SAC, Deputy Ministers and Ministers' tables.

Messages for asymptomatic travellers from Hubei and China flying onwards within Canada

[Responsive, if asked what advice asymptomatic travellers from Hubei and China will be given regarding onward flights in Canada]

- SAC will be agreeing to advice to travellers on this issue tomorrow, including possibly advising asymptomatic travellers to be given a

mask, in the event they become symptomatic on any onward flights to their final destination in Canada.

Personal Protective Equipment

[Responsive, if asked what is being done regarding Personal Protective Equipment (PPE) supplies]

- Attempts to secure high-demand assets, such as N95 and surgical masks, by the National Emergency Strategic Stockpile (NESS) are ongoing.
- The National Emergency Strategic Stockpile is able to secure modest supplies of surgical masks and N95 masks with deliveries staggered by industry due to mounting market pressures.
- The SAC and one of its sub-committees are examining this issue. PHAC is conducting a PPE survey of provincial and territorial partners to identify PPE areas of vulnerability and options to ensure sufficient domestic supply.

○ 

Cruise Ships

Q. What is the Government of Canada doing to protect Canadians on cruise ships, and to manage ill passengers who may arrive in Canada via cruise ship?

- PHAC is actively monitoring the situation regarding the 2019 novel Coronavirus and is engaged with its partners to ensure Canada remains prepared for any public health events aboard cruise ships.
- PHAC maintains a current schedule for all cruise ships entering or departing Canadian waters. At this time, no cruise ships are expected

to arrive in Canada until April 2020. The cruise ship season in Canada is from April to October.

Q. Does the Quarantine Act and related reporting of communicable illness apply to cruise ships?

- Yes. Under the Quarantine Act, cruise ship operators are required to report any passengers or crew onboard who may have a communicable illness to the Public Health Agency of Canada (PHAC) before arrival in Canada.
- Ill travellers undergo a health assessment prior to disembarkation for signs of communicable disease, and whether additional public health measures are required. The *Quarantine Act* is administered 24 hours per day, 7 days per week, at all points of entry into Canada, including marine ports.

Q. Is there a protocol in place for cruise ship operators to manage illness onboard?

- The Public Health Agency of Canada (PHAC) has the authority to inspect cruise ships entering Canadian waters. In the event of widespread illness, PHAC will respond, investigate the outbreak, and work with partners to bring the outbreak under control.
- To prevent the introduction and spread of communicable diseases in Canada, in accordance with the *Quarantine Act*, comprehensive measures, including quarantine, may be taken where it is suspected that any person on board a conveyance could cause the spread of a communicable disease that poses a significant risk to public health.

Q. Are cruise ship operators implementing measures to prevent and mitigate the spread of disease?

- Effective February 7, Cruise Lines International Association (CLIA), the world's largest cruise industry trade association, and its members have adopted the enhanced protocols for ocean-going guests and crew who have recently traveled from or through China.
- CLIA members are to deny boarding to all persons who have traveled from, visited or transited via airports in China, including Hong Kong and Macau, within 14 days before embarkation; and who, within 14 days before embarkation, have had close contact with, or helped care for, anyone suspected or diagnosed as having Coronavirus, or who is currently subject to health monitoring for possible exposure to Novel Coronavirus.

PARTICIPANT LIST
FPT Ministers of Health Teleconference
February 10, 2020

*(Confirmed)**(Unavailable) (not expected to take the call)*

Province/Territory	Minister/Designate
<i>British Columbia</i>	Adrian Dix (Minister) <i>(Confirmed)</i> Stephen Brown (DM) <i>(Confirmed)</i> Dr. Bonnie Henry (Provincial Health Officer) <i>(Confirmed)</i>
<i>Alberta</i>	Tyler Shandro (Minister) <i>(not expected to take the call)</i> Lorna Rosen (DM) <i>(Confirmed)</i> Gordon Vincent (Executive Council) Bryce Stewart (Senior ADM)
<i>Saskatchewan</i>	Jim Reiter (Minister) <i>(not expected to take the call)</i> Max Hendricks (DM) <i>(Confirmed)</i> Dr. Saquib Shahab (Chief Medical Officer of Health)
<i>Manitoba</i>	Cameron Friesen (Minister) Karen Herd (DM) Nathan Clark, (Special Assistant to the Minister)
<i>Ontario (PT Co-Chair)</i>	Christine Elliott (Minister) <i>(Confirmed)</i> Helen Angus (DM) <i>(Confirmed)</i> Melanie Fraser (Associate DM) Dr. David Williams (Chief Medical Officer of Health) Patrick Dicerni (ADM)
<i>Quebec</i>	Danielle McCann (Ministre) <i>(Confirmed)</i> Yvan Gendron (DM) Pierre Lafleur (ADM) <i>(Confirmed)</i> Dr. Horacio Arruda (Chief Public Health Officer) <i>(Confirmed)</i>
<i>New Brunswick</i>	Hugh Flemming (Minister) <i>(not expected to take the call)</i> Gérald Richard (DM) <i>(Confirmed)</i> Dr. Jennifer Russell (Chief Medical Officer of Health)
<i>Nova Scotia</i>	Randy Delorey (Minister) <i>(not expected to take the call)</i> Jeannine Lagassé (A/DM) <i>(Confirmed)</i> Dr. Robert Strang (Chief Medical Officer)

Province/Territory	Minister/Designate
Prince Edward Island	James Aylward (Minister) (Confirmed) <i>Mark Spidel (DM)</i> <i>Dr. Heather Morrison (Chief Public Health Officer)</i>
Newfoundland & Labrador	<i>Dr. John Haggie (Minister) (not expected to take the call)</i> <i>Karen Stone (DM)</i> Dr. Janice Fitzgerald (Chief Medical Officer of Health) (Confirmed) <i>Coleen Simms (ADM)</i> <i>Andrea McKenna (ADM)</i>
Yukon	<i>Pauline Frost (Minister) (not expected to take the call)</i> <i>Stephen Samis (DM) (Confirmed)</i> <i>Dr. Brendan Hanley (Chief Medical Officer of Health)</i>
Northwest Territories	Diane Thom (Minister) (Confirmed) <i>Bruce Cooper (DM) (Confirmed)</i> <i>Dr. Kami Kandola (Chief Public Health Officer)</i> <i>Jo-Anne Cecchetto (ADM)</i>
Nunavut	George Hickes (Minister) <i>Ruby Brown (DM)</i> <i>Dr. Mike Patterson (Chief Medical Officer of Health)</i>
Health Canada	Minister Patty Hajdu (Confirmed) Stephen Lucas (DM) <i>Kendal Weber (ADM)</i> <i>Jennifer Hollington (ADM)</i>
PHAC	Tina Namiesniowski (President) (Confirmed) Dr. Theresa Tam (Chief Public Health Officer) (Confirmed) <i>Dr. Howard Njoo (Deputy Chief Public Health Officer)</i>

Occupational Health and Safety for Federal Public Servants HESA Jan 29 2020

I can update you on the work Health Canada is doing to protect federal public servants as they perform their work across the country and overseas.

Role of Health Canada

Health Canada, on behalf of Treasury Board as the employer, provides occupational health services and occupational hygiene consultative services to the core public administration. This includes Canada Border Services Agency, Immigration Refugees & Citizenship and the Department of National Defence. We also serve Global Affairs Canada, providing occupational health services and advice to Canada-based staff deployed overseas, as well their spouses and dependents.

These services are provide by the Public Service Occupational Health Program (PSOHP).

General Occupational Health Advice for federal public servants

As per the usual protocols for these types of situations, PSOHP issued a general Occupational Health Advisory for all departments and agencies on January 22, 2020. The advisory provides information on novel coronavirus and recommends general precautions for employees such as:

- Frequent hand hygiene; proper cough and sneeze etiquette; and self-monitoring for symptoms.

The advice and information is based on science and the current knowledge of the novel coronavirus and risk level as described by PHAC and the WHO.

This Advisory has also been shared with the Senate and House of Commons administration.

Union Notification

Health Canada's occupational Health Advisories are shared with departments and agencies through the office of the Chief Human Resources Officer who also share with Bargaining Agents through the National Joint Council's service wide occupational safety and health committee.

I will note that the Public Service Alliance of Canada has posted general guidance on their website. The advice is generally aligned to that provided by PSOHP with the additional information relating to rights under the collective agreements

PSOHP has also provide more detailed advice and recommendations for specific places of work including points of entry and for our Overseas Missions.

Occupational Health Advice for federal employees working at Airports (and Ports)

The first priority was specific recommendations for federal personnel working at airports and working with travellers. The advisory for airport personnel was issued on Saturday January 25, 2020.

