



EVERGREEN MEDIA LINES

Novel 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 determined that a novel coronavirus (referred to as COVID-19) was 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 senior officials and media relations to respond to requests for information.

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COVID-19 Key Messages

- Our top priority is the health and safety of Canadians.
- On March 11, 2020, the World Health Organization (WHO) assessed COVID-19 as a pandemic.
- The assessment by the WHO was not unexpected.
- In Canada, our health care system is prepared for such a situation.
- Canada has multiple systems activated and in place to prepare for, prevent, detect, and respond to the spread of the 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 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.



- This is a critical time with global efforts focused on containment of the outbreak and prevention of further spread.
- Everyone has to contribute to flattening the epidemic curve. We must modify our behaviours, including personal hygiene measures like frequent handwashing, covering our mouths when we cough, and practising physical distancing.
- This is an evolving situation and we will provide Canadians with new information as it becomes available.
- For the latest and most up-to-date information, visit canada.ca/coronavirus or call the new toll-free phone line (1-833-784-4397) to get answers to 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 health care system already that could impact health care 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 people 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 number-one priority is the health and safety of Canadians. Our mandate on the matter of human exposure to radio frequency electromagnetic energy is to conduct research on possible health effects, review the relevant scientific literature, and update common exposure guidelines in [Safety Code 6](#).



- Safety Code 6, which covers the frequency range used by 5G technology, meets or exceeds internationally accepted standards and is based on a thorough evaluation of the scientific literature. The health of Canadians is protected when the exposure limits set out in Safety Code 6 are not exceeded.
- There is no scientific basis for the recent claim linking 5G networks 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 the transmission of COVID-19 is available at canada.ca/coronavirus.

Foundations for Living with COVID-19

- We recognize that we will continue to see the transmission of COVID-19 in the community as things start opening up again. That is why we need to move slowly, cautiously, as we live through the next phases of this pandemic, until such time as we have a vaccine.
- Most people infected with COVID experience mild symptoms. During this reopening phase, we will do our utmost to protect those at most risk of severe illness due the virus. Our goal is to minimize overall illness and death from COVID and non COVID related illnesses. There are key steps all Canadians can take in this.
- Continue to practice the critical measures to limit transmission: physical distancing, frequent hand-washing, and staying home if you're sick.
- If you suspect you have illness due to COVID, get tested. This will help us identify any outbreaks in the community and put in place measures to prevent further spread.
- By opening up health services for all conditions again, and allowing for some social and economic activity, we hope to reduce the overall burden of disease and illness in the community, COVID and non-COVID related.
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- People with chronic disease, people over the age of 60 and anyone at higher risk should maintain a high-level of vigilance. We need to support these most-vulnerable members of the community to continue to stay home as much as possible, avoid situations where non-home contacts might be and/or where adequate physical distancing is not possible.
- Remember that each of us can still infect others, even if we have no symptoms. It will be critical to continue practicing fundamental infection prevention measures, as well as to ensure that anyone with symptoms contacts goes to a testing centre right away.
- If you are experiencing even mild symptoms, stay home from work and other community settings until you are better. Employers and employees alike need to support each other on this front so that we can track the rate of transmission and keep it under control.



Remember that the science tells us it's possible to be spreading the virus before, during and even without any symptoms.

- We know many Canadians want to mark important ceremonies, funerals and other important rites and rituals. It will be important to follow your local guidance on number of participants, infection prevention measures and associated events.

Keeping Canadians Informed

COVID-19 Situational Dashboard

- On April 4, the Government of Canada launched a new COVID-19 situational dashboard for Canada.
- The situation in Canada is changing rapidly and we are learning more about COVID-19 every day. Canadians need easy access to digital tools and resources to help them get the information they need about COVID-19.
- This dashboard provides Canadians and researchers with the latest COVID-19 data in a user-friendly format online so that they can better understand how the outbreak of COVID-19 is evolving in Canada.
- It provides an interactive overview of number of cases and deaths in Canada, including information on affected populations by age, sex and on how the outbreak is progressing over time.
- This tool does not provide any modelling or forecasting of what may occur in the coming weeks and months.
- New data is released daily by provincial and territorial officials. While the dashboard is continuously updated to reflect these new data, if there are any differences between the national case count and testing numbers reported by provincial and territorial public health officials, the provincial and territorial data should be considered the most up-to-date.
- The Government of Canada will continue to work collaboratively with partners at all levels of government to respond to COVID-19 and ensure that cases continue to be rapidly identified and managed in order to protect the health of Canadians.

Virtual Health Tools

- More than ever, Canadians need tools and resources to support their health and wellbeing, including easily accessible information, mental health support, alerts and screening tools.



- The announcement of \$240.5 million on May 3 will help Canadians access credible health information and the health services they need through virtual approaches and tools.
- Virtual tools enable Canadians to engage safely with their regular health providers via phone, text or video conference. They also enable patients to continue to access specialist services during these uncertain times.
- Improving access to virtual tools will also help Canadians to access trustworthy information, including via the Canada COVID-19 mobile app, so that they can understand and track their symptoms and learn more about how to stay safe during the pandemic.
- We recognize that Canadians are coping with the effects of COVID-19 and are facing different degrees of stress. This investment will support Wellness Together Canada, a new free online portal that offers virtual mental health, wellbeing and substance use supports.
- The Government of Canada is working closely with provinces and territories, innovators, and others to support rapid expansion of virtual care services and make these tools widely available to Canadians and their families.
- Supporting the expansion of virtual care and providing digital solutions to Canadians will help reduce pressures on health systems and provide Canadians with needed health services and authoritative information in a safe and secure manner.
- Our government recognizes that these are unprecedented times. We continue to work with the provinces and territories, innovators and other partners to take action and support Canadians.
- Enabling Canadians to access credible information and needed health services virtually and securely is key to the government's work to keep Canadians safe and informed.

The Canada COVID-19 App

- Canadians need easy access to digital tools and resources to help them get the information they need about COVID-19.
- The Canada COVID-19 mobile application allows users to access trusted health resources and track COVID-19 symptoms daily.
- The latest updates about COVID-19 and how Canada is responding are available in real-time through the app with recommendations and resources that are personalized.
- This app builds on what provinces and territories are doing and provides another valuable resource for Canadians.
- Health Canada is continuing to work closely with provinces and territories, vendors and stakeholders to make additional tools widely available to Canadians and their families.



- The Canada COVID-19 app is a central resource to be used for accessing trusted, evidence-based information about the COVID-19 pandemic across Canada. It does not track personal information, nor is it a surveillance tool.
- The protection of Canadians information is a priority for the Government of Canada and any tool used to collect health care information would need to undergo a rigorous privacy assessment.

Federal Funding

- On March 11, 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 COVID-19 Research

- Our top priority is the health and safety of Canadians.
- Canada is home to some of the world's most qualified and eminent researchers and they are working hard to support the international response to the current pandemic.
- Every day, we learn more about COVID-19 by keeping up to date on new scientific data being released at a rapid rate.



- To slow and ultimately stop the spread of COVID-19, we need to mobilize Canada's scientific and research community to advance research and technology development.
- That is why in March 2020, the Government of Canada announced more than \$1 billion for a whole-of-government COVID-19 Response Fund, of which \$275 million will be used to improve our capacity to test antivirals, develop vaccines and fund clinical trials.
- Through the Canadian Institutes of Health Research's (CIHR) Rapid Response Research Program, the Government of Canada has invested \$54.2 million to support 99 research teams across the country. These teams are working to develop and put in place measures to rapidly detect, control and reduce the spread of COVID-19. Their activities include vaccine research and the development of strategies against misinformation, stigma and fear.
- In addition to the CIHR, funding for the Rapid Response Research Initiative comes from 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 also made contributions.
- The report released today outlines critical and innovative research being conducted across Canada, including solutions and tools being developed to combat and treat COVID-19.
- This makes it possible to leverage the capacity and expertise of Government of Canada research institutions and make strategic investments to support and enhance the research capabilities of Canadian academia and industry.
- Many of the funded projects involve collaborations and partnerships with academia, government departments and industry in other countries.
- We are working together to turn valuable research findings and results into measures that will save lives across Canada.

Project Examples

- The Government of Canada is investing \$150 million to support federal public health measures such as enhanced monitoring, increased testing at the Public Health Agency of Canada's (PHAC) National Microbiology Laboratory (NML), and ongoing support for preparedness in First Nations and Inuit communities.
- This important work will support the development of diagnostic tests across Canada, as well as research, testing, and implementation of new diagnostic tests and methods. It will also support the coordination of supply and distribution of reagents and laboratory supplies with provincial and territorial authorities to increase testing capacity across the country.
- PHAC's NML is improving its understanding of COVID-19's epidemiology across Canada, which will help us improve our response. This important work includes performing blood tests to determine the immune status of Canadian populations and developing methods to perform them, as well as modelling work to evaluate various projections that will guide measures to minimize the impact of the virus.
- The National Research Council's (NRC) Pandemic Response Challenge Program will bring together Canada's top researchers from government,



academia and the private sector to develop medical countermeasures to combat COVID-19. Program members will work with Canadian health experts to identify the most pressing needs. They will focus on tools to rapidly detect and diagnose the virus, drugs and vaccines to treat and prevent disease, and digital health solutions to help manage Canada's pandemic response.

Vaccine Development

- There are currently no vaccines to protect against COVID-19. Research supporting the development of COVID-19 vaccines is in various stages around the world, including in Canada.
- We are taking appropriate action to secure the availability of a vaccine or drug to prevent or treat COVID-19 to Canadians, once it is developed.
- This includes investments to:
 - Medicago (Quebec City): for pre-clinical and clinical testing of a plant-based, virus-like particle vaccine, with expansion of manufacturing capacity;
 - The University of Saskatchewan's Vaccine and Infectious Disease Organization – International Vaccine Centre's (VIDO-InterVac): to strengthen VIDO-InterVac's existing expertise on coronavirus research and upgrade its manufacturing facility to meet good manufacturing practice (GMP) standards; to support this effort, the NML and the Canadian Food Inspection Agency (CFIA) are collaborating with the University of Saskatchewan's VIDO-InterVac and with the National Research Council to develop and test vaccine candidates against COVID-19; and,
 - National Research Council (NRC): to upgrade the Human Health Therapeutics Research Centre in Montreal to meet GMP standards. This biomanufacturing facility will be available to produce clinical trial lots as soon as vaccine candidates become available, beginning as early as late spring 2020.
- Health Canada is also working with vaccine developers and manufacturers to help expedite the assessment of vaccines to prevent COVID-19. This includes supporting clinical trials and preparing for expedited reviews, once they are developed.
- The Government of Canada will continue working with international health product regulators—including the European Medicines Agency, the United States Food and Drug Administration, Australia, Canada, Singapore and Switzerland partners, and other organizations such as the International Coalition of Medicines Regulatory Authorities and the World Health Organization (WHO)—to support and coordinate rapid regulatory responses for potential vaccines and other medical countermeasures.
- The NRC is also working with a number of companies in the development of vaccine candidates.



- Canada is participating in the SOLIDARITY trial—a multinational trial coordinated by the WHO that is testing multiple potential drugs for the fight against COVID-19. The Canadian arm of this study has already begun enrolling patients. This global trial plans to recruit up to 20 sites across Canada.
- This unprecedented mega-trial to test potential treatments for COVID-19 is truly a new model for global collaboration, with the goal of being able to quickly identify treatments that could reduce the toll of COVID-19.
- ***Working with industry to advance research and bring innovative products to market***
 - The Government of Canada is also working with industry to support research and manufacturing capabilities through Innovation, Science and Economic Development Canada and the National Research Council of Canada.
 - This includes funding to develop patient monitoring systems and home diagnostic kits.
 - The Government of Canada is also providing funding to help Canadian small and medium-sized businesses to increase their capacity to innovate and take ideas to market, including manufacturing personal protective equipment and sanitation products.

