



EVERGREEN KEY MESSAGES

New coronavirus discovered in 2019 in Wuhan, China (COVID-19)

Issue Statement: On December 31, 2019, the Wuhan Municipal Health Commission in Hubei province, Central China, issued a public statement that they had identified an outbreak of pneumonia of unknown cause. China has made a determination that a novel coronavirus (referred to as COVID-19) is responsible for cases of pneumonia in the Wuhan outbreak.

For the latest and most up-to-date information about COVID-19, including the latest number of confirmed cases, visit Canada.ca/coronavirus.

These media lines have been prepared for use by media relations and senior officials to respond to requests for information.

Table of Contents

<i>COVID-19 key messages.....</i>	<i>6</i>
<i>Risks to Canadians.....</i>	<i>7</i>
<i>5G technology and COVID-19.....</i>	<i>7</i>
<i>Foundations for living with COVID-19</i>	<i>8</i>
<i>Keeping Canadians informed</i>	<i>9</i>
COVID-19 Situational Awareness Dashboard.....	9
Virtual health tools	10
Canada COVID-19 application	10
<i>Federal funding for the COVID-19 response.....</i>	<i>11</i>
<i>Government of Canada's COVID-19 research.....</i>	<i>12</i>
Examples of projects	12
Collaboration for developing a vaccine	13
<i>Mental health support for Canadians.....</i>	<i>15</i>
Wellness Together Canada	15
Funding for Kids Help Phone in response to an increased demand for mental health services for children and young people in relation to COVID-19.....	16
<i>Immunization schedules during COVID-19.....</i>	<i>17</i>
<i>Advice</i>	<i>17</i>
<i>Additional advice for persons with disabilities in Canada</i>	<i>17</i>
If pressed about the vulnerability of persons with disabilities during COVID-19:	18
<i>Infection prevention and control for acute healthcare settings.....</i>	<i>18</i>

<i>Infection prevention and control for COVID-19: Interim guidance for home care settings.....</i>	<i>21</i>
Guidance highlights.....	21
<i>Long-term care homes.....</i>	<i>22</i>
Public health guidelines for long-term care homes.....	23
Alberta's long-term care homes	23
<i>Advice on death care services and mass fatalities</i>	<i>25</i>
If pressed on developing guidelines in response to recent outbreaks in long-term care homes:	25
If pressed on funeral practices or body-handling of Indigenous people and members of various ethnic, religious and cultural groups:.....	25
If pressed on what happens if a Canadian dies from COVID-19 outside Canada:.....	26
If pressed on mass fatality management:	26
<i>Reopening of dental clinics</i>	<i>26</i>
If pressed on enhanced security measures:	27
<i>Isolation, quarantine (self-isolation) and physical distancing.....</i>	<i>27</i>
Isolation	27
Quarantine (self-isolation)	29
Physical distancing	29
Be prepared.....	30
<i>Mandatory isolation and quarantine (self-isolation)</i>	<i>31</i>
<i>Criteria for individuals to discontinue home isolation after COVID-19 symptoms</i>	<i>32</i>
If pressed on why the criteria are being changed:	33
If pressed on how the time period was decided upon:.....	33
If pressed on whether the new criteria are more or less stringent than previous criteria:.....	33
<i>Use of non-medical masks (or facial coverings) by the public.....</i>	<i>33</i>
How wearing non-medical masks can help protect others	34
Factors to consider when wearing a non-medical mask.....	34
<i>Modelling and surveillance</i>	<i>35</i>
Surveillance for COVID-19	35
<i>Data modeling (April 28)</i>	<i>36</i>
Quebec case and death rates.....	37
If pressed on whether case numbers in other provinces and territories are underestimated:.....	37
<i>Government of Canada support for La Loche, Saskatchewan.....</i>	<i>38</i>
If pressed:.....	38
<i>Virus epidemiology.....</i>	<i>39</i>
<i>COVID-19 testing in Canada.....</i>	<i>39</i>
COVID-19 reagents and tests	41

Testing individuals	42
Why asymptomatic people are not being tested for COVID-19:	43
Unusable swabs	43
Amendments to the authorization of the Spartan testing kit	44
If pressed on the number of tests that were distributed as a result of the authorization of the test kits:	45
If pressed on recall details:	45
If pressed on Health Canada's review of Spartan's product:	45
If pressed on the Public Health Agency of Canada National Microbiology Laboratory (NML)'s review of the kit	46
If pressed on the government's purchase of the Spartan kit:.....	46
Testing at home	47
About the Interim Order respecting medical devices	47
Serology and immunity certificates	47
Canada-wide study to monitor COVID-19.....	48
If pressed on serological testing:	49
If asked why Canada is not following suit with the UK and Germany:.....	50
The first serological test for COVID-19	50
If pressed on Canada's approach to authorizing COVID-19 diagnostic testing devices:	51
About pre-symptomatic and asymptomatic transmission	52
Drugs and vaccines	52
Canadian hospitals join global drug trials.....	52
Experimental therapies	53
If pressed on expediting access to treatment:.....	53
If pressed on off-label use:.....	54
If pressed on clinical trials:	54
Hydroxychloroquine and azithromycin for the treatment of COVID-19	55
If pressed on the National Emergency Strategic Stockpile:	56
If pressed on the availability of hydroxychloroquine and azithromycin:	56
If pressed on measures taken by Health Canada to address COVID-19-related shortages:	57
Clinical trial approved for the use of hydroxychloroquine in hospitalized children	57
Relaxing regulations for COVID-19 treatments.....	58
Remdesivir for the treatment of COVID-19	59
If asked about promising evidence for remdesivir:	60
If asked about the availability of remdesivir:	61
Medical supplies and devices	61
Canadian supply of personal protective equipment (PPE) and medical supplies	61
Regulatory measures to improve access to medical devices, including PPE	62
Gown shortage	62

Procurement contracts to increase the quantity of supplies in Canada	64
Invitation to submit an expression of interest in providing logistics services	65
PPE purchases and donations	65
Coordinated Government of Canada response for equipment and supplies	66
Reusing single-use medical devices.....	67
Decontaminating and reusing N95 masks	67
About the Public Health Agency of Canada's purchase of decontamination devices for reprocessing single-use N95 masks during the fight against COVID-19	68
About Health Canada's considerations regarding reprocessing single-use N95 masks during the fight against COVID-19	68
Authorizations under the Interim Order respecting medical devices	69
About our existing guidelines	70
About the report to Canada's Chief Science Advisor: Task Force on Reprocessing of Respirators/ N95 Masks	70
Legislative amendments	70
Key messages on legislative amendments.....	70
Temporary exemption under the Controlled Drugs and Substances Act for medical treatments	71
Interim Order Respecting Drugs, Medical Devices and Foods for a Special Dietary Purpose in Relation to COVID-19	72
Interim Order respecting COVID-19-related medical devices	73
If pressed on the US directive to allow unauthorized health products:	73
If pressed on cost recovery:	73
Unilingual product labelling for COVID-19.....	73
If pressed on interim measures to allow faster market access for certain hard-surface disinfectants and hand sanitizers:	74
If pressed on the expected duration of these measures:	75
If pressed on interim policies to enable faster market access for household cleaners, workplace cleaners and hand and body soaps:	75
Border measures	76
ArriveCAN mobile application	77
Non-essential travel restriction (Canada-USA)	78
Government of Alberta's enhanced screening measures at border crossings and ports of entry	79
OIC 2 – Mandatory isolation	80
OIC 11 – Minimizing the Risk of Exposure to COVID-19 in Canada Order (Prohibition of Entry into Canada from the United States).....	82
If pressed:.....	83
Screening of Canadian travellers returning to Canada	84



When you arrive in Canada	85
<i>Travel health notices</i>	86
<i>Cottage season and COVID-19</i>	87



COVID-19 key messages

- Our top priority is the health and safety of Canadians.
- On March 11, 2020, the World Health Organization (WHO) characterized COVID-19 as a pandemic.
- The assessment by the WHO is not unexpected.
- In Canada, our health system is ready for this type of situation.
- Canada has multiple systems activated and in place to prepare for, prevent, detect and respond to the spread of novel coronavirus. These include the following:
 - The Public Health Agency of Canada (PHAC) activated the Health Portfolio Operations Centre (HPOC) to ensure effective planning and coordination of the Agency's response efforts, in collaboration with international and federal, provincial and territorial partners.
 - Public Safety Canada has activated the Government of Canada Operations Centre to coordinate activities across federal departments and agencies.
 - PHAC, through Canada's Chief Public Health Officer, is in close contact with provincial and territorial Chief Medical Officers of Health to share information, coordinate response efforts, and support informed vigilance as the situation evolves.
 - A Special Advisory Committee of Canada's Chief Medical Officers of Health and senior public health officials has been activated to focus on coordination of federal, provincial and territorial preparedness and response across Canada's health systems.
- Routine traveller screening procedures are in place at all of Canada's ports of entry, and additional border screening measures have been expanded to all international airports in Canada to help identify any travellers returning to Canada who may be ill, and to raise awareness among travellers about what they should do if they become sick.
- The Government of Canada maintains continual preparedness for public health emergencies, taking precautions to mitigate the potential risk of introduction and spread of infectious diseases. These precautions include:
 - a comprehensive surveillance infrastructure to rapidly identify emerging events and infectious diseases, including respiratory illnesses;
 - routine infection prevention and control precautions in all Canadian hospitals; and
 - public health laboratory capacity that is well equipped to rapidly detect serious infectious diseases.



- It is a critical time with global efforts focused on containment of the outbreak and the prevention of further spread.
- Everyone has to contribute to flattening the epidemic curve. We have to modify our behaviours including personal hygiene measures, like frequent hand washing, covering our coughs, and practicing physical distancing.
- This is an evolving situation, and we will provide Canadians with new information as it becomes available.
- For the most up-to-date information, visit Canada.ca/coronavirus or call the new toll-free number (1-833-784-4397) for answers to your questions about the 2019 novel coronavirus.

Risks to Canadians

- COVID-19 is a serious health threat, and the situation is evolving daily.
- The risk will vary between and within communities, but given the increasing number of cases in Canada, the risk to Canadians is considered **high**.
- This does not mean that all Canadians will get the disease.
- It means that there is a significant impact on the healthcare system already that could impact healthcare resources available to Canadians with or without COVID-19, if we do not flatten the epidemic curve now.
- The risk of severe illness and outcomes is higher for older adults and those of all ages with underlying medical conditions.
- This is why we are advising Canadians to stay home, if possible. If you must leave your home, practise physical distancing.
- Public health authorities across the country are working hard to slow the spread of COVID-19 in our communities and to reduce its impact.
- The Public Health Agency of Canada, along with provincial, territorial and community partners, continues to reassess the public health risk, based on the best available evidence as the situation evolves.

5G technology and COVID-19

- Health Canada's top priority is the health and safety of Canadians. Our mandate in terms of human exposure to radiofrequency electromagnetic fields is to conduct research on potential health effects, analyze relevant scientific literature and fine-tune exposure guidelines in [Safety Code 6](#).



- Safety Code 6, which covers the spectrum of frequencies used by 5G technology, meets or exceeds international standards and is based on a thorough assessment of the scientific literature. Canadians' health is protected when Safety Code 6 exposure limits are observed.
- There is no scientific basis for the recent suggestion linking 5G network deployment to the COVID-19 outbreak. The World Health Organization and the International Commission on Non-Ionizing Radiation Protection have also recently shared this message on their websites. Information on COVID-19 transmission is available at Canada.ca/coronavirus.

Foundations for living with COVID-19

- We know that the coronavirus will continue to spread in the community as activities are gradually resumed. That is why we must proceed slowly and carefully as this pandemic progresses, at least until we have access to a vaccine.
- Most people with COVID-19 have mild symptoms. As lockdown is lifted, we will do everything in our power to protect those most at risk for this disease. Our goal is to minimize the overall number of cases and deaths, regardless of whether they are associated with COVID-19. Key steps can be taken by all Canadians to achieve this.
- Continue to follow essential measures to limit the spread of coronavirus, including physical distancing, frequent hand washing and self-isolation at home if you are sick.
- If you think you are sick with coronavirus, get tested. This will allow us to better identify any community outbreaks and implement measures to prevent the spread of the virus.
- We hope that reopening services for all health conditions, as well as resuming some social and economic activities, will ease the overall burden of coronavirus-related and non-coronavirus-related disease in the community.
- People with chronic disease, those 60 years of age and older, and those at higher risk of infection should remain vigilant. We need to support the most vulnerable Canadians so they can stay home as much as possible, avoid situations where out-of-home contact is likely, or avoid areas where adequate physical distancing is not possible.
- Remember that even without symptoms, we are all potentially carriers of the coronavirus. Maintaining basic infection prevention measures will therefore be essential, along with ensuring that anyone presenting with symptoms goes immediately to a testing centre.
- Even if your symptoms are mild, stay home until you get better, rather than going to work or going out into the community. In this context, employers and employees need to



support each other so that we can monitor the rate of transmission and keep the virus under control. Scientific data shows that people can spread coronavirus before and during the onset of symptoms and even when asymptomatic.

- We know that many Canadians want to hold important ceremonies like funerals or celebrate significant milestones. It is very important to follow local guidelines regarding the number of participants, infection prevention measures and related activities.

Keeping Canadians informed

COVID-19 Situational Awareness Dashboard

- On April 4, 2020, the Government of Canada launched a new COVID-19 Situational Awareness Dashboard in Canada.
- In Canada, the situation is progressing rapidly and knowledge about COVID-19 is evolving by the day. Canadians must be able to easily access online resources to find the answers to their questions about COVID-19.
- Canadians and researchers will find the most recent data on COVID-19 on this online, user-friendly dashboard to help them better understand how the epidemic is evolving in Canada.
- The situational awareness dashboard provides an interactive overview of the number of cases and deaths in Canada, with details on the most affected populations (by age and sex) and on how the epidemic has evolved over time.
- This tool does not include modeling or forecasts of what could happen in the coming weeks and months.
- Every day, new data is published by the provinces and territories. Although the table is constantly updated to reflect new data, there may be discrepancies between the number of cases in the country and in the provinces and territories: data from the provinces and territories should therefore be considered the most recent.
- The Government of Canada will continue to work with its partners at all levels of government to deal with the COVID-19 pandemic, particularly in terms of quickly detecting and handling infections to protect the health of Canadians.



Virtual health tools

- More than ever before, Canadians need tools and resources to support their health and well-being, including easily accessible information, mental health support, alerts and screening tools.
- The \$240.5 million in funding announced on May 3 will help Canadians access credible health information and the health services they need through virtual tools and approaches.
- Virtual tools allow Canadians to communicate safely with their usual care providers by phone, text or video chat. They also allow patients to continue to access specialist services during these uncertain times.
- Improving access to virtual tools will also help Canadians access reliable information, including through the Canada COVID-19 mobile application, so they can understand and monitor their symptoms and learn more about how to protect themselves during the pandemic.
- We recognize that Canadians are struggling to cope with the effects of COVID-19 and different levels of stress. This investment will support Wellness Together Canada, a new free online portal that provides mental health, wellness and substance use support.
- The Government of Canada is working closely with provinces and territories, innovators and other partners to support the rapid expansion of virtual care services and make these tools widely available to Canadians and their families.
- Expanding virtual care and implementing digital solutions for Canadians will help reduce pressures on health systems and provide the reliable health services and information that Canadians need safely and securely.
- Our government recognizes that these are unprecedented times. We are continuing to work with the provinces and territories, innovators and other partners to take action and support Canadians.
- Enabling Canadians to securely and virtually access credible information and the health services they need is central to the government's work to ensure that Canadians remain safe and informed.

Canada COVID-19 application

- Canadians need easy access tools and digital resources to obtain the information they need about COVID-19.
- The Canada COVID-19 mobile application allows users to access reliable sources of information on health and to monitor their COVID-19 symptoms on a daily basis, if applicable.



- It allows Canadians to review the most recent updates on COVID-19 and the measures taken by Canada in response to the pandemic in real time, in addition to recommendations and custom resources.
- This application is based on tools developed by the provinces and territories and is another valuable resource for Canadians.
- Health Canada is continuing to work in close collaboration with the provinces and territories, providers and stakeholders to make additional tools available to Canadians and their families.
- The Canada COVID-19 application is a central resource that allows people to access reliable information based on facts about the prevailing COVID-19 pandemic in Canada. It does not contain any personal information and is not used for monitoring.
- Protecting the information of Canadians is a priority for the Government of Canada. If a tool were used to collect healthcare information, it would be subject to a rigorous assessment of privacy factors.

Federal funding for the COVID-19 response

- On March 11, the Prime Minister, Justin Trudeau, announced Canada's more than \$1-billion whole-of-government COVID-19 Response Fund.
- Funding provided to PHAC and Health Canada includes:
 - \$50 million for the Public Health Agency of Canada to support ongoing communications to keep Canadians informed and a national public education campaign to encourage the adoption of personal protective behaviours.
 - \$100 million to support federal public health measures, such as enhanced surveillance, increased testing at the National Microbiology Laboratory (NML) and ongoing support for preparedness in First Nations and Inuit communities.
 - This is in addition to an initial \$50 million that was provided to support the immediate public health response.
 - \$275 million to enhance our capacity to explore antivirals, develop vaccines and support clinical trials.
 - This is in addition to the \$27 million for coronavirus research announced in early March through the Canadian Institutes of Health Research, which will support 47 research teams from across Canada.
 - \$50 million to the Public Health Agency of Canada to support the purchase of personal protective equipment—such as surgical masks, face shields and gowns—and medical supplies to address federal needs and supplement stocks of the provinces and territories that require it.



Government of Canada's COVID-19 research

- Our top priority is the health and safety of Canadians.
- Canada has some of the world's best and brightest researchers working hard to support the international fight against the current pandemic.
- Every day, we are learning more about COVID-19 by staying abreast of new, rapidly disseminated scientific data.
- To slow down and ultimately stop the spread of COVID-19, we must mobilize Canada's scientific and research communities to advance research and technological development.
- That is why, in March 2020, the Government of Canada announced Canada's more than \$1- billion whole-of-government COVID-19 Response Fund, \$275 million of which will be used to enhance our capacity to explore antivirals, develop vaccines and support clinical trials.
- Through the Canadian Institutes of Health Research (CIHR) Rapid Research Response program, the Government of Canada has invested a total of \$54.2 million to support 99 teams of researchers from across the country. These teams are working to create and implement measures to detect, control and quickly reduce the spread of COVID-19. Their activities include research for developing a vaccine as well as developing strategies to fight stigma, misinformation and fear.
- In addition to CIHR, rapid research funding has been provided by the Natural Sciences and Engineering Research Council of Canada, the Social Sciences and Humanities Research Council, the Canada Research Coordinating Committee, the International Development Research Centre and Genome Canada. Research Manitoba, Research Nova Scotia and Alberta Innovates have also made contributions.
- The report published today presents the vital and innovative research being conducted across Canada, including solutions and tools being developed to fight and treat COVID-19.
- This involves building on the capacities and expertise of Government of Canada research institutions and making strategic investments to support and increase the research capacities of Canada's academic community and industry.
- Many of the projects funded include collaborations and partnerships with the academic community, government departments and industry in other countries.
- We are uniting our efforts to transform significant research results and findings into measures that will save lives across the country.