This advisory includes more specific information on appropriate use of personal protective equipment. For example, there are instances when only gloves and frequent handwashing and/or sanitization are recommended, and other times when masks or eye covering are also recommended as well as instructions on the proper donning (putting on) and doffing (taking off) of personal protective equipment (PPE).

CBSA has built this into their shift briefings, and over 600 Border Services Officers have attended information sessions held by Health Canada Occupational Health Nurses and Public Health Agency of Canada personnel. Sessions continue to be available as required.

This advice is also being used for federal public servants working at Ports and has also been shared with the National Joint Council

I want to emphasize that the news of confirmed cases of Coronavirus does not alter the advice provided.

Occupational Health Advice for Missions Abroad

Health Canada is working closely with officials at Global Affairs Canada to provide information and recommendations specific to missions.

This includes Canada-based staff deployed overseas, as well their spouses and dependents

A specific advisory was shared with Global affairs on January 27, 2020 along with material for information sessions for Mission staff.

Next Steps

As information about the novel coronavirus evolves, occupational health advice for departments and employees will be updated.

Should any departments or agencies have specific questions or concerns, PSOHP is ready to provide occupational health advice and guidance.

Qs and As
2019 Novel Coronavirus
Occupational Health Advice and Guidance for Federal Employees

Who does the Public Service Occupational Health Program (PSOHP) serve?

Health Canada's Public Service Occupational Health Program is the occupational health service provider for the core public administration (operationally defined as Schedule I & IV of the Financial Administration Act). Some of PSOHP's biggest client departments include Canada Border Services, Immigration Refugees & Citizenship and the Department of National Defence. We also serve Global Affairs Canada, providing occupational health services and advice to Canada-based staff deployed overseas, as well their spouses and dependents.

For situations like coronavirus, the PSOHP role is to provide advice and guidance to federal departments about appropriate precautions for safeguarding employee health. PSOHP advice is based on the latest available information about the virus and best practices in infection control. PSOHP provides its advice to departments who then make the decisions about what to implement in their own department.

How are we ensuring a common approach to occupational health and safety across federal departments?

PSOHP has been playing an interdepartmental facilitation role in this event to help ensure departmental approaches are aligned.

There has been excellent collaboration amongst key departments to ensure that there is alignment across organizations and complementarity with PHAC's messaging to Canadians.

We want to ensure that employees take sufficient and appropriate precautions, while at the same time not create any sense of alarm among the public they serve. For instance, wearing gloves to handle documents and baggage is a sufficient precaution to protect employee health. Wearing a mask and gown to handle documents is not necessary and could falsely create a sense that there is a higher risk than actually exists at the moment.

How does the PSOHP work with federally regulated workplaces under ESDC's Labour Program?

Although only mandated to serve the core public administration, PSOHP shares its advisories for use by other organizations. PSOHP shared its Occupational Health Advisory on Coronavirus with ESDC's Labour Program last week so that they could then post general information pointing employers and employees of federally regulated workplaces to key sources of information, such as the Public Health Agency of Canada and the World Health Organization.

We have shared the general Advisory with the Senate and House of Commons administration.

Do you have a network with Provinces and Territories to share OHS guidance?

PSOHP does not participate in any formal F/P/T mechanisms for occupational health and safety. However, our health professionals do liaise regularly with their occupational health colleagues working in other jurisdictions and in other sectors. We are also in regular contact with key organizations like the Canadian Centre for Occupational Health and Safety.

We also share all of the Advisories with the Public Health Agency of Canada who engaged provinces and territories through their networks

Who is responsible for front line medical workers?

PSOHP is only responsible for providing advice to federal public servants.

Our colleagues at Indigenous Service Canada have our advice and are working with PHAC to ensure appropriate guidance for their nurses in First Nations Communications and liaise with First Nations Health administrations to share advice and guidance

Provincial health systems manage advice for their health care workers and are part of the broader FPT Public health networks led by PHAC

The document titled "Public Health Agency of Canada – Health Portfolio Situation Report" dated February 10, 2020, 1300EST has been removed from this file as it is being provided in the PHAC submission of records. This page serves as a placeholder.



Occupational Health Advisory: Novel Coronavirus

Public Service Occupational Health Program (PSOHP), Health Canada

As of 24 January 2020

Please note that this advice may change as more information becomes available.

Purpose

To provide federal employees with occupational health advice in relation to the novel coronavirus (2019-nCoV).

Novel Coronavirus

Coronaviruses (CoV) are a large family of viruses that cause illness ranging from the common cold to more severe diseases such as Middle East Respiratory Syndrome (MERS-CoV) and Severe Acute Respiratory Syndrome (SARS-CoV). A novel coronavirus (nCoV) is a new strain that has not been previously identified in humans.

Common signs of infection with a coronavirus include fever and respiratory symptoms such as cough, shortness of breath and breathing difficulties. In more severe cases, infection can cause pneumonia, kidney failure and even death.

So far there has been limited human to human transmission of this novel coronavirus.

Given the evolving status of this disease outbreak, please refer to the following link for up-to-date information:

- [Public Health Agency of Canada \(January 21, 2020\). 2019 Novel Coronavirus infection \(Wuhan, China\): Outbreak update \(canada.ca/coronavirus\).](https://www.canada.ca/coronavirus)

General Precautions

Standard precautions for all federal employees include:

1. Frequent hand hygiene is important (<https://www.cdc.gov/handwashing/when-how-handwashing.html>).
2. Hands must be washed each time gloves are changed or discarded.
3. Wash hands before preparing, handling, serving or eating food.

4. Avoid touching your face, mouth, nose and eyes with unwashed or gloved hands.
5. Practice proper cough and sneeze etiquette. Cover your mouth and nose with your arm to reduce the spread of germs. Remember if you use a tissue, to dispose of it as soon as possible and wash your hands afterwards.
6. Federal employees should self-monitor for symptoms. If an employee develops fever and respiratory symptoms such as cough, shortness of breath and/or difficulty breathing they should seek medical attention and report these symptoms to their occupational health and safety department.

Contact Information

If there are any questions or concerns regarding this advisory and/or your present health status, please consult with the occupational health and safety resource personnel within your department.

For psychosocial support for federal workers, contact your department's Employee Assistance Program (EAP).

Annexes

Given that employees of the core public administration work in a variety of settings domestically and internationally, this General Advisory will be supplemented by annexes with information and recommendations pertaining to specific places of work (for example, airports).

References

- Centers for Disease Control and Prevention (January 22, 2020). *2019 Novel Coronavirus (2019-nCoV), Wuhan, China*. <https://www.cdc.gov/coronavirus/2019-ncov/summary.html>
- Infection Prevention and Control Canada (January 20, 2020). *Information about Coronavirus*. <https://ipac-canada.org/coronavirus-resources.php>
- Government of Canada (January 22, 2020). *Novel Coronavirus in Wuhan, China*. <https://travel.gc.ca/travelling/advisories/pneumonia-china?ga=2.260947853.1094428749.1578423601-32662530.1555003301>
- Public Health Agency of Canada (January 21, 2020). *Coronavirus Infection: Symptoms and treatment*. <https://www.canada.ca/en/public-health/services/diseases/coronavirus.html>

- World Health Organization (January 9, 2020). *Q&A on coronaviruses*.
<https://www.who.int/news-room/q-a-detail/q-a-coronaviruses>
- World Health Organization (December 31, 2019). *Novel Coronavirus*.
<https://www.who.int/westernpacific/emergencies/novel-coronavirus>

Annex A: Airports of Entry – As of 27 January 2020
Annex B: Missions in China – As of 28 January 2020



AIRPORTS

Occupational Health Advisory: Novel Coronavirus at Airports of Entry Public Service Occupational Health Program (PSOHP) As of 27 January 2020

In addition to the above noted general information recommendations, for federal employees working at airports of entry, the following precautions/recommendations apply.

Recommendations

PSOHP offers the following recommendations for federal workers who may be working with travelers:

- Be up-to-date with all recommended adult vaccinations as per the Canadian Immunization Guide. For communicable disease advice or immunization status queries, call your local public health authorities or the Public Service Occupational Health Program Office in your region.
- Meet their recommended immunizations as outlined for their occupational group as per Health Canada's Occupational Health Assessment Guide (OHAG).
- Where possible, keeping a distance greater than two metres from an individual who appears ill (e.g. coughing, sneezing).
- **Having the ill person wear a mask and use alcohol-based hand sanitizer at the earliest opportunity.**
- Isolating the ill person from others, when feasible, in a separate area or room.
- Ensuring a supply of tissues, hand sanitizer, masks and a wastebasket are available in the room.

Personal protective equipment (PPE)

Federal workers should follow standard precautions as per their departmental occupational health and safety program.