Cooperation with the International Research Community

- The Government of Canada is also connected to the global research effort to respond to COVID-19, working with international partners, including the WHO through its Collaborating Centres and Blueprint R&D Initiative, to coordinate efforts and share research data and findings to collectively build knowledge around the world.
- Some examples include collaboration between the Canadian Food Inspection Agency (CFIA), Defence Research and Development Canada (DRDC) and PHAC to establish the Biosafety Level 4 Zoonotic Disease Network (BSL4ZNet).
- This network consists of 15 government organizations from five countries (Canada, the US, the UK, Germany and Australia), each with a responsibility over the regulation of human, animal and zoonotic pathogens with pandemic potential.
- The BSL4Znet has been conducting COVID-19 emergency meetings since early January with international partners to facilitate the sharing of scientific information and research capacity needs to enhance global efforts to respond to the spread of COVID-19.
- PHAC and DRDC are also members of the Medical Countermeasures Consortium, in partnership with the Department of National Defence, where they engage with the US, the UK and Australian governments to promote collaboration in research, development and acquisition.



- CMA, NRC, PHAC and CFIA regularly engage with the Coalition for Epidemic Preparedness and Innovation (CEPI), which is a key international funding mechanism for vaccine development. Canada has provided \$54 million to CEPI, which is leading efforts to have COVID-19 vaccine candidates ready for clinical trials by late spring 2020.
- CIHR's response to the COVID-19 pandemic is being informed by international partners, including the WHO and the Global Research Collaboration for Infectious Disease Preparedness (GloPID-R).
- CIHR, in partnership with PHAC, is leveraging the existing Canadian Immunization Research Network (CIRN) to address the COVID-19 pandemic. CIRN has received \$1 million through a direct grant to gather data related to COVID-19 symptoms, as well as possible treatments and risk factors, which will inform Canada's public health response to COVID-19.
- 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 the global supply.

Mental Health Support for Canadians

Wellness Together Canada

- Canadians need easy access to digital tools and resources to get the information they need during the COVID-19 pandemic.
- During these challenging times, it is essential that Canadians have access to effective tools to support their mental health and wellbeing, to obtain credible and reliable information about mental health and substance use, and to access services.
- That is why the Government of Canada launched Wellness Together Canada, a portal for mental health and substance use support. It 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 with long histories of providing high-quality substance abuse and mental health care to Canadians, 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 psychosocial information and support services and is available at Canada.ca/coronavirus and via the Canada COVID-19 application.
- Wellness Together Canada, the portal for mental health and substance use support, was designed to support services already offered by the provinces and territories.



- Health Canada is working closely with the provinces and territories, providers, and stakeholders to ensure that Canadians and their families have easy access to additional tools.

Funding to Kids Help Phone in response to increased demand for child and youth mental health services associated with COVID-19

- The COVID-19 pandemic is new and unexpected. It is having a major impact on Canadians, including children and youth. Supporting the mental health and well-being of Canadians during the COVID-19 pandemic is a priority for the Government of Canada.
- With school closures and reduced access to community resources, Kids Help Phone is experiencing increased demand for its confidential 24/7 crises support services, which are available online, by telephone, and through text messaging.
- In response, the Government of Canada is providing \$7.5 million to Kids Help Phone to meet this increased demand and provide young people with the mental health support they need during this difficult time.
- This additional support will provide English and French e-mental health services to children and youth across Canada who are feeling the social and financial impacts of the COVID-19 pandemic. It will ensure that vulnerable Canadian youth and children can find the help they need when they need it most.
- This investment is an important first step in connecting Canadians to the mental health resources they need across the country.

Vaccination Schedules during COVID-19

- Vaccination is one of the most effective ways to prevent the spread of infectious diseases.
- Although public health is a shared responsibility in Canada, issues related to vaccination programs fall under provincial and territorial jurisdiction.
- Canadians should contact their health care provider or public health authorities to find out if there have been any changes to their recommended vaccination schedule or to that of their family members due to the COVID-19 pandemic.
- In the context of the current pandemic, it is normal to be concerned about going to routine medical and clinic appointments, including those for vaccinations.
- Canadians should consult their health care provider or public health authorities to:



- find out whether there have been any changes to their recommended vaccination schedule or to that of their family members due to the COVID-19 pandemic;
 - determine when they should visit;
 - understand the measures put in place for the safe delivery of immunization services during the crisis.
- Health care providers have taken precautions to prevent the spread of infection during consultations. These measures include:
 - screening patients for symptoms or other risk factors before the appointment and upon arrival;
 - installing posters in the office;
 - promoting the use of an alcohol-based or alcohol-free hand sanitizer approved by Health Canada to patients;
 - providing masks when patients arrive;
 - leaving time between appointments to promote physical distancing in the office.

Tips

Additional Tips for Persons with Disabilities in Canada

- We know that some groups, including persons with disabilities, are much more affected than others by the COVID-19 pandemic.
- The Public Health Agency of Canada (PHAC), in collaboration with the COVID-19 Disability Advisory Group (CDAG), has identified considerations and accommodations for persons with disabilities and for people who provide care and support to them, and will incorporate these considerations and accommodations into the current COVID-19 guidelines.
- This document complements other important guidance documents, including Interim Guidance for Infection Prevention and Control of COVID-19 in Long-Term Care Facilities and Interim Guidance for Prevention and Control of COVID-19 in Home Care Settings. These documents can be adapted to environments where persons with disabilities live.
- The document also presents elements for consideration by caregivers and COVID-19 assessment centres in adapting their approaches during the pandemic to facilitate access to their services for persons with disabilities.

If pressed on the vulnerability of persons with disabilities to 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 trying to obtain information, social services, and health care. The need to isolate oneself and maintain physical distancing can also create other difficulties.



Infection Prevention and Control for Acute Care Facilities

- Protecting Canada's healthcare workers from COVID-19 infection is essential. These care providers are at the frontline of the pandemic and are looking after some of the most vulnerable Canadians.
- The Public Health Agency of Canada's (PHAC) infection prevention and control guidance complements provincial and territorial public health policies and procedures.
- PHAC's National Advisory Committee on Infection Prevention and Control, comprised of experts in this field and front-line care providers, worked with PHAC to develop this guidance.
- The F/P/T Special Advisory Committee on COVID-19 has endorsed the guidance and the technical brief.
- PHAC guidance is not mandatory. It should be read in conjunction with relevant provincial, territorial, and local legislation, regulations and policies.

Updated interim guidance on infection prevention and control in acute healthcare settings

- This guidance was updated in line with our approach to keep guidance current and to ensure we provides comprehensive recommendations based on the best available evidence.
- The guidance emphasizes the need for environmental and administrative controls in facilities to protect healthcare workers and patients as well as the fundamental importance of training in the use of PPE.
- It indicates that droplet and contact precautions are appropriate for most patient care. Aerosol-generating medical procedures require N95 respirators along with other PPE.
- The guidance remains interim as it is subject to revision based on new scientific evidence.

New technical brief guidance regarding masks and eye protection/ face shields, to be worn throughout shifts

- PHAC recommends that all health care workers in acute care hospitals wear medical masks and eye protection/face shields for the full duration of a shift in acute healthcare settings.
- This recommendation is based on emerging evidence of asymptomatic and pre-symptomatic transmission of COVID-19 infection.



- Wearing a medical mask throughout the duration of a shift is an important measure to help reduce the risk of transmission from a health care worker to a patient.
- Wearing a medical mask and eye protection/face shield throughout the duration of a shift is an important measure to help reduce the risk of transmission from a patient to a healthcare worker.
- This recommendation applies to health care workers who are in direct contact with patients, as well as environmental services staff working in patient care areas.
- Another important measure to ensure COVID stays out of health care settings is the recommendation that any health care workers who have COVID-19-related symptoms should immediately go home and only return to work following the advice of their local public health units
- Health care workers should refer to their province or territory's guidance, as well as facility policies on the use of masks, eye protection, and other personal protective equipment (PPE), including any PPE conservation strategies that are in place.

Canada's Supply of PPE and Medical Supplies

- Health care workers need medical masks, including surgical masks, medical procedure masks, and respirators, such as N95 masks. It is extremely important to maintain the supply of medical masks where it is needed.
- The Government of Canada is working to ensure that health care workers have the PPE and medical supplies they need. We are doing this through collaborative bulk procurement with the provinces and territories, building domestic production capacity, and identifying potential alternatives and ways to extend product life.
- Canada is working to rapidly allocate PPE and medical supplies to the provinces and territories as per an approach agreed upon by federal, provincial and territorial Ministers of Health

Guidance and concerns from the Canadian Federation of Nurses Unions

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

Point of Care Risk Assessment



- Before any patient interaction or procedure, all health care workers should assess the infectious risks posed to themselves, other patients and other workers. This is called Point of Care Risk Assessment, and is the basis for selecting the appropriate PPE.

Inclusion of Cleaners and Food Providers Who Could be Exposed to COVID-19

- The advice in this guidance document is intended for anyone working in an acute care facility, including cleaners and food providers.

Use of Surgical Masks rather than N95 Respirators

- The choice of a surgical mask or an N95 mask should always be based on a point of care risk assessment.

Re-use of PPE and Guidance for Health Care Facilities

- N95 masks have historically been single-use products that are used by health care workers.
- Canada is exploring ways to extend the use of N95 respirators by decontaminating and reusing them. Decontamination of N95 respirators has been successful in other countries, including the United States.
- Canada is asking provinces and territories to set their used N95 respirators aside while a process for successful decontamination of the masks can be tested.
- Extending the use of PPE through decontamination is one way of helping to ensure that Canada has enough supply.

Prevention and Control of Coronavirus Disease (COVID-19): Guidelines for Home Care Settings

- As an essential component of the health care system, home care organizations play an important role in preventing unnecessary admissions to hospitals and long-term care facilities by providing care and support to people in their homes.
- People who receive home care are often older adults or people with health problems, making them vulnerable to serious illness if they contract COVID-19. Preventing COVID-19 in this vulnerable population is a priority.
- The Public Health Agency of Canada (PHAC) Infection Prevention and Control Guidelines provide recommendations for home care agencies and providers to prevent the transmission of COVID-19 to front-line workers and to protect vulnerable clients.
- PHAC's National Advisory Committee on Infection Prevention and Control, which consists of subject matter experts and front-line health care providers, worked with the



Agency to develop these guidelines, which were also approved by the Federal/Provincial/Territorial Special Advisory Committee on COVID-19.

- PHAC guidelines are not mandatory. They should be consulted in conjunction with provincial, territorial, and local laws, regulations and policies.

Highlights of the Guidelines

- To prevent the transmission of COVID-19 to clients, home care providers should monitor their health and take their temperature daily to detect signs and symptoms of illness. If they show signs of infection, they should be excluded from work until local public health authorities authorize their return.
- Home care providers should wear a mask during all 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 have any signs or symptoms of COVID-19 or if other members of their household are showing signs or symptoms. If so, agencies and home care providers can then determine whether the visit can be postponed or otherwise arranged to ensure everyone's safety. Use of eye protection for the duration of home visits is strongly recommended to prevent the possible transmission of COVID-19 to health care providers by clients in whom infection has not yet been detected.

Canada's Supply 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 consult their provincial, territorial and local guidelines, as well as their facility's policies, for specific recommendations about the use of masks, eye protection, and other types of PPE, and about PPE conservation strategies.
- The Government of Canada is working to ensure that health care workers, including those providing home care services, have the PPE and medical supplies they need.
- It does this through bulk purchasing in cooperation with the provinces and territories, building national production capacity, and seeking alternatives and ways to extend product life.

Long-term Care Facility Residents

- We call on all Canadians to help protect older adults and medically vulnerable individuals who are at the greatest risk of suffering serious complications from COVID-19.



- We must all work to stop the spread of the virus among long-term care facility residents and the workers who care for them.
- A no-visit policy should be seriously considered. If visits are permitted, they should be strictly limited to those that are essential (i.e. those necessary to meet residents' basic personal medical or compassionate needs). Essential visits should be limited to one person at a time for each resident.
- Like all Canadians, residents and staff in long-term care facilities are expected to practise physical separation as much as possible, including during meal times.
- Because they have direct contact with the most vulnerable people in our society, who are most likely to be seriously ill, health care workers should not go to work if they have symptoms.
- We understand that in order to stop the spread of COVID-19 and to protect the most vulnerable populations, Canadians must make difficult decisions and personal sacrifices.