Examples of projects

- The Government of Canada is investing \$150 million to support federal public health measures, such as enhanced surveillance, increased testing at the National Microbiology Laboratory (NML) and the Public Health Agency of Canada (PHAC), as well as ongoing support for preparedness in First Nations and Inuit communities.



- This important work will support carrying out diagnostic tests throughout Canada, as well as researching, testing and implementing new tests and new diagnostic methods. It will also support coordination efforts for procuring and distributing reagents and laboratory supplies with provincial and territorial authorities to increase testing capacity across the country.
- PHAC's NML is enhancing its understanding of COVID-19 epidemiology throughout Canada, which will allow us to improve our response. This important work includes evaluating blood tests to determine Canadians' immunity status and implementing methods to conduct those tests, as well as the modeling work that will make it possible to evaluate various projections to inform authorities' decisions on measures to minimize the impact of the virus.
- The National Research Council of Canada (NRC) Pandemic Response Challenge program will bring together Canada's best government, academic and private-sector researchers to develop medical countermeasures to fight COVID-19. Program members will work with Canadian health experts to identify the most pressing needs. They will target tools to quickly diagnose and detect the virus, medications and vaccines to treat and prevent the disease as well as digital health solutions to help Canada manage and respond to the pandemic.

Collaboration for developing a vaccine

- At this time, there is no vaccine that protects against COVID-19. Research projects being conducted around the world—including in Canada—to support the development of vaccines against COVID-19 are at various stages of completion.
- We are taking the necessary measures to ensure that Canadians have access to a vaccine or medication to prevent or treat COVID-19 as soon as one exists.
- These measures include investments in the following organizations:
 - Medicago (Québec City): for preclinical and clinical trials of a plant-based vaccine using virus-like particles, including increasing their manufacturing capacity
 - The University of Saskatchewan's Vaccine and Infectious Disease Organization – International Vaccine Centre (VIDO-InterVac): for building on current VIDO-InterVac expertise in coronavirus research and for improving its manufacturing facilities to comply with Good Manufacturing Practices (GMP). To support these efforts, the NML and the Canadian Food Inspection Agency (CFIA) are working with the University of Saskatchewan's VIDO-InterVac and the NRC to develop and test COVID-19 vaccine candidates.
 - National Research Council of Canada (NRC): for improving facilities at the Human Health Therapeutics Research Centre in Montreal to comply with GMP standards. By the end of spring 2020, these facilities will be able to manufacture batches of vaccines for clinical trials as soon as vaccine candidates are available.



- Health Canada is also working with vaccine developers and manufacturers to expedite the evaluation of vaccines against COVID-19. This approach includes support for clinical trials and preparations for expedited reviews as soon as they are developed.
- The Government of Canada will continue to work with international regulatory agencies of health products, including the European Medicines Agency, the US Food and Drug Administration, its partners in Australia, Canada, Singapore and Switzerland, and other organizations such as the International Coalition of Medicines Regulatory Authorities and the World Health Organization (WHO), to support and coordinate quick regulatory action for potential vaccines and other medical countermeasures.
- The NRC is also cooperating with several companies in developing experimental vaccines.
- Canada is participating in the multinational SOLIDARITY trial coordinated by the WHO, which is testing several potential medications to combat COVID-19. As part of the Canadian component of this trial, patients are already being recruited and 20 sites have been selected for the trial in Canada.
- This unprecedented mega-trial of potential COVID-19 treatments is based on a brand-new global collaboration model with the goal of quickly finding treatments to potentially reduce the number of COVID-19 victims.

Collaboration with industry to advance research and market innovative products

- The Government of Canada, through Innovation, Science and Economic Development Canada and the NRC, is also working with industry to support research and manufacturing capacities.
- It has also provided funds to develop systems to monitor patients and home diagnostic kits.
- Furthermore, the Government of Canada is providing funding to small- and medium-sized Canadian businesses to help them enhance their ability to innovate and market their ideas, in particular for manufacturing personal protective equipment and sanitation products.

Collaboration with the international research community

- The Government of Canada is participating in the global research effort to fight COVID-19. It is working with its international partners, including the WHO through collaboration centres and its research and development master plan as well as by coordinating efforts and sharing data and research results to expand all knowledge throughout the world.



- One example is the collaboration between the Canadian Food Inspection Agency (CFIA), Defence Research and Development Canada (DRDC) and PHAC to develop the Biosafety Level 4 Zoonotic Laboratory Network (BSL4ZNet).
- This network includes 15 government organizations from five different countries (Canada, United States, United Kingdom, Germany and Australia) that are all responsible for regulating human, animal and zoonotic pathogens likely to trigger a pandemic.
- BSL4ZNet has been holding emergency meetings on COVID-19 since the beginning of January with its international partners to facilitate the exchange of scientific information and to share information about research capacity needs to intensify global efforts to fight the spread of COVID-19.
- In partnership with the Department of National Defence, PHAC and DRDC are also members of the Medical Countermeasures Consortium, which works in consultation with the American, British and Australian governments to foster collaboration in research, development and procurement.
- The Canadian Medical Association (CMA), NRC, PHAC and CFIA regularly consult with the Coalition for Epidemic Preparedness Innovations (CEPI), one of the main international funding mechanisms for developing vaccines. Canada has contributed \$54 million to CEPI, which directs efforts for developing experimental vaccines against COVID-19 for clinical trials that will be conducted by the end of spring 2020.
- CIHR's response to the COVID-19 pandemic has been guided by contributions by international partners, such as the WHO and the Global Research Collaboration for Infectious Disease Preparedness (GLo-PID-R).
- In association with PHAC, CIHR is relying on the existing Canadian Immunization Research Network (CIRN) to tackle the COVID-19 pandemic. CIRN has received a \$1-million direct grant to collect data on COVID-19 symptoms, potential possible treatments and risk factors that will be used to support Canada's public health response to this disease.
- As a member of the International Pharmaceutical Regulators Programme, Health Canada is working with other international regulatory agencies to monitor the impact of COVID-19 on world supply.

Mental health support for Canadians

Wellness Together Canada

- Canadians need easy access to tools and digital resources to get the information they need during the COVID-19 pandemic.



- In these difficult times, it is essential for Canadians to have access to effective tools to promote their mental health and well-being, to receive both credible and reliable information on mental health and substance use and to access services.
- This is why the Government of Canada has launched Wellness Together Canada, a mental health and substance use support portal. This is a central resource for accessing confidential mental health and substance use support during the COVID-19 pandemic.
- Health Canada is pleased to have worked with a wide range of organizations that have been providing Canadians with excellent care for mental health and substance use for a long time, including: Stepped Care Solutions, Kids Help Phone, Homewood Health, Greenspace Health, the Mental Health Commission of Canada and the Canadian Psychological Association.
- This web portal provides Canadians with a virtual network of information services and psychosocial support. It can be accessed at Canada.ca/coronavirus or through the [Canada COVID-19 application](#).
- Wellness Together Canada's mental health and substance use support portal was designed to support the services already offered by the provinces and territories.
- Health Canada is working in close collaboration with the provinces and territories, providers and stakeholders so that Canadians and their families can easily access additional tools.

Funding for Kids Help Phone in response to an increased demand for mental health services for children and young people in relation to COVID-19

- The COVID-19 pandemic is a novel and unexpected phenomenon with major impacts on Canadians, including children and young people. Supporting the mental health and well-being of Canadians during the COVID-19 pandemic is a priority for the Government of Canada.
- Since schools are closed and access to community resources is reduced, Kids Help Phone has recorded an increased demand for confidential 24/7 crisis support services offered online, by phone and by text messaging.
- As a result, the Government of Canada is providing \$7.5 million to Kids Help Phone so that the organization can meet the increased demand and provide the psychological help young people need during this difficult period.
- With this additional support, electronic mental health services can be offered in English and French to children and young people across Canada who are experiencing the social and financial effects of the COVID-19 pandemic. This means that vulnerable young Canadians and children will be able to find the help they need when they need it.



- This investment represents an important first step in connecting Canadians across the country with the mental health resources they need.

Immunization schedules during COVID-19

- Vaccination is one of the most effective ways to prevent the spread of infectious diseases.
- While public health is a shared responsibility in Canada, issues related to immunization programs are the provinces' and territories' responsibility.
- Canadians should contact their healthcare provider or public health authorities to find out if any changes have been made to their or their family members' recommended vaccination schedule due to the COVID-19 pandemic.
- Given the prevailing pandemic, it is normal to be concerned about going to routine medical appointments or clinic appointments, such as for getting vaccinated.
- Canadians should consult with their healthcare provider or public health authorities to:
 - know if any changes have been made to their or their family members' recommended immunization schedule due to the COVID-19 pandemic;
 - determine the time of their visit;
 - know what measures have been put in place to safely deliver immunization services during the crisis.
- Healthcare providers have taken precautions to prevent the spread of infection during consultations. These measures include:
 - screening patients for symptoms or other risk factors prior to their appointment and upon arrival;
 - posting signs in the office;
 - encouraging patients to use alcohol-based hand sanitizer or alcohol-free hand sanitizer approved by Health Canada;
 - providing masks to patients upon arrival;
 - staggering appointments to promote physical distancing in the office.

Advice

Additional advice for persons with disabilities in Canada

- We know that some groups, including persons with disabilities, are much more affected by the COVID-19 epidemic than others.
- In collaboration with the COVID-19 Disability Advisory Group (CDAG), the Public Health Agency of Canada (PHAC) has identified considerations and accommodations for persons with disabilities and those who provide them with care and support, and will incorporate them into current COVID-19 guidelines.



- This document complements other important guidance documents, including the Interim guidance for long-term care homes and the Interim guidance for home care settings documents related to COVID-19. These documents can be tailored to environments where persons with disabilities live.
- The document also outlines considerations for caregivers and COVID-19 assessment centres to adapt their approaches during the epidemic to facilitate access to services for persons with disabilities.

If pressed about the vulnerability of persons with disabilities during COVID-19:

- Some persons with disabilities may be at greater risk of infection or serious illness because of their age, underlying health problems or disability. They may therefore be more likely to be exposed to and to contract COVID-19.
- Some persons with disabilities may face discrimination and barriers when seeking information, social services and healthcare. The need to self-isolate and maintain physical distancing can also create other issues.

Infection prevention and control for acute healthcare settings

- Protecting Canada's healthcare workers from COVID-19 is essential. These healthcare providers, who are on the front lines of the pandemic, are looking after the most vulnerable Canadians.
- The Public Health Agency of Canada (PHAC)'s infection prevention and control guidelines complement provincial and territorial public health policies and procedures.
- PHAC's National Advisory Committee on Infection Prevention and Control, which includes experts in the field and front-line healthcare providers, worked with PHAC to develop these guidelines.
- The Federal/Provincial/Territorial (F/P/T) Special Advisory Committee on COVID-19 approved the guidelines as well as the technical summary.
- PHAC guidelines are not law. They should be consulted in conjunction with provincial, territorial and local legislation, regulations and policies.

Revised Guidance: Infection Prevention and Control Measures for Healthcare Workers in Acute Care and Long-term Care Settings

- This guidance document was updated in accordance with our approach to ensure that guidelines are current and provide comprehensive recommendations based on the best available data.
- The guidelines highlight the need for environmental and administrative controls in institutions to protect healthcare workers and patients, as well as the importance of providing training on the use of personal protective equipment (PPE).



- Precautions against droplet and contact transmission are appropriate for most patient care. Aerosol-generating medical procedures require the use of N95 masks and other PPE.
- They will remain interim guidelines, seeing as they may be amended as new science becomes available.

Technical summary of new guidelines for wearing masks, eye protection and face shields during shifts

- PHAC recommends that all healthcare workers in acute care hospitals wear a medical mask and eye protection or face shield for the duration of their shifts in an acute care facility.
- This recommendation is based on new data indicating that COVID-19 can be transmitted by asymptomatic and pre-symptomatic carriers.
- Wearing a medical mask for the entire shift is an important measure that helps reduce the risk of transmission from healthcare workers to patients.
- Wearing a medical mask and eye protection or face shield throughout the entire shift is an important measure that helps reduce the risk of transmission from patients to healthcare workers.
- This recommendation applies to healthcare workers in direct contact with patients as well as environmental service workers entering patient care areas.
- To keep coronavirus out of healthcare facilities, it is also important that healthcare workers exhibiting COVID-19 symptoms go home immediately and return to work only on the advice of their local public health authority.
- Healthcare workers should consult their provincial or territorial guidelines and institutional policies on wearing masks, eye protection and other PPE, as well as any strategies for conserving PPE that have been implemented.

Canada's supply of PPE and medical supplies

- Healthcare workers wear medical masks, including surgical masks, procedural masks, and respirators (e.g., N95 masks). Maintaining the required supply of medical masks is extremely important.
- The Government of Canada is working to ensure that healthcare workers have the PPE and medical supplies they need through bulk supply orders in collaboration with the provinces and territories as well as by strengthening national production capacities and research into alternative solutions and ways to extend the service life of products.



- Canada is working to quickly allocate PPE and medical supplies to provinces and territories, pursuant to an approach agreed to by federal, provincial and territorial Ministers of Health.

Canadian Federation of Nurses Unions guidelines and concerns

- We have been in regular contact with the Canadian Federation of Nurses Unions regarding their concerns about certain aspects of the revised guidelines.
- The Government of Canada developed the guidelines based on the best available data to protect the health and safety of healthcare workers.
- We will continue to re-evaluate and update the guidelines as the situation evolves and we learn more about COVID-19.

Point-of-care risk assessment

- Before interacting with or performing a procedure on a patient, healthcare workers should assess the risk of infection for themselves, other workers and patients. This procedure, called a point-of-care risk assessment, is used to select the appropriate PPE for the situation.

Including cleaners and food suppliers potentially exposed to COVID-19

- The guidance provided in these guidelines applies to anyone working in an acute care facility, including cleaners and food suppliers.

Wearing surgical masks instead of N95 respirators

- The decision to wear a surgical mask or N95 mask should always be based on a point-of-care risk assessment.

Reusing PPE and guidelines for healthcare facilities

- N95 masks are normally single-use products intended for healthcare workers.
- Canada is exploring ways to extend the service life of N95 masks by decontaminating and reusing them. Decontaminating N95 masks has proven effective in other countries, including the United States.
- Canada is asking that the provinces and territories set aside their used N95 masks until an effective decontamination process can be tested.
- Extending the service life of PPE through decontamination is one way to ensure that Canada has sufficient reserves.



Infection prevention and control for COVID-19: Interim guidance for home care settings

- Home care agencies, which are an essential part of the healthcare system, play an important role in preventing unnecessary hospital and long-term care admissions by providing home care and support.
- People receiving home care are often elderly or have health problems, making them susceptible to serious illness if they become infected with COVID-19. Preventing COVID-19 in this vulnerable population is a priority.
- The Public Health Agency of Canada (PHAC) infection prevention and control guidelines include recommendations for home care providers and agencies to prevent COVID-19 transmission to front-line workers and protect vulnerable clients.
- PHAC's National Advisory Committee on Infection Prevention and Control, comprised of experts in the field and front-line care providers, worked with PHAC to develop these guidelines, which were also endorsed by the Federal/Provincial/Territorial (F/P/T) Special Advisory Committee on COVID-19.
- PHAC guidelines are not mandatory. They should be consulted in conjunction with provincial, territorial and local legislation, regulations and policies.

Guidance highlights

- To prevent the transmission of COVID-19 to clients, home care providers must take their temperatures daily and monitor their health for signs and symptoms of the disease. If they show signs of infection, it is recommended that they stay home from work until local public health authorities allow them to return.
- Home care providers should wear a mask for the duration of visits to avoid transmitting COVID-19 to their clients before symptoms are detected.



- To protect themselves, front-line home care providers should contact their clients prior to visits to ask if they or other members of their household are exhibiting signs or symptoms of COVID-19. If so, home care providers and agencies can then determine if the visit can be delayed or otherwise carried out in a way that ensures everyone's safety. Using eye protection throughout home visits is strongly recommended to prevent possible COVID-19 transmission to healthcare providers from clients who have not yet been diagnosed with the infection.

Canadian procurement of personal protective equipment (PPE) and medical supplies

- Personal protective equipment (PPE) is an important component of infection prevention and control measures that can protect home care providers and their clients from COVID-19.
- Home care providers should refer to provincial, territorial and local guidelines and local policies for specific recommendations about wearing masks, eye protection and other types of PPE, as well as strategies for conserving PPE.
- The Government of Canada is working hard to ensure that healthcare workers, including those providing home care services, have the PPE and medical supplies they need.
- This is accomplished through bulk purchases in collaboration with the provinces and territories, by building domestic production capacity, and by looking for alternatives and ways to extend product life.

Long-term care homes

- We are asking all Canadians to help protect the health of seniors and vulnerable individuals who are most likely to suffer serious complications from COVID-19.
- We must all make efforts to stop the spread of the virus among residents of long-term care homes and among the workers who care for them.
- A no-visiting policy should be seriously considered. If visits are permitted, they should be strictly limited to essential visits required to meet basic personal needs of a medical nature or out of compassion for residents. Essential visits should be limited to one person at a time for each resident.
- Like all Canadians, residents and employees of long-term care homes must practise physical distancing as much as possible, including at mealtimes.
- Because they have direct contact with the most vulnerable members of our society, who are most at risk of serious illness, healthcare workers should not go to work if they have symptoms.
- We understand that to stop the spread of COVID-19 and protect our most vulnerable, Canadians must make difficult decisions and personal sacrifices.



Guidance

- The Public Health Agency of Canada (PHAC) establishes evidence-based infection prevention and control guidance to complement provincial and territorial infection prevention, control and monitoring efforts associated with healthcare.
- The Government of Canada has published a document entitled *Infection prevention and control for COVID-19: Interim guidance for long-term care homes* to assist employees and residents of these facilities.
- This interim guidance is based on previous Canadian guidance developed for the coronavirus pandemic, lessons learned from the COVID-19 outbreak in China and other countries, and interim guidance from other Canadian and international organizations.

Public health guidelines for long-term care homes

- Considerable vigilance must be exercised in long-term care homes to prevent symptomatic employees from coming to work.
- Employees should undergo COVID-19 symptom screening before each shift, and those who begin to develop symptoms during their shift should be dealt with immediately.
- Where possible, employers should work with their employees to limit work to a single institution and to limit the number of areas of the institution where employees work.
- All employees and visitors must wear a mask throughout their shift or visit to prevent the transmission of the virus, even before they know they are sick.
- For essential visits, visitors should be screened for fever, cough or difficulty breathing and should not be allowed in if they have COVID-related symptoms.
- Many facilities have already taken steps, such as prohibiting visits or other non-essential services on-site.
- Long-term care homes and residents should also follow recommendations from their provincial or territorial health authorities on preventing the transmission of infections, including COVID-19.

Alberta's long-term care homes

- The Government of Canada is committed to protecting all Canadians, including vulnerable individuals.
- All levels of government are working closely to ensure that public health measures to respond to the COVID-19 pandemic are harmonized.