PSOHP recommends the use of the following PPE:

- gloves when handling documents and baggage of potentially ill persons
- gloves, eye/face protection and a mask when escorting and remaining with an ill person

All staff should be trained on the correct technique and sequence for putting on (donning) and taking off (doffing) their PPE. Advice from your departmental occupational health and safety personnel is recommended in regards to the choice and use of PPE.

Please consult your department's standard operating procedures for further guidance on the management of individuals who have been identified as requiring follow-up by a quarantine officer.



MISSIONS IN CHINA

Occupational Health Advisory: Novel Coronavirus at Missions in China Public Service Occupational Health Program (PSOHP) As of 28 January 2020

In addition to the above noted general information and recommendations, for those working at missions in China by the Novel Coronavirus, the following precautions/recommendations apply.

Recommendations

For all individuals working at missions in China

To reduce your risk of getting ill:

- Be aware of the local situation and follow local public health advice.
- Avoid all travel to Hubei Province, China.
- Avoid large public gatherings, crowds or crowded areas.
- Avoid high-risk areas such as farms, live animal markets, and areas where animals may be slaughtered.
- Avoid contact with animals (alive or dead).
- Avoid surfaces with animal droppings or secretions on them.
- Avoid contact with sick people, especially if they have fever, cough, or difficulty breathing.
- Avoid eating raw or undercooked animal products.
- Stay up to date on the current situation by reviewing travel advice and advisories regularly at <https://travel.gc.ca/destinations/china>

- If you or your family members have other medical conditions or concerns, please contact your **Emergency Watch and Response Centre at + 1-613-996-8885** who will then get you in touch with the designated medical consultant.

For anyone who may be working directly with visitors at mission

At designated entrances, prior to any visitor interaction, signage will be available to remind all visitors that if presenting with symptoms (fever, cough, difficulty breathing) they are not to enter the mission/facility. Continue to work with your mission security department to coordinate these efforts.

- Use environmental and engineering controls already in place (e.g. reception desk with glass barrier, limit number of visitors entering facility).
- Ensure a supply of tissues, hand sanitizer, masks and a wastebasket are available in the public areas.
- In areas where the first contact with the visitor occurs, implement standard screening questions:
 - If you are not located in China; Have you traveled in China?
 - Have you traveled in the Province of Hubei, China or visited Wuhan, China in the last 14 days?
 - Are you feeling sick or unwell right now?
- If the visitor answers "yes" to all questions, do not allow entry to facility. Instruct them to seek medical attention at the nearest appropriate health care facility and **provide a mask and alcohol-based hand sanitizer to the visitor.**
- **Surgical or procedure type masks are recommended for use by visitors and staff that are ill. The intent of the mask is to prevent respiratory droplets from dispersing into the air and potentially infecting others. The use of masks by people who do not have symptoms is not recommended by PSOHP at this time. However, public health recommendations may be different in China and other areas. Please follow local public health advice.**
- Where possible, keep a distance greater than two meters from an individual.
- Increase frequency of cleaning and disinfection practices in the workplace with an emphasis on high traffic areas.

Personal protective equipment

PSOHP recommends the use of the following personal protective equipment (PPE) and emergency supplies when interacting with a visitor to the mission:

- Gloves (single use disposable non-sterile disposable medical type gloves) when handling documents and/or personal belongings of visitors. The gloves can be made of latex, vinyl or nitrile. Please note that some people are allergic to latex. Thin, transparent gloves that are often used in food service are not recommended.
- Gloves are recommended when handling any documents that have been handed over to them by a visitor. The gloves should be changed and disposed of in between visitors. It is important to know how to put on and take off gloves and hand hygiene (use of antibacterial hand sanitizer or hand washing) must be performed before and after using gloves. It is also important to avoid all contact between gloves and the eyes/nose/mouth to prevent potential transmission of the virus.
- Advice from your departmental occupational health and safety personnel is recommended in regards to the choice and use of PPE.
- The use of masks by people who do not have symptoms is not recommended by PSOHP at this time. However, public health recommendations may be different in China and other countries. Please follow local public health advice. In the event that masks are worn, masks should be changed when they become moist or wet.

If you or a family member is feeling ill

If you or a family member is feeling ill with symptoms of a respiratory illness (fever, cough, difficulty breathing), do not go to work and advise your supervisor. See the following link for more information on the Novel Coronavirus infection:
<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection.html>.

- If you become ill at the mission, put on a surgical-type mask at the earliest opportunity, use alcohol-based hand sanitizer and try to maintain a distance of two meters from others.

Avoid contact with others and contact the Emergency Watch and Response Centre at +1-613-996-8885.

DRAFT

Rassi, Daniel (HC/SC)

From: Lucas, Stephen (HC/SC)
Sent: 2020-02-12 1:23 PM
To: Minister Patty Hajdu
Cc: [REDACTED] Namiesniowski, Tina (PHAC/ASPC); Tam, Dr Theresa (PHAC/ASPC)
Subject: GOC COVID-19 status report update

Minister - Government Operations Center (Public Safety) roll up status report.

VALID as of 10:00 EST, 12 Feb 2020.

Summary:

- On 11 Feb, the World Health Organization announced the new name of the illness that's sickened more than 42,000 people in China: COVID-19: meaning coronavirus disease that was discovered in 2019.
- Canada 2 final numbers: 188 evacuees, 7 GAC, 6 DND medical, 14 aircrew; 10 aircrew added at YVR: total of 225 total passengers (Source: GAC).
- As of 11 Feb, a total of 2 returnees have been ordered to undergo additional examination. Both tested negative for COVID-19.
- On 9 Feb, six (6) Canadian Armed Forces were assessed and deemed not at risk of exposure to COVID-19. Similarly, on 10 Feb, 25 crew from Canada 1 and one (1) GAC member from Canada 1 were assessed and deemed not at risk of exposure to COVID-19. All were released from quarantine under the authority of Canada's Chief Public Health Officer (CPHO). (Source: PHAC, CAF, Open Source).

Status at CFB Trenton:

- As of 17:00 11 Feb, with the arrival of passengers and crew members from Canada 2, there are now 456 individuals in lodging. (Source: CRC)
- Tentative dates of quarantine release are February 21 and February 25. An official statement by Dr. Theresa Tam (CPHO) will be issued once confirmed. (Source: PHAC)
- Security continues to be an issue. CAF is supporting. Additional contracted capacity is being sought on an urgent basis.

NAVCAN Centre: (Under evaluation as potential quarantine alternate site)

- Assessment completed on 9 Feb to the NAVCAN Centre in Cornwall, Ontario and the conclusion was that this facility would be suitable alternative.

- No additional planning is underway at the Government Operations Centre to secure an alternate site, until it is determined that Trenton CFB has exceeded its capacity.

Domestic situation update:

- There are 7 confirmed cases of **COVID-19** infection identified in Canada. Excluding 8 Canadian citizens aboard the Diamond Princess).
- Enhanced screening measures are in place for travelers from Hubei Province, China, within the last 14 days, in all international airports.
- **1466 travelers have answered yes to being in Hubei Province, China, since enhancing screening implementation. (Source: PHAC).**

Global situation:

China

- **42,638 cases** of **COVID-19** pneumonia, with **1,016 deaths**.

Japan

- The Diamond Princess cruise ship, carrying approximately 3,700 passengers and crew, **including 255 Canadians (251 passengers and 4 crew members)**, is being quarantined for 14 days off shore of Yokohama, Japan. **The quarantine is expected to last until February 19** (Source: GAC)
- As of February 10, **8** Canadian passengers of the Diamond Princess cruise ship quarantined in Japan were confirmed to have **COVID-19** infections and were transferred to local hospitals to receive care. (Source: PHAC)
- **A ninth Canadian** with serious symptoms was hospitalized urgently on February 10. Coronavirus test results are still pending. (Source: GAC EWRC Report)
- **PHAC Executive Medical Advisor (EMA) will deploy to Tokyo to assist GAC's Standing Rapid Deployment Team (SDRT) on 14 Feb. The SDRT is a unit of specialized officials deployed to work alongside Canada's embassy and consulate personnel to provide critical services to Canadians in distress during emergencies. The EMA will provide public health and technical advice in support of Canadian passengers on board the Diamond Princess for the remainder of the quarantine period, and their return to Canada post quarantine.**

Hong Kong

- Hong Kong released all passengers temporarily quarantined on a cruise ship, including 36 Canadians. (Source: PHAC)

Other

Communications Update/Media Analysis (Source: PS Communications):

- Coverage of the Novel Coronavirus (COVID-19) remains strong but is no longer the top news story in Canada. The primary focus over last 24 hrs has been on the arrival of the second plane from Wuhan to CFB Trenton.
- Most remains neutral, with a notable positive CP report focusing on life under quarantine at CFB Trenton. The report centered on one graduate student who said she's "been enjoying the comforts of home, from English-language TV news she plays on a loop, to the freedom to roam the base and fraternize with fellow evacuees — from a medically prescribed two-metre distance."
- A majority of reports pointed out that none of the evacuees at CFB Trenton have shown symptoms of the virus. Wednesday's media coverage also noted ON's CMOH statement that the province has resolved a case of COVID-19 for the first time.
- No media availability planned for the CPHO on Wednesday. Ontario's Chief Medical Officer of Health is scheduled to hold a media availability on Wednesday morning underscoring the federal partnership.
- More CPHO updates about releasing individuals from quarantine are expected in the coming days.
- Friday, February 14 – Media availability with CPHO and DCPHO (TBC).
- Media coverage of COVID-19 remains strong. However on Tuesday it was not the top news story in Canada with coverage of the anti-pipeline protests taking part across the country becoming the top story. In the U.S., Coronavirus was a distant second behind the New Hampshire Democratic primaries. During the past 24 hours, there were 40 notable news stories. The primary media focus in Canada on Tuesday was the arrival of the second plane.