Guidelines

- The Public Health Agency of Canada (PHAC) provides evidence-based guidance on infection prevention and control to complement the efforts of provincial and territorial governments in preventing, controlling and monitoring health care-associated infections.
- The Government of Canada has published *Prevention and Control of Coronavirus Disease (COVID-19): Interim Guidance for Long-Term Care Facilities* 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 Facilities

- Extreme vigilance is required in long-term care facilities to prevent employees from reporting to work if they have symptoms.
- Employees should be screened for COVID-19 symptoms before each shift, and those who begin to show symptoms during their shift should be managed immediately.
- Wherever possible, employers should work with their employees to restrict work to a single facility and to limit the number of facility areas in which employees work.
- All employees and visitors must wear a mask for the duration of their shift or visit to prevent transmission of the virus, even before they know they are sick.
- If visitors must come, they should be screened for fever, cough or breathing difficulties, and they should not be allowed in if they have symptoms related to COVID-19.



- Many facilities have already taken measures, such as prohibiting visits or other non-essential services on site.
- Long-term care facilities and assisted living facilities should also follow the recommendations of their provincial or territorial health authorities regarding preventing the spread of infections including COVID-19.

Alberta Long-Term Care Homes

- The Government of Canada is committed to protecting all Canadians, including vulnerable people.
- All levels of government are working together closely to ensure that public health measures to respond to the COVID-19 pandemic are consistent.
- Public health authorities are closely monitoring the continuity and stability of the slowing of the pandemic in Canada while carefully considering ways to ease public health restrictions where possible.
- The epidemiological situation of COVID-19 differs from one province and territory to another. This means that not all approaches will be the same across Canada and will need to be tailored to the unique challenges and context of the disease in each province and territory.
- Each Canadian province and territory is looking at different types of community settings, such as long-term care homes, and developing risk-based approaches and 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 the most up-to-date science and assessment of the situation.

As to whether this approach is consistent with the federal guidelines:

- Care in long-term care facilities is governed by provincial and territorial legislation.
- The Public Health Agency of Canada develops evidence-based infection prevention and control guidelines to complement provincial and territorial public health measures that address preventing, controlling and monitoring health care-acquired infections.
- The federal guidelines recognize that provinces and territories may choose to provide limited access to visitors to long-term care facilities in accordance with their legislation and policies.
- In these circumstances, we recommend that all staff and visitors, if access is permitted, wear masks throughout their shift or visit in order to prevent transmission of the virus, even if they have no symptoms of the disease.



- If visits are permitted, visitors must be screened for symptoms such as cough, fever and breathing difficulties, and must not enter a facility if they have symptoms related to COVID-19.
- Visitors should be reminded of how important it is to wash their hands and use an alcohol-based hand sanitizer, especially before putting on and removing their masks.
- These facilities must also follow the appropriate provincial or territorial health authority recommendations to prevent the transmission of infections, including COVID-19, in long-term care and assisted living facilities. Care in long-term care facilities is governed by provincial and territorial legislation.
- The Public Health Agency of Canada's Prevention and Control of Coronavirus Disease (COVID-19): Interim Guidance for Long-Term Care Facilities should be interpreted in conjunction with relevant provincial, territorial, and local laws, regulations and policies.
- As we enter the next phase of this pandemic, provinces and territories will begin to ease 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 guidelines like this, especially for those who have lost a loved one, and we extend our deepest condolences to all those who have lost a family member, friend or colleague to the disease.
- 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 transmission of COVID-19 through human remains is not yet known.
- In collaboration with public health experts, infection prevention and control specialists and the Funeral Service Association of Canada, we have developed these guidelines to ensure safe service delivery for families and to protect the health of those who work to provide these services to the public.

If pressed on the development of guidelines in response to recent outbreaks in long-term care facility:

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



If pressed on the funeral customs or treatment of the bodies of Indigenous people and members of various ethnic, religious and cultural groups:

- Various religious, ethnic and cultural groups have specific guidelines for the treatment of the bodies of deceased persons. 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 religious and cultural leaders be involved in planning funeral services to ensure that funeral arrangements remain respectful of cultural and religious values.
- Chiefs may also be able to provide or facilitate cultural or religious support, such as bereavement counselling, to bereaved persons.

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

- You may safely repatriate the remains of a person whose death is attributed to COVID-19 to Canada as long as 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 with a suspected or confirmed COVID-19 infection:
 - One for a cremated body;
 - The other for a body transported in a hermetically sealed container.
- We recognize that this may place some restrictions on families seeking to return home with the remains of a loved one. These restrictions are necessary to protect those who come into contact with the remains during the repatriation process.
- You can access general information on what to do if someone dies outside Canada by contacting funeral service providers in your community or by visiting <https://travel.gc.ca/assistance/emergency-info/death-abroad> on the Government of Canada website.

If pressed on the management of mass fatalities

- 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 may exceed the normal funeral service capacity.
- 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 deaths associated with the pandemic.
- The guidelines are based on the latest scientific evidence and provide recommendations for transporting bodies, planning, storage capacity, and other technical factors.



Isolation, Quarantine (Voluntary Isolation) and Physical Distancing

- There is a difference between the advice to place oneself in quarantine (self-isolation) and the advice to isolate. It is important to note that these measures are in place to protect the health and safety of Canadians.

Isolation

- Isolation means staying home when you have symptoms of COVID-19 and may have been exposed to the virus. By avoiding contact with other people, you help prevent the spread of the disease to others in your home and community.

You must:

- **Go directly home and stay there if:**
 - you have been diagnosed with COVID-19 or if you are waiting to receive the results of a COVID-19 laboratory test;
 - you are experiencing any symptoms of COVID-19, no matter how mild, and:
 - you have been in contact with a suspected, probable or confirmed case of COVID-19;
 - a public health official has told you (directly or through a public communication or self-assessment tool) that you may have been exposed to COVID-19.
 - you have just returned from a trip outside Canada and are experiencing symptoms of COVID-19 (mandatory). [Footnote*](#)
- monitor your health for symptoms as instructed by your health care provider or the public health authority until they inform you that you are no longer at risk of transmitting the virus to others;
- contact your health care professional or the [public health authority](#) immediately if your symptoms get worse, and follow their instructions.
- **Limit contact with others**
 - Do not leave home unless you need to seek medical attention.
 - Do not use public transportation (such as buses and taxis).
 - Arrange for groceries and supplies to be delivered to your door to limit contact.
 - Stay in a separate room and do not use the same bathroom as other family members, if possible.
 - If you need to be in contact with another person, practice physical distancing and keep at least two metres between them and you.
 - Avoid contact with people with chronic diseases, weakened immune systems, and older adults.



- Keep interactions brief and wear a medical mask, or a non-medical mask or face shield (i.e. one made to completely cover the nose and mouth and fit snugly over the face, held in place by ties behind the ears or the head and neck) if a medical mask is not available, when coughing, sneezing, or if you need to be in the same room as other people in the house.
 - Follow your public health authority's instructions regarding the safe use and disposal or washing of 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 them with disposable paper towels or reusable dry towels, which you can replace when wet.
 - You can also remove dirt with a damp wipe and then use a Health Canada-approved alcohol-based or alcohol-free hand sanitizer.
 - Avoid touching your eyes, nose and mouth.
 - Cough or sneeze into your arm or a tissue.
- **Avoid contamination of common objects and surfaces**
 - At least once a day, clean and disinfect surfaces you touch often, such as toilets, bedside tables, doorknobs, telephones and TV remotes.
 - Do not share personal items with others, such as toothbrushes, towels, bedding, utensils or electronics.
 - To disinfect objects and surfaces, use only approved hard surface disinfectants with a Drug Identification Number (DIN). A DIN is an eight-digit number assigned by Health Canada that confirms that the disinfectant product is approved in Canada and is safe to use.
 - Place contaminated items that cannot be cleaned in a plastic-lined container, seal the container tightly, and dispose of it with other household waste.
 - Close the toilet lid before flushing.
 - Masks, including non-medical masks and other face coverings, can trap your respiratory droplets and prevent them from contaminating the surfaces around you. However, wearing a mask does not mean you can get away with cleaning less.
- **Take care of yourself**
 - Monitor your symptoms as instructed by your health care provider or the public health authority.
 - If your symptoms get worse, contact your health care provider or public health authority immediately and follow their instructions.
 - Rest, eat a balanced diet, and stay in contact with others through communication devices.
- **Supplies to have at home during isolation**
 - Medical masks, if available, for individuals and health care providers. Otherwise, a non-medical mask or face shield (i.e. made to completely cover the nose and



mouth and fit snugly over the face, held in place by ties behind the ears or the head and neck).

- Eye protection (face shield or safety glasses) for use by health care providers only.
- Disposable (not reusable) gloves for use by health care providers only.
- Disposable paper towels
- Paper tissues
- Plastic-lined garbage bin
- Thermometer
- Over-the-counter medications to reduce fever (e.g. ibuprofen or acetaminophen)
- Running water
- Hand soap
- Alcohol-based hand disinfectant containing at least 60% alcohol
- Dishwashing soap
- Regular laundry soap
- Regular household cleaning products
- Hard surface disinfectant; if not available, concentrated bleach (5%) and a separate container for dilution
- Alcohol prep wipes or approved cleaners for cleaning high-touch electronic devices

Quarantine (voluntary isolation)

- You must quarantine yourself for 14 days if you have **no symptoms** and **one** of the following situations applies to you:
 - You are returning from a trip **outside Canada** (self-isolation mandatory);
 - You have been in close contact with a person who has or may have COVID-19;
 - You have been informed by a public health official that you may have been exposed to the virus and that you must quarantine yourself.
- Placing yourself in quarantine means that for 14 days, you must:
 - **stay home** and monitor your symptoms, even if they are mild;
 - Avoid contact with others to prevent transmission of the virus in the early stages of the disease;
 - practise physical distancing in your home and community.
- If you develop symptoms, even mild ones, stay home and self-isolate immediately from other people who live with you. Immediately call a public health professional or the 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 epidemic.
- Everyone must follow physical distancing instructions, even if they:
 - have no COVID-19 symptoms;
 - have no known risk of having been exposed to the virus;
 - have not travelled outside Canada in the last 14 days.



- You can practise physical distancing by making changes to your daily routine to minimize close contact with others. For example:
 - Avoid crowded areas and gatherings;
 - Avoid customary greetings, such as handshakes;
 - Limit contact with people at higher risk (seniors, people in poor health, etc.);
 - Maintain whenever possible a distance of at least two arm lengths (about two metres) between yourself and other people.
- The most effective measures to stay healthy and prevent the spread of any respiratory infection are to:
 - wash your hands often with soap and running water for at least 20 seconds;
 - cough and sneeze into your arm, not your hands;
 - avoid touching your eyes, nose and mouth, especially with unwashed hands;
 - avoid close contact with people who are sick;
 - stay home if you are sick to avoid spreading illness to others.
- While keeping a physical distance of two metres between you and others, you can:
 - greet people with a wave instead of a handshake, a kiss or a hug;
 - have food delivered or shop online;
 - ask a family member, neighbour or friend to help you with essential errands;
 - exercise at home;
 - go outside to get some fresh air, run, bike or walk your dog;
 - eat and play games with family and friends online;
 - 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 obstacle courses and playing games in your backyard.

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
 - Obtain essential supplies (a few weeks' worth) 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 someone who is sick. 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 know that the novel coronavirus can cause a range of symptoms, from mild to severe. Some people may not recognize the signs of illness when the first symptoms appear because they are similar to cold or flu symptoms.
- If you have symptoms (fever, cough or difficulty breathing) and think you may have COVID-19, contact a health care professional before coming in person so that appropriate action can be taken when you arrive.
- Do not report to a health care professional's office without calling ahead so that appropriate action can be taken when you arrive.
- **Stay informed.** Consult credible sources for up-to-date information and advice:
 - The Canada.ca/coronavirus web page;
 - The national toll-free telephone number (1-833-784-4397) for COVID-19;
 - The Government of Canada's Twitter, Facebook and LinkedIn social media accounts;

Provincial, territorial and municipal government websites and social media accounts.

Application of mandatory isolation and quarantine (voluntary 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.
 - Every Canadian has a role to play and needs to understand the potential risk that they may have been exposed to the virus during any recent travel outside the country and the risk that they may pose to other Canadians, including the most vulnerable.
 - Canadians also need to respect any guidance given by local public health authorities and stay home if they are ill.
 - The 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 required to self-isolate, they will continue to be the need to leave their homes for essential items like food and medication. As long as individuals do not have COVID-19 symptoms, they 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.



If pressed

- Quarantine laws at all levels of government contain very strict provisions 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 be taken, 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, washing their hands often and avoiding close contact with people who are sick.