- Public health authorities are closely monitoring the continuity and stability of the epidemic slowdown in Canada, while carefully examining ways to ease public health restrictions where possible.
- The epidemiological situation of COVID-19 varies by province and territory. This means that not all approaches will be consistent across Canada and that they will need to be tailored to the unique challenges and circumstances of the disease in each province and territory.
- Every province and territory in Canada is considering different types of community settings (such as long-term care homes), developing risk-based approaches and conducting assessments based on what is happening within its borders.
- The Government of Canada is working with its provincial, territorial and international partners to ensure that our response to the COVID-19 pandemic is based on an assessment of the situation and the most recent scientific data available.

As to whether this approach is consistent with federal guidelines:

- Care in long-term care homes is governed by provincial and territorial legislation.
- The Public Health Agency of Canada is developing evidence-based infection prevention and control guidelines to complement provincial and territorial public health measures to monitor, prevent and control hospital-acquired infections.
- Federal guidelines recognize that provinces and territories may choose to grant visitors limited access to long-term care homes in accordance with their laws and policies.
- In these circumstances, we recommend that all staff and visitors (if allowed access) wear a mask throughout their shift or visit to prevent the transmission of the virus, even if they have no symptoms of the disease.
- If visits are allowed, visitors should be screened for symptoms such as cough, fever and difficulty breathing, and should not enter an institution if they have COVID-related symptoms.
- Visitors should be reminded of the importance of washing their hands and using alcohol-based disinfectants, especially before putting on and removing their masks.
- These facilities must also follow recommendations from appropriate provincial or territorial health authorities to prevent the transmission of infections, including COVID-19, in long-term care homes and assisted living facilities. Care in long-term care homes is governed by provincial and territorial legislation.
- The Public Health Agency of Canada's COVID-19 infection prevention and control guidelines for long-term care homes must be interpreted in conjunction with relevant provincial, territorial and local legislation, policies and regulations.



- As we enter the next phase of this pandemic, provinces and territories will begin to relax restrictions while emphasizing extreme caution.

Advice on death care services and mass fatalities

- The Public Health Agency of Canada (PHAC) has developed guidelines for the safe handling of human remains during the COVID-19 pandemic. All information presented in the guidelines is based on the latest scientific evidence.
- We know it can be difficult to hear about such guidelines, especially for those who have lost loved ones, and we offer our deepest condolences to those who have lost a family member, friend or colleague because of the illness.
- However, these guidelines for funeral services and mass fatalities are an important part of pandemic planning and preparedness.
- Our understanding of the virus is constantly evolving, and the risk of human remains transmitting COVID-19 is not yet known.
- In collaboration with public health specialists, infection prevention and control specialists and the Funeral Service Association of Canada, we have developed these guidelines to ensure that families are provided with safe services and to protect the health of those who work to provide those services to the public.

If pressed on developing guidelines in response to recent outbreaks in long-term care homes:

- These guidelines have been developed to support proactive planning by the funeral industry for various possible scenarios during the pandemic.

If pressed on funeral practices or body-handling of Indigenous people and members of various ethnic, religious and cultural groups:

- Various religious, ethnic and cultural groups have specific guidelines for handling the bodies of the deceased. It is important to respect and accommodate these practices to the extent possible, while protecting the health and safety of the community.
- We recommend that leaders of religious and cultural communities participate in the planning of funeral services to ensure that funeral arrangements always respect cultural and religious values.
- Leaders may also be able to provide or facilitate cultural or religious support (notably grief counselling) for bereaved individuals.



If pressed on what happens if a Canadian dies from COVID-19 outside Canada:

- You may safely repatriate the remains of a person whose death is attributed to COVID-19 to Canada, provided that certain conditions are met.
- In all cases, you must have the relevant documents, including a death certificate.
- There are two methods for repatriating the remains of a deceased person suspected or confirmed to be infected with COVID-19:
 - one for a cremated body;
 - one for a body carried in a hermetically sealed container.
- We recognize that this may impose some restrictions on families wanting to return home with the remains of a loved one. These restrictions are necessary for the protection of those who come into contact with the remains during the repatriation process.
- General information on what to do in the event of a death abroad can be obtained from funeral service providers in your community or by visiting the following Government of Canada website: <https://travel.gc.ca/assistance/emergency-info/death-abroad>.

If pressed on mass fatality management:

- Based on the experience of other countries, it is important to prepare for an increase in the number of deaths caused by COVID-19 in Canada—an increase that could exceed usual capacity to provide funeral services.
- PHAC has published guidelines to help local and regional planners, community leaders, funeral industry workers, medical examiners and coroners prepare to manage any sudden increase in the number of pandemic-related deaths.
- The guidelines are based on the latest scientific evidence and provide recommendations for body transport, planning, storage capabilities and other technical considerations.

Reopening of dental clinics

- The Canadian Dental Association is supporting provincial and territorial dental associations, which are working with government officials to gradually reopen dental clinics according to infection prevention and control guidelines.
- Provinces and territories regulate dentistry and choose when to allow their private dental clinics to reopen.
- Dental clinics in some provinces and territories are gradually reopening in accordance with increased safety measures.



- The Public Health Agency of Canada (PHAC) Infection prevention and control for COVID-19: Interim guidance for acute healthcare settings, which applies to dental practice, complement provincial and territorial public health policies and procedures. PHAC guidelines are not mandatory. They should be considered in conjunction with provincial, territorial and local legislation, regulations and policies.

If pressed on enhanced security measures:

Each province and territory has the authority to decide what specific measures to adopt within its jurisdiction. These measures may include:

- screening for COVID-19 symptoms and taking patients' temperature;
- seeing fewer patients with staggered appointments;
- minimizing aerosol-generating procedures and incorporating "settling periods" before fully cleaning and disinfecting treatment rooms.

Isolation, quarantine (self-isolation) and physical distancing

- Different advice is provided for quarantine (self-isolation) and for isolation. It is important to note that these measures are in place to protect the health and safety of Canadians.

Isolation

- Isolation means staying at home when you have a symptom of COVID-19 and it is possible that you have been exposed to the virus. By avoiding contact with other people, you help prevent the spread of disease to others in your home and your community.

You must:

- **go directly home and/or stay at home** if you have:
 - been diagnosed with COVID-19, or are waiting to hear the results of a lab test for COVID-19;
 - any symptom of COVID-19, even if mild, and have
 - been in contact with a suspected, probable or confirmed case of COVID-19;
 - been told by public health (directly, through public communications or through a self-assessment tool) that you may have been exposed to COVID-19;
 - you are returning from a trip outside Canada and have symptoms of COVID-19 (mandatory); [Footnote*](#)
- monitor your symptoms as directed by your healthcare provider or [Public Health Authority](#), until they advise you that you are no longer at risk of spreading the virus to others;
- immediately contact your healthcare provider or [Public Health Authority](#) and follow their instructions if your symptoms get worse.
- **Limit contact with others.**
 - Do not leave home unless you need medical attention.



- Do not use public transportation (e.g., buses, taxis).
 - Arrange to have groceries and supplies dropped off at your door to minimize contact.
 - Stay in a separate room and use a bathroom separate from others in your home, if possible.
 - If you have to be in contact with others, practise physical distancing and keep at least two metres between yourself and the other person.
 - Avoid all contact with people with chronic diseases, people with weakened immune systems and the elderly.
 - Keep any interactions brief and wear a medical mask, or even a non-medical mask or face covering (i.e., constructed to completely cover the nose and mouth without gaping and secured to the head by ties or ear loops) if a medical mask is unavailable, when you need to be in the same room with others in the home, or when coughing or sneezing.
 - Follow instructions from your Public Health Authority about the safe use and disposal or laundering of face masks.
 - Avoid contact with animals, as there have been several reports of people transmitting COVID-19 to their pets.
- **Keep your hands clean.**
 - Wash your hands often with soap and water for at least 20 seconds, and dry with disposable paper towels or dry reusable towel, replacing it when it becomes wet.
 - You can also remove dirt with a wet wipe and use an alcohol-based hand sanitizer or alcohol-free hand sanitizer approved by Health Canada.
 - Avoid touching your eyes, nose and mouth.
 - Cough or sneeze into the bend of your arm or into a tissue.
- **Avoid contaminating common items and surfaces.**
 - At least once daily, clean and disinfect surfaces that you touch often, like toilets, bedside tables, doorknobs, phones and television remotes.
 - Do not share personal items with others, such as toothbrushes, towels, bed linen, utensils or electronic devices.
 - To disinfect items and surfaces, use only approved hard-surface disinfectants that have a Drug Identification Number (DIN). A DIN is an 8-digit number given by Health Canada that confirms the disinfectant product is approved and safe for use in Canada.
 - Place contaminated items that cannot be cleaned in a lined container, secure the contents and dispose of them with other household waste.
 - Put the lid of the toilet down before flushing.
 - Wearing a face mask, including a non-medical mask or facial covering, may trap respiratory droplets and stop them from contaminating surfaces around you. Wearing a mask does not reduce the need for cleaning, however.
- **Care for yourself.**
 - Monitor your symptoms as directed by your healthcare provider or Public Health Authority.



- If your symptoms get worse, immediately contact your healthcare provider or public health authority and follow their instructions.
- Get some rest, eat a balanced diet and stay in touch with others through communication devices.

- **Supplies to have at home when isolating**

- Medical masks if available for the case and the caregiver; otherwise, a non-medical mask or face covering (i.e., constructed to completely cover the nose and mouth without gaping and secured to the head by ties or ear loops)
- Eye protection (face shield or goggles) for use by caregiver
- Disposable gloves (do not re-use) for use by caregiver
- Disposable paper towels
- Tissues
- Waste container with plastic liner
- Thermometer
- Over-the-counter medication to reduce fever (e.g., ibuprofen or acetaminophen)
- Running water
- Hand soap
- Alcohol-based sanitizer containing at least 60% alcohol
- Dish soap
- Regular laundry soap
- Regular household cleaning products
- Hard-surface disinfectant; if unavailable, use concentrated (5%) liquid bleach and a separate container for dilution
- Alcohol prep wipes or appropriate cleaning products for high-touch electronics

Quarantine (self-isolation)

- You must quarantine for 14 days if you have **no symptoms** and any of the following apply to you:
 - You are returning from a trip **outside Canada** (mandatory self-isolation);
 - You had close contact with someone who has or is suspected to have COVID-19;
 - You have been told by the public health authority that you may have been exposed to COVID-19 and need to quarantine.
- Quarantine means that, for 14 days you must:
 - **Stay home** and monitor your symptoms, even if they are mild;
 - Avoid contact with other people to help prevent transmission of the virus at the earliest stage of illness;
 - Practise physical distancing in your home and community.
- If you develop symptoms, even mild ones, stay home and immediately isolate yourself from other people living with you. Immediately contact a healthcare provider or Public Health Authority.

Physical distancing

- We are advising Canadians to stay home, if possible. If you must leave your home, practise physical distancing.



- Physical distancing is proven to be one of the most effective ways to reduce the spread of illness during an outbreak.
- Everyone needs to practise physical distancing, even if you have:
 - no symptoms of COVID-19;
 - no known risk of exposure;
 - not travelled outside of Canada within the last 14 days.
- You can practise physical distancing by making changes in your everyday routines to minimize close contact with others. For example:
 - avoiding crowded places and gatherings;
 - avoiding common greetings, such as handshakes;
 - limiting contact with people at higher risk (e.g., older adults and those in poor health);
 - keeping a distance of at least two arms' lengths (approximately two metres) from others, as much as possible.
- The most effective measures to stay healthy and prevent the spread of respiratory and other illnesses is to:
 - wash your hands often with soap under running water for at least 20 seconds;
 - cough and sneeze into your sleeve and not your hands;
 - avoid touching your eyes, nose or mouth, especially with unwashed hands;
 - avoid close contact with people who are sick; and
 - stay home if you are sick to avoid spreading illness to others.
- While keeping a physical distance of two metres from others, you can:
 - greet one another with a wave instead of a handshake, kiss or hug;
 - use food delivery services or online shopping;
 - ask family, a neighbour or friend to help with essential errands;
 - exercise at home;
 - go outside for some fresh air, a run, a bike ride, or to walk the dog;
 - host online dinners and games with family and friends;
 - use technology, such as video calls, to keep in touch with family and friends;
 - work from home;
 - get creative by drawing chalk art or running back yard obstacle courses and games.

Be prepared.

- There are simple, practical things you can do to prepare in case you or someone in your household becomes ill or if COVID-19 becomes common in your community.
- Make a plan that includes:
 - Essential supplies (a few weeks' worth) on hand so you will not need to leave your home if you become ill;
 - Avoid panic buying. Add a few extra items to your cart every time you shop. This places less of a burden on suppliers and can help ease financial burden on you as well;



- Renew and refill your prescription medications.
- Make alternative arrangements in case you become ill or if you need to care for a sick family member. For example:
 - Have backup childcare in case you or your usual care provider become ill;
 - If you care for dependents, have a backup caregiver in place;
 - Talk to your employer about working from home if possible.
- We recognize that the novel coronavirus can cause a range of symptoms, from mild to severe. Some people may not recognize the signs of the disease when the first symptoms appear because they resemble cold or flu symptoms.
- If you have symptoms (fever, cough or difficulty breathing) and suspect you may have COVID-19, contact a health professional before arriving in person so that the appropriate measures can be taken when you arrive.
- Call before going to a healthcare provider's office so that appropriate measures can be taken when you arrive.
- **Stay informed.** Go to credible sources for up-to-date information and advice:
 - the [Canada.ca/coronavirus](https://www.canada.ca/coronavirus) web page;
 - the national toll-free phone number (1-833-784-4397) for COVID-19;
 - Government of Canada Twitter, Facebook and LinkedIn social media accounts; and provincial, territorial and municipal government websites and social media accounts.

Mandatory isolation and quarantine (self-isolation)

- For questions regarding whether Canada would ever consider fining or arresting individuals who are not following the advice to self-isolate:
 - We are asking Canadians to **do the right thing** and to continue to stay home, if possible, and to practise physical distancing if they leave their home.
- Canadians need to understand the role that they play personally and the potential risk that they may have been exposed to the virus during any travel outside the country and the risk that they in turn may pose to other Canadians including the most vulnerable.
- Canadians must also respect any guidance given to them by local public health authorities and, if they are sick, they need to stay home.
- Failure to comply is a real concern. Individuals who are asked to self-isolate should take this seriously and stay home. If there is a need to leave home for food and/or medication, efforts should be made to ask a friend or family member to help out.
- For Canadians not self-isolating, there will continue to be the need to leave their homes for essential items, such as food and medication. As long as individuals do



not have COVID-19 symptoms, people can also continue to get fresh air and exercise outdoors while practising physical distancing.

- This will help protect older adults and medically vulnerable people who are at greatest risk of severe COVID-19 disease. We need to help as many Canadians as possible to stay healthy.
- There are some very powerful measures under the quarantine legislation at every level of government to help enforce measures to protect the health and safety of Canadians. A number of provinces and territories have put in place mandatory self-isolation orders.
- Such extreme action could take place, but we are not at that point and we continue to expect Canadians to help their neighbours, friends and family by continuing to stay at home as much as possible, wash their hands often and avoid close contact with people who are sick.

Criteria for individuals to discontinue home isolation after COVID-19 symptoms

- Based on the latest science and in consultation with provincial and territorial experts, we have updated the guidance on when individuals can end a period of home isolation following the presence of COVID-19 symptoms.
- The new guidance recommends that an individual in home isolation, who had symptoms consistent with COVID-19, can end home isolation a minimum of 10 days after the onset of their first symptoms, provided they are feeling better and do not have a fever.
- The 10-day minimum is based on when these people are no longer expected to be able to spread the virus to others. Some people can have a persistent cough after an illness like COVID-19, and we do not want to keep them isolated longer than necessary.
- This new guidance means that an individual on home isolation no longer needs to have two negative COVID-19 tests 24 hours apart once they no longer exhibit symptoms consistent with COVID-19.
- This change does not apply to hospitalized patients.
- Provinces and territories may impose a longer period of isolation.
- Individuals who work in healthcare settings may need to meet additional requirements, as set out by their employer or provincial/territorial jurisdiction, before they are able to return to their workplace.
- Everyone has to contribute to reducing the spread of COVID-19 in Canada and flattening the curve. Using tried and true measures, such as continuing to practise physical distancing once home isolation has ended, will help our overall public health efforts and protect Canada's most vulnerable people.



If pressed on why the criteria are being changed:

- Across Canada, we need to strategically use laboratory testing resources.
- This change to the approach for laboratory testing will help ensure the best use of limited health and laboratory resources.
- Not all persons on home isolation with symptoms consistent with COVID-19 require a laboratory test to confirm or rule out infection, provided they adhere to strict home isolation guidance.
- The updated criteria will allow the provinces and territories to recommend a period of home isolation for individuals with symptoms consistent with COVID-19 without requiring multiple laboratory tests.

If pressed on how the time period was decided upon:

- Research and data on COVID-19 continue to grow and evolve.
- One unpublished study found that when scientists tried to find live virus in specimens from people who had COVID-19, no live virus could be found by the eighth day after the onset of illness/symptoms. When these same people were tested using a different test (polymerase chain reaction [PCR]), several of them still came up as positive because that test can detect both live and dead virus.
- This means some people can test positive even though they are no longer at risk of spreading the virus to others.
- In the absence of a large amount of conclusive data, a minimum of 10 days of home isolation is an appropriate recommendation at this time.

If pressed on whether the new criteria are more or less stringent than previous criteria:

- The new guidance replaces the current more stringent and resource-intensive requirement for individuals to receive two negative tests before being allowed to end home isolation.

Use of non-medical masks (or facial coverings) by the public

- Canadian public health guidance related to COVID-19 has been changing as the evidence base and our understanding of COVID-19 rapidly evolve. We are continually looking at the evidence as it is being produced and working with our partners across the country and around the world to learn more.



- To prevent transmission of COVID-19, here is what we know is proven:
 - staying home as much as possible;
 - physical distancing;
 - washing your hands;
 - protecting the most vulnerable from infection and exposure to others;
 - covering your cough with tissues or your sleeve.
- It is critical that these measures continue.
- Healthcare workers need medical masks, including surgical, medical procedure masks and respirators, such as N95 masks. It is extremely important that we keep the supply of medical masks for healthcare workers where it is urgently needed for medical procedures and to care for individuals who have COVID-19.
- Wearing a non-medical mask (e.g., homemade cloth mask) in the community has not been proven to protect the person wearing it.
- With the emerging information regarding pre-symptomatic and asymptomatic transmission, and our goal to stop the spread of COVID-19 by all means possible, wearing a non-medical mask—even if you have no symptoms—is an additional measure you can take to try to protect others around you at times when physical distancing is not possible in public (e.g., at the grocery store or in confined spaces, like on public transit).
- Wearing a non-medical mask in the community does not mean you can back off from the public health measures that we know work to protect you; no mask will ever replace physical distancing.
- All of the recommendations regarding staying home, physical distancing, and hand hygiene are based on what we know will work best to protect you and your family from infection.

How wearing non-medical masks can help protect others

- Wearing a non-medical mask is another way to cover your mouth and nose to prevent your respiratory droplets from contaminating others or landing on surfaces.
- Like covering your mouth with a tissue or sleeve when coughing, a cloth mask or face covering can reduce the risk of other people being exposed to your respiratory droplets.