Deryck Trehearne

Director General | Directeur général

Government Operations Centre | Centre des opérations du gouvernement

613-991-7728 | [REDACTED]



GOVERNMENT OPERATIONS CENTRE
CENTRE DES OPÉRATIONS DU GOUVERNEMENT

From: Lucas, Stephen (HC/SC) <stephen.lucas@canada.ca>

Sent: 2020-02-10 12:58 PM

To: Minister Patty Hajdu <[REDACTED]>; Darren Fisher <[REDACTED]>

Cc: [REDACTED] Namiesniowski, Tina (PHAC/ASPC) <tina.namiesniowski@canada.ca>; Tam, Dr Theresa (PHAC/ASPC) <drtheresa.tam@canada.ca>

Subject: Fwd: DM Update on Novel Coronavirus - VALID as of 10:00 EST, 10 Feb 2020

Subject: DM Update on Novel Coronavirus - VALID as of 10:00 EST, 10 Feb 2020

Summary:

- For Canada 2, as of 0900 on 10 Feb, there are currently 135 Canadians and 63 other eligible on the manifest for Canada2 (total 198). Thirteen personnel from GAC and CAF will be on board, as well as flight crew. Confirmation of final numbers will not be known until final boarding occurs in Wuhan. (GAC fact sheet attached)
- Canada2 is scheduled to arrive at CFB Trenton at 04:40 EST on 11 Feb. Updated flight times will be provided as soon as available. Canada2 is the final planned flight.
- To date, none of the returnees from Canada1 or US 4 have been ordered for additional examination or medical care related to Novel Coronavirus.
- On 9 Feb, flight crew from the US4 flight and CAF medical staff were released from quarantine under the authority of Canada's Chief Public Health Officer.
- An Incident Response Group meeting is scheduled for Tuesday 11 Feb, in the afternoon.

Status at CFB Trenton:

- On 9 Feb, 5 flight crew from the US4 flight, 8 CAF medical staff, and 1 GAC personnel were released from quarantine under the authority of Canada's Chief Public Health Officer.
- Planning is underway to prepare accommodations for arrivals from Canada2. The planning assumption is that Canada2 will be at maximum capacity with returnees plus aircrew, DND medical staff and GAC personnel (currently up to 274, subject to change).
- Additional public health advice is required by CAF and is in progress in order to finalize accommodations.
- CRC (up to 35 plus ten virtual caseworkers) presence continues to increase at Trenton. OPP on site. Efforts continue to ensure appropriate security presence and are the subject of an RFA directly between PHAC and DND which remains under discussion.

Canada2

- Canada2 landed in Wuhan on Monday 10 Feb at 9:30 EST. Canada2 is scheduled to arrive at CFB Trenton at 04:40 EST on 11 Feb. Updated flight times will be provided as soon as available. Canada2 is the final planned assisted departure flight.
- As of 0900 on 10 Feb, there are 135 Canadians and 63 other eligible on the manifest for Canada2 (total 198). An additional 13 personnel from GAC and CAF will be on board, as well as flight crew. Confirmation of final numbers will not be known until final boarding occurs in Wuhan.
- Plan is to have the following GoC personnel on the return flight from Wuhan to Trenton: 6 DND medical +6 GAC officer + 1 SRDT.

NAVCAN Centre:

- Recce completed on 9 Feb to the NAVCAN Centre in Cornwall, Ontario. Assessment was that this facility would be suitable should accommodation requirements outstrip Trenton.

Global:

- Japan's Ministry of Foreign Affairs reported that the Diamond Princess cruise ship, carrying approximately 3,700 passengers and crew, including 251 Canadians, is being quarantined for 14 days off shore of Yokohama, Japan. Seven Canadian citizens that tested positive were transferred to local hospitals.
- Hong Kong released all passengers that had been temporarily quarantined on a cruise ship, including 36 Canadians.

Domestic situation update:

- As of 09 Feb, there are 7 confirmed cases of 2019-nCoV infection identified in Canada. This does not include the seven Canadian citizens aboard the cruise ship Diamond Princess who tested positive and were transferred to local hospitals.
- Enhanced screening measures for travelers who have been in Hubei in prior 14 days, have been implemented in all international airports across Canada.
- As of 07 Feb 1271 travelers have answered yes to being in Wuhan/Hubei since border questioning was implemented.

Communications Update:

- Yesterday, the Chief Public Health Officer issued a CPHO Statement on the release of select CAF medical staff from quarantine. The statement outlined the process pursuant to the Quarantine Act, providing the rationale for the decision.
- Today, GAC is tentatively planning on issuing a News Release that will highlight international cooperation including the supplies Canada has provided to the international efforts to counter the Corona virus (details tbd).
- The Media Plan continues to be updated in real time with plans for a PHAC/Health Canada/GAC tech briefing tentatively scheduled for early this week as well as tentative plans to communicate publicly for the arrival of the next plane via News Release.

The next key points will be issued at 12:00 EST on 11 Feb 2020

1. Welcome and Opening Remarks

Meeting Management

- At the start of the call:
 - Welcome your Ministerial colleagues.
 - Confirm that your co-chair, Minister Elliott is on the line [as well as DM Lucas, President Namiesniowski and Dr. Theresa Tam] prior to conducting the roll call.
 - Refer to list of confirmed participants for roll call.

Talking Points

- Thank jurisdictions for their strong collaboration and open communication at all levels in the context of both repatriation and updated travel advice, which we will discuss today.
- Not always easy to remain aligned as we face rapidly evolving pressures and dynamics of a new virus. Recognize that officials across Canada are doing their best to contain the virus and protect the health of Canadians.
- Sincere thank you to Minister Elliott and Ontario officials for their tremendous collaboration on arrangements and follow-up on the ground in Trenton, as well as to Minister Dix and BC officials for their support with the repatriation plane stops in Vancouver.
- Our precautionary approach regarding updated advice to travellers continues to align with our objective of containing this new virus and protecting Canadians.
- As the situation evolves, I know that we will continue adjusting our advice and approaches in a way that is evidence-informed and proportionate to the risk for Canadians at home and abroad.

- Before turning to Dr. Theresa Tam to provide an update on recent developments, I will ask my co-chair, Minister Elliott, if she would like to say a few words.

[Following Minister Elliott's remarks, invite Dr. Tam to provide a brief Situation Update on Novel Coronavirus]

2. Situation Update on Novel Coronavirus (2019-nCoV) and Domestic Activities (CAN-PHAC)

FEDERAL OBJECTIVES

- ✓ Provide the latest international and domestic update to Ministers as the situation evolves;
- ✓ Ensure our collective readiness and level of preparation across jurisdictions; and
- ✓ Continue to respond to questions as required.

Meeting Management

Dr. Tam's Remarks

Latest Numbers (As of Feb. 10)

- 40,171 cases, with 908 deaths reported from mainland China. The number of deaths in China due to coronavirus have surpassed the number due to SARS in 2002-03.
- International cases (outside mainland China): 449 cases in 27 countries, 2 deaths of individuals with underlying medical conditions (including the 135 cases confirmed among passengers among a cruise ship in Japan).
- Within mainland China, Hubei Province remains the epicentre of the outbreak, accounting for 74% (29,631) of cases, and 96% (871) of deaths.
- There are now 7 confirmed cases in Canada, 3 in ON, 4 in BC.
- While there appears to be some slight plateauing in the rate of increase of new cases in China in the last few days, it is too early to read much into those numbers at this point in the international outbreak.