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

- Based on the latest scientific data and in consultation with provincial and territorial experts, we have updated guidance on when people can end a period of home isolation after developing COVID-19 symptoms.
- The new guidance recommends that a person in home isolation, who had symptoms similar to those of COVID-19, be allowed to end the isolation period at least 10 days after the onset of the 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 a person who is isolated at home no longer needs to have two negative test results for COVID-19 at least 24 hours apart, as long as they no longer have symptoms consistent with COVID-19.
- This change does not apply to hospitalized patients.
- Provinces and territories may impose longer periods of isolation.
- Individuals who work in health care 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 must make an effort to reduce the spread of COVID-19 in Canada and flatten the curve. The use of proven measures, such as continuing the practise of physical distancing once home isolation is over, will contribute to our overall public health efforts and to the protection of Canada's most vulnerable people.

If pressed on why the criteria were changed

- Across Canada, we need to use our laboratory testing resources strategically.



- This change in the approach to laboratory testing will help to ensure optimal use of limited health and laboratory resources.
- Not all home-isolated individuals 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 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 period was determined

- Research and data collection 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 onset of illness/symptoms. When samples from these same individuals were tested using another test (polymerase chain reaction [PCR]), several of them tested positive because this test can detect both active and inactive viruses.
- In other words, some people may receive a positive test result even though they are no longer likely to transmit the virus to someone else.
- In the absence of a large body 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 directive replaces the current, more stringent and resource-intensive requirement that two negative test results be obtained before a person can be released from home isolation.

Use of non-medical masks (or face 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 national and international partners to learn more.
- The following are proven methods to prevent transmission of COVID-19:
 - Stay home as much as possible;
 - Practise physical distancing;
 - Wash your hands;
 - Protect the most vulnerable from infection and limit their exposure to others;



- Cough into a handkerchief or your sleeve.
- It is critical that these measures continue.
- Health-care workers need medical masks, including surgical masks, procedural masks and respiratory masks such as N95s. It is extremely important that we reserve these masks for health-care workers, as they are 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.
- Our goal is to stop the spread of COVID-19 by any means possible. In light of new information on both presymptomatic and asymptomatic transmission, wearing a non-medical mask, even in the absence of symptoms, is an additional measure that can be taken to help protect others for brief periods when physical distancing is impossible (e.g., at the grocery store or in cramped places, such as public transit).
- Wearing a non-medical mask in the community is not a replacement for following proven public health measures. No mask can replace physical distancing.
- All recommendations concerning physical distancing, frequent hand washing and home isolation are based on practices recognized as the most effective 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 your sleeve when coughing, a cloth mask or face shield can reduce the risk of exposing others to your respiratory droplets.

Factors to consider when wearing a non-medical mask

- If wearing a non-medical mask makes you feel safer and stops you from touching your nose and mouth, that is a good thing. However, remember not to touch or rub your eyes, as that is another route of infection.
- Canadians must understand the benefits and limitations of masks. If they choose to wear a non-medical mask, they must use it safely by:
 - avoiding moving or adjusting it often;
 - avoiding sharing it with other people; and
 - Choosing a mask that covers the nose and mouth completely without gaping and that is secured with ear loops or ties behind the head and neck.
- It is also important to be aware that masks can become contaminated on the outside or when touched by hands.



- Children under the age of two and anyone who has trouble breathing, or is unconscious or unable to remove the mask without assistance should not wear non-medical masks or other face coverings.
- Note that non-medical masks will not prevent COVID-19 spread without consistent and strict adherence to good hygiene and public health measures, including frequent hand washing and physical distancing.
- The [Canada.ca/coronavirus](https://www.canada.ca/coronavirus) website is updated regularly and contains information on measures to take, such as washing your hands when putting on or removing the mask. The site also includes information on how to wash cloth masks and safely dispose of other non-medical masks (including dust masks).

Modelling and surveillance

Surveillance of COVID-19

- Canada's health system has been on high alert to detect possible COVID-19 cases for many weeks.
- Canada remains focused on containment efforts to delay and slow the spread of COVID-19. We do this through early identification of cases, meticulous tracing of close contacts, and the use of proven public health measures such as isolation. We also recommend that Canadians practise physical distancing.
- Canada has a highly integrated federal, provincial and territorial approach to surveillance, involving front-line health care facilities and laboratories across the country with effective means of detecting respiratory diseases, including COVID-19.
- Public health laboratories across Canada are also working together to report COVID-19 test results to the public on a weekly basis. 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.
- Surveillance in hospitals is another important means of detecting cases of COVID-19. These facilities allow us to monitor people with respiratory symptoms, including patients with pneumonia or serious infections, even if they have not travelled to an affected country. This is another way to extend the scope of our surveillance to detect signs of possible spread in the community so that public health authorities can take appropriate action.
- Finally, Canada has networks of paediatricians and family physicians that are critical to surveillance. These networks bring together front-line primary care providers, who are often the first to detect new or unexpected patterns of illness and can provide an early warning that we have an emerging health problem.



- It is by collating data from all these sources that we can detect signals and analyze transmission patterns to closely monitor the emergence and spread of COVID-19 in communities across Canada.

Data modelling (April 28)

- The Government of Canada continues to work with its provincial, territorial and international partners to ensure that the response to the COVID-19 outbreak is based on the latest scientific data and the situational assessment.
- We are constantly analyzing the data and results of clinical and epidemiological studies as we obtain them to determine when the 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 predict how COVID-19 could spread in Canada in the future and to estimate a range of possible cases, hospitalizations and deaths that could occur in the coming weeks and months.
- Based on these models, we can prepare our health care system to provide care for the projected number of patients and determine what public health measures may be needed to change the course of the epidemic in Canada.
- Our actions have a very large impact on the models. We can all contribute to reducing 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 from one province and territory to another.
- Models cannot predict what will happen, but they can help us understand what might happen and thus help us plan and take action to ensure the best possible outcome.
- Modelling the course of COVID-19 requires us to make assumptions based on incomplete data and science that is still evolving. These assumptions change as new information about the virus and more data about the epidemic in Canada become available.
- We are continually improving the models to provide Canadians with the best possible information on outcomes.

Case and death rates in Quebec

- A number of factors contribute to the higher number of reported cases and deaths in Quebec compared to the other provinces and territories.
- First, the provinces of Ontario and Quebec have reported a number of outbreaks in long-term care facilities and seniors' residences. These environments are driving the numbers



of transmissions and deaths among older people. In Quebec, long-term care residents account for more than 80% of the deaths.

- Long-term care facilities continue to experience outbreaks, which influence the number of cases and deaths in some provinces. According to provincial/territorial websites and media briefings, over 63% (1,157/1,834) of the cases have occurred in long-term care facilities.
- Another factor that might have contributed to the higher numbers is the timing of **spring break**. In Quebec, spring break is earlier than in other provinces, so people might have travelled to countries and regions where the outbreak had not yet been reported.
 - The way cases are reported in Quebec could also contribute to the higher number of reported cases and deaths. Quebec includes cases in its figures of individuals who present symptoms of COVID-19 and have been in contact with a person with a laboratory-confirmed diagnosis, without having received laboratory confirmation themselves. Quebec includes these cases and deaths in its figures, while the other provinces and territories do not. Quebec's public health authority can provide more details on how the province reports its confirmed cases.
- Quebec was able to scale up its testing capacity very early in the outbreak through targeted testing, including testing for health care staff, long-term care facility residents and respiratory hospitalization cases, allowing it to identify cases.

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

- The other provinces and territories publicly report the number of individuals with a laboratory-confirmed diagnosis.
- We are aware that laboratory-confirmed cases do not paint a true picture of the number of people who are infected in areas where the virus is circulating. That is because people who are sick may not necessarily undergo a screening test to obtain laboratory confirmation.
- People with mild symptoms may go unnoticed or unreported, and some people may have no symptoms at all. That is why public health measures, such as social distancing, are crucial.

Government of Canada support for La Loche, Saskatchewan

- The Government of Canada is working with the 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) provided Health Canada-authorized point-of-care testing devices to La Loche, Saskatchewan, to assist municipal authorities in responding 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 surge capacity needs.

Support for Saskatchewan

- The National Microbiology Laboratory (NML) provided the community of La Loche with GeneXpert Xpert Xpress SARS-CoV-2 point-of-care testing devices and 46 test kits (10 tests per kit).
- The NML has also provided point-of-care testing devices and GeneXpert Xpert Xpress SARS-CoV-2 point-of-care test kits to other remote communities in Saskatchewan:
 - The 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 received point-of-care testing devices and three test kits each.
 - Hatchet Lake received point-of-care testing devices and two test kits.
 - Stony Rapids, in the Athabasca region, received 10 test kits.
- The NML is prepared to ship at least 70 additional test kits to Saskatchewan once the province has confirmed the communities that need them most.

If pressed

- The Public Health Agency of Canada (PHAC) strives to allocate personal protective equipment (PPE) and medical supplies to the provinces and territories in a timely manner according to an approach agreed to by federal, provincial, and territorial health ministers.
- The provinces and territories may also request assistance from the National Emergency Strategic Stockpile (NESS) to meet their essential needs. To date, the NESS has responded to more than 40 requests for assistance related to COVID-19.
- The provinces and territories provide PPE to Indigenous communities in accordance with the allocation provisions and guidelines in place in their jurisdictions.
- PHAC does not comment on the total 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 improve understanding of 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 stated on February 10, 2020, that it was 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 as a result of the second exposure, it may mistakenly appear as though the incubation period was longer than 14 days because the “clock” was not reset 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 improve understanding of the epidemiology of this disease.

Screening for COVID-19 in Canada

- We continue to **perform a very large number of screening tests in Canada** - at rates among the highest in the world.
- To date, screening priority has been given to **people with symptoms** and to those in **high-risk situations**.
- These include people working in **care settings, long-term care facilities, and correctional facilities** or who are in situations where a positive case is linked to a high-risk environment that could be the source of an outbreak.
- As we move into the next phase of easing some public health measures and reopening some 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 be a part of our lives and **screening will continue to be an important tool** to detect and isolate new cases, to monitor those who have been in close contact



with these cases, to stop the spread of the virus, and to prevent outbreaks in the community.

- Cases and outbreaks continue to be reported at an alarming rate in high-risk settings such as long-term care facilities. In the next phase, **it will be critical to screen the groups most at risk for complications due to COVID-19**. This screening will serve as a warning signal for our health care system.
- **Increased screening does not result in a faster return to normal activities** or a return to daily life as it was before COVID-19. **Screening does not replace public health measures.**
- No specific number of daily tests would allow us to ease public health measures in the same way and at the same pace in all regions of Canada. **The epidemic manifests itself differently** from one province and territory to another, and even from one region to another.
- We also need **to test intelligently**. People can be contagious before they show symptoms, while they have symptoms, and even if they have no symptoms at all. It doesn't make sense to use all our resources and supplies for testing where there are low numbers of cases and no signs of transmission in the community.
- **Timing of screening is critical.** A negative test result can give people a false sense of security because a negative test result does not mean that the person has not been exposed to the virus. The person can become contagious in the days following the testing, so it is best to screen at least five days after a potential exposure.
- Since May 5, we have been performing **on average 20,000 tests per day** in Canada, **almost double** the number of tests performed a month ago. This number continues to increase.
- Canada maintains 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 drop below 3% in Canada (to 1%, for example), it would mean that we are **overly broad in testing** those who don't need to be tested, such as:
 - those in areas of Canada where the disease is not circulating;
 - those who test too early.
- The number of tests and the positivity rate show that our **current screening system is very sensitive**. We continue to expand the capacity of our laboratories to keep it that way.



- Health Canada is working with manufacturers to bring commercial diagnostic devices to market in order to **strengthen the COVID-19 diagnostic capacity in Canada**.
- The Minister of Health signed an interim order as an emergency public health measure to allow expedited access to medical devices related to COVID-19. As a result of this interim order, **new diagnostic tests are available in Canada**. A list of these tests is available on Health Canada's [website](#).
- New diagnostic tests will offer **faster and more convenient** screening to Canadian patients.
- **We must stay the course and stick to proven measures.** All Canadians must do the following to prevent the spread of COVID-19 regardless of the level of screening where they live.
 - **Stay home and away from others when they are sick.**
 - **Wash your hands frequently.**
 - **Clean common surfaces with an appropriate disinfectant.**
 - **Protect the vulnerable.**
 - **Practice 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 2 metres** between yourself and others.