Factors to consider when wearing a non-medical mask

- If wearing a non-medical mask makes you feel safe and prevents you from touching your nose and mouth, that's a good thing. However, remember not to touch or rub your eyes, as the eyes are also a route of transmission.
- It is important that Canadians fully understand the benefits and limitations of wearing a mask; if they choose to wear a non-medical mask, they should use it with caution:
 - Avoid moving or adjusting it often;



- Do not share it with others;
 - It should be constructed to completely cover the nose and mouth without gaping and secured to the head by ties or ear loops.
- You should also know that masks can become contaminated when you go outside or handle them.
- Children under two years of age and people with breathing problems, who are unconscious, or who are unable to remove a mask on their own should not wear a non-medical mask or other face covering.
- Remember that non-medical masks will not prevent the spread of COVID-19 if hygiene and public health instructions, including frequent hand washing and physical distancing, are not followed to the letter and at all times.
- The [Canada.ca/coronavirus](https://www.canada.ca/coronavirus) website is updated regularly and contains information on what to do, such as washing your hands before putting on or removing your mask. This site also includes information on how to safely wash cloth masks or discard other non-medical masks (including dust masks).

Modelling and surveillance

Surveillance for COVID-19

- For several weeks, the Canadian healthcare system has been on alert and working to detect potential cases of COVID-19.
- Canada remains focussed on containment efforts to delay and slow the spread of COVID-19. We do this by rapidly identifying cases, meticulously finding close contacts and using proven public health measures such as isolation and recommending that Canadians practise physical distancing.
- Canada has a highly integrated federal, provincial and territorial approach to surveillance, involving front-line healthcare settings and laboratories across the country that have effectively equipped us to detect respiratory illnesses, including COVID-19.
- Public health laboratories across Canada are also working together to report COVID-19 test results weekly. These reports will allow us to monitor where COVID-19 is occurring, which can provide us with an early signal of potential clusters that can indicate community spread.
- Hospital surveillance is another important area for detection of COVID-19. These sites allow us to monitor for people with respiratory symptoms, including those with pneumonia or severe infections, even if they have not travelled to an affected country. This is another means of broadening the scope of our surveillance to identify signals of potential community spread so that public health authorities can take appropriate action.



- Finally, Canada has established networks of paediatricians and family doctors that are essential to surveillance. These networks include providers at the front-line of primary care, who are often the first to detect new or unexpected patterns of illness that may be a first alert to an emerging health concern.
- By compiling data from all these sources, we can detect signals and investigate transmission patterns in order to closely monitor the potential emergence and spread of COVID-19 in communities across Canada.

Data modeling (April 28)

- The Government of Canada is continuing to work with its provincial, territorial and international partners to ensure that the response to the COVID-19 pandemic is based on an assessment of the situation and the most recent scientific data available.
- We are continually analyzing data and results from clinical and epidemiological studies as we receive them to determine when public health measures are working and when we need to do more to control the epidemic.
- We are also working with provincial and territorial governments and universities to anticipate how COVID-19 could spread in Canada in the future and to estimate a range of possible cases, hospitalizations and deaths that may occur in the coming weeks and months.
- Based on these models, we can prepare our healthcare system to provide care for the projected number of patients and determine what public health measures might be needed to change the course of the epidemic in Canada.
- Our actions have a huge impact on models. We can all help reduce the impact of COVID-19 in Canada by maintaining our physical distancing efforts.
- Since infection rates vary across the country, projections of the effects also vary by province and territory.
- The models cannot predict what is going to happen, but they can help us understand what might happen and help us plan and take steps to ensure that the outcome is as favourable as possible.
- To model the progression of COVID-19, we need to make assumptions based on incomplete data and scientific knowledge that is still evolving. These assumptions change as we get more information about the virus and more information about the epidemic in Canada.
- We are constantly improving models to provide Canadians with the best possible information on possible outcomes.



Quebec case and death rates

- Several factors contribute to the higher number of reported cases and deaths in Quebec, compared to other provinces and territories.
- The provinces of Ontario and Quebec have reported several outbreaks in long-term care homes and seniors' residences. These environments are conducive to transmission and death among older people. In Quebec, residents in these facilities account for more than 80% of deaths.
- Long-term care homes continue to experience outbreaks, which affect the number of cases and deaths in some provinces. According to provincial, territorial and press briefing websites, over 63% (1,157/1,834) of cases occurred in long-term care homes.
- The timing of **spring break** was another factor that may have contributed to increased numbers. In Quebec, spring break is earlier than in other provinces, so people may have travelled to countries and areas where the outbreak had not yet been reported.
 - The way cases are reported in Quebec may also contribute to the higher number of reported cases and deaths. In its figures, Quebec includes cases of people with COVID symptoms who have been in contact with a person who has received a confirmed laboratory diagnosis, but who have not received a confirmed laboratory diagnosis themselves. These cases and deaths are included in Quebec's figures, but not in those for other provinces and territories. Quebec's public health authority is able to provide more details on how the province reports its confirmed cases.
- Quebec was able to increase its analytical capacity very early in the outbreak through targeted analyses, including analyses for healthcare staff, long-term care centre residents and respiratory hospitalization cases, to identify cases.

If pressed on whether case numbers in other provinces and territories are underestimated:

- Other provinces and territories publicly report the number of individuals who have a confirmed laboratory diagnosis.
- We are aware that laboratory-confirmed cases do not paint a true picture of cases of infected people where the virus is spreading. This is because people who are sick do not necessarily get tested for laboratory confirmation.
- People with mild symptoms may go undetected or unreported, and some people may not have symptoms. That is why public health measures like social distancing are crucial.



Government of Canada support for La Loche, Saskatchewan

- The Government of Canada is working with provincial and territorial health authorities to help prevent the spread of COVID-19 in Canada, including in remote communities.
- The Public Health Agency of Canada (PHAC) has provided Health Canada-authorized point-of-care testing devices to La Loche, Saskatchewan, to help municipal authorities respond to the COVID-19 outbreak in the community.
- Indigenous Services Canada has also provided resources to First Nations on reserves affected by COVID-19 to help them meet their additional capacity needs.

Support for Saskatchewan

- The National Microbiology Laboratory (NML) provided the community of La Loche with Genexpert's Xpert Xpress SARS-Cov-2 point-of-care testing devices as well as 46 test kits (each test kit includes 10 tests).
- The NML also provided Genexpert's Xpert Xpress SARS-Cov-2 point-of-care testing devices to other remote communities in Saskatchewan:
 - All Nations' Healing Hospital in Fort Qu'Appelle received point-of-care testing devices and eight test kits.
 - Île-à-la-Crosse and La Ronge each received point-of-care testing devices and three test kits.
 - Hatchet Lake received point-of-care testing devices and two test kits.
 - Stony Rapids, in the Athabasca Basin, was given 10 test kits.
- The NML is ready to ship at least 70 additional test kits to Saskatchewan once the province has confirmed the communities where these kits will be most useful.

If pressed:

- The Public Health Agency of Canada (PHAC) is working to quickly allocate personal protective equipment (PPE) and medical supplies to the provinces and territories in an approach agreed to by federal, provincial and territorial Ministers of Health.
- Provinces and territories may also request assistance from the National Emergency Strategic Stockpile (NESS) to meet their basic needs. To date, the NESS has responded to over 40 COVID-19 requests for assistance.
- Provinces and territories provide PPE to Indigenous communities in accordance with allocation provisions and guidelines in place in their jurisdictions.
- PHAC is not commenting on the overall quantities of PPE that a province or territory has received from the Government of Canada.



Virus epidemiology

- In Canada, and around the world, researchers are actively investigating all aspects of the novel coronavirus outbreak to further understand this disease and how the outbreak may progress.
- Canada is following the guidance of the World Health Organization (WHO), which recommends a quarantine period of two weeks (14 days).
- The WHO noted on February 10, 2020, that it is not considering changing its recommended quarantine time.
- The WHO has cautioned that a 24-day incubation period could be an outlier or an unrecognized second exposure. An unrecognized second exposure is a situation where an individual already recognized as having been exposed to the virus is exposed to the virus again, but this second exposure is not recognized. If they develop illness due to the second exposure, it may mistakenly appear as if the incubation period is longer than 14 days because the “clock” was not “re-set” at the time of the second exposure.
- To date, there has been no verified data to suggest the incubation period extends beyond 14 days.
- The Public Health Agency of Canada (PHAC) is an active participant in a number of expert groups that are examining how the disease is transmitted, developing models to predict how it may spread, and developing guidance for infection prevention and control based on the most recent information.
- PHAC continues to liaise with international partners, including the WHO, to better understand the epidemiology of this disease.

COVID-19 testing in Canada

- We are continuing to **conduct a very large number of tests** in Canada—at some of the highest rates in the world.
- To date, priority for testing has been given to **individuals with symptoms** and those in **high-risk situations**.
- These include people who work **in care settings, long-term care homes or correctional facilities**, or who are in situations where a positive case is linked to a high-risk environment that could lead to an outbreak.
- As we move into the next phase of easing certain public health measures and reopening certain sectors of the economy, **there will continue to be cases of COVID-19** until the population has developed sufficient immunity or until a vaccine to prevent the disease is available.



- COVID-19 will remain part of our lives and **testing will remain an important tool** for detecting and isolating new cases, for following up with people with whom these cases have been in close contact, for stopping the spread of the virus and for preventing community outbreaks.
- Cases and outbreaks continue to be reported at an alarming rate in high-risk settings, such as long-term care homes. In the next phase, **it will be essential to test the groups most at risk of COVID-19 complications**. This testing will serve as a warning signal for our healthcare system.
- **Increased testing does not mean normal activities will be resumed more quickly** or that day-to-day life will go back to how it was before COVID-19. **Testing does not replace public health measures**.
- No specific number of daily tests would allow us to relax public health measures in the same way and at the same rate across all regions of Canada. **The epidemic manifests itself differently** from one province, territory or even region to another.
- We also need **to be smart about testing**. People can be contagious before they have symptoms, while they have symptoms and even if they have no symptoms at all. It would not make sense to use all our testing resources and supplies where there is a small number of cases and there are no signs of community transmission.
- **Choosing the right time to test is essential**. A negative test can give people a false sense of security, because a negative test does not mean that the person has not been exposed to the virus. The person may become contagious within days of testing, so it is best to test at least five days after potential exposure.
- Since May 5, **we have averaged 20,000 tests per day** in Canada—**almost double** what we averaged a month ago. That number continues to grow.
- Canada has maintained a 6%–7% positivity rate, which is within the range required **to accurately detect** where the disease is circulating.
- If the positivity rate were to fall below 3% in Canada (to 1%, for example), it would mean that we are casting **too wide** a net by testing people who do not need it, such as:
 - those who are not in areas of Canada where the disease is circulating;
 - those who take a test too early.



- The number of tests and positivity rate indicate that our **current testing system is very sensitive**. We are continuing to increase our laboratory testing capacity to keep it that way.
- Health Canada has been actively working with manufacturers to enable market access for commercial diagnostic devices in order to increase Canada's COVID-19 diagnostic capacity.
- The Minister of Health has signed an Interim Order, issued as an emergency public health measure, to allow expedited access to medical devices related to COVID-19. Thanks to this order, **new diagnostic tests are available in Canada**. The list is available on the Health Canada [website](#).
- New diagnostic tests will make **testing faster and more convenient** for Canadian patients.
- **We must stay the course and stick to the measures that have been proven to work**. Regardless of the level of testing where they live, all Canadians must do the following to prevent the spread of COVID-19:
 - **Stay home and away from others if you are sick;**
 - **Wash your hands often;**
 - **Clean common surfaces with an appropriate disinfectant;**
 - **Protect the vulnerable;**
 - **Practise social distancing.**
- Wearing a non-medical mask or face covering is also **recommended in crowded public places and when it is not possible to systematically maintain a physical distance of two metres** from others.

COVID-19 reagents and tests

- Several commercial reagents have been approved by Health Canada that can be used to test for COVID-19 infection. There is a global shortage of many of these reagents, which affects laboratory capacity. We need Canadian solutions to this problem.
- The shortage of reagents required for COVID-19 testing affects Canada's testing capacity. The Public Health Agency of Canada (PHAC)'s National Microbiology Laboratory has developed a reagent to help address this shortage. This reagent is produced in bulk by LuminUltra Technologies Ltd., a New Brunswick-based company.
- PHAC also signed a temporary licence agreement with bioMérieux Canada to receive the rights and formula for its reagent used in COVID-19 diagnostics.



- The Government of Canada's priorities for testing are access to test reagents, assessment of commercial test technologies, and access to authorized test kits to help provinces and territories increase their testing capacity.

On LuminUltra:

- Scientists at Canada's National Microbiology Laboratory (NML) have reproduced and validated a commercial reagent for COVID-19 using open-source information. This reagent is comparable to those used in diagnostic laboratories across the country.
- LuminUltra Technologies Ltd. purchases raw materials for developing batches of NML-formulated reagents and coordinates the shipment of the reagent to public health laboratories across the country.
- LuminUltra shipped its first batch of reagent on April 10, 2020.
- At maximum capacity, LuminUltra will be able to manufacture reagents for up to 500,000 tests per week.
- As its production capacity increases, LuminUltra is expected to be able to produce enough reagents to help meet domestic demand.

On the bioMérieux agreement:

- bioMérieux is a French company that produces reagents used in COVID-19 diagnostic tests. The company is facing challenges obtaining certain ingredients needed to manufacture its product and meet global demand.
- As part of an innovative public-private partnership, PHAC has signed a temporary license agreement with bioMérieux Canada, at no cost, to receive the rights and formula for their reagents used in COVID-19 diagnostics. The manufacturing systems for these reagents are in various stages of development and testing to address some of the reagent shortages in the near future.

What are reagents?

- A reagent is a chemical formulation used to process samples for laboratory testing.
- The specific reagents produced for the COVID-19 tests are extraction reagents.
- They extract the virus from a sample so that they can detect the genetic material and determine whether a COVID-19 test is positive or negative.

Testing individuals

- Testing for the novel coronavirus in symptomatic individuals has clear clinical and public health value, but the same is not true for testing asymptomatic persons.



- Canada has and will continue to test all symptomatic individuals, as part of our evidence-based approach, while considering the evolving science on other testing scenarios. As the science evolves, our approach will keep pace, and policies and protocols will be updated accordingly.
- One thing that is clear in our approach is that we test all symptomatic individuals and our threshold for that has been very low.
- It is important to understand that this is not a simple or straightforward issue, and the science is not clear.

Why asymptomatic people are not being tested for COVID-19:

- It is important to focus on testing the right people at the right time.
- Testing in Canada is focused on people who present with symptoms consistent with COVID-19.
- Testing people who are asymptomatic is not considered an effective approach to detecting and preventing the spread of this virus and may give a false sense of reassurance.
- Testing asymptomatic individuals can confer a false sense of reassurance because an asymptomatic individual who tests negative could still go on to become symptomatic and develop the disease within the incubation period. The timing of testing matters. This is why we took the precaution to quarantine individuals again in Canada. There is a real assurance in monitoring for the 14-day incubation period and that means more for preventing spread than a potentially false negative test result.
- In addition, if an asymptomatic individual was tested and the test was positive, it is not clear what the significance and implications are. A positive test could mean that the presence of virus genetic material was detected, but not that the person is necessarily infectious to others.

Unusable swabs

- The Government of Canada is aware of the problems associated with certain swabs received in early April.
- These swabs were delivered as part of a bulk order of 8.85 million swabs expected by Canada in April and May.
- The manufacturer (ESBE Scientific) is a reputable company, licensed by Health Canada. We have been informed that the company has suspended production to resolve manufacturing issues. As a result, future swab deliveries will likely be delayed while the company resolves its quality issues.



- The problem could affect future orders. The Public Health Agency of Canada is continuing to work directly with the provinces and territories to determine their medical supply needs and place bulk orders. Public Services and Procurement Canada will continue to identify all suppliers capable of meeting Canada's needs.

Amendments to the authorization of the Spartan testing kit

- On March 26, 2020, Health Canada issued conditional approval to Spartan Bioscience Inc. for its Spartan Cube for research use only.
- This authorization was granted under the [Interim Order](#) Respecting the Importation and Sale of Medical Devices for Use in Relation to COVID-19, which allows Health Canada to authorize devices through an expedited scientific review process, based on minimum requirements.
- On April 11, 2020, Health Canada completed its scientific review to ensure that the kit met safety and effectiveness requirements. The conditions of the authorization have been amended, and the restriction on the sale of the product for purposes other than research has been removed.
- Health Canada's regulatory decision was based on laboratory analysis of the product and not on clinical data on its effectiveness. The review considered that subsequent clinical validation would be conducted by public health laboratories to determine clinical performance. This approach is consistent with the one adopted by other trusted regulators.
- On May 1, 2020, the National Microbiology Laboratory (NML) provided Health Canada with a final report on clinical trials conducted in three provinces (Alberta, Ontario and Manitoba) where Spartan swabs were used to collect samples directly from patients under clinical conditions.
- The report indicates that although the Spartan Cube functioned in the laboratory according to the manufacturer's specifications, performance problems were identified during the clinical trial. These problems appear to be related to the patented swab, which may not collect enough mucous material for testing.
- In light of the clinical results, on May 2, 2020 Health Canada placed conditions on the authorization to restrict the sale of the product for research purposes only until the company could provide evidence of adequate clinical performance.
- Health Canada is not revoking the authorization based on the evidence that the kit works well in the lab. The Spartan kit can therefore continue to be sold for research purposes only until the company can provide data demonstrating that the product performs adequately in a clinical setting.
- Health Canada will continue to work with Spartan as the company works towards meeting regulatory requirements for point-of-care testing.



If pressed on the number of tests that were distributed as a result of the authorization of the test kits:

- Spartan Bioscience sent its distribution records to Health Canada on May 2 and confirmed that it had distributed 5,500 testing kits for research purposes only in a clinical setting to four public health agencies:
 - Alberta Health Services
 - CHU de Québec – Université Laval
 - Ontario Agency for Health Protection and Promotion
 - Public Health Agency of Canada
- These organizations are aware of the new authorization conditions imposed by Health Canada.
- Health Canada has asked the company to voluntarily recall the products to prevent their use for testing at this time. The company agreed to do so.
- On May 2, the Department sent a regulatory letter to the company outlining the new conditions of authorization pursuant to section 6 of the Interim Order. The letter also outlined the steps to follow for the voluntary recall of the kits.
- Health Canada has limited the sale of test kits for research only until adequate evidence of clinical performance can be provided and assessed.

If pressed on recall details:

- The recall will include:
 - issuing a notice informing all clients of the risks associated with using the product for diagnostic purposes and the measures to be taken to mitigate those risks;
 - requesting that all unused single-use devices and items (e.g., reagents and swabs) from laboratory settings and laboratories using the product for diagnostic purposes be sent back;
 - requesting that swabs only in laboratories continuing to use the device for research purposes be sent back.

If pressed on Health Canada's review of Spartan's product:

- On March 26, 2020, Health Canada issued an authorization to Spartan Bioscience Inc. for the use of its Spartan Cube on the condition that the product be sold for research purposes only. This authorization was granted under the Interim Order Respecting the Importation and Sale of Medical Devices for Use in Relation to COVID-19, which allows Health Canada to authorize medical devices through an expedited scientific review process, based on minimum requirements.
- On April 11, Health Canada completed its scientific review to ensure that the kit met safety and effectiveness requirements. The conditions of the authorization have been amended, and the restriction on the sale of the product for purposes other than research has been removed.