Cruise Ship Update

- On February 5, PHAC was notified by Japan public health authorities of confirmed 2019-nCoV Canadian cases associated with the Royal Princess Cruise ship.
 - 8 Canadians have now tested positive for 2019-nCoV, transferred from ship to hospital in Japan. 135 cases total on the ship.
 - 2 Canadians identified as contacts to date, but departed ship on Feb 1 in Hong Kong (permanent addresses are Hong Kong), PHAC is following up to provide health advice given their potential exposure.
- PHAC is sending a letter to all Canadians on the Diamond Princess Cruise Ship to provide them with information and we are in contact with GAC and Japanese officials to support Canadians within the context of the Japanese quarantine order.

Domestic Situation & Readiness

- We are at a critical point in the international outbreak with significant increases in the number of cases in China, and exposure risk centred in Hubei province. It is now 14 days since the Chinese government put extraordinary measures in place in Wuhan.
- Out of an abundance of caution related to potential transmission by individuals who are mildly symptomatic, the Special Advisory Committee recommended new advice to travellers from Hubei province and China.
- Reminder of updated advice provided to media, on-line and in airports:
 - Advise all travellers to Canada who have been in Hubei province in the last 14 days to self-isolate (away from work and school) for a period of 14 days from their Hubei departure and to contact their public health authority within 24 hours of arrival.
 - Provide all travellers from China with information to self-monitor and inform them on what to do if they become sick.
- This advice was implemented in 10 airports across Canada this past weekend.
- SAC has finalized a number of key products over the last week including surveillance case definition and reporting, infection prevention and control guidance for acute healthcare settings, and public health management guidance, including airplane contact tracing for containment.
- SAC is assessing respective jurisdictional stockpiles of personal protective equipment and PHAC is putting plans into place to support replenishment.

- We will continue to monitor the situation and determine our advice and approach needs to be adjusted over time, based on the latest evidence.
- In the next two weeks we should have a better sense of whether or not China's containment efforts have been successful, that is if China can maintain containment and we begin to see a sustained decline in the number of illnesses and deaths in that country.
- [Responsive, if asked about requiring self-isolation or public health proactive contact: PHAC is doing more work to explore what might be required to identify contact information from passengers returning from Hubei to allow local public health to follow up and what steps may be necessary to require self-isolation. PHAC is analyzing the benefits and drawbacks of requiring any further measures pursuant to the Quarantine Act, including implications for public health system resources].

END

Following Dr. Tam's Remarks ...

- Thank you Dr. Tam. Do colleagues have any questions for Dr. Tam?

3. Repatriation Plan

FEDERAL OBJECTIVES

- ✓ Update PT Ministers of Health on the arrival of the Canadian and US repatriation planes at CFB Trenton on February 7, and the second Canadian plane.

Talking Points

- Impressed with the level of coordination across jurisdictions to ensure our systems work seamlessly to support the repatriation process and assure the health of all Canadians.
- As you know, the first Canadian plane (carrying 174 passengers + 34 crew) and Canadian passengers from the US repatriation plane (39 passengers + 7 crew) from Wuhan, China arrived safely at CFB Trenton on February 7th.

- The National Microbiology Laboratory mobile lab is on-site to support testing as needed. In addition, the Canadian Red Cross is providing support to travellers at CFB Trenton, and security is provided, supported as required by the OPP.
- The next Canadian repatriation flight departs from Wuhan today, estimated to be at full capacity (248 seats including crew, GAC, DND personnel), and is expected to arrive at CFB Trenton early tomorrow morning. Final numbers will be shared once they are confirmed.

Turn to Dr. Tam to speak to health status of travellers and crew:

Dr. Tam's Update

- All of the individuals from the first Canadian flight and the US flight have been processed, and all health assessments have been conducted by registered nurses.
- Of the 213 travellers, no fevers have been reported and none have showed visible signs of illness during the flight or since their arrival.
- The Emergency Order under the Quarantine Act applies to all individuals on the repatriated flights including individuals such as the Canadian Forces medical staff, flight crew and other Government of Canada employees who have no exposure risk from Wuhan.
- Given its broad scope the order also allows for me, as Chief Public Health Officer, to exercise discretion to determine that flight crew members and Government personnel may be released earlier on a case by case basis (with advice to self-isolate).
- In exercising this discretion, I use established protocols that consider the risk of exposure—taking into account the time spent in Wuhan, the use of personal protective equipment, and any contact with a person showing symptoms of the novel coronavirus.
- I have assessed each member of the Canadian Armed Forces medical

staff, who accompanied the returning travelers, and have determined that their continued quarantine is not required.

- 8 Canadian Forces personnel were released on February 9.
- 6 flight crew members who accompanied the flight from Vancouver to Trenton, and a Government of Canada employee who boarded the flight in Hanoi are being released today.
- This exercise of discretion is not taken lightly. Denying civil liberties of movement is a serious matter; there is no justification to hold individuals who have had no exposure.
- I will turn it back to Minister Hajdu to continue the repatriation update.

END of Dr. Tam's update on health status

Minister's Continued Talking Points:

- We recommend a 14 day quarantine period out of an abundance of caution since the average incubation period is around 5 days.
- *[IF MINISTER WISHES to speak to potential shorter period at Trenton: Right now these travellers are to complete the 14 days at CFB Trenton and we would welcome your views on whether the whole quarantine period needs to be completed at Trenton if individuals can get home easily and safely for home isolation.]*
- In addition to monitoring for illness, our efforts will begin to turn to departure planning, once the 14-day quarantine period is completed.
- We do not yet have complete information on the final destination within Canada of passengers on the Canadian and US repatriation flights. Once we have consolidated information we will share final numbers of final destination by province with jurisdictions.
- PHAC is keeping individual level information for all individuals should there be a need for it for future contact tracing.

- Respecting the privacy of these returning residents is of utmost importance, in particular in the context of their release after completing the quarantine period.
- PHAC is identifying individuals that may require interim provincial health insurance coverage and will communicate this to jurisdictions.
- We will continue to share regular updates throughout the quarantine period(s) for all repatriation groups.
- Thank you again to ON and BC for your extensive collaboration on the repatriation efforts.
- I would like to hear your perspectives and open the floor for questions or comments.
- Minister Elliott, would you like to start?

4. Next Steps & Forward Planning

FEDERAL OBJECTIVES

- ✓ Seek Ministers' perspectives on next steps for consideration by the Public Health Agency of Canada and the Special Advisory Committee on Coronavirus.

Talking Points

- It is important as Ministers that we consider what the next steps are in our collective response to the coronavirus.
- We have had incredible collaboration amongst jurisdictions, and it is vital we continue together to ensure an effective response and public confidence.
- Although we remain in a containment phase at this time, we cannot ignore what may come next.

- PHAC is doing advanced thinking and scenario analysis including a pandemic scenario. This work will involve all jurisdictions through the Special Advisory Committee, Conference of Deputy Ministers and Ministers.
- We need to be prepared to respond based on the latest scientific evidence and data.
- We are also planning ahead for cruise ship season in Canada, working with Transport Canada, Cruise Lines International Association (industry) and CBSA.
- The Industry Association has put in place enhanced protocols for ocean-going guests and crew who have recently travelled from or through China.

5. Closing Remarks

Talking Points

- In closing, I would like to thank you all again for taking this call today.
- Through our Deputy Ministers and the Special Advisory Committee, officials will continue to work closely over the coming days and weeks.
- It has been very helpful to meet regularly to discuss coronavirus response efforts as the situation is rapidly evolving both globally and in Canada. We will convene regular Ministerial calls.
- Minister Elliott, do you have anything you would like to add before we sign-off?

~ MEETING ADJOURNED ~

1. Welcome and Opening Remarks

10:15 – 10:20 AM (5 minutes)

Meeting Management

- At the start of the call:
 - Welcome your Ministerial colleagues.
 - Confirm that your co-chair, Minister Elliott is on the line [as well as PHAC President Tina Namiesniowski and Dr. Theresa Tam if dialing in] prior to conducting the roll call.
- [Please refer to **Tab B: List of Participants**]

Talking Points

- Thank jurisdictions for their strong cooperation and for all of the calls on the weekend by DMs and Chief Medical Officers of Health.
- Sincere thank you to Minister Elliott and Ontario officials for their cooperation and collaboration on arrangements and follow-up on the ground in Trenton.
- Plans to repatriate Canadians from Hubei province back to Canada have been rapidly developed with incredible collaboration across all levels of government.
- Recognize the importance of coordinating across jurisdictions to ensure our systems work seamlessly to support the repatriation process and assure the health of all Canadians.
- Today we will outline the plan that we have developed in consultation with your respective jurisdictions over the last couple of days, and I would like to hear any considerations that you may have.
- Given the evolving international situation with the WHO's declaration of a Public Health Emergency of International Concern, this is a good

opportunity to hear briefly from Dr. Tam on significant international developments and the current domestic situation.