Reagents and tests for COVID-19

- There are several commercial reagents authorized 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 deal with this problem.
- The shortage of reagents required for the COVID-19 test is affecting Canada's testing capacity. The Public Health Agency of Canada's (PHAC) National Microbiology Laboratory has developed a reagent to help address this shortage. This reagent is mass-produced by Luminultra Technologies Ltd., a New Brunswick-based company.
- PHAC has also signed a temporary licensing agreement with bioMérieux Canada to receive the rights and formulation of its reagent used in COVID-19 diagnostics.
- The Government of Canada's testing priorities are as follows: access to test reagents, evaluation of commercial testing technologies, and access to authorized test kits to enable provinces and territories to expand their testing capacity.

About 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 the raw materials needed to develop batches of reagents formulated by the NML, and the company 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 is able to manufacture reagents for up to 500,000 tests per week.
- It is expected that as its production capacity increases, Luminultra will be able to produce sufficient reagents to help meet domestic demand.

About the bioMérieux agreement

- bioMérieux is a French company that produces reagents used in COVID-19 diagnostic tests. The company is facing difficulties in obtaining certain ingredients necessary for the manufacture of its product and meeting global demand.
- In an innovative public-private partnership, PHAC has signed a temporary license agreement with bioMérieux Canada, at no cost, to receive the rights and formulation of their reagents used in the diagnosis of COVID-19. Systems for the production of these reagents are at various stages of development and testing with the aim of alleviating some of the reagent shortages in the near future.
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Amendments to the Spartan test kit authorization

- On March 26, 2020, Health Canada issued a conditional authorization to Spartan Bioscience Inc. for the use of the Spartan Cube for research purposes only.
- This authorization was granted under the [Interim Order](#) respecting medical devices used in the context of COVID-19, which allows Health Canada to authorize the use of devices after an expedited scientific review process, based on minimum requirements.
- On April 11, 2020, Health Canada completed its scientific review process to ensure that the kit met safety and efficacy requirements. The conditions of the authorization have been amended and the restriction has been lifted regarding the sale of the product for non-research purposes.
- Health Canada's regulatory decision was based on laboratory analysis of the product and not on clinical efficacy data. The review took into consideration the fact that



subsequent clinical validation would be conducted by public health laboratories to determine performance in a clinical setting. This approach is consistent with that taken by other reputable regulators.

- On May 1, 2020, the National Microbiology Laboratory (NML) submitted to Health Canada its final report on clinical trials conducted in three provinces (Alberta, Ontario, and Manitoba) using Spartan swabs for direct sample collection from patients under clinical conditions.
- The report explains that although the Cube performed well in the laboratory (according to the manufacturer's specifications), there were performance issues during the clinical trial. These problems appear to be related to swabs protected by exclusive rights which may not sufficiently collect the mucosal material necessary for testing.
- In light of the clinical results, on May 2, 2020, Health Canada imposed conditions on the product's authorization for use to limit its sale for research purposes only, until the company could provide data demonstrating adequate clinical performance of the product.
- Health Canada is not revoking the authorization, based on the evidence that the kit works well in the laboratory. The Spartan kit may therefore continue to be sold only for research purposes until the company is able to provide data demonstrating adequate clinical performance of the product.
- Health Canada will continue to work with Spartan as the company strives to meet regulatory requirements that will enable the use of the point-of-care screening test.

If pressed on how many tests have been distributed following the authorization of test kits

- Spartan Bioscience forwarded its distribution records to Health Canada on May 2 and confirmed that it had distributed 5,500 test kits for research purposes only in a clinical setting to four public health organizations:
 - 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 them from being used in a screening context at this time. The company has agreed to do so.
- On May 2, the department sent a regulatory letter to the company indicating the new conditions of authorization, in accordance with section 6 of the interim order. The letter also outlines the steps to be followed for the voluntary recall of the kits.



- Health Canada has limited the sale of the test kits to research use only until adequate evidence of clinical performance can be provided and evaluated.

If pressed on the details of the recall

- The recall includes:
 - issuing a notice informing all customers of the risks associated with the use of the product for diagnostic purposes and the measures to be taken to mitigate those risks;
 - requesting the recovery of all unused single-use devices and components (e.g., reagents and swabs) from non-laboratory environments and from laboratories using the product for diagnostic purposes;
 - requesting the collection of swabs only from laboratories that will continue to use the device for research purposes.

If pressed on Health Canada's review of Spartan

- 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 sale of this product be limited to research purposes only. This authorization was issued under the Interim Order respecting medical devices used in the context of COVID-19, which allows Health Canada to authorize the use of a medical device after an expedited scientific review process, based on minimum requirements.
- On April 11, 2020, Health Canada completed its scientific review process to ensure that the kit met the requirements concerning safety and efficacy. The conditions of the authorization have been amended and the restriction has been lifted regarding the sale of the product for non-research purposes.
- Health Canada's regulatory decision was based on laboratory analysis of the product and not on clinical efficacy data. The review took into consideration the fact that subsequent clinical validation would be conducted by public health laboratories to determine performance in a clinical setting. This approach is consistent with that taken by other reputable regulators.
- On May 1, 2020, the NML submitted to Health Canada its final report on clinical trials conducted in three provinces (Alberta, Ontario, and Manitoba) using Spartan swabs for direct sample collection from patients under clinical conditions. These clinical trials are essential as they uncover performance issues that would not show up in the laboratory. The report explains that although the Cube performed well in the laboratory (according to the manufacturer's specifications), there were performance issues during the clinical trial. These problems appear to be related to swabs protected by exclusive rights which may not sufficiently collect the mucosal material necessary for testing. In light of the clinical results, Health Canada has amended the authorization conditions to restrict the sale of the Spartan Cube for research purposes only, until the company can resolve the performance issues with the kit and provide sales data.



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

- As part of its research efforts, the Public Health Agency of Canada's NML conducts scientific reviews of new medical devices.
- Given the urgency of the situation, the NML is conducting test validation and performance evaluation of diagnostic equipment such as COVID-19 test kits.
- This validation function is part of scientific research and is independent of Health Canada's regulatory approval process. Although the validation process is separate from the Health Canada authorization process, the NML works closely with Health Canada to share the knowledge gained through the review process.
- The NML tests laboratory supplies associated with the clinical diagnosis of COVID-19 to ensure that they conform to the gold standard used in public health laboratories. The purpose of the validation process is to determine if the product can be used to obtain reliable and accurate results for the diagnosis of COVID-19.

If pressed on the government buying 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.

Spartan's COVID-19 Rapid Screening Test Kits

- Early diagnosis is essential to slow and reduce the spread of COVID-19 in Canada.
- As part of Canada's plan to mobilize industry in the fight against COVID-19, Health Canada has authorized a portable COVID-19 rapid test kit for health care providers to detect infections more quickly and easily. This will help stop the spread of the virus.
- Spartan Bioscience's test kit can diagnose COVID-19 in less than an hour without having to send a sample to a laboratory.
- The scientific review of Spartan's diagnostic testing device was conducted under tight deadlines as part of the Interim Order announced by Health Minister Patty Hajdu on March 18, 2020. Health Canada's review concluded that the device meets the requirements for safety and efficacy.
- The Public Health Agency of Canada's National Microbiology Laboratory (NML) has collaborated with Spartan to accelerate the development and validation of its point-of-care technology, which will be particularly useful in remote areas.
- Health Canada will continue to monitor and evaluate the safety and efficacy of these rapid test kits in the field to ensure that they are working properly and providing accurate results.



- We continue to work with businesses from coast to coast to coast to ensure that our health care workers have the tools they need to take care of all Canadians.

If pressed on the accuracy of the test kits:

- Health Canada has maintained a science-based approach to pandemic management, and the process for authorization under an Interim Order includes a pre-market scientific review.
- The Spartan Bioscience diagnostic test kit was authorized by Health Canada under an Interim Order put in place by the Minister to allow for the exceptional importation of medical products as part of the response to the COVID-19 outbreak. The authorization follows a scientific evaluation by Health Canada reviewers to ensure that the device meets standards for safety and efficacy.
- For more information regarding the performance of the Spartan test, please contact the manufacturer directly.

If pressed on the number of test kits to be purchased:

- The Government of Canada has amended its supply contract with Spartan to obtain the supply of the devices and 40,000 screening test kits per month for April, May, and June 2020, and 200,000 additional screening test kits per month from July 2020 to March 2021.
- The Government of Canada strives to allocate these medical supplies to the provinces and territories in a timely manner according to an approach agreed to by federal, provincial, and territorial health ministers.

About Spartan:

- Spartan Bioscience is an Ottawa-based company.
- Spartan's research is supported by the National Research Council of Canada's Industrial Research Assistance Program.
- The company was awarded a contract by the Government of Canada to accelerate its innovative work on rapid diagnostic screening for COVID-19.

About the Interim Order:

- As an emergency public health measure, the Interim Order allows expedited access to medical devices related to COVID-19.
- As a result of the Interim Order, new diagnostic tests are now readily available in Canada. They are listed on Health Canada's website.
- The Interim Order will also ensure that other medical devices related to COVID-19 will be available to treat, mitigate or prevent COVID-19, as required.



- An interim order is one of the fastest mechanisms available to the Government of Canada to help make health products available in the event of a large-scale public health emergency.

If pressed on the US directive allowing unauthorized health products:

- Health Canada will continue to use all tools at its disposal to expedite the supply of safe and effective health products related to COVID-19. However, the department does not provide blanket approval for unauthorized drugs or devices. We will inform Canadians of any new information as it becomes available.

If pressed on cost recovery:

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

At-Home Tests

- Rapid diagnosis is essential to slow and reduce the spread of COVID-19 in Canada.
- Health Canada is against at-home testing for COVID-19 as it has not evaluated and authorized any at-home test kits, which means that the results obtained may be inaccurate.
- These kits affect the ability of the health system to collect accurate and timely data on the spread of infection, which is essential to manage a pandemic.
- Health Canada has only authorized the sale and importation of COVID-19 diagnostic tests for the exclusive use of qualified healthcare professionals or technicians.
- Health Canada has not authorized any diagnostic tests or sample collection kits that can be used by the general public to detect or self-diagnose COVID-19.
- The Government of Canada continues to work with Canadian and international companies to equip Canadians and healthcare workers with the tools necessary 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 for use to counter COVID-19.
- As a result of the Interim Order, new diagnostic tests are now readily available in Canada. A list of these tests is available on Health Canada's website.



- The Interim Order will ensure the availability of medical devices related to COVID-19 to treat, mitigate or prevent disease, as required.

Serology and certificates of immunity

- 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 whether to certify the immune status of people.
- As the virus causing COVID-19 is new, we need more data before knowing whether people who have recovered from the disease will have long-term protective immunity.
- At this point, we do not know if people who have recovered will have immunity and how long this immunity may last, nor do we know if it is possible to get COVID-19 twice or if the disease will be milder or more severe the second time.
- We recognize that it can be difficult to wait for scientific data but as we learn more about COVID-19, we are compelled to use proven public health measures.
- We continue to recommend that Canadians stay home, wash their hands well, and practise physical distancing. These are proven public health measures.
- We are working hard to improve our knowledge of COVID-19 in Canada so that we can continue to adapt our response to slow the spread of the virus.

Pan-Canadian study to track COVID-19

- Every day, we learn more about COVID-19 and keep abreast of new science as it becomes available. 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 be conducted to measure the scope and magnitude of COVID-19 cases across the country.
- This effort must be well coordinated and well executed to ensure that the results that will guide political decisions on how to bring the country back to normal—or a “new normal”—are optimal.
- We are establishing a working group of organizations to work under the direction of a board of directors to set priorities and recommend projects to the Government of Canada for funding. The management team is comprised of three individuals recognized for their contributions to research, academia, and innovation in public health and healthcare, both in Canada and abroad.
- The co-chair of the administrative committee will be ensured by:
 - Dr. David Naylor, renowned for his qualities as a scientific and academic leader, and his successful management of large, complex organizations;



- Dr. Catherine Hankins, who will bring to the board her national and international experience in leading large and complex research projects and building partnerships to advance public health priorities;
 - Dr. Tim Evans, Director of the School of Population and Global Health at McGill University, will lead the secretariat responsible for the effective delivery of this complex initiative.
- The Working Group will stimulate, support, and align the rapid design and implementation of population-based studies that will produce the first reliable estimates of immunity to SARS-CoV-2 in the general population, and in priority populations in Canada.
- The Public Health Agency of Canada's National Microbiology Laboratory will be part of the Working Group. It will ensure standardization of testing and promote the acquisition of commercial test kits (once authorized) to support the effective and consistent activities of the Working Group.
- Rapid and representative national surveys provide insight into the current situation and what to expect if there is a second wave of infections. The surveys can also shed light on the possible immune status of vulnerable populations such as members of Indigenous communities and residents of nursing homes and long-term care facilities.
- Serological surveys will help guide important public health decisions once a vaccine is developed.