- Health Canada's regulatory decision was based on laboratory analysis of the product and not on clinical data on its effectiveness. The review considered that subsequent clinical validation would be conducted by public health laboratories to determine clinical performance. This approach is consistent with the one adopted by other trusted regulators.
- On May 1, 2020, the NML provided Health Canada with a final report on clinical trials conducted in three provinces (Alberta, Ontario and Manitoba) where Spartan swabs were used to collect samples directly from patients under clinical conditions. These clinical trials are essential to identify any performance problems that go undetected in a laboratory. The report indicates that although the Spartan Cube functioned in the laboratory according to the manufacturer's specifications, performance problems were identified during the clinical trial. These problems appear to be related to the patented swab, which may not collect enough mucous material for testing. In light of the clinical results, Health Canada placed conditions on the company's authorization to restrict the sale of the Spartan Cube for research purposes only until the company can resolve the kit's performance issues and provide sales data.

If pressed on the Public Health Agency of Canada National Microbiology Laboratory (NML)'s review of the kit

- As part of its research efforts, the Public Health Agency of Canada's NML conducts a scientific review of new medical devices.
- Given the urgency of the situation, the NML is validating trials and evaluating the performance of diagnostic equipment, including COVID-19 testing kits.
- This validation task is part of scientific research and is independent of Health Canada's regulatory approval process. While the validation process is separate from Health Canada's authorization process, the NML works closely with Health Canada to share knowledge gained through the review process.
- The NML tests laboratory supplies used for the clinical diagnosis of COVID-19 to ensure that they meet the gold standard used in public health laboratories. The purpose of the validation process is to determine whether the product can be used to obtain reliable and accurate results to diagnose COVID-19.

If pressed on the government's purchase of the Spartan kit:

- The Government of Canada has entered into a supply contract with Spartan to secure the supply of these kits. The contract is conditional on Health Canada's authorization to sell the kit domestically.



Testing at home

- Early and quick diagnosis is critical to slowing and reducing the spread of COVID-19 in Canada.
- Health Canada does not support home testing for COVID-19 because it has not evaluated and approved any home testing kits, which means that results could be inaccurate.
- These kits undermine the health system's ability to collect timely and accurate information on the spread of infection, which is essential for managing a pandemic.
- Health Canada has only authorized the sale and importation of COVID-19 diagnostic tests for the exclusive use of health professionals or qualified technicians.
- Health Canada has not authorized a diagnostic test or sample collection kit that can be used by the general public to detect or self-diagnose COVID-19.
- The Government of Canada is continuing to work with Canadian and international companies to equip Canadians and healthcare workers with the tools they need to care for Canadians and reduce the spread of COVID-19.

About the Interim Order respecting medical devices

- As an emergency public health measure, the Interim Order Respecting the Importation and Sale of Medical Devices for Use in Relation to COVID-19 provides expedited access to medical devices to combat COVID-19.
- With the Interim Order, new diagnostic tests are made readily accessible in Canada. The list is available on the Health Canada website.
- The Interim Order will ensure the availability of medical devices related to COVID-19 to treat, mitigate or prevent illness, as required.

Serology and immunity certificates

- Internationally, efforts are being made to determine whether people who have recovered from the disease can safely return to work. No decision has yet been made in Canada on the possibility of certifying people's immunity status.
- Because the virus causing COVID-19 is a novel virus, we need more data before we can know whether people who have recovered from the disease will have long-term protective immunity.
- At this time, we do not know whether people who have recovered will have immunity, how long this immunity will last, whether it is possible for people to contract COVID-19



twice, or whether they will have milder or more severe symptoms if they contract COVID-19 a second time.

- We recognize that it may be difficult to wait for scientific data, but while we learn more about COVID-19, we must use public health measures known to be effective.
- We continue to advise Canadians to stay home, practise good hand hygiene and practise physical distancing. These are proven public health measures that work.
- We are working to improve our knowledge about COVID-19 across Canada so that we can continue to adapt our response to slow the spread of the virus.

Canada-wide study to monitor COVID-19

- We are learning more about COVID-19 every day and staying informed about new scientific data as it is made available. The scientific data collected through the work of the COVID-19 Immunity Task Force will provide essential knowledge to inform decision-making.
- Extensive serological surveys (blood tests) of the Canadian population will measure the extent and magnitude of COVID-19 cases across the country.
- This effort needs to be well coordinated and executed to provide optimal results to guide policy decisions on how to bring the country back to normal or a “new normal.”
- We are setting up a Task Force of organizations that will work under the direction of a Leadership Group to set priorities and provide recommendations to the Government of Canada on which projects to fund. Group members include three individuals recognized for their contributions to research, academia and innovation in public health and healthcare, both in Canada and abroad.
- The Group will be co-chaired by:
 - Dr. David Naylor, who is renowned for his scientific and academic leadership and his successful management of large and complex organizations;
 - Dr. Catherine Hankins, who will share her national and international experience leading large and complex research and partnership development projects to advance public health priorities.
 - Dr. Tim Evans, Director of McGill University’s School of Population and Global Health, who will head the secretariat responsible for effectively carrying out this complex initiative.
- The Task Force will promote, support and harmonize the design and rapid implementation of population studies that will produce the first reliable estimates of SARS-CoV-2 immunity in both the general population and priority populations in Canada.



- The Public Health Agency of Canada's National Microbiology Laboratory will be part of the Task Force. It will ensure standardized testing and contribute to acquiring commercial analysis kits (once approved) to support the Task Force's effective and consistent operations.
- Quick and representative national surveys provide insight into the current situation and what to expect if there is a second wave of infections. They can also highlight the potential immunity status of vulnerable populations, such as members of Indigenous communities as well as nursing and long-term care home residents.
- Serological surveys will help inform important public health decisions once a vaccine is developed.

If pressed on serological testing:

- Serological tests are blood tests that detect the presence of antibodies against specific viruses in the blood. In the case of COVID-19, they can tell us whether someone has been exposed to the virus that causes the disease.
- There are challenges in developing and implementing a validated and effective serological test to detect COVID-19. It is a novel virus, and very little is known about the body's immune response to it. More research is needed.
- On March 18, the Minister of Health signed an Interim Order to expedite healthcare providers' access to medical devices related to COVID-19. Health Canada is reviewing applications submitted under the Interim Order, including those for commercial serological testing, and is authorizing medical devices that meet safety and effectiveness requirements.
- Only diagnostic tests authorized by Health Canada can be imported or sold in Canada. Unauthorized tests might yield inaccurate results, leading to potential misdiagnosis. Health Canada has confirmed that authorized COVID-19 tests are well supported by evidence that they will provide accurate and reliable results. As of April 9, 2020, Health Canada had not approved any serological tests.
- Serological tests detect the presence of the virus-specific antibodies that cause COVID-19 in patients' blood, allowing public health professionals to identify who has been infected,
- The ability to test for antibodies provides a better understanding of how the immune system responds to the virus that causes COVID-19 and serves as a tool for evaluating new vaccines and other treatments.
- European authorities have reported poor performance of rapid serological tests for diagnosing COVID-19 infections. Using a diagnostic test that yields false or inaccurate results can put individuals and the Canadian public at risk. Canada is ensuring that serological testing is used appropriately, in combination with other tools to diagnose infection.



If asked why Canada is not following suit with the UK and Germany:

- More research is needed before Canada can make these decisions.
- Other respiratory viruses do not generally provide complete immunity to people who have recovered.
- At this time, we do not know whether people who have recovered will have immunity, how long this immunity will last, whether it is possible for people to contract COVID-19 twice, or whether they will have milder or more severe symptoms if they contract COVID-19 a second time.
- Canada will continue to work with international partners to share information on best practices and measures to guide our national approach.

The first serological test for COVID-19

- On May 12, following a priority scientific review, Health Canada authorized the sale of the first serological test for diagnosing COVID-19.
- The DiaSorin LIAISON® test is authorized for detecting antibodies specific to this virus.
- The test reveals prior exposure to the virus that causes COVID-19 by detecting the presence of antibodies.
- Serological testing will contribute to a better understanding of infected people's immunity status.
- Using validated and effective serological tests for COVID-19 will be an important step in Canada's public health response.
- Serological testing will help inform important public health decisions once a vaccine is developed.
- Health Canada will continue to focus its work on the health and safety of Canadians and on distributing safe and effective COVID-19 health products as quickly as possible.
- This test must be performed in a laboratory.
- Serological testing is essential for understanding the immune response to the viral infection and will play a key role in determining the extent of exposure to the virus through serological monitoring studies.
- Further research is required to fully comprehend the relationship between positive antibody tests and any protection against re-infection.



- In accordance with Health Canada's serological testing guidelines, a condition is attached to the authorization for serological tests to monitor their ability to function as intended once used by the Canadian healthcare system.
- Serological testing should be used in conjunction with the testing strategy developed by municipal, provincial or territorial public health authorities.
- All other devices authorized for COVID-19 testing in Canada are nucleic acid-based tests used to diagnose active infection.

If pressed on Canada's approach to authorizing COVID-19 diagnostic testing devices:

- As an emergency public health measure, the Minister of Health has signed an Interim Order to allow expedited access to COVID-19-related medical devices, including testing devices.
- Only testing devices authorized by Health Canada can be imported or sold in Canada. Unauthorized tests may not produce accurate results, leading to potential misdiagnosis.
- COVID-19 tests are confirmed by Health Canada to be well supported by evidence indicating they will provide accurate and reliable results. Over a dozen COVID-19 diagnostic testing devices are now available in Canada. The list of authorized testing devices is available on the Health Canada website.
- Canada has maintained a science-based approach to managing the pandemic, including maintaining pre-market authorization requirements for testing technologies.
- Providing Canadians with accurate information on infection status is a cornerstone of Canada's pandemic response.
- Health Canada's position on using serological testing is consistent with the World Health Organization's view that it will play an important role in research and monitoring.
- The Public Health Agency of Canada's National Microbiology Laboratory and its partners are working to evaluate various commercial serological tests for SARS-Cov-2. Collaborators across the country include members of the Canadian Public Health Laboratory Network, clinical researchers in front-line healthcare settings and Canadian Blood Services. All are working to develop the necessary materials for evaluating and implementing serological testing in Canada.
- Health Canada is continuing to review other serological testing technologies in accordance with its serological testing guidelines. Health Canada will authorize other highly sensitive and highly specific serological tests. For more information, please visit the Testing devices for COVID-19: Serological testing devices website.



About pre-symptomatic and asymptomatic transmission

- Now that more countries have had large numbers of cases and have analyzed transmission patterns, recent studies provide evidence that transmission of the virus can happen from infected people—before they develop symptoms. We refer to this as *pre-symptomatic transmission*.
- There is also evidence that some infected people who never develop symptoms are also able to transmit the virus. This is called *asymptomatic transmission*.
- We do not know how much of a role pre-symptomatic and asymptomatic transmission play in driving this epidemic at this time, but we know that it is occurring among those with close contact or in close physical settings.
- While the primary driver of the global pandemic of COVID-19 has been individuals with visible symptoms (coughing and respiratory droplets are key ways the virus is spread), evidence of asymptomatic or pre-symptomatic transmission points to the importance of everyone, even those who feel fine, following the proven methods of preventing transmission.

Drugs and vaccines

- When a vaccine or drug is developed to prevent or treat COVID-19, we will take appropriate action to ensure it is available to Canadians.
- Measures include fast-tracking through the:
 - scientific review of new drugs or vaccines through a priority review or a notice of compliance with conditions;
 - use of the Extraordinary Use of New Drugs pathway for making a promising new drug or vaccine available in order to secure the health of Canadians during an emergency;
 - Canadian clinical trials for new vaccines, new or repurposed antivirals, or supportive therapies.
- Other measures include the following:
 - Special Access Program for practitioners treating patients with serious or life-threatening conditions when conventional therapies have failed or are unavailable;
 - Importation of a new drug authorized for sale in the United States, Switzerland or the European Union through the list of drugs for an urgent public health need.

Canadian hospitals join global drug trials

- COVID-19 is a global pandemic that requires a global solution.
- The participation of different countries, including Canada, in this unprecedented mega-trial of potential COVID-19 treatments is truly a new model of global collaboration.



- This global trial, coordinated by the World Health Organization, will test a number of possible drugs to treat COVID-19. Since all countries will be using the same experimental plan, it will be possible to obtain more reliable results more quickly.
- As with all unproven treatments, there are both risks and benefits. It is therefore best to use potential treatments in a clinical trial.
- The Government of Canada has invested nearly \$1 million in the Canadian component of this global trial through the Canadian Institutes of Health Research. This investment is part of the government's \$275-million commitment to support medical research into the COVID-19 pandemic.
- Canada has some of the world's best and brightest researchers, who are working tirelessly to support the international fight against this pandemic. Up to 20 institutions across the country should be invited to participate in the Canadian component of this global trial.
- To advance the research and development of a COVID-19 vaccine, the World Health Organization, along with the Coalition for Epidemic Preparedness Innovations, is coordinating an international collaboration involving Canada.

Experimental therapies

- No drug or health product with a therapeutic claim may be sold or marketed in Canada without first having been approved by Health Canada as a safe, effective and quality product. This approval process is initiated when the manufacturer of the drug or health product submits an application for approval to Health Canada.
- To ensure that Canadians have access to effective COVID-19 health products as quickly as possible, Health Canada is expediting the evaluation process for all COVID-19-related submissions.
- At this time, no specific drugs to treat or prevent COVID-19 have been approved. The best way to access drugs that seem promising to treat COVID-19 is through clinical trials.
- Health Canada is encouraging health professionals who prescribe or offer experimental treatments to patients with COVID-19 to contact Health Canada to launch a clinical trial.
- The Department is continuing to monitor the safety and effectiveness of drugs and health products once they are on the market.

If pressed on expediting access to treatment:

- Health Canada recognizes that Canadians want quick access to promising new drugs and health products, especially when treatment options are limited.



- As an emergency public health measure, the Minister of Health has signed an Interim Order to allow expedited access to COVID-19-related medical devices.
- Health Canada will continue to use all tools at its disposal to expedite the procurement of safe and effective health products related to COVID-19.

If pressed on off-label use:

Additional context: Some healthcare providers prescribe “off-label” drugs to treat COVID-19 symptoms. This means that they prescribe drugs to treat COVID-19 that are authorized and indicated for the treatment of other health problems.

- In Canada, a healthcare professional's decision to prescribe or use a particular drug for an approved or off-label indication is part of the practice of medicine, which falls under the jurisdiction of provincial and territorial regulatory bodies.
- Although Health Canada is responsible for drug regulation in Canada, it is up to healthcare professionals to consider the information provided in the Canadian product monograph, on the labels of approved products and from other reliable sources, such as medical journals, peer-reviewed studies and reports to ensure that the potential benefits of the drug outweigh the risks for each patient.
- Off-label use may not be supported by the same level of scientific evidence as an authorized use. An off-label prescription can be justified by a wide range of data, from rigorous clinical study data to anecdotal evidence without substantial scientific validation.
- Drug labels are designed to indicate authorized use and therefore may not provide all the information necessary for use beyond safe and effective indications. In the case of off-label drugs, this means that there may be less information about their possible interactions with other drugs and other possible adverse reactions associated with off-label use of the drug.
- It is illegal to directly or indirectly promote experimental therapies or off-label use of authorized drugs.
- Health Canada encourages health professionals to explore the use of off-label medications for the treatment of COVID-19 in the context of a clinical trial, so that data can be collected and used to inform future prescribing practices.

If pressed on clinical trials:

- Clinical trials play a key role in advancing research and evaluating research products to help address emerging health issues.
- The purpose of clinical trials is to determine whether the use of a drug or medical device is effective and safe for humans.



- Clinical trials require informed consent from patients as well as monitoring and protection measures to ensure the safety of those involved.
- Clinical trials allow the healthcare community to systematically collect data on the efficacy of treatments and the risks that could be associated with them to inform decisions about the treatment of other patients.

Hydroxychloroquine and azithromycin for the treatment of COVID-19

- Canadians who are ill with COVID-19 and their families need access to safe and effective drugs and health products to treat and detect the disease.
- There has been some preliminary evidence from studies suggesting that hydroxychloroquine alone or a combination of hydroxychloroquine and azithromycin may be effective in reducing the viral load in patients with COVID-19, as well as in treating respiratory tract infections related to COVID-19.
- Evidence on the effectiveness of the combined use of hydroxychloroquine and azithromycin to treat COVID-19 is still very limited, and like all medications, both drugs are associated with known risks.
- Both hydroxychloroquine and azithromycin have been approved in Canada for the treatment of other diseases. Physicians may choose to use these medications off-label based on their patient's needs, including the seriousness of the patient's illness if the potential benefits outweigh the known risks of the drugs.
 - Hydroxychloroquine is approved for the treatment of lupus, rheumatoid arthritis and malaria.
 - Azithromycin is an antibiotic used to treat pneumonia and other bacterial infections.
- It is important to ensure continued access to these drugs for patients who need them for approved uses.
- Because the use of these medications to treat COVID-19 is just beginning to be scientifically tested, Health Canada recommends that healthcare practitioners who want to prescribe them to treat COVID-19 patients do so as part of a clinical trial.
- A clinical trial requires the informed consent of patients and would enable medical professionals to systematically collect data about the risks and benefits of the treatment.
- All clinical trials related to the treatment of COVID-19 are being reviewed on a priority basis. Companies, physicians, and researchers who want to conduct a clinical trial should contact Health Canada.



If pressed on the National Emergency Strategic Stockpile:

- The Government of Canada has added hydroxychloroquine to the National Emergency Strategic Stockpile (NESS). The inventory will be used first for the drug's approved uses, and then in clinical trials for the treatment of COVID-19.
- Hydroxychloroquine will gradually be added to the NESS over several months to minimize impacts on its availability for approved uses.
- Provinces and territories may use the NESS in emergencies, such as responding to infectious disease outbreaks, natural disasters, or other public health incidents when their own resources are not enough.
- The NESS contains a variety of items, including medical devices, medications, beds and blankets.
- The NESS is intended to supplement provincial and territorial inventories in the event of a rare or high-impact public health incident.
- The NESS is not used to replace provincial and territorial inventories or purchases. Provinces and territories must prepare and maintain their own procurement capacities.
- Since the coronavirus outbreak in China in January, the Public Health Agency of Canada has been closely monitoring the situation and assessing NESS inventories to acquire necessary supplies and be able to respond to a potential outbreak in Canada.
- Supply is running low around the world. The federal government is continuing to work aggressively to secure everything it needs as quickly as possible, in direct collaboration with all provinces and territories.