- Before turning to Dr. Theresa Tam to provide an update on recent developments, I'll ask my co-chair, Minister Elliott, if she would like to say a few words.

[Following Minister Elliott's remarks, invite Dr. Tam to provide a brief Situation Update on Novel Coronavirus]

2. Standing Item - Situation Update on Novel Coronavirus

10:20 – 10:25 AM (5 minutes)

FEDERAL OBJECTIVES

- ✓ Provide the latest international and domestic update to Ministers as the situation evolves;
- ✓ Ensure our collective readiness and level of preparation across jurisdictions; and
- ✓ Continue to respond to questions as required.

Meeting Management

Dr. Tam's Remarks

Latest Numbers (To be updated morning of Feb 3)

- As of today, February 3, there are 14 411 (Feb 2) confirmed cases in mainland China and 146 outside of mainland China in 23 countries, including now 4 in Canada (3 in ON, 1 in BC). There have been 304 deaths to date in China and 1 death in the Philippines.
- In relation to Canada's most recent case in ON announced on January 31st, all proper infection and prevention protocols were followed. Testing procedures continue to evolve to be more sensitive and allow detection of the smallest trace presence of the virus.

International Developments

- Having been a part of the WHO Emergency Committee's deliberations, I can say that the decision to declare a Public Health Emergency of International Concern was based on the need to enhance preparedness and response in vulnerable countries in particular, given the potential for the outbreak to overwhelm their health systems.
- In their advice to countries, the WHO stated that all countries should be prepared for containment, active monitoring, and measures to prevent onward spread of the coronavirus.
- The WHO does not recommend any travel or trade restrictions based on the current information available.
- Canada's actions are already aligned with these recommendations.
- With respect to public health measures taken as part of this repatriation efforts internationally, following traveller arrival, several countries, including the UK, France, Japan, US and Germany, have implemented a 14 day period of medical examination and observation of various types in a secure facility (i.e., hospital, military base).

Domestic Situation & Readiness

- The Public Health Agency of Canada has updated our risk assessment and there is no change to the level of risk within Canada which remains low.
- With respect to border measures we have expanded our measures to seven other airports across Canada (Calgary, Edmonton, Winnipeg, Ottawa, Quebec City and Halifax).
- The FPT Special Advisory Committee on Coronavirus met 4 times this past week, including yesterday and discussed public health guidance for returning travellers.

END

Following Dr. Tam's Remarks ...

- Thank you Dr. Tam
- Do colleagues have any questions for Dr. Tam?

3. Repatriation Plan

10:25 – 10:40 AM (15 minutes)

FEDERAL OBJECTIVES

- ✓ Present PT Ministers of Health with the plan that was prepared across federal departments and jurisdictions for repatriation of Canadian citizens who wish to return from Hubei, China.
- ✓ Emphasize that the repatriation plan was established based on the latest evidence regarding the coronavirus.
- ✓ Seek Ministers' perspectives on the plan, including any considerations for its execution by federal government officials.

Talking Points

Introductory Comments on Repatriation

- Given regional travel restrictions introduced by China as a result of the coronavirus outbreak, Global Affairs Canada has made arrangements to repatriate Canadians who travelled to China on a Canadian passport with a valid visa for China and wish to return to Canada.
- The current repatriation plan is for a flight carrying 250 people (includes 6 DND personnel, 2 Transport Canada inspectors and flight crew). The exact number of travellers cannot be confirmed as access onboard will be determined by thorough health screenings.
- We will share with jurisdictions the final destinations of repatriated Canadians as we receive this information.
- Repatriation could take place as early as the middle of this week.
- The Public Health Agency of Canada has worked with Global Affairs Canada, CBSA and Public Safety to develop processes and protocols that are commensurate with the level of risk, informed by public health advice of the Special Advisory Committee on Coronavirus.

- PHAC will coordinate with provincial and municipal health authorities. PHAC will also be responsible for the provision of Personal Protective Equipment (PPE) and advice on level of protection required for passengers, staff, flight crew, and at CFB-Trenton.

THE PLAN

- This objective of this plan is to ensure heightened oversight to protect the health of exposed travellers, as well as the health and safety of the public from the coronavirus outbreak.

Pre-boarding in China

- All Canadians boarding the flight will undergo medical exit screening (visual and temperature check) by Chinese authorities before being allowed in the airport.
- Travellers will undergo a second visual/temperature check by Canadian Forces medical staff before being allowed on the plane.

Boarding and On Plane

- During the flight Canadian Forces medical team will complete a detailed health questionnaire to gather traveller contact tracing information.
- If a passenger becomes ill they will be segregated into an isolated section of the plane and masked for the duration.
- The plane will stop for refueling in Vancouver. We would like to thank BC for their support on this aspect. Passengers will stay on the plane. Only passengers exhibiting symptoms which meet a pre-established threshold for immediate medical assistance will deplane in Vancouver.

Arrival and Follow-up Under Quarantine Act

- Arrival point will be CFB-Trenton to support coordinated and contained processing and support services.

- In the event that a passenger becomes ill on the flight, emergency medical staff will transfer the ill passenger directly to a local health care facility for examination and treatment consistent with the approach determined by the Ontario public health authority.
- Upon arrival, all travellers will automatically be processed by CBSA to secondary screening based on having arrived from Hubei, Province.
- A high-level health assessment (visual/temperature check) will be done to determine if anyone is visibly sick.
- Under authority of an Emergency Order pursuant to the federal Quarantine Act, all passengers will remain at CFB-Trenton for 14 days after arrival to allow for a full health assessment, follow-up observation by PHAC personnel for all travellers and support services.
- During this period, we will offer social support including mental health services, given the stressful experience.
- Additional testing may be considered as part of the health assessment protocols, in consultation with the provincial public health authority.
- Should symptoms be identified at any time, the traveller will be appropriately transported in coordination with the provincial health authority to the local hospital for further treatment and contact tracing protocols will be initiated.
- Onward travel information of asymptomatic Canadians returning on the repatriation flight will be communicated to their respective P/T jurisdiction to facilitate any further follow up by local public health.
- Following the completion of the full health assessment, the Government of Canada will provide transportation to Toronto, Ottawa or Montreal.
- I would like to hear your perspectives and open the floor for questions or comments.
- Minister Elliott, would you like to start?

4. Closing Remarks

10:40 – 10:45 PM (5 minutes)

Talking Points

- In closing, I would like to thank you all again for taking this call today, and for our conversations over the last week, with particular thanks to Ontario.
- Our Chief Medical Officers of Health, the Special Advisory Committee and DMs will stay in close touch over the coming days and weeks, as they have been doing.
- It has been very helpful to meet regularly on the coronavirus as the situation is rapidly evolving both globally and in Canada. We will convene regular Ministerial calls (weekly or more frequent as needed).
- Minister Elliott, do you have anything you would like to add before we sign-off?

~ MEETING ADJOURNED ~

1. Welcome and Opening Remarks

Meeting Management

- At the start of the call:
 - Welcome your Ministerial colleagues.
 - Confirm that your co-chair, Minister Elliott is on the line [as well as DM Lucas, President Namiesniowski and Dr. Theresa Tam] prior to conducting the roll call.
 - Refer to list of confirmed participants for roll call.

Talking Points

- Thank jurisdictions and all of their officials for their incredible collaboration over the last several weeks, as Canada has welcomed home and supported many individuals in the context of ever evolving developments related to Coronavirus.
- Sincere thank you to Minister Elliott and Ontario officials for their tremendous collaboration on operations and follow-up on the ground in Trenton and now in Cornwall as well.
- Appreciate the agility with which our respective teams are working together on border measures and public health follow-up, repatriation, management and containment of cases in our health system, and internationally with our global partners.
- Before turning to Dr. Theresa Tam to provide an update on recent developments, I will ask my co-chair, Minister Elliott, if she would like to say a few words.

[Following Minister Elliott's remarks, invite Dr. Tam to provide a brief Situation Update on Novel Coronavirus]

2. Situation Update on Novel Coronavirus (2019-nCoV) and Domestic Activities (CAN-PHAC)

FEDERAL OBJECTIVES

- ✓ Provide the latest international and domestic update to Ministers as the situation evolves;
- ✓ Ensure our collective readiness and level of preparation across jurisdictions; and
- ✓ Continue to respond to questions as required.

Meeting Management

Dr. Tam's Remarks

Dr. Tam will provide an update on the latest international and domestic numbers and situational developments.