If pressed on serological testing

- Serological tests are blood tests that can detect the presence of antibodies against specific viruses in blood samples. In the case of COVID-19, they can tell us whether a person has been exposed to the virus that causes the disease.
- The development and implementation of a validated and effective serological test for the detection of COVID-19 presents challenges. It is a new virus and very little is known about the body's immune response to it. More research must be done.
- The Public Health Agency of Canada's National Microbiology Laboratory is evaluating a range of commercially available tests for detecting COVID-19.
- On March 18, the Minister of Health signed an interim order to expedite access to healthcare providers to medical devices related to COVID-19. Health Canada reviews applications submitted under the interim order, including those for commercial serological testing, and authorizes medical devices that meet safety and efficacy requirements.
- Only diagnostic tests authorized by Health Canada can be imported into or sold in Canada. Unauthorized testing may produce inaccurate results, which may lead to



diagnostic errors. Health Canada has confirmed that authorized COVID-19 tests are well supported by evidence indicating that they will provide accurate and reliable results. As of April 9, 2020, Health Canada had not authorized any serological tests.

- A serological test detects the presence of antibodies specific to the virus that causes COVID-19 in the blood of patients and allows public health professionals to identify those who have been infected.
- The ability to screen 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. The use of a diagnostic test that gives erroneous or inaccurate results can put individuals and the Canadian population as a whole at risk. Canada ensures that serological tests are used appropriately in combination with other tools to diagnose infection.

If pressed on why Canada is not following the lead of the United Kingdom and Germany...

- More research is needed before making decisions in Canada.
- Other respiratory viruses generally do not provide an individual with 100% immunity after recovery.
- Right now, we just do not know if individuals who have recovered from COVID-19 will have immunity, how long that immunity may last, or if it's possible for individuals to experience less severe or potentially more serious illness if they get COVID-19 a second time.
- Canada will continue to work with its international partners to share information on measures and best practices to guide our domestic approach.

About presymptomatic and asymptomatic transmission

- Now that more countries have recorded significant numbers of cases and analyzed transmission patterns, recent studies show that infected people can transmit the virus before they even have any symptoms. This is known as presymptomatic transmission.
- Data also show that some infected people can transmit the virus without ever having any symptoms. This is called asymptomatic transmission.
- Currently, we do not know the extent to which presymptomatic and asymptomatic transmission play a role in the progression of the pandemic, but we do know that this type of transmission occurs in people who come into close contact or are in cramped quarters with infected people.



- 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 its availability 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:
 - 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.
- Various countries, including Canada, are participating in an unprecedented mega-trial of potential COVID-19 treatments. This is truly a new model of global collaboration.
- This global trial, coordinated by the World Health Organization, will test several potential drug treatments for COVID-19. Since all countries will use the same trial design, this will enable quicker, more reliable results.
- As with all unproven treatments, there are risks and benefits. It is therefore preferable to use potential treatments in a clinical trial.
- Through the Canadian Institutes of Health Research, the Government of Canada has invested close to \$1 million in the Canadian component of this global trial. This investment is part of the government's \$275 million commitment to support medical research on the COVID-19 pandemic.



- Canada has some of the brightest and most skilled researchers in the world working tirelessly to support the international fight against this pandemic. Up to 20 institutions across the country will be invited to participate in the Canadian arm of this global trial.
- To advance research and development of COVID-19 vaccines, the World Health Organization (WHO), in conjunction with the Coalition for Epidemic Preparedness Innovations, is coordinating an international collaboration in which Canada is participating.

Experimental therapies

- Every drug or health product making a therapeutic claim sold or marketed in Canada needs to be approved by Health Canada for safety, efficacy and quality. This approval process starts with manufacturers filing a submission of a drug or health product with Health Canada.
- To ensure that Canadians have access to effective COVID-19 health products as quickly as possible, Health Canada is expediting the review of all submissions related to this disease.
- Currently there are no drugs specifically authorized to treat or prevent COVID-19. For drugs that show an early promise in treating COVID-19, the best way to access therapies is through clinical trials.
- Health Canada encourages health care professionals prescribing or using experimental therapies for COVID-19 patients to contact the Department to initiate a clinical trial.
- The Department continues to monitor the safety and effectiveness of drugs and health products once they are on the market.

If pressed on the fast-tracking access to treatments

- Health Canada acknowledges 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 Interim Orders to allow expedited access to COVID-19-related medical devices and drugs.
- Health Canada will continue to use all tools at its disposal to expedite the supply of safe and effective health products related to COVID-19.

If pressed on off-label use

Additional background: Some health care providers are prescribing off-label drugs to treat COVID-19 symptoms. This means that are prescribing drugs that are authorized and labelled to address other medical conditions to treat COVID-19.



- In Canada, a practitioner's decision to prescribe or use a drug for an approved or off-label indication is part of the routine medical practice regulated by provincial and territorial authorities.
- Although Health Canada regulates drugs in Canada, practitioners must ensure that a drug's potential benefits outweigh its risks to patients. Thus, they are responsible for considering the information in the Canadian Product Monograph, on the labels of approved products, and from other reliable sources such as medical journals, reports, and peer-reviewed studies.
- An off-label use may not be supported by the same level of scientific evidence as an authorized use. An off-label prescription may be justified by a range of data, from rigorous clinical studies to anecdotal evidence, without substantial scientific validation.
- Drug labels are designed to indicate the authorized use of a drug and therefore might not provide all the required information for safe and effective off-label use. This means that off-label drug use may involve less information about potential interactions with other drugs and about other potential adverse effects.
- It is illegal to directly or indirectly promote experimental therapies or the off-label use of authorized drugs.
- Health Canada encourages practitioners to consider the off-label use of drugs to treat COVID-19 in a clinical trial. This will help collect and use data to inform future prescribing practices.

If pressed on clinical trials

- Clinical trials play a critical role in advancing research and evaluating investigational products to respond to emerging health issues.
- Clinical trials aim to identify whether the use of a drug or medical device is effective and safe for humans.
- Clinical trials require the informed consent of patients, monitoring and protection to ensure participants' safety.
- Clinical trials enable the healthcare community to systematically collect information on the effectiveness of the treatment and potential associated risks so that the results can help treatment decisions for 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 health products and drugs for detecting and treating the illness.
- The preliminary evidence from some studies suggests that hydroxychloroquine, alone or combined with azithromycin, may be effective in reducing the viral load in patients with COVID-19, as well as in treating respiratory tract infections caused by COVID-19.



- There is very little evidence on the combined use of hydroxychloroquine and azithromycin to treat COVID-19. Like all drugs, their use is linked to some proven risks.
- Canada has approved the use of either hydroxychloroquine or azithromycin to treat some diseases. Nonetheless, based on patients' needs and the seriousness of their illness, physicians may also prescribe these drugs off-label when they deem that their potential benefits outweigh known risks.
 - Hydroxychloroquine is approved to treat lupus, rheumatoid arthritis and malaria.
 - Azithromycin is an antibiotic used to treat pneumonia and other bacterial infections.
- It is important to protect access to these drugs for patients who need them for approved uses.
- Because the use of these drugs to treat COVID-19 is in its early experimental stage, Health Canada recommends that practitioners who wish to prescribe these therapies to treat COVID-19 do so through a clinical trial.
- A clinical trial requires patients' informed consent and enables the medical establishment to systematically collect data about the risks and benefits of treatment.
- All clinical trials on the treatment of COVID-19 are being reviewed on a priority basis. Any company, physician or researcher interested in conducting a clinical trial must contact Health Canada.

If pressed on the National Emergency Strategic Stockpile

- The Government of Canada is adding hydroxychloroquine to the National Emergency Strategic Stockpile (NESS). The stocks will be used first for approved applications, and then in clinical trials for the treatment of COVID-19.
- Hydroxychloroquine will be phased into the NESS over several months to minimize the impacts on its availability for approved applications.
- The NESS contains supplies that provinces and territories can request in emergencies, such as infectious disease outbreaks, natural disasters, and other public health events, when their own resources are not enough.
- The stockpile contains a variety of items, including medical devices, drugs, beds and blankets.
- The purpose of the NESS is to help supplement provincial and territorial resources during a rare or high-impact public health event.



- The NESS is not intended to replace supplies that provinces and territories hold or procure. Provinces and territories are responsible for preparing and maintaining their own supply capacities.
- Since the coronavirus outbreak in China in January, the Public Health Agency of Canada has been closely monitoring the situation, assessing the NESS inventory and procuring supplies to respond to a potential outbreak in Canada.
- There is a global supply shortage. The federal government is continuing to work aggressively to secure all needed supplies as quickly as possible and 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.
- Four companies market hydroxychloroquine in Canada: Apotex Inc., JAMP Pharma Corporation, Mint Pharmaceuticals Inc., and Sanofi-Aventis Canada Inc. Health Canada has been informed that all four companies have experienced an increase in 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 Limitée, Sandoz Canada Incorporated, Sanis Health Inc., Sivem Pharmaceuticals ULC, Sterimax Inc., Teva Canada Incorporated and Pfizer Canada ULC. None of these companies are reporting shortages of azithromycin in Canada.

If pressed on Health Canada's actions to mitigate COVID-19-related shortages

- Health Canada is closely monitoring the impact of the COVID-19 pandemic on Canada's drug supply. This includes targeting supply chains' weakest links so as to fill gaps and avoid shortages.
- The Department has also increased surveillance efforts and consults regularly, sometimes daily, with the provinces and territories, the pharmaceutical industry, the health sector and patient groups. Health Canada also shares information on all global supply disruptions through international collaborations with other regulatory agencies. These include the European Medicines Agency, the United States Food and Drug Administration, the Australian Therapeutic Goods Administration and the World Health Organization. This ongoing dialogue allows us to better detect shortages, prepare mitigation strategies, and respond in a coordinated manner.
- Under the government-wide response to the COVID-19 pandemic, the government passed the *COVID-19 Emergency Measures Act* on March 25, and amended the *Food and Drugs Act* to enable Health Canada to implement stronger measures to reduce and try to prevent shortages.



- On March 30, the Minister of Health signed an Interim Order authorizing the exceptional importation and sale of drugs, medical devices and foods for a special dietary purpose that are needed to prevent or alleviate the effects of shortages directly or indirectly related to COVID-19.
- The Interim Order authorizes the exceptional importation of some drugs that may not fully comply with Canadian regulations (on bilingual labelling, for example) but are manufactured to Canadian-equivalent standards. The goal is to maintain Canada's drug supply and protect the health of Canadians during this period.
- Only drugs included on the List of Drugs for Exceptional Importation and Sale will be eligible for the exceptional importation and sale provisions provided for in the Interim Order. For the time being, only drugs for which a Tier 3 shortage has been reported, such as hydroxychloroquine, will be eligible for inclusion on this list.
- No drugs are yet on this list. However, under this new process, Health Canada will assess proposals from companies interested in accessing drugs deemed to meet Tier 3 shortage criteria, including hydroxychloroquine. The Department will amend the list as required.
- Health Canada will continue to collaborate with other federal government departments, the provinces and territories, international partners and industry to ensure that Canadians have continued access to the drugs and medical devices they need during the COVID-19 pandemic.

Regulatory flexibility for COVID-19 treatments

- Health Canada's top priority is to ensure that all Canadians have access to the drugs and medical devices they need during the COVID-19 pandemic.
- Health Canada is prepared to take the rare step of considering to ease certain regulatory measures to allow early filing of drug submissions that show promise in treating or preventing COVID-19.
- Health Canada may accept new evidence from ongoing clinical trials as it becomes available, while ensuring that the review is always subject to the same levels of safety, efficacy and quality. This process can lead to a more efficient review by Health Canada and reduce the overall review time for a new drug, while maintaining the high standards of scientific review.
- The evidence provided must always show that the drug is safe, effective and of high quality before Health Canada approves the drug for use by Canadians.
- A similar approach was taken for the approval of the H1N1 vaccine.