If pressed on the availability of hydroxychloroquine and azithromycin:

- Health Canada is closely monitoring the supply of potential treatments for COVID-19 in Canada, including hydroxychloroquine and azithromycin.
- There are four companies that market hydroxychloroquine in Canada: Apotex Inc., JAMP Pharma Corporation, Mint Pharmaceuticals Inc. and Sanofi-Aventis Canada Inc. Health Canada understands that all four companies are experiencing increased demand.
- There are 16 companies that market azithromycin in Canada: Altamed Pharma, Angita Pharma Inc., Apotex Inc., Auro Pharma Inc., Dominion Pharmacal, JAMP Pharma Corporation, Laboratoire Riva Inc., Marcan Pharmaceuticals Inc, Pharmascience Inc., Pro Doc Limitee, Sandoz Canada Incorporated, Sanis Health Inc., Sivem Pharmaceuticals ULC, Sterimax Inc., Teva Canada Incorporated and Pfizer Canada ULC. None of these companies is reporting shortages of azithromycin in Canada.



If pressed on measures taken by Health Canada to address COVID-19-related shortages:

- Health Canada is closely monitoring the impact of the COVID-19 pandemic on drug supply in Canada, including targeting the weakest links in supply chains to fill gaps and avoid shortages.
- The Department has also increased its monitoring efforts and regularly (sometimes daily) consults with provinces and territories, the pharmaceutical industry, the health sector and patient groups. Health Canada is also working with other international regulatory agencies, including the European Medicines Agency, the US Food and Drug Administration, Australia's Therapeutic Goods Administration and the World Health Organization to share information on any global supply disruptions. This ongoing dialogue allows us to better detect shortages, prepare mitigation strategies, and respond in a coordinated manner.
- As part of the whole-of-government response to the COVID-19 pandemic, the government passed the *COVID-19 Emergency Response Act* on March 25, and the *Food and Drugs Act* was amended to allow Health Canada to implement stronger methods to reduce and try to prevent shortages.
- On March 30, the Minister of Health signed the Interim Order Respecting the Importation and Sale of Medical Devices for Use in Relation to COVID-19, authorizing exceptions to the importation and sale of drugs, medical devices and special dietary foods necessary to prevent or mitigate the effects of shortages directly or indirectly related to COVID-19.
- The Interim Order exceptionally authorizes the importation of certain drugs that may not fully meet Canadian regulatory requirements (e.g., on bilingual labelling) but whose manufacturing standards are equivalent to those applied in Canada to maintain Canada's drug supply and protect the health of Canadians during the pandemic.
- Only drugs on the List of Drugs for Exceptional Import and Sale will be subject to the exceptional importation and sale provisions of the Interim Order. For the time being, only drugs in shortage designated as a Tier 3 shortage (such as hydroxychloroquine) can be placed on this list.
- Although no drugs are listed yet, Health Canada will evaluate proposals from companies seeking access to drugs in Tier 3 shortage, including hydroxychloroquine, under this new process and amend the list as required.
- Health Canada will continue to work with other federal departments, the provinces and territories, international partners and industry to ensure Canadians' continued access to the drugs and medical devices they need during the COVID-19 pandemic.

Clinical trial approved for the use of hydroxychloroquine in hospitalized children

- The health and safety of Canadians is our top priority.



- Canadians and especially children who are ill with COVID-19 need access to safe and effective drugs and to health products for diagnosis and treatment.
- Hydroxychloroquine is approved in Canada for the treatment of lupus, rheumatoid arthritis and malaria.
- Given that this drug is just beginning to be used on a trial basis to treat COVID-19, Health Canada recommends that health professionals who want to prescribe it to patients with the disease do so as part of a clinical trial.
- On May 2, 2020, Health Canada authorized the Research Institute of the McGill University Health Centre to conduct a clinical trial to study the safety and effectiveness of hydroxychloroquine as a treatment for COVID-19 in hospitalized children.
- Preliminary data from some international studies suggests that hydroxychloroquine may be effective in reducing viral load in certain groups of COVID-19 patients and in treating respiratory infections caused by COVID-19. However, because results vary, further studies are needed, especially in children.
- Like all drugs, hydroxychloroquine has known risks, which can be carefully controlled and monitored during a clinical trial.
- A clinical trial requires the informed consent of patients (and their parent or guardian, if applicable) and would enable the healthcare community to systematically collect information about the risks and benefits of the treatment.

Relaxing regulations for COVID-19 treatments

- Health Canada's top priority is to ensure that all Canadians have access to necessary drugs and medical devices during the COVID-19 pandemic.
- Health Canada is prepared to consider relaxing some regulations, which is rarely done, to allow early submissions for drugs that appear promising for treating or preventing COVID-19.
- Health Canada may accept new evidence from ongoing clinical trials as it becomes available, while ensuring that the review maintains the same level of safety, effectiveness and quality standards. This process can lead to a more effective review by Health Canada and reduce the overall review time for a new drug, while maintaining high standards of scientific review.
- The evidence provided must always demonstrate that the drug is safe, effective and of high quality before Health Canada can approve the drug for use by Canadians.
- A similar approach had previously been taken for H1N1 vaccine approval.



About using this approach for remdesivir

- Potentially promising treatments, such as remdesivir, could be reviewed using this model.
- Health Canada is currently in discussions with Gilead Sciences Canada Inc. regarding a drug submission for remdesivir.
- Remdesivir is an antiviral drug originally developed as a treatment for Ebola.

Remdesivir for the treatment of COVID-19

- Canadians and their families who are ill with COVID-19 need access to health products for diagnosis and treatment.
- Currently, there are no drugs specifically authorized in Canada to treat or prevent COVID-19. Health Canada has been closely monitoring potential treatments being developed for COVID-19, including remdesivir.
- Remdesivir is an experimental drug that has been used to treat certain hospital patients with COVID-19 in clinical trials. Although there is evidence from preliminary clinical trials suggesting that remdesivir may help patients recover more quickly, the effectiveness of this drug in treating COVID-19 remains to be determined and will require a review of clinical data once submitted to Health Canada.
- Health Canada is aware that the US Food and Drug Administration (FDA) has granted emergency authorization for the experimental drug remdesivir based on early clinical trial data from the US National Institute of Allergy and Infectious Diseases (NIAID). This preliminary evidence suggests that remdesivir can help patients recover more quickly. For the FDA, the authorization is temporary and does not replace the official process for submitting, reviewing and approving a new drug.
- Health Canada has not yet received a submission for authorizing the use of remdesivir for the treatment of COVID-19. If the company presents a submission for remdesivir, Health Canada will use the regulatory flexibility available exclusively for public health emergencies to allow the company to present a submission earlier and continue to submit information on the safety, efficacy and quality of the drug. Health Canada will evaluate this information on an ongoing basis.
- Health Canada is working with its international counterparts and will use available knowledge wherever possible to expedite the review of an application for remdesivir submitted to Health Canada. Health Canada is in discussions with Gilead Sciences Canada, Inc., the manufacturer of remdesivir, to discuss an expedited regulatory process, including the flexibility of the ongoing review recently made available by Health Canada, and to provide advice on how best to apply for market access in Canada.
- Remdesivir is still considered an experimental treatment, and the best way to access it is by participating in a clinical trial. To date, Health Canada has approved two clinical trials



involving remdesivir in the context of COVID-19 in Canada. Clinical trials provide Canadians with access to new therapies to treat COVID-19, as well as an opportunity for the healthcare community to systematically gather information about the effectiveness of treatments and the associated risks. More information on trials is available on our website.

- To date, access to remdesivir has also been granted on a case-by-case basis through Health Canada's Special Access Programme, which provides emergency access to drugs against serious or life-threatening diseases.
- If remdesivir is authorized for use in Canada, Health Canada will work with the company to ensure that Canadians have access to the drug, while recognizing global demand for this product.
- Available evidence must always demonstrate that the drug is safe, effective and of high quality before Health Canada can approve the drug for use by Canadians.

If asked about promising evidence for remdesivir:

- Remdesivir is an experimental drug that has not yet been approved in any country. It was originally developed as a potential treatment for Ebola virus infection and has shown promise in the treatment of SARS-2.
- The most appropriate way to access experimental treatments that may be useful in the treatment of COVID-19 is through a clinical trial. Clinical trials provide Canadians with access to new treatments for COVID-19, as well as an opportunity for the medical community to systematically gather information about the effectiveness of treatments and the associated risks.
- The US National Institutes of Health (NIH) has published information from a randomized, placebo-controlled clinical trial, suggesting that remdesivir may have a positive effect on the outcome of COVID-19. Specifically, in a trial conducted by the US National Institute of Allergy and Infectious Diseases (NIAID), early results show that hospital patients receiving remdesivir have a faster recovery rate than those receiving placebo. However, complete trial data has not yet been shared with Health Canada for critical review.
- According to information published by the NIH, patients receiving remdesivir have a 31% faster recovery time than those receiving a placebo. The median healing time was 11 days for patients treated with remdesivir, compared to 15 days for those given a placebo.
- Health Canada recognizes the urgent need for treatment for COVID-19 and for the suggested results of the NIAID trial; however, all available evidence must first be reviewed by Health Canada to ensure that the drug is safe, effective and of high quality for Canadians.
- Health Canada is in discussions with Gilead Sciences Canada, Inc., the manufacturer of remdesivir, to discuss an expedited regulatory process, including the flexibility of the



ongoing review recently made available by Health Canada, and to provide advice on how best to apply for market access in Canada.

If asked about the availability of remdesivir:

- Remdesivir is not currently an approved product and can only be accessed through a clinical trial or Health Canada's Special Access Programme (SAP).
- If remdesivir is authorized for use in Canada, Health Canada will work with the company to ensure that Canadians have access to the drug.
- Thus far, a very small number of patients have been treated with remdesivir in Canada through special access or compassionate programs.
- Because of the high global demand for remdesivir, access for Canadians will be primarily through clinical trials. Access through SAP will be possible for certain groups, including pregnant women or children with confirmed cases of COVID-19 and serious illness.
- Health Canada is in discussions with Gilead Sciences Canada, Inc., the manufacturer of remdesivir, to discuss an expedited regulatory process and to provide advice on how best to apply for market access in Canada. The company has been informed of the possibility of an open submission, which is only available in the event of a public health emergency.

Medical supplies and devices

Canadian supply of personal protective equipment (PPE) and medical supplies

- We are aware of the shortage of personal protective equipment (PPE) and medical supplies in Canada and are committed to doing everything necessary to protect the health of Canadians, especially front-line healthcare workers, from COVID-19.
- The Government of Canada is working with provincial and territorial governments to quickly assess PPE needs (N95 masks, surgical masks, face shields, nitrile gloves, gowns and other protective clothing) and medical supplies (disinfectant, respirators, swabs and test kits).
- To meet these needs, we are purchasing large quantities of equipment and supplies, investing in COVID-19 testing, and working with Canadian companies to increase their manufacturing capacity.
- We have also received donations from national and international organizations.



- Canada is working to quickly allocate PPE and medical supplies to provinces and territories, pursuant to an approach agreed to by federal, provincial and territorial Ministers of Health.
- The Public Health Agency of Canada (PHAC) is also sending PPE and respirators from the National Emergency Strategic Stockpile (NESS) to provinces and territories upon request.
- Canada's NESS contains supplies that provinces and territories can request in emergencies, such as infectious disease outbreaks. Its objective is to help provide additional support in times of crisis to complement provincial and territorial resources.
- Provinces and territories are responsible for preparing and maintaining their own supply capacities.

Regulatory measures to improve access to medical devices, including PPE

- Over the past few weeks and to support the whole-of-government response to COVID-19, we have taken the following actions.
 - expediting access to medical devices related to COVID-19, such as testing kits;
 - issuing expedited establishment and manufacturing licences;
 - allowing the importation and sale of unapproved medical devices in Canada, in accordance with certain requirements, to address shortages;
 - simplifying access to products that may not meet all current regulatory requirements (e.g., bilingual labelling), including personal protective equipment (masks, gowns), swabs, hand sanitizer and surface disinfectant;
 - amending the *Food and Drugs Act* and *Patent Act* to support efforts to prevent and respond to shortages.

Health Canada will monitor and assess the safety, quality and effectiveness of any products authorized for importation and sale under these special measures.

Gown shortage

- Gowns are essential to protecting healthcare workers during the COVID-19 pandemic. However, growing global demand for gowns has caused a temporary shortage in Canada and around the world.
- To help healthcare institutions develop strategies to continue to ensure the safety of healthcare workers when providing patient care, the Public Health Agency of Canada and Health Canada have made recommendations regarding conserving stocks, priorities for use, alternatives and expired gowns.
- The Government of Canada is working to ensure that healthcare workers have the personal protective equipment (PPE) and medical supplies they need through bulk



supply orders in collaboration with the provinces and territories as well as by strengthening national production capacities and research into alternative solutions and ways to extend the service life of products.

- The Government of Canada has ordered gowns and has begun receiving shipments from international and domestic suppliers. The Public Health Agency of Canada is working to quickly distribute items to provinces and territories, pursuant to an approach agreed to by federal, provincial and territorial Ministers of Health.

Conservation strategies

- To conserve gown stocks that offer protection against droplets and fluids, healthcare facilities must apply environmental and administrative measures to minimize constraints associated with their use.
- These measures may include:
 - installing physical barriers between healthcare workers and potentially infectious persons in control areas;
 - reducing, postponing or cancelling non-essential activities or procedures that may require wearing a gown;
 - exploring ways to accelerate washing and returning reusable gowns;
 - limiting the number of visitors to patient rooms where gowns are normally required;
 - using a type of gown usually reserved for other uses (e.g., surgical gowns), if available given the operating room workload for staff.

Alternatives to protective gowns

- Alternatives or additions to gowns (e.g., coveralls, laboratory coats and aprons) may be more difficult to put on and remove than protective gowns, which may increase the risk of contamination.
- It is also important to note that the level of protection from droplets and fluids offered by alternatives or additions to gowns varies.
- To extend the service life of protective gowns, healthcare workers may wear aprons over their gowns that can be changed between patients.
- When protective gowns are not available, a combination of apparel may be considered to provide adequate protection in the event of a risk of exposure to bodily fluids.

Expired and reusable gowns

- Health Canada does not recommend using expired disposable medical gowns without first confirming that they are still fluid resistant.



- Reusable (washable) gowns may be cleaned after each use as per the manufacturer's instructions with respect to sterility and laundering requirements for healthcare settings. This includes the number of times gowns can be laundered to maintain performance, safety, and effectiveness.
- Reusable gowns can be used beyond their recommended life span provided they are free of damage. Expired gowns should be visibly inspected for damage prior to use.

Orders and domestic production of medical gowns

- Because of global demand for PPE, some materials typically used to manufacture gowns are being reallocated to produce masks. As a result, manufacturers around the world are having difficulty filling their orders, resulting in production and shipping delays.
- To meet domestic needs, Canada has strengthened its domestic production capacity. Innovation, Science and Economic Development Canada and Public Services and Procurement Canada have reached out to Canadian industries, and thanks to several Canadian companies that have shifted towards producing gowns, domestic deliveries have already begun.
- To date, Public Services and Procurement Canada has ordered over 130 million gowns. Over 200,000 gowns have been delivered to PHAC, and more deliveries are planned in the coming weeks.

Procurement contracts to increase the quantity of supplies in Canada

- Innovation, Science and Economic Development Canada and Public Services and Procurement Canada are continuing to mobilize Canadian industries to increase domestic production capacity, including transforming plants to produce equipment and supplies, such as portable respirators, surgical masks and rapid test kits.
- As a result of these efforts, the Government of Canada has signed procurement contracts with Canadian companies, including Thornhill Medical, Medicom and Spartan Bioscience.
- The government has also signed letters of intent with companies (including Precision Biomonitoring, Fluid Energy Group Ltd., Irving Oil, Calko Group and Stanfield's Ltd.) for the production of testing kits, disinfectant and protective clothing, including masks and gowns.
- Canada Goose has received its medical device establishment licence from Health Canada. The company will be able to retool its manufacturing facilities to produce gowns.



- Throughout this process, PHAC and Health Canada have played a key role in conducting technical reviews to ensure that products meet the Government of Canada's technical specifications for COVID-19, which are listed on Public Services and Procurement Canada's [Buy and Sell website](#).
- The Government of Canada has also awarded a contract to Amazon, which will manage the logistics of distributing PPE and supplies to support the fight against COVID-19.
- Amazon will be working directly with Canada Post to provide warehousing services and using its current delivery service providers (Canada Post and Purolator) to ship products to health authorities in all provinces and territories for use by front-line health workers.

Invitation to submit an expression of interest in providing logistics services

- The Government of Canada is working hard to secure personal protective (PPE) for front-line healthcare workers across the country.
- To support these efforts, the Government of Canada is issuing an invitation to submit an expression of interest to logistics service providers to facilitate rapid delivery and distribution of an exceptional volume of PPE orders across Canada.
- This new expression of interest focuses on an end-to-end logistics solution that is different from the current agreement with Amazon. It includes storage, customs and brokerage documents and inventory management.
- PHAC will continue to monitor the amount of PPE and supplies available, which provinces and territories request it, and where the equipment is being shipped.

PPE purchases and donations

- PHAC verifies the medical supplies and PPE received by the Government of Canada through both donations and purchases to ensure that they comply with the COVID-19 technical specifications set out on Public Services and Procurement Canada's Buy and Sell website.
- The verification process varies depending on the medical device. For example, acceptable alternatives to N95 masks (such as KN95 respiratory masks) are visually inspected for design and manufacturing defects and tested to ensure that flow, pressure-drop and penetration levels meet requirements for air filtration masks. Gowns are visually inspected and tested for fluid resistance.
- Given that our healthcare providers may not be familiar with some suppliers, a list of those that meet the relevant technical specifications will be distributed to the provinces



and territories, along with usage instructions and documentation confirming that the products meet specifications.

- For example, supplies received from China may be labelled in Mandarin. To ensure timely distribution, PHAC is unable to replace labels on all items. As a result, provinces and territories are encouraged to follow the PHAC instructions accompanying supplies by ensuring appropriate training for front-line healthcare workers.
- Another example is the KN95 mask. The normal procedure for an N95 mask is fit testing, but the KN95 mask cannot be tested this way, so PHAC will ask the provinces and territories to perform fit testing. Healthcare workers may not be familiar with this process, so instructions will be provided.
- The Government of Canada has happily accepted generous PPE donations from international and national organizations, including the Jack Ma Foundation/Alibaba, Home Depot, Apple, CBC/Radio-Canada, Shell and AstraZeneca, to name a few.
- It is heartwarming to see so many Canadians coming together to help those who need it most.

Coordinated Government of Canada response for equipment and supplies

- The Government of Canada has taken a coordinated approach to distributing needed supplies and equipment across the country.
- **Public Services and Procurement Canada:** PSPC is building on existing procurement agreements and liaising with domestic and international procurement communities to identify and purchase the required products.

The Department is asking all suppliers to come forward and propose products or services that they could offer to support Canada's response.

- **Public Health Agency of Canada:** PHAC is working with federal partners as well as the provinces and territories to identify needs and requirements for the COVID-19 response. PHAC is also overseeing Canada's National Emergency Strategic Stockpile, which contains supplies that the provinces and territories can request in emergency situations.
- **Health Canada:** As the regulator of health products, Health Canada is working to expedite access to the products Canadians need to help limit the spread of COVID-19.

On March 18, the Minister of Health signed an Interim Order to allow expedited access to COVID-19-related medical devices. Health Canada has also adopted an interim measure to facilitate access to certain products, including PPE.