Latest Numbers:

- The number of cases of Coronavirus in mainland China continues to grow, albeit at what appears to be a slower pace: 74,185 cases, 2004 deaths.
- In other countries, the main source of growth in cases has been the Diamond Princess Cruise Ship in Japan: 621 cases (6 confirmed deaths outside China). Minister Hajdu will speak in a few minutes about our repatriation plans for passengers on the Diamond Princess.
- In Canada, the number of cases has remained quite stable at 8 cases (3 ON, 5 BC).

Cruise Ships:

- As we all hear on a daily basis in the media, cases aboard cruise ships have been a key challenge internationally to containment efforts.
- On February 14, the Westerdam cruise ship, with 2,257 people onboard, docked in Cambodia, with 271 passengers and 2 crew from Canada.
- Of the 145 passengers from this cruise ship that flew to Malaysia, one American tested positive for COVID-19. Contact tracing was initiated by Malaysian authorities who identified Canadian citizens who were on the same flight.

- CBSA has a list of Canadian passengers from that cruise ship to support lookouts and interception of those individuals when they arrive in Canada. Upon arrival these passengers are given the handout advising them to self-isolate for 14 days from their departure on the ship, and to contact public health within 24 hours of their arrival.
- The most up to date information that we have from the Diamond Princess Cruise Ship in Japan is that there are a total of 621 cases confirmed on the ship, including 47 Canadians that have tested positive for Coronavirus.
- These Canadians are remaining in Japan in hospital or quarantine, and a number of other Canadians from this cruise ship are remaining in Japan (due to health issues, or other reasons).
- PHAC has a small team, along with Global Affairs Canada and Canadian Forces medical staff on the ground to provide support to these Canadians in Japan.

Domestic Situation & Readiness

Follow-up: Returning Travellers from Hubei, China and Two Cruise Ships

- PHAC and CBSA have now implemented a traveller contact information form for returning travellers to complete from Hubei province in China, as well as travellers returning on commercial flights from the Westerdam cruise ship.
- We are sharing this information with provincial/territorial public health authority of the final destinations of these travellers to support proactive public health follow-up and monitoring and to support our collective effort to identify whether or not passengers are being compliant.
- In addition, we are providing all Hubei and Westerdam travelers with masks to support them during any onward travel should they begin to feel ill.
- It will be important for jurisdictions to share information back with PHAC on compliance of individuals contacting public health and voluntary self-isolation. This information will assist us in monitoring and adapting the process as required.
- The Special Advisory Committee is discussing jurisdictional policy approaches and on the use of personal protective equipment (PPE) such as N95 respirators, and concerns that unnecessary use will lead to a shortage in PPE stock for health care workers who need them most for specific medical procedures and situations.

- SAC is working on approaches to conserve and coordinate PPE supply across jurisdictions, including to meet the immediate need for pediatric masks for use in Trenton and Cornwall.
- SAC also continues its work lab testing to support release of individuals that were confirmed cases from isolation, and forward planning scenarios. We will continue to bring forward recommendations and updates to DMs and Ministers.

END

Following Dr. Tam's Remarks ...

- Thank you Dr. Tam. Do colleagues have any questions for Dr. Tam?

3. Repatriation Plan

FEDERAL OBJECTIVES

- ✓ Update PT Ministers of Health on the plans for the repatriation of Canadians on the Diamond Princess Cruise ship in Japan.
- ✓ Update PT Ministers of Health on the exit plans for repatriated Canadians at CFB Trenton.

Talking Points

- Since we last spoke, efforts are in full swing for repatriation of Canadian passengers on the Diamond Princess Cruise ship in Japan.
- The Government of Canada has secured a chartered aircraft to bring passengers directly from Japan to Canada.
- We are taking this action to return Canadians home from on board the Diamond Princess, while ensuring measures are in place to address any residual risk associated with these individuals.
- The Government of Canada is working closely with the Carnival Cruise Line and the Government of Japan.

Diamond Princess Cruise Ship Update

- To date, 156 Canadians have accepted the offer of repatriation to Canada by chartered flight.
- The plane chartered to repatriate Canadians will leave tomorrow (February 20) mid-day Ottawa time, and arrive in CFB Trenton early in the morning on February 21st.
- Passengers will be screened for symptoms before boarding the plane. Those who exhibit symptoms will not be permitted to board and will instead be transferred to the Japanese health system to receive appropriate care. We are confident in the ability of the Japanese health care system to provide care for Canadians experiencing symptoms.
- The aircraft will fly passengers from Japan to CFB Trenton, where they will be processed and transported onward to the NAV Canada Training Institute in Cornwall, Ontario, where they will be quarantined for up to 14 days.
- Steps are being taken to secure authority to also quarantine individuals who are released from the Japanese quarantine, if they return to Canada using commercial flights. This would be done at their first point of arrival in Canada, either through mandatory isolation at home or in a facility designated for quarantine by the CPHO.
- PHAC has received the breakdown by home P/T of Canadian passengers on the Diamond Princess and has shared this with jurisdictions via the SAC.
- Again, a big thank you to Ontario for supporting the repatriation of passengers to Cornwall.

CFB Trenton

- Passengers from the repatriation flights that arrived in CFB Trenton are doing well.
- PHAC is finalizing plans for the exit strategy of individuals from Trenton following the quarantine period. This planning includes onward travel, health, communication, and legal considerations.
- Given the dates on which the earlier flights arrived in Canada, the existing quarantines are expected to expire on February 21st and February 25th respectively. 218 individuals are expected to leave from Trenton on February 21st.
- Have seen excellent collaboration and tireless work on the ground across many organizations including officials from Ontario, Federal Health Portfolio, Canadian Armed Forces, Global Affairs Canada and the Canadian Red Cross.
- We will continue to share regular updates throughout the quarantine period(s) for all repatriation groups.
- Impressed with the level of coordination across jurisdictions to ensure our systems work seamlessly to support the repatriation process and assure the health of all Canadians.
- I would like to hear your perspectives and open the floor for questions or comments.
- Minister Elliott, would you like to start?

4. Next Steps & Forward Planning

FEDERAL OBJECTIVES

- ✓ Seek Ministers' perspectives on next steps on Coronavirus.

Talking Points

- It is important as Ministers that we continue to support our officials to consider the next steps in our collective response to the coronavirus.
- To date, Canada has been effectively responding to cases, domestic and international risk and managing containment across all levels of government.
- FPT discussions on public health scenarios have begun through the SAC to inform response planning, triggers for further measures and potential recommended actions across jurisdictions as the situation evolves.
- Health Canada and PHAC are also working on a federal planning scenario exercise looking at implications, including social and economic, for the whole of government should the COVID-19 situation continue to evolve.
- Ministers will receive updates on scenario planning as SAC and federal departments continue to refine the scenarios.

5. Closing Remarks

Talking Points

- In closing, I would like to thank you all again for taking this call today.
- Through our Deputy Ministers and the Special Advisory Committee, officials will continue to work closely over the coming days and weeks.
- It has been very helpful to meet regularly to discuss coronavirus response efforts as the situation is rapidly evolving both globally and in Canada. We will convene regular Ministerial calls.

- Minister Elliott, do you have anything you would like to add before we sign-off?

[Note: Key messages on medical assistance in dying are attached in the event your colleagues raise this]

~ MEETING ADJOURNED ~

1. Welcome and Introductions

11:45 – 11:50 AM (5 minutes)

Meeting Management

- At the start of the call:
 - Welcome your Ministerial colleagues
 - Confirm that your co-chair, Minister Elliott is on the line [as well as Dr. Theresa Tam if dialing in] prior to conducting roll-call:

Province/Territory	Minister/Designate
British Columbia	Adrian Dix (Minister) Stephen Brown (DM)
Alberta	Dr. Deena Hinshaw (Chief Medical Officer of Health) <i>on behalf of Minister Shandro</i>
Saskatchewan	Jim Reiter (Minister)
Manitoba	Cameron Friesen (Minister)
Ontario	Christine Elliott (Minister) <i>Helen Angus (DM)</i>
Quebec	Danielle McCann (Ministre)
New Brunswick	Dr. Jennifer Russell (Chief Medical Officer of Health) <i>on behalf of Minister Flemming</i>
Nova Scotia	Randy Delorey (Minister)
Prince Edward Island	James Aylward (Minister)
Newfoundland & Labrador	Dr. John Haggie (Minister)
Yukon	Dr. Brendan Hanley (Chief Medical Officer of Health) <i>on behalf of Minister Frost</i>
Northwest Territories	Bruce Cooper (DM) <i>on behalf of Minister Thom</i>
Nunavut	Ruby Brown (DM) <i>on behalf of Minister Hickey</i>

2. Federal Health Minister Opening Remarks

11:50 – 11:55 AM (5 minutes)

Talking Points

- I would like to thank all of you for making yourselves available today on short notice.
- As Ministers of Health, our priority is the health and safety of Canadians and I felt it was important we touch base early to discuss our domestic readiness to prepare for and respond to the novel Coronavirus.
- As you know, there have been no confirmed cases in Canada, but the situation is evolving and that could change quite quickly.
- The focus of today's meeting is to satisfy ourselves of our level of collective readiness and preparedness for potential cases in Canada.
- We recognize the exceptional collaboration, discussion and regular information sharing between the federal government and all of your jurisdictions.
- Together we are actively monitoring the situation domestically, and the Public Health Agency of Canada is actively engaged with international partners as well.
- At this time we have been clearly communicating that the risk to Canadians remains low.
- While we should be confident in knowing that our governments have learned a great deal from our past experiences with SARS and H1N1, each situation is unique and we may face some new challenges that we will need to prepare for.
- Thankfully, we have already taken a number of critical steps.