Using this approach for remdesivir



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

Remdesivir for COVID-19 treatment

- Canadians and their families who have COVID-19 need access to health products for diagnosis and treatment.
- Currently, there are no drugs in Canada specifically approved to treat or prevent COVID-19. Health Canada has been closely monitoring developments in potential treatments for COVID-19, including remdesivir.
- Remdesivir is an experimental drug that has been used within the framework of clinical trials to treat some patients hospitalized with COVID-19. While there is evidence from preliminary clinical trials suggesting that remdesivir may help patients recover more quickly, the efficacy of this drug in treating COVID-19 remains to be established and a review of clinical data will be required once it is submitted to Health Canada.
- In Canada, Health Canada has so far approved two remdesivir clinical trials with regards to COVID-19. Access to remdesivir through clinical trials is available at several sites across the country. More information on approved tests is available on our [website](#).
- Health Canada has not yet received a submission for approval to use remdesivir to treat COVID-19. If the company files a submission for remdesivir, Health Canada will exercise the regulatory flexibility available to it in the event of a public health emergency to allow the company to file a submission earlier and continue to submit information on the safety, efficacy and quality of the drug. Health Canada will assess this information on an ongoing basis.
- If remdesivir is authorized for use in Canada, Health Canada will work with the company to ensure Canadians have access to the drug, while recognizing the global demand for this product.
- The available evidence must still demonstrate that the drug is safe, effective and of high quality before Health Canada will authorize its use by Canadians.
- Companies or health care professionals who are treating COVID-19 patients and who are interested in conducting a clinical trial to evaluate the efficacy of remdesivir or other drugs are encouraged to contact Health Canada.
- Health Canada will facilitate faster access to potential vaccines or therapeutic products meant to treat COVID-19 by expediting the review of any health product submission and



clinical trial application related to COVID-19, while ensuring that the review maintains the same levels of safety, efficacy and quality.

If pressed on promising evidence with regards to remdesivir:

- Remdesivir is an experimental drug that has not yet been approved in any country. It was originally developed as a potential treatment for the Ebola virus and showed promise in the treatment of SARS.
- 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 give Canadians access to new treatments to treat COVID-19 and provide the medical community with an opportunity to systematically collect information on the effectiveness of treatments and associated risks.
- The US National Institute of Health (NIH) has published information from a randomized, placebo-controlled clinical trial suggesting that remdesivir may have a positive effect on COVID-19 outcomes. Specifically, early results from a trial conducted by the U.S. National Institute of Allergy and Infectious Diseases (NIAID) show that hospitalized patients receiving remdesivir have a faster cure rate than those receiving a placebo. However, the complete trial data have not yet been submitted to Health Canada for critical review.
 - According to information published by the NIH, patients who received remdesivir had a 31% faster recovery time than those who received a placebo. The median recovery time was 11 days for patients treated with remdesivir compared to 15 days for those who received a placebo.
- Health Canada recognizes the urgent need for COVID-19 treatment and 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 pathway, including a flexible ongoing review process recently made available by Health Canada, and to provide advice on how best to file for market access in Canada.

If pressed on 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 Program (SAP).
- Should remdesivir be authorized for use in Canada, Health Canada will work with the company to ensure Canadians have access to it.



- At present, a very small number of patients have been treated with remdesivir in Canada under special or compassionate access programs.
- Due to the strong global demand for remdesivir, Canadians will be able to access it primarily through clinical trials. Access through SAP will be possible for certain groups, such as pregnant women or children with a confirmed case of COVID-19 and a serious illness.
- Health Canada is in discussions with Gilead Sciences Canada, Inc., the manufacturer of remdesivir, about an expedited regulatory pathway and how best to file for market access in Canada. The company has been informed of the possibility of a rolling submission, which is only available in the event of a public health emergency.

Medical supplies and appliances

Canada's supply of 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 whatever it takes to protect the health of Canadians; especially front-line health-care workers, from COVID-19.
- The Government of Canada is working with provincial and territorial governments to quickly assess needs for PPE (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 striving to rapidly distribute PPE and medical supplies to the provinces and territories based on an approach agreed upon by federal, provincial and territorial ministers of health.
- The Public Health Agency of Canada (PHAC) also sends 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 may request in emergency situations, such as an infectious disease outbreak. Its purpose 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)

- To support the Government-wide response to COVID-19, in recent weeks we have:
 - expedited access to COVID-19-related medical devices such as test kits.
 - expedited licensing of establishment and product licences.
 - addressed shortages by permitting the importation and sale of medical devices that are not approved in Canada, subject to certain requirements.
 - facilitated access to products that may not fully meet current regulatory requirements, such as bilingual labelling, including personal protective equipment (such as masks and gowns), swabs, hand sanitizers, and hard-surface disinfectants.
 - amended the *Food and Drugs Act* and the *Patent Act* to support efforts to help prevent and alleviate shortages.

Health Canada will monitor and evaluate the safety, quality and effectiveness of all products allowed for import and sale under these special measures.

Shortage of gowns

- Gowns are essential in protecting health care workers during the COVID-19 pandemic. However, the growing global demand for gowns has caused a temporary shortage in Canada and elsewhere the world.
- To help health care settings develop strategies to continue to keep health care workers safe while caring for patients, the Public Health Agency of Canada and Health Canada have developed recommendations for conserving and prioritizing gown use, and gown alternatives and expired gowns.
- The Government of Canada is working hard to get personal protective equipment (PPE) and medical supplies to health care workers through bulk procurement in collaboration with the provinces and territories, ramping up domestic production capacity, and identifying potential alternatives, and ways to extend product life.
- The Government of Canada ordered gowns and began receiving shipments from international and domestic suppliers. The Public Health Agency is working rapidly to allocate these items to provinces and territories as per an approach agreed upon by federal-provincial-territorial (FPT) Ministers of Health.

Conservation strategies



- To conserve the inventory of gowns that provide protection from droplets and fluids, health care settings should implement environmental and administrative controls to minimize the strain on gown use.
- These controls could include
 - Installing physical barriers between health care workers and potentially contagious persons in controlled areas
 - Reducing, postponing or cancelling non-essential activities or procedures that may require gowns
 - Exploring ways to speed up laundering and returning reusable gowns
 - Limiting the number of visitors to patient rooms where gowns are normally required
 - Using gowns not usually used in this context (e.g., surgical gowns), if inventory and surgical workload permit

Protective gown alternatives

- Gown alternatives or supplements (e.g. coveralls, lab coats, aprons) may be more difficult to put on and take off than protective gowns, which may increase the risk of contamination.
- It is also important to note that the level of droplet and fluid protection offered by alternatives or additions to gowns varies.
- To extend the life of protective gowns, health care workers may wear an apron on top of their gown that they can change between patients.
- If protective gowns are not available, combinations of gown alternatives may need to be considered to provide adequate protection where there may be exposure to body fluids.

Expired and reusable gowns

- Health Canada does not recommend the use of disposable medical gowns that have expired without confirming that they are still fluid resistant.
- Reusable (i.e. washable) gowns may be washed after each use, following manufacturer's instructions regarding sterility and bleaching requirements for health care facilities, including the number of times the gowns may be washed without affecting their performance, safety and efficacy.
- Reusable gowns may be used beyond the recommended shelf life provided they are not damaged. Expired disposable gowns must be visually inspected for damage before use.

Orders and domestic production of medical gowns



- Due to the worldwide demand for PPE, some materials normally used for the manufacture of gowns are being reassigned to the production of masks. As a result, manufacturers around the world have difficulty filling orders, resulting in production and shipping delays.
- In order to meet domestic needs, Canada has strengthened its production capacity. Innovation, Science and Economic Development Canada, and Public Services and Procurement Canada have reached out to domestic industry with regards to gown production and thanks to the efforts of several companies deliveries have already begun.
- To date, Public Services and Procurement Canada has ordered more than 130 million gowns. More than 200 000 gowns have been delivered to PHAC, with more deliveries planned in the coming weeks.

Procurement contracts to increase supplies in Canada

- Innovation, Science and Economic Development Canada and Public Services and Procurement Canada continue to galvanize Canadian industries to increase domestic production capability. Specifically, factories are being re-tooled to produce equipment and supplies including portable respirators, surgical masks and rapid test kits.
- As a result of these efforts, the Government of Canada has signed procurement agreements with Canadian companies such as 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, to produce test kits, hand sanitizer and protective apparel, including masks and gowns.
- Canada Goose has received its Medical Device Establishment Licence from Health Canada. This will allow the company to retool its facilities to produce gowns.
- Throughout this process, PHAC and Health Canada played a leading role in conducting technical reviews to ensure that products met the Government of Canada's technical specifications for COVID-19, which are set out on Public Services and Procurement Canada's Buy and Sell website.
- The Government of Canada also awarded a contract to Amazon, who manages the logistics of PPE distribution and supplies in order to support the fight against COVID-19.
- Amazon will work directly with Canada Post to provide storage services. Amazon will also use its current delivery service providers, Canada Post and Purolator, to ship products to the health authorities of all provinces and territories for use by front-line health-care workers.



Invitation to submit a statement of interest for logistics service delivery

- The Government of Canada is working hard to obtain personal protective equipment (PPE) to provide to front-line health-care workers across the country.
- To support these efforts, the Government of Canada is launching an invitation to submit a statement of interest to logistics service providers to facilitate the timely receipt and distribution of an extraordinary volume of PPE orders across Canada.
- This new statement of interest is for a different end-to-end logistics solution than the one provided for in the current agreement with Amazon. It includes warehousing, customs and brokerage documents and inventory management.
- PHAC will continue to monitor the quantities of PPE and supplies available, the provinces and territories that request them and the locations to which the equipment is shipped.

PPE purchases and donations

- PHAC verifies all purchased or donated medical supplies and personal protective equipment received by the Government of Canada. PHAC's role is to ensure compliance with the technical specifications for COVID-19 products provided 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 the flow rate, pressure drop and penetration meet the requirements for filtration masks. The gowns are visually inspected and tested for liquid resistance.
- Some of the supplies may be unknown to our health care providers. The supplies that satisfy the relevant technical specifications are distributed to the provinces and territories with documentation confirming their compliance and providing instructions for use.
- For example, supplies received from China may be labelled in Mandarin. PHAC cannot replace all the item labels while ensuring timely distribution. Therefore, provinces and territories are encouraged to follow PHAC's instructions accompanying the supplies, all while ensuring appropriate training of front-line health-care workers.
- The KN95 mask is another example. Fit testing is standard procedure for the N95 mask. However, the KN95 mask cannot be tested this way. This is why PHAC will request that the provinces and territories perform fit testing. Since health-care workers may be unfamiliar with this process, they will be provided with instructions.



- The Government of Canada appreciates the generous PPE donations coming from many international and national organizations. These include the Jack Ma Foundation/Alibaba, Home Depot, Apple, CBC/Radio-Canada, Shell, AstraZeneca, and many others.
- We are pleased to see so many Canadians stepping up and helping those who need it most.

Coordinated Government of Canada response to purchasing equipment and supplies

- The Government of Canada has taken a coordinated approach to distribute the needed supplies and equipment across the country.
 - **Public Services and Procurement Canada:** PSPC is leveraging existing supply arrangements and reaching out to the domestic and international supply communities to identify and purchase required products.

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

- **Public Health Agency of Canada:** PHAC ensures collaboration with federal partners, provinces and territories to identify needs and requirements for the COVID-19 response. The Agency also oversees Canada's National Emergency Strategic Stockpile, which contains supplies provinces and territories can request for surge support.
- **Health Canada:** As the regulatory agency for 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 also adopted an interim measure to facilitate access to certain products, such as PPE.

Under the Interim Order, a medical device licence is required to sell and import higher-risk medical devices in Canada.

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

- **Innovation, Science and Economic Development Canada:** ISED is leading Canada's Plan to Mobilize Industry to fight COVID-19. It introduces new measures to directly support businesses seeking to rapidly increase 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:** The NRC's Industrial Research Assistance Program builds on its existing relationships with thousands of Canada's most innovative small and medium-sized businesses to challenge the marketplace to find innovative solutions to fight COVID-19.

Reuse of single-use medical devices

- As with other hospital practices, the purchase and use of reprocessed medical devices by health care institutions is the responsibility of provincial and territorial governments.
- Given the shortage of some medical devices caused by COVID-19, Health Canada is working on guidelines for cleaning and sterilizing single-use medical devices.
- In recent weeks, the Government of Canada has taken additional emergency measures to facilitate access to new COVID-19 diagnostic test kits, disinfectants, hand sanitizers, personal protective equipment and swabs for testing.

N95 Masks - Decontamination and reuse

- N95 masks used by health-care workers are labelled as single-use products.
- Like many other countries, the Government of Canada is exploring ways to extend the use of personal protective equipment (PPE), such as N95 masks, through decontamination to help Canada meet its supply needs.
- The Government of Canada has asked the provinces and territories, as well as health-care providers, to keep used N95 masks and store them in accordance with local biosafety standards and guidelines, while it verifies the effectiveness of the decontamination processes.
- Health Canada has already authorized certain devices for decontaminating N95 masks under the Interim Order respecting Medical Devices. Products and manufacturing processes must meet safety, quality and efficacy requirements to protect the health and safety of Canadians.
- The Government of Canada has acquired decontamination equipment to increase provincial and territorial capacity to reprocess N95 masks as needed.
- Other countries have adopted this approach, including the United States.
- The Government of Canada is working hard to provide PPE and medical supplies to health-care workers by making bulk purchases in collaboration with the provinces and territories, increasing domestic production capacity and seeking alternatives and ways to extend product life.



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

- On April 15, 2020, the Government of Canada entered into a contract with Stryker Canada for the purchase of 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 made in Canada.
- The Government of Canada will continue to work closely with all provinces and territories to address their potential needs for additional decontamination and reprocessing capacity.
- The National Research Council of Canada has purchased 20 Clean Flow Mini medical devices for health care to share with hospitals to research mask decontamination.

About Health Canada's considerations for the reprocessing of N95 single-use masks to fight COVID-19

- The Government of Canada recognizes that mask reprocessing is one possible solution that would provide an additional supply of masks for health care workers who rely on them for protection.
- Due to the risk of PPE shortages during the COVID-19 response, the Government of Canada continues to work with manufacturers to identify alternative technologies to effectively decontaminate single-use N95 masks for safe reuse by front-line health care professionals.
- Decontamination is an acceptable way to make masks safe for reuse. Companies are required to prove that their processes adequately decontaminate masks for reuse.
- Health Canada has published a [notice](#) informing manufacturers of important regulatory provisions that they must consider when demonstrating that their methods for decontaminating single-use N95 masks meet key safety and effectiveness requirements.
- The Department has also published a [notice](#) containing important considerations for health professionals, which provides further information on Health Canada's evidence requirements to ensure that products and manufacturing processes meet mandatory standards required for safety, quality and effectiveness.
- Manufacturers who wish to reprocess medical devices for use in relation to COVID-19 can apply for expedited authorization under the [Interim Order](#) issued on March 18, 2020. This is a streamlined regulatory process to address the health crisis.
- Two approaches can be taken:
 - companies can provide sterilization or decontamination devices or systems to health care facilities for reprocessing single-use N95 masks;



- they can reprocess single-use N95 masks themselves and redistribute them to health care facilities.
- Health care facilities that have sterilizers that allow them to reprocess N95 masks internally may perform this activity without authorization from Health Canada. However, the Department strongly recommends that they only use technologies authorized by Health Canada.
- The Government of Canada will continue to communicate with the health care community as well as the provinces and territories to monitor the quantity of PPE and to explore possible ways to reprocess N95 masks.
- Our goal is to find solutions quickly and effectively to meet the urgent need for safe and effective PPE in the healthcare community.

Authorizations under the Interim Order Respecting Medical Devices

- Health Canada has invited medical device manufacturers with extensive experience in manufacturing decontamination and reprocessing equipment to submit an application for authorization of these technologies for the safe and effective reprocessing of N95 masks and other PPE. As it does for all products used to fight COVID-19, Health Canada is expediting the application process for these products and making it its top priority.
- Under the Interim Order Respecting Medical Devices ([link](#)), Health Canada has authorized the expansion of the intended use of sterilizers and the use of new devices for reprocessing N95 masks.
- A list of authorized devices is available [here](#) (search for “sterilizer” or “decontamination” in the “technology” column). This list will be updated regularly as new devices become authorized under the Interim Order.
- Health Canada will continue to monitor current international trends and evaluate the evidence supporting various decontamination and sterilization methods and strategies for reprocessing other PPE, such as single-use surgical masks, used as part of the COVID-19 response.

About our current guidelines

- In May 2016, Health Canada published a [notice](#) to industry on the reuse of single-use medical devices.
- Companies that reprocess medical devices that are originally licensed and labelled for single use and distribute them to health care facilities in Canada are subject to the same requirements by Health Canada as manufacturers of new devices.
- All manufacturers of authorized sterilizers or decontamination devices have their own guidelines that guide users on how to use the device to decontaminate masks, including:
 - instructions for health care facilities;



- instructions for caregivers;
 - an information sheet on the decontamination of N95 masks.
- Health Canada has also published a notice containing important considerations for health professionals, which provides further information on Health Canada's evidence requirements to ensure that products and manufacturing processes meet mandatory standards required for safety, quality and effectiveness.

About the report to Canada's Chief Science Advisor: working group on reprocessing N95 masks

- Experts from PHAC and Health Canada were among the members of the working group that reviewed the available evidence on the reprocessing and reuse of N95 masks (also known as respirators or N95 respirators) in light of potential shortages of these devices.
- The working group conducted an expedited review of options for reprocessing the masks using ultraviolet light, heat and microwaves and chemicals such as hydrogen peroxide.
- The recommendations in this report are consistent with current plans and practices supported by PHAC and Health Canada.
- Since the submission of the report, Health Canada has approved additional reprocessing technologies. The Department will continue to quickly assess all technologies related to COVID-19.

Legislative changes

Key messages regarding legislative changes

- To facilitate Canada's response to COVID-19, the new legislative amendments will grant the Minister of Health new powers to:
 - introduce regulations that help prevent or alleviate drug and medical device shortages;
 - request additional information from companies that produce food, drugs, cosmetics or medical devices to assess the new products' risks and benefits and to confirm that they are safe for Canadians;
 - obtain authorization for third-party manufacturers to provide the necessary patented inventions, such as drugs or medical equipment, to whatever extent is required to fight this pandemic.
- These measures received Royal Assent on March 25, 2020, and came into force immediately.
- Changes to the *Food and Drugs Act* and the authority granted to the Commissioner of Patents to give authorizations will remain in force until September 30, 2020.



- Health Canada is committed to implementing the necessary measures to continue protecting the health and safety of Canadians during this pandemic. It will take appropriate action, in collaboration with the provinces and territories, and other stakeholders, to ensure the supply of drugs and medical devices needed in Canada.

Compatibility of these changes with the *Protecting Canadians from Unsafe Drugs Act (Vanessa's Law)*

- These amendments complement the powers granted by Vanessa's law:
 - by granting the authority to collect additional safety information to guide decisions about new products marketed, or already on the market, in Canada;
 - by expanding the scope of these powers to include other potential new products, including cosmetics and special dietary foods, that may be required to address shortages during the pandemic.

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

- A number of people with substance use disorder, or who live with chronic pain, may have difficulty effectively applying physical distancing principles if no changes are made to prescription and distribution practices. In these times of emergency, we must do everything we can to give these people access to the medications they need.
- Health Canada is working with the provinces and territories to undertake concrete action to enable patients and practitioners to reduce social interactions without limiting access to essential medications.
- On March 19, 2020, Health Canada issued a six-month exemption for prescriptions for controlled substances (such as narcotics) under the *Controlled Drugs and Substances Act* and its regulations. This temporary exemption allows pharmacists to prescribe, sell or provide controlled substances in limited circumstances, or to transfer prescriptions for these substances.
- In accordance with the laws and regulations of the province or territory in which the pharmacist is licensed to practice, the exemption:
 - Allows pharmacists to extend or renew prescriptions;
 - Allows pharmacists to transfer prescriptions to other pharmacists;
 - Authorize pharmacy employees to deliver controlled substances to a patient's home or any other location they may be.
- To facilitate physical distancing and reduce pressure on emergency rooms and health care professionals across Canada during the COVID-19 pandemic, the temporary exemption also allows prescribers, including nurse practitioners, to verbally authorize the extension or renewal of a prescription (e.g., by telephone).
- The exemption will be in effect until September 30, 2020, but may be extended or ended earlier by Health Canada if necessary.



- Amendments to legislation and regulations in some provinces or territories may be required to allow pharmacists and nurse practitioners to carry out these new activities. Health Canada recommends that you contact a pharmacist or the regulatory agency in your province or territory to find out if and when these services will be 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 similar exemptions during the 2020 winter storm in Newfoundland and Labrador.

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

- The ongoing COVID-19 pandemic has significant impacts on Canadians and the health care system. It is essential to ensure that the Government of Canada can respond effectively to the needs of those impacted.
- In response to the COVID-19 pandemic, the Minister of Health signed an Interim Order to help prevent and alleviate shortages of drugs, medical devices, and foods for a special dietary purpose, whether they result directly or indirectly from the pandemic.
- Upon its entry 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 pharmaceuticals and medical devices, Health Canada will assess and monitor the safety, security, quality, and effectiveness of all products allowed to be imported and sold under the Interim Order. Drug and medical device manufacturers will be required to comply with strict monitoring requirements.
- The Interim Order will also require manufacturers and importers of medical devices deemed essential during the COVID-19 pandemic to report existing or anticipated shortages, as is currently the case with drugs. Those responsible for health care systems will be better prepared to redistribute materials based on needs, thereby providing Canadians with ongoing access to these products.
- The Interim Order will also expedite the marketing of certain hard surface disinfectants and hand sanitizers.
- Collectively, these measures will improve access to drugs, medical devices, and foods for a special dietary purpose that Canadians need to stay healthy and safe. They will also help sick patients recover.

Interim Order Respecting COVID-19-Related Medical Devices

- A diagnosis is essential to slow and reduce the spread of COVID-19 in Canada.



- As an emergency public health measure, the Minister of Health signed an Interim Order for expedited access to medical devices related to COVID-19.
- With the Interim Order, two new diagnostic tests are made readily accessible in Canada:
 - The Roche Molecular Systems Inc. cobas SARS-CoV-2 diagnostic test; and
 - The ThermoFisher Scientific TaqPath™ COVID-19 Combo Kit.
- For the Government of Canada, an Interim Order is one of the fastest mechanisms for making health products required to respond to major public health emergencies available.

If pressed on the US directive to allow unauthorized health products

- Health Canada will continue to use all tools at its disposal to expedite supply of safe and effective COVID-19-related health products. 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.

Border measures

- The Government of Canada continues establishing 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 in Canada, including COVID-19.
- The Canada Border Services Agency (CBSA) is working closely with the Public Health Agency of Canada (PHAC) to help prevent the spread of 2019 novel coronavirus into Canada at all international points of entry.
- PHAC must advise the CBSA of any required enhanced measures to be implemented at the Canadian border to help prevent the spread of serious infectious diseases into Canada.
- Canadian citizens, permanent residents and Registered Indians under the *Indian Act* continue to enter Canada by right, and are subject to COVID-19 entry control measures.
- To protect Canadians and to ease the potential burden non-essential travellers could place on our health care system and its frontline workers, the CBSA has implemented new travel restrictions across all points of entry in all modes of transportation—land, sea, air and rail.



- A travel ban is currently in place for most people entering Canada*, including:
 - All foreign nationals entering Canada by air;
 - All travellers from the U.S., across all modes, for recreation and/or tourism purposes;
 - Foreign nationals entering Canada if they arrive from a foreign country other than the United States, with some exceptions, including temporary foreign workers and international students;
 - Foreign nationals entering from the U.S. with signs or symptoms of respiratory illness.

**There are exceptions to the bans that are described in the Orders in Council.*

- Canada and the US have also entered into a mutual agreement to send back all asylum seekers. Exceptions can be made in unique circumstances, such as in the case of an unaccompanied minor.
- Every person 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 that critical infrastructure, essential services and economic supply chains continue between Canada and the U.S. Workers who are essential to our economy and