According to the Interim Order, a medical device licence is required to be able to sell and import high-risk medical devices into Canada.

Health Canada will review all COVID-19 submissions and applications as quickly as possible while maintaining patient safety standards.

- **Innovation, Science and Economic Development Canada:** ISED is responsible for Canada's Plan to Mobilize Industry to Fight COVID-19, which includes new measures to provide support directly to these businesses to help them rapidly scale up production or re-tool their manufacturing lines to develop products made in Canada that will help in the fight against COVID-19. On March 20, ISED issued a call to action for manufacturers and businesses.
- **National Research Council of Canada:** The NRC's Industrial Research Assistance Program is building on its current relationships with thousands of the most innovative small- and medium-sized businesses to challenge the market to find innovative solutions to combat COVID-19.

Reusing single-use medical devices

- Like other hospital practices, the purchase or reuse of reprocessed medical devices by healthcare institutions falls under provincial and territorial jurisdiction.
- Given the shortage of certain medical devices as a result of COVID-19, Health Canada is working on guidelines for cleaning and sterilizing single-use devices.
- The Government of Canada has taken additional emergency measures in recent weeks to facilitate access to new COVID-19 diagnostic testing kits, as well as disinfectants, hand sanitizers, personal protective equipment and swabs for testing.

Decontaminating and reusing N95 masks

- N95 masks used by healthcare workers are labelled as single-use products.
- The Government of Canada, like many other countries, is exploring ways to extend the use of personal protective equipment (PPE), such as N95 masks, through decontamination to help meet Canada's supply needs.
- The Government of Canada has asked the provinces and territories as well as healthcare providers to keep and store used N95 masks in accordance with local biosecurity guidelines and standards while the effectiveness of the decontamination processes is being verified.
- Health Canada has already authorized certain devices used to decontaminate N95 masks under the Interim Order respecting medical devices. Products and manufacturing processes must meet safety, quality and effectiveness requirements to protect the health and safety of Canadians.



- The Government of Canada has acquired decontamination equipment to increase provincial and territorial N95 mask reprocessing capacity as required.
- Other countries, including the United States, have also adopted this approach.
- The Government of Canada is working hard to provide PPE and medical supplies to healthcare workers by making bulk purchases in collaboration with the provinces and territories, increasing domestic production capacity and looking for alternatives and ways to extend product life.

About the Public Health Agency of Canada's purchase of decontamination devices for reprocessing single-use N95 masks during the fight against COVID-19

- On April 15, 2020, the Government of Canada contracted Stryker Canada to purchase 82 decontamination devices.
- These devices will provide a total additional national reprocessing capacity of approximately 275,500 N95 masks per week.
- These devices are the result of Canadian research and development efforts and are manufactured in Canada.
- The Government of Canada is continuing to work closely with all provinces and territories to meet their future needs for additional decontamination and reprocessing capacity.
- The National Research Council of Canada has purchased 20 Clean Flow Mini medical devices for healthcare to be shared with hospitals to study mask decontamination.

About Health Canada's considerations regarding reprocessing single-use N95 masks during the fight against COVID-19

- The Government of Canada recognizes the reprocessing of masks as a possible solution that would provide an additional supply of masks to healthcare workers who depend on them for their protection.
- Because of the risk of PPE shortages during the fight against COVID-19, the Government of Canada is continuing to work with manufacturers to find alternative technologies to effectively decontaminate single-use N95 masks for safe reuse by front-line health professionals.
- Decontamination is an acceptable way to make masks safe to reuse. Companies are required to provide evidence that their processes allow for the proper decontamination of masks for reuse.
- Health Canada has published an advisory informing manufacturers of the important regulatory provisions with which they must comply to demonstrate that their single-use N95 mask decontamination methods meet key safety and effectiveness requirements.



- The Department also published an [advisory](#) setting out important considerations for health professionals, which provides more information on Health Canada's evidence requirements to ensure that products and manufacturing processes meet mandatory safety, quality and effectiveness standards.
- Manufacturers looking to reprocess medical devices intended for use against COVID-19 may apply for expedited authorization under the [Interim Order](#) issued on March 18, 2020. It is a streamlined regulatory process to address the health crisis.
- Two approaches are available:
 - Companies may provide sterilization or decontamination devices or systems to healthcare facilities for the reprocessing of single-use N95 masks; or
 - They can reprocess single-use N95 masks themselves and redistribute them to healthcare facilities.
- Healthcare facilities equipped with sterilizers to internally reprocess N95 masks may do so without authorization from Health Canada. However, the Department strongly recommends that they use authorized technologies only.
- The Government of Canada continues to communicate with the healthcare community as well as the provinces and territories in order to monitor PPE supplies and learn about possible ways to reprocess N95 masks.
- Our goal is to find solutions quickly and effectively to meet the pressing need for safe and effective PPE in healthcare settings.

Authorizations under the Interim Order respecting medical devices

- Health Canada has invited medical device manufacturers with extensive experience in manufacturing, decontaminating and reprocessing equipment to submit an application to authorize these technologies for the safe and effective reprocessing of N95 masks and other PPE. As with all products intended for use against COVID-19, Health Canada is expediting the application process for authorizing these products and making this its top priority.
- Under the Interim Order respecting medical devices ([link](#)), Health Canada has authorized broadening the intended use of sterilizers and the use of new devices for reprocessing N95 masks.
- A list of authorized devices is available [here](#) (look for "sterilizer" or "decontamination" in the "technology" column). This list will be updated regularly as new devices are authorized under the Interim Order.
- Health Canada will continue to monitor current international trends and to evaluate the evidence supporting various decontamination and sterilization methods and strategies to reprocess other PPE (such as single-use surgical masks) in the context of the COVID-19 pandemic.



About our existing guidelines

- In May 2016, Health Canada published a [notice](#) to industry regarding the reuse of single-use medical devices.
- Health Canada applies the same requirements to companies that reprocess originally approved single-use medical devices and distribute them to Canadian healthcare facilities as it does to new device manufacturers.
- Manufacturers of authorized sterilizers or decontamination devices all have their own guidelines for users on how to use the device to decontaminate masks, including:
 - instructions for healthcare facilities
 - instructions for healthcare providers
 - a fact sheet on decontaminating N95 masks
- Health Canada has also published an [advisory](#) setting out important considerations for health professionals, which provides more information on Health Canada's evidence requirements to ensure that products and manufacturing processes meet mandatory safety, quality and effectiveness standards.

About the report to Canada's Chief Science Advisor: Task Force on Reprocessing of Respirators/ N95 Masks

- Experts from PHAC and Health Canada participated in the Task Force that reviewed available evidence on reprocessing and reusing N95 face masks (also known as respirators or N95 respirators) in light of potential shortages of these devices.
- The Task Force conducted an expedited review of mask reprocessing options using ultraviolet light, heat and microwaves, and chemicals such as hydrogen peroxide.
- The recommendations in this report are consistent with current practices and plans supported by PHAC and Health Canada.
- Since the report was submitted, Health Canada has approved other reprocessing technologies. The Department is continuing to quickly evaluate all technologies related to COVID-19.

Legislative amendments

Key messages on legislative amendments

- To facilitate Canada's response to COVID-19, new legislative amendments will give the Minister of Health new powers to:
 - make regulations that help prevent or address drug and medical device shortages;
 - request additional information from companies that produce food, drugs, cosmetics or medical devices in order to assess the risks and benefits of new products and to confirm that they are safe for Canadians;



- obtain permission for third-party manufacturers to provide the necessary patented inventions, such as a drug or medical equipment, to the extent required to combat the pandemic.
- These measures received Royal Assent on March 25, 2020 and came into force immediately.
- Amendments to the *Food and Drugs Act* and the Commissioner of Patents' authority to issue authorizations will remain in force until September 30, 2020.
- Health Canada is committed to taking the necessary steps to continue to protect the health and safety of Canadians during this pandemic and will take appropriate action, in collaboration with provinces, territories and other stakeholders, to protect Canada's supply of required drugs and medical devices.

Amendments consistent with the *Protecting Canadians from Unsafe Drugs Act (Vanessa's Law)*

- These amendments complement authorities granted under Vanessa's Law by:
 - granting authorization to collect additional safety information to inform decisions about new products on the market in Canada or products already on the market;
 - increasing the scope of authorities to include other potential new products, including cosmetics and special dietary foods that may be required to address shortages during the pandemic.

Temporary exemption under the Controlled Drugs and Substances Act for medical treatments

- Many people with a substance use disorder or who live with chronic pain may find it challenging to effectively practise physical distancing without changes to prescribing and dispensing practices. In this time of emergency measures, we must do everything we can to help them access the medicine they need.
- Health Canada is working with provinces and territories to take action to help patients and practitioners reduce their social interactions, without limiting access to critical medicine.
- On March 19, 2020, Health Canada issued a six-month national exemption for prescriptions of controlled substances (such as narcotics) under the *Controlled Drugs and Substances Act* and Regulations. This exemption temporarily authorizes pharmacists to prescribe, sell or provide controlled substances in limited circumstances, or to transfer prescriptions for controlled substances.
- As permitted by the laws and regulations of the province or territory in which the pharmacist is entitled to practise, this exemption will:
 - permit pharmacists to extend and renew prescriptions;
 - permit pharmacists to transfer prescriptions to other pharmacists; and
 - allow pharmacy employees to deliver controlled substances to patients' homes or wherever they may be.



- To accommodate physical distancing, and to reduce the stress on emergency rooms and healthcare practitioners across Canada during the COVID-19 pandemic, the exemption also permits prescribers, including nurse practitioners, to temporarily issue verbal orders (i.e., over the phone) to extend or refill a prescription.
- The exemption will be in effect until September 30, 2020, but can be extended or ended earlier by Health Canada if required.
- Legislative or regulatory amendments may be required in some provinces and territories to enable pharmacists and nurse practitioners to carry out these activities. Health Canada recommends contacting your pharmacist or provincial or territorial regulatory authority to check when and if these activities are available in your area.
- The Government of Canada will continue to collaborate with our provincial and territorial partners to effectively implement the exemption, and to assess any additional barriers to Canadians' access to controlled substances for medical reasons during the pandemic.
- Health Canada issued a similar exemption during Newfoundland and Labrador's 2020 snowstorm.

Interim Order Respecting Drugs, Medical Devices and Foods for a Special Dietary Purpose in Relation to COVID-19

- The ongoing COVID-19 pandemic is having a significant impact on Canadians and the healthcare system. Ensuring that the Government of Canada is able to respond effectively to the needs of those affected is essential.
- In response to the COVID-19 pandemic, the Minister of Health signed an Interim Order to help prevent and address shortages of drugs, medical devices and special dietary foods that are the direct or indirect result of the COVID-19 pandemic.
- Upon coming into force, the Order will authorize the importation and sale of products that are not approved in Canada, subject to certain requirements.
- As with all drugs and medical devices, Health Canada will assess and monitor the safety, security, quality and effectiveness of all products that may be imported and sold under the Interim Order. Drug and medical device manufacturers will be required to meet strict monitoring requirements.
- The Interim Order will also require companies that manufacture and import medically necessary devices during the COVID-19 pandemic to report existing or anticipated shortages, as is currently the case with drugs. This will allow health systems to better prepare and redistribute materials as needed to provide Canadians with continued access to these products.
- The Interim Order will also expedite the release of certain hard-surface disinfectants and hand sanitizers.



- Taken together, these measures will promote access to the drugs, medical devices and special dietary foods Canadians need to stay healthy and safe, and will help people recover.

Interim Order respecting COVID-19-related medical devices

- Diagnosis is critical to slowing and reducing the spread of COVID-19 in Canada.
- As an emergency public health measure, the Minister of Health has signed an Interim Order to allow expedited access to COVID-19-related medical devices.
- With the Interim Order, two new diagnostic tests are made readily accessible in Canada:
 - the Roche Molecular Systems Inc. cobas SARS-CoV-2 diagnostic device; and
 - the ThermoFisher Scientific TaqPath™ COVID-19 Combo Kit.
- An Interim Order is one of the fastest mechanisms available to the Government of Canada to help make health products available to help address larger-scale, public health emergency situations.

If pressed on the US directive to allow unauthorized health products:

- Health Canada will continue to use all tools at its disposal to expedite the procurement of safe and effective health products related to COVID-19. However, the Department is not providing blanket approval of unauthorized drugs or devices. We will update Canadians with any new information as it arises.
- The Interim Order will also ensure that other COVID-19-related medical devices are available to treat, mitigate or prevent COVID-19, as necessary.

If pressed on cost recovery:

- To remove impediments for manufacturers in this time of public health need, Health Canada will waive all application fees for COVID-19 medical devices subject to this Interim Order.

Unilingual product labelling for COVID-19

- Health Canada's top priority is the health and safety of Canadians. To that end, the Department is doing everything possible to facilitate access to the products required to slow the spread of COVID-19.
- Health Canada is firmly committed to meeting the requirements of the *Official Languages Act* and promoting linguistic duality.
- Typically, labelling, instructions and safety information are required to be bilingual on all products sold in Canada.
- In light of the exceptional demand and the urgent need for products to limit the spread of COVID-19, Health Canada has decided to facilitate, on an interim basis, access to



certain imported products that could be labelled in only one official language to increase access to high-demand products.

- Many global suppliers have indicated that they are labelling products in English only to speed up production and will only ship to countries that accept labels in English only.
- These products include household cleaners, workplace cleaners, hand and body soaps, hard-surface disinfectants and hand sanitizers.
- Effective today, all new importers of these products under the interim measure must make a bilingual text of the label available to consumers. Pre-approved importers will be required to publish a bilingual label text on their website and provide sellers with a way of informing consumers of the website in question at the time of sale, by June 8, 2020.
- As of today, all new Canadian manufacturers of these products must use bilingual labelling. Licensed Canadian hand sanitizer manufacturers that are currently using unilingual labels under the interim measure will be required to begin using bilingual labels by June 8, 2020.
- To mitigate the risks associated with unilingual labelling, importers must publish a bilingual label text on their website. They must also provide sellers with a way of informing consumers of the website where the bilingual information is provided at the time of sale. This could be done by putting a sticker directly on products, displaying posters or distributing brochures at the point of sale.
- Health Canada continues to strongly encourage all companies importing products into Canada to use bilingual labels.
- Health Canada will remove these interim measures as soon as the normal supply of these products becomes more stable.

If pressed on interim measures to allow faster market access for certain hard-surface disinfectants and hand sanitizers:

- Health Canada is allowing the importation of hand sanitizers and disinfectants from countries with similar regulatory frameworks and quality assurance requirements to Canada as an interim measure to address the shortage of these products.
- While Health Canada facilitates access to imported products that are labelled in only one official language during the shortage, the use of bilingual labels remains strongly encouraged.
- To mitigate the risks associated with unilingual labelling, importers of the affected products must publish a bilingual label text on their website. They must also provide sellers with a way of informing consumers of the website where the bilingual information is provided at the time of sale. This could be done by putting a sticker directly on products, displaying posters or distributing brochures at the point of sale.



- Effective today, all new importers of these products under the interim measure must make a bilingual text of the label available to consumers. Pre-approved importers will be required to publish a bilingual label text on their website and provide sellers with a way of informing consumers of the website in question at the time of sale, by June 8, 2020.
- As of today, all new Canadian manufacturers of these products must use bilingual labelling. Licensed Canadian hand sanitizer manufacturers that are currently using unilingual labels under the interim measure will be required to begin using bilingual labels by June 8, 2020.
- Health Canada will use a risk-based approach to address reports of non-compliance.

If pressed on the expected duration of these measures:

- Health Canada's priority is to ensure that Canadians have access to the products required to slow the spread of COVID-19.
- Health Canada will remove these interim measures as soon as the normal supply of these products becomes more stable.

If pressed on interim policies to enable faster market access for household cleaners, workplace cleaners and hand and body soaps:

- The *Canada Consumer Product Safety Act*, *Food and Drugs Act* and *Hazardous Products Act* require that labels and, where applicable, safety data sheets be in both official languages. One of the options available under the interim policies is to facilitate access to products for which this information may be in only one official language.
- This was seen as necessary to address current or potential shortages in the supply of cleaning products and hand and body soaps that can be used to fight the COVID-19 pandemic. This will facilitate the importation of these products from the United States, where product labelling may not be available in both official languages.
- While Health Canada facilitates access to imported products that are labelled in only one official language during the shortage, the use of bilingual labels remains strongly encouraged.
- To take advantage of the interim policies, importers of the affected products must provide a bilingual label text and, if applicable, bilingual safety information on their website. They must also provide sellers with a way of informing consumers and employers of the website where the bilingual information is provided at the time of sale. This could be done by putting a sticker directly on products, displaying posters or distributing brochures at the point of sale or use. This requirement comes into effect immediately for all new importers of these products through the interim policies. Importers who have already submitted a form must meet established requirements by June 8, 2020.



- Canadian manufacturers of hand and body cleansers and soaps are not included in these interim policies as they are able to provide bilingual labelling and safety data sheets (if applicable) for their products. As a result, Canadian companies that manufacture these products must continue to manufacture products with labels and safety data sheets (if applicable) in both official languages.
- In addition, Health Canada is making efforts to share information on these products with Canadians in both official languages through its safety alerts and notices database as well as through social media. Canadians are also encouraged to visit the Health Canada website, which provides links to information in both official languages on industry websites.
- Health Canada will use a risk-based approach to address reports of non-compliance.
- Health Canada will remove these interim policies as soon as the normal supply of these products becomes more stable.

Border measures

- The Government of Canada is continuing to implement border measures to limit the introduction and spread of COVID-19.
- The Government of Canada has multiple systems in place to prepare for, detect and limit the spread of infectious diseases, including COVID-19, in Canada.
- The Canada Border Services Agency (CBSA) is working closely with the Public Health Agency of Canada to help prevent the spread of the 2019 novel coronavirus at all of Canada's international ports of entry.
- If additional measures are required at the Canadian border to prevent the spread of serious communicable diseases in Canada, the Public Health Agency of Canada must notify the CBSA.
- Canadian citizens, permanent residents and persons registered under the *Indian Act* may continue to enter Canada by right and are subject to entry controls implemented to counter COVID-19.
- To protect Canadians and reduce the burden that non-essential travellers could place on our healthcare system and its front-line workers, the CBSA has implemented new travel restrictions at all ports of entry and for all modes of transportation, including land, sea, air and rail.
- A travel ban is currently in effect for most people entering Canada,* including:
 - all foreign nationals entering Canada by air;
 - all travellers arriving from the United States, by whatever means, for tourism or pleasure;
 - foreign nationals entering Canada from a foreign country other than the United States, with some exceptions, including temporary foreign workers and international students; and



- foreign nationals arriving from the United States who exhibit signs or symptoms of respiratory illness.

**There are exemptions to the travel ban, which are described in the orders in council.*

- Canada and the United States have also reached a reciprocal agreement to turn away all asylum seekers. Exceptions may be made in special circumstances, such as in the case of an unaccompanied minor.
- All people entering Canada—regardless of their country of origin or mode of entry—are REQUIRED to self-isolate for 14 days.
- There are exemptions to mandatory self-isolation to ensure the continuity of critical infrastructure, essential services and economic supply chains between Canada and the United States. Workers who are essential for our economy and infrastructure will be allowed into Canada, including truck drivers, firefighters and medical workers.
- Cross-border supply chains are essential to keep goods (including food and medical supplies) moving for all Canadians. The CBSA is therefore working with other federal partners to share information with commercial stakeholders and reassure them that trade is not being restricted.