- ✓ We have multiple systems in place to prepare for, detect and respond to the spread of serious infectious diseases into and within Canada.
- ✓ The Public Health Agency of Canada is in close contact with the World Health Organization and other international partners, and Canada's Chief Public Health Officer, Dr. Theresa Tam, is working closely with her counterparts in your jurisdictions through the Council of Chief Medical Officers of Health (CCMOH).
- ✓ Our experts and officials are meeting together regularly to assess and update relevant technical guidance to support rapid identification, diagnosis, and management of an outbreak.
- Part of our learning from SARS was the need for more responsive governance and consistency in our messages to avoid misinformation and support effective, timely response.
- I think it remains incredibly important for us to collaborate and ensure we coordinate our communications across jurisdictions, especially in the context of preparing for a potential first domestic case.
- All of these collective efforts will remain critical in the days and weeks to come and I am grateful for your ongoing support.
- In that respect, I think we should ask our communications officials to review our existing communications protocols to ensure that communications are clear about how we will coordinate, share and ensure consistency of messaging to avoid any potential missteps both for frontline health staff, as well as Canadians.
 - Jennifer Hollington is our lead ADM for Communications who will be reaching out to her counterparts in your jurisdictions.
- Before turning to Dr. Tam, to provide a briefing on the latest information from the WHO and the state of our domestic readiness, I'll ask my co-chair, Minister Elliott, if she would like to say a few words.

3. Situation Update and Domestic Readiness

11:55 – 12:25 PM (30 minutes)

FEDERAL OBJECTIVES

- ✓ To inform Ministers of the current situation.
- ✓ To ensure our collective readiness and level of preparation across jurisdictions.
- ✓ To task officials to ensure strong communication protocols to support coordinated communications to front-line staff (healthcare workers, border agents, etc.) and the general population.
- ✓ To respond to questions.

Meeting Management

- CBSA representative, Calvin Christiansen (Director General, Operational Guidance and Support Directorate Travellers Branch) will be on-hand to respond to specific issues related to border control.

Dr. Tam's Remarks

[Given the constantly evolving context and situation, Dr. Tam will speak to the latest information on the situational update, as well as domestic readiness.]

Her remarks will cover:

- International update: WHO decision regarding the possibility of declaring a Public Health Emergency of International Concern (PHEIC); latest international cases and epidemiology highlights (e.g., transmission); and level of risk to Canada.
- Domestic readiness: collaboration and coordination of efforts across jurisdictions; laboratory testing capacity; border measures and travel health; health professional guidance, communications; and governance.

4. Roundtable

12:25 – 12:35 PM (10 minutes)

FEDERAL OBJECTIVES

- ✓ Seek an update on jurisdictional readiness activities and identify foreseeable challenges.

Talking Points

- I would be interested in hearing from colleagues about the current situation in your jurisdictions and whether you foresee any specific challenges you would like to bring to our attention.

[Consider opening the floor for discussion starting west to east.]

Following the roundtable

- This has been a useful discussion to help ensure our collective readiness.
- Our officials continue to collaborate but I think it would be worthwhile for us to periodically check-in, as required, as the situation evolves.

6. Closing Remarks

12:40 – 12:45 PM (5 minutes)

Talking Points

- In closing, I would like to thank you all again for taking this call today and look forward to upcoming discussions with you on these issues and others.
- I also want to flag that Minister Elliott and I have asked our officials to explore a Health Ministers' meeting date in mid-April, following the Easter long weekend. This week is a legislative break for most jurisdictions.
- Minister Elliott, do you have anything you would like to add before we sign-off?

~ MEETING ADJOURNED ~

1. Welcome and Opening Remarks

11:30 – 11:40 AM (10 minutes)

Meeting Management

- At the start of the call:
 - Welcome your Ministerial colleagues
 - Confirm that your co-chair, Minister Elliott is on the line [as well as Dr. Njoo if dialing in] prior to conducting roll-call

[Please refer to List of Participants provided under **TAB B**]

- Dr. Tam will try to dial in however, she is attending an emergency meeting of the WHO on the Coronavirus. As such her meetings have been delegated to Dr. Howard Njoo, Deputy Chief Public Health Officer.

Talking Points

- I would like to thank all of you for making yourselves available again on short notice.
- As I said last week, I wanted to have the opportunity to provide colleagues with a more fulsome update and discussion on medical assistance in dying.
 - I will provide colleagues with some preliminary findings of what-we-heard from the roundtable discussions and online questionnaire.
 - I will also welcome colleagues' thoughts on how my government can move forward on any potential legislative amendments.
- Before we discuss that issue, I want to take this opportunity to update colleagues on recent developments regarding the coronavirus.
- As you know, the situation has evolved since last week, with the first confirmed cases of coronavirus on Canadian soil (in Ontario and BC).

- The reality of global travel means that preventing the arrival of a virus is next to impossible. What really counts is limiting its impact and controlling its spread once it gets here.
- I felt it was important that we touch base again to discuss these developments and our domestic readiness.
- I want to reiterate that we are actively monitoring the situation and that we continue to be in close contact with public health authorities in all provinces and territories. There continues to be exceptional collaboration, discussion and regular information sharing between the federal government and all of your jurisdictions.
- As you have heard me say in the media, the risk to Canadians remains low. Our Canadian health systems have strong infection prevention and control protocols in place to limit the spread of infection and protect health care workers. But each situation is unique and we may face some new challenges that we will need to prepare for.
- The health of Canadians is a priority for all our governments. Consistent communication across jurisdictions is especially important in order to maintain trust and credibility in our health systems, and to counter misinformation in the media, particularly on social media.
- All of these collective efforts will remain critical in the days and weeks to come and I am grateful for your ongoing support.
- Before turning to Dr. Theresa Tam [Dr. Howard Njoo, Deputy Chief Public Health Officer], to provide an update on recent developments, I'll ask my co-chair, Minister Elliott, if she would like to say a few words.

Following Minister Elliott's remarks, invite Dr. Tam [or Dr. Howard Njoo] to present item #2 Situation Update on Novel Coronavirus

2. Standing Item - Situation Update on Novel Coronavirus

11:40 – 11:55 AM (15 minutes)

FEDERAL OBJECTIVES

- ✓ Maintain open dialogue with Ministers as the situation evolves;
- ✓ Ensure our collective readiness and level of preparation across jurisdictions; and
- ✓ Continue to respond to questions as required.

Meeting Management

- A Situational Update Report has been circulated to Ministers in advance of this call.

Dr. Njoo's Remarks

Given the constantly evolving context and situation, Dr. Tam [or Dr. Njoo] will speak to the latest information on the situational update, as well as domestic readiness.

Remarks will cover:

- International update: latest Canadian and international cases, as well as epidemiology highlights (e.g., transmission) including level of risk to Canada.
- Domestic readiness: collaboration and coordination of efforts across jurisdictions; laboratory testing capacity; border measures and travel health; health professional guidance, communications; and governance.
- Confirmation of the activation of a Special Advisory Committee (SAC) on the 2019 Novel Coronavirus (2019-nCoV).

Following Dr. Tam/Dr. Njoo's Remarks ...

- Thank you Dr. Tam/Dr. Njoo. Do colleagues have any questions?
- I think it makes sense that we keep this as a standing item to discuss as needed, but we can be reassured that our Chief Medical Officers of Health and senior officials are meeting regularly to discuss the latest developments and ensure that our governments are well coordinated and ready to respond.



4. Roundtable

12:25 – 12:30 PM (5 minutes)

Talking Points

- [Time permitting] Are there any other issues that Ministers would like to raise at this time, perhaps for our next discussion?

5. Closing Remarks

12:25 – 12:30 PM (5 minutes)

Talking Points

- In closing, I would like to thank you all again for taking this call today and look forward to upcoming discussions with you on these issues and others.
- Minister Elliott, do you have anything you would like to add before we sign-off?

~ MEETING ADJOURNED ~