ArriveCAN mobile application

- Under the emergency orders under the *Quarantine Act*, anyone entering Canada must quarantine (self-isolate) for 14 days.
- To ensure compliance with the order, all travellers entering Canada are required, upon arrival, to provide the Government of Canada with essential contact information, report any symptoms and confirm that they have prepared a quarantine plan.
- Until now, this information has been collected on a paper or web-based form when travellers arrive on Canadian soil.
- The ArriveCAN application, launched during the week of April 29, is an alternative to the paper form that will expedite the entry process at the Canadian border. Travellers are encouraged to use it.
- With ArriveCAN, travellers can quickly, easily and safely enter their information into a digital version of the coronavirus form upon arrival in Canada.
- Electronic declarations enhance the protection of travellers and border and quarantine officers by reducing physical contact.
- The application inputs exactly the same information as requested on the paper and web version of the coronavirus form.
- Travellers are now being asked for additional information, such as flight or border-crossing data, whether they have COVID-19 symptoms, and whether they have a quarantine plan.



- The personal information collected on the paper or web form or on the application by border and quarantine officers will enable the Public Health Agency of Canada to verify that travellers are complying with the Quarantine Act. The information will be shared with provinces and territories, as well as law enforcement agencies, to ensure compliance with the order.
- Protecting Canadians' personal information is a priority for the Government of Canada, and any tool for collecting personal information is subject to a rigorous review of privacy issues.
- This personal information is used to administer and enforce *OIC 10 - Minimizing the Risk of Exposure to COVID-19 in Canada Order (Mandatory Isolation) No. 2*, issued under the Quarantine Act or the Department of Health Act. Personal information may be used or disclosed for the following purposes: (1) to monitor or verify compliance with the mandatory isolation order and sanction violations, (2) to inform travellers to help them comply with the mandatory isolation order, and (3) to support public health monitoring activities.
- Under the *Privacy Act* and Regulations, the CBSA and PHAC must retain the personal information entrusted to them. Personal information used for administrative purposes, such as information collected through the application, is retained for at least two years after the date of its last use.
- The ArriveCAN application supports Canada's digital strategy on service delivery to Canadians and government greening efforts.

Non-essential travel restriction (Canada-USA)

- On March 18, 2020, the governments of Canada and the United States announced that both countries would be implementing collaborative and reciprocal measures to suspend non-essential travel along the Canada-US border in response to the spread of COVID-19.
- As of March 21, a temporary 30-day restriction on all non-essential travel at the Canada-US border came into effect. These temporary measures are effective as of Saturday, March 21, at 12:01 am EDT for an initial period of 30 days, renewable.
- All travel of an optional or discretionary nature, including tourism and recreation, is covered by these measures. Travel by healthy people who have to cross the border to go to work or for other essential purposes, such as medical care, will continue.
- The following are some examples of essential travel purposes:
 - crossing the border to work or study;
 - economic services and supply chains;
 - support for critical infrastructure;
 - health (immediate medical care), protection and safety;
 - purchases of essential goods such as medications or goods required for the health and safety of an individual or family;
 - other activities deemed essential at the discretion of the border services officer.



- Canadian citizens, permanent residents and persons registered under the *Indian Act* may enter the country by right. They will receive a flyer from the Public Health Agency of Canada advising travellers that they are required to self-isolate for 14 days from the day they enter Canada.

Canada will also implement measures at airports to:

- strengthen health screening;
- increase presence to conduct further health screening and public outreach;
- increase signage throughout the arrivals area to encourage travellers to follow the latest public health guidance;
- prevent all travellers who have COVID-19 symptoms, regardless of their citizenship, from boarding international flights to Canada;
 - Airlines will conduct a basic health assessment of all air travellers based on guidance from the Public Health Agency of Canada.
- This includes making information readily available and raising awareness among **all** travellers about what they should do if they develop symptoms of COVID-19. In addition, we continue to advise travellers coming from any location to self-monitor for signs and symptoms of COVID-19.
- We continue to monitor and assess the global risk of COVID-19. To keep pace with the evolving situation, our response measures are being adjusted and refined in accordance with the global risk assessment. This includes updating our travel health advisories with increased risk levels.

Government of Alberta's enhanced screening measures at border crossings and ports of entry

- All levels of government are working closely to harmonize public health measures to address the COVID-19 pandemic, where possible.
- Public health authorities are carefully monitoring the outbreak in Canada to see when there will be a stable and ongoing slowdown, while carefully assessing approaches to ease public health restrictions when and where possible.
- The epidemiological characteristics of COVID-19 vary between and within provinces and territories. As a result, public health measures will vary by province and territory and may even vary by region within a province or territory.
- The Government of Canada is aware of other health control measures implemented by Alberta at ports of entry, which include temperature testing.
- Federal officials responsible for screening travellers entering Canada continue to follow guidelines requiring them to ask people to report any symptoms related to COVID-19.



- Every province and territory in Canada is reviewing different situations and developing risk-based approaches and evaluations, depending on what is happening within its borders.
- The Government of Canada is continuing to work with its provincial, territorial and international partners to ensure that its response to the COVID-19 pandemic is based on assessments of the situation and the most recent scientific data available.
- We will continue to work closely with the provinces and territories to facilitate the implementation of mitigation strategies to prevent the introduction and spread of COVID-19 from ports of entry across the country.

OIC 2 – Mandatory isolation

- Ensuring the health and safety of Canadians is the Government of Canada's top priority. We are taking unprecedented action to combat the COVID-19 epidemic. One of these measures is to continually assess risks in order to adapt our response accordingly.
- The Government of Canada's Emergency Order under the *Quarantine Act* already requires persons entering Canada—whether by air, sea or land—to isolate for 14 days if they have symptoms of COVID-19, or to quarantine (self-isolate) themselves for 14 days if they are asymptomatic to limit the spread of the disease.
- An updated order in council will be issued to clarify terminology. It is based on new scientific data showing that asymptomatic people can transmit the virus.
- According to the updated order, travellers arriving in Canada, regardless of whether they are symptomatic, cannot isolate or quarantine (as the case may be) in a place where they would be in contact with vulnerable people, such as adults 65 years of age and older and people with a pre-existing medical condition.
- In addition, all travellers must confirm that they can isolate or quarantine themselves in an appropriate location where they will have access to basic necessities, such as food and medicine. Travellers will need to make arrangements for their isolation or quarantine location before arriving in Canada. Those who do not have an appropriate place to isolate or quarantine must visit a quarantine facility designated by the Chief Public Health Officer of Canada. These are new criteria for asymptomatic travellers.
- Compliance with the Order is mandatory for anyone arriving in Canada on or after April 15, 2020.
- If a symptomatic traveller does not have private transportation or an appropriate place to isolate, they will have to self-isolate for 14 days at a location designated by the Chief Public Health Officer of Canada.
- Asymptomatic travellers may still infect other people and must wear a non-medical mask or face covering (i.e., constructed to completely cover the nose and mouth without gaping and secured to the head by ties or ear loops) while travelling to the destination where they will have to quarantine (self-isolate) for 14 days and follow instructions of the



local health authority indicated by the border or quarantine officer if they develop signs of symptoms of COVID-19. A mask is provided if they do not have one.

- Symptomatic travellers are also required to wear a non-medical mask or covering while travelling to their final destination where they will need to isolate, or when they cannot maintain a physical distance of two metres from others.
- Asymptomatic travellers who do not have a suitable quarantine (self-isolation) location are subject to the same requirements as symptomatic travellers and must travel to a location designated by the Chief Public Health Officer of Canada.
- [HYPERLINK "https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/latest-travel-health-advice.html"](https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/latest-travel-health-advice.html). Certain persons who cross the border regularly to ensure the continued flow of goods and essential services, or individuals who receive or provide other essential services to Canadians, are exempt from having to quarantine (self-isolate), as long as they are asymptomatic (do not have symptoms of COVID-19).
- These exempted persons must wear a non-medical mask or face covering while travelling to their final destination. Upon arriving at their final destination, exempt persons must: practise physical distancing; plan to wear a mask or any other face covering when maintaining a physical distance of two metres from others is not possible; monitor their symptoms; remain inside their residence as much as possible; and follow the instructions of the local public health authority if they feel sick.
- We based that decision on the most recent scientific data available and the discussions we have had with the provinces and territories.
- These additional measures will help to contain the epidemic and prevent further spread of COVID-19 in Canada.
- They will also help protect older people and those with pre-existing health conditions who are at greater risk of developing serious COVID-19 complications.
- The Government of Canada will continue to work closely with local, provincial, territorial and international partners to limit the introduction of COVID-19.

Law enforcement

- The Government of Canada will conduct spot checks to ensure compliance.
- Penalties for failure to comply with this Order include a maximum fine of \$750,000 and/or six months in prison.
- Any person who creates a threat of imminent death or serious injury to another person through a wilful or negligent offence under the *Quarantine Act* is subject to a fine of up to \$1,000,000 and/or up to three years in prison.



- Amendments are being made to offences specific to the *Quarantine Act* under the *Contraventions Regulations*. It will be stipulated that such offences are subject to fines.
- Fines may vary between \$75 and \$1,000. Young people will be fined \$100.

Designated quarantine facilities

- The Chief Public Health Officer has designated quarantine facilities (such as hotels) across the country, including in Vancouver, Calgary, Toronto and Montreal.
- Under section 7 of the *Quarantine Act*, the Chief Public Health Officer may designate any place in Canada as a quarantine facility to protect the health of Canadians if he or she considers it necessary.

OIC 11 – Minimizing the Risk of Exposure to COVID-19 in Canada Order (Prohibition of Entry into Canada from the United States)

- Foreign nationals who may enter Canada include temporary foreign workers, some students, people delivering emergency medical supplies and certain categories of asylum seekers, including those who arrive in Canada at a land port of entry and can make a claim under the Safe Third Country Agreement (STCA).
- All foreign nationals authorized to enter Canada must meet the requirements of emergency orders made under the *Quarantine Act*, including mandatory quarantine (self-isolation) for 14 days after entry into Canada, unless they have been granted a specific exemption. They must also comply with provincial and territorial emergency orders and local health guidance.
- Foreign nationals generally cannot enter Canada for optional travel or if they have symptoms of COVID-19.
- Temporary foreign workers are needed to maintain our food industry and supplies so that all Canadians have access to food and essential products during this pandemic.
- The *Minimizing the Risk of Exposure to COVID-19 in Canada Order (Prohibition of Entry into Canada from the United States)* is in effect from April 22 to May 21, 2020.
- Amendments to this order will allow Canada to continue to meet its international obligations with respect to refugees and asylum seekers.
- These measures will help prevent the spread of disease in Canada, while ensuring that essential travel and the supply chain are not interrupted.

About foreign nationals wanting to make a refugee claim

- Foreign nationals entering Canada between official ports of entry to make a refugee claim will continue to be sent back to the United States, a designated safe third country.



- The entry ban will not apply to foreign nationals from the United States who arrive in Canada at an official land port of entry and **meet the criteria** for an exemption from the STCA, regardless of whether or not they have symptoms. They will then be able to make a refugee claim.
- Applicants who are unable to comply with Canada's quarantine/isolation requirement will be referred to a federally managed facility.

About enforcement

- Failure to comply with this Order is an offence under the *Quarantine Act*.
- Maximum penalties include a fine of up to \$750,000 and/or six months in prison. In addition, anyone who intentionally or recklessly violates the Act or regulations by exposing another person to imminent danger of death or serious injury could be subject to a fine of up to \$1,000,000 and/or up to three years in prison.
- In addition, amendments have been made to the Contraventions Regulations, under which failure to comply with specific requirements under the *Quarantine Act* constitutes a ticketable offence.
- Tickets include a fine ranging from \$275 to \$1,000. The fine for young offenders is \$100.

About essential travel to Canada by foreign nationals via the United States

- Essential travel will continue without restrictions. Both governments recognize the importance of preserving vital supply chains between the two countries. These supply chains ensure that people on both sides of the border have access to food, fuel and critical medicine.

If pressed:

The foreign nationals listed below may enter Canada:

- persons arriving in Canada at an official land port of entry eligible to make a refugee claim under the Safe Third Country Agreement;
- persons with status under the *Indian Act*;
- protected persons.

In addition, provided they are trying to enter Canada for non-optional and non-discretionary purposes and do not exhibit COVID-19 symptoms, foreign nationals in the following categories may also enter Canada.

Foreign nationals in these categories must still prove they are coming to Canada for essential reasons and must be asymptomatic.



- persons with a valid work permit or application that was approved under the *Immigration and Refugee Protection Act*;
- persons with a valid study permit who received approval under the *Immigration and Refugee Protection Act* before March 18, 2020;
- persons permitted to work in Canada as a student in a health field under subsection 186(p) of the *Immigration and Refugee Protection Regulations*;
- persons whose application for permanent residence was approved under the *Immigration and Refugee Protection Act* before March 18, 2020;
- immediate family members of Canadian citizens or of a permanent resident;
- persons authorized to enter Canada by consular services for purposes of reuniting with immediate family;
- conveyance crews (e.g., air, boat, etc.) or workers on marine vessels;
- diplomats;
- persons invited by Canada to assist with Canada's COVID-19 response;
- persons on military flights or other Canadian-military support persons;
- protected persons;
- French citizens who reside in Saint-Pierre-et-Miquelon and have been only in Saint-Pierre-et-Miquelon, the United States or Canada during the period of 14 days before the day on which they arrived in Canada;
- those whose presence in Canada is in the national interest as it pertains to public safety and emergency preparedness;
- persons providing essential services or who are essential for the movement of goods such as truck drivers and marine carriers;
- emergency workers;
- licensed healthcare professionals with proof of employment in Canada;
- persons who enter Canada for the purpose of delivering, maintaining or repairing medically-necessary equipment or devices;
- persons who enter Canada for the purpose of making medical deliveries of cells, blood and blood products, tissues, organs or other human body parts that are required for patient care in Canada;
- those who, in the opinion of the Chief Public Health Officer of Canada, do not pose a risk of significant harm to public health.

Screening of Canadian travellers returning to Canada

- As part of Canada's enhanced border measures to contain further introduction and spread of COVID-19, airlines will conduct a health check of all travellers before boarding a flight to Canada.
- The health check is based on guidance from the Public Health Agency of Canada, in line with the World Health Organization's recommendations.
- Individuals will be screened for the following symptoms by airline personnel:
 - fever



- cough
 - difficulty breathing
- If airline personnel observe a traveller with symptoms or if the passenger answers yes to any of the questions on the health check, the traveller will be refused boarding for a period of 14 days or until he/she provides a medical certificate confirming that his/her symptoms are not related to the COVID-19 virus.
- Further instructions and advice will be provided to travellers who are denied boarding advising them to follow the guidance of local public health authorities. These travellers will also be directed to the appropriate consular services.
- These measures will help protect the health of all Canadians.

About the health check:

- Airline staff will be advised to maintain distance between themselves and travellers at all times, and to encourage travellers to do so as well.
- Airline staff will observe if travellers are showing symptoms of COVID-19 and will ask every traveller if he/she has a fever, cough or difficulty breathing.
- They will also ask if travellers have been denied boarding in the past 14 days because of a medical reason related to COVID-19.
- However, there is allowance for travellers to provide a medical certificate certifying that any symptoms they have are not related to COVID-19.
- These measures are intended for travellers, not flight crewmembers.

About enforcement:

- Any traveller who provides false or misleading answers about their health during screening could be subject to penalty of up to \$5,000 under the *Aeronautics Act*.

When you arrive in Canada

- All travellers assessed in the air to be symptomatic upon arrival at a Canadian airport are met and escorted by border officers away from other travellers to be attended to by public health personnel.
- All persons arriving in Canada at an air, land, marine or rail border will be asked about the purpose of their visit and whether they are feeling ill or unwell. The border services officer may ask additional questions to make their determination.



- CBSA officers will observe for signs of illness and refer any traveller suspected of being ill for a further medical assessment by the Public Health Agency of Canada, regardless of how travellers reply to screening questions.
- All travellers—no matter their country of origin or mode of entry—are assessed upon arrival to Canada. Entry screening is an important public health tool among others during periods of uncertainty and part of a multilayered government response strategy.
- CBSA officers will remain vigilant, and are highly trained to identify travellers seeking entry into Canada who may pose a health or safety risk.
- CBSA officers will provide symptomatic travellers with surgical masks and instructions on how to use them.
- These measures complement routine traveller screening procedures already in place in order to prepare for, detect and respond to the spread of serious infectious diseases into and within Canada.
- The following questions are now being asked by all border services officers at the primary inspection line at all air, land, ferry and rail ports of entry:
 - “Do you currently have a cough, difficulty breathing, or feel you have a fever?”
 - “I/we acknowledge that I/we must self-isolate for 14 days to prevent the potential spread of COVID-19.”
- CBSA officers not only query travellers on the state of their health, but also are trained to observe visible signs of illness and will refer any traveller who they suspect of being ill, regardless of how the traveller answered the health screening question.
- Travellers presenting symptoms consistent with COVID-19 will be referred to a PHAC staff member for further assessment.
- These travellers are provided with a kit that includes a mask and instructions.
- All travellers entering Canada are given a Public Health Agency of Canada handout with instructions to self-isolate for 14 days. Symptomatic people are given a red pamphlet, and asymptomatic people are given a green pamphlet.

Travel health notices

- The Public Health Agency of Canada issues travel health notices to inform Canadian travellers of an increased or unexpected potential health risk in a country or region outside of Canada.
- The travel health notices also provide information on preventative measures travellers can take to help reduce these risks.
- The following are considered when adding countries or areas to the COVID-19 Affected Areas List:



- multiple instances of spread have occurred at the community level (multiple clusters—not in definable settings such as a household);
 - evidence of geographical spread; and
 - whether cases can be linked to an exposure (e.g. to another case or because of travel to another country with ongoing transmission of COVID-19).
- The COVID-19 Affected Areas List on the [Canada.ca/coronavirus](https://www.canada.ca/coronavirus) website includes all countries with Travel Health Notices related to COVID-19.

Cottage season and COVID-19

- Public health recommendations continue to change, but this is because the situation is changing rapidly and we are learning new things about COVID-19 every day.
- Based on the available evidence, we are asking Canadians to avoid non-essential travel to limit the spread of COVID-19, especially in small and rural communities where health systems could be easily overwhelmed.
- For that reason, we are asking everyone not to go to a cottage, campground or vacation property during the COVID-19 pandemic.
 - Unless the property is your main residence or is in the same locality as your main residence, you should wait for the situation in Canada to change before going there.
 - If you get sick, you may not be able to get the help you need. If you stop on the way to get gas or buy groceries, your risk of exposure increases and, even if you are asymptomatic, you could spread the virus to others.
 - An influx of people into a small community can also threaten the supply of food and other essential supplies for residents.
 - If you have to go to your cottage for insurance reasons, you should make one roundtrip only and then proceed directly home.
 - All Canadians must continue to do their utmost to flatten the curve and ensure the health of our friends and families. That includes staying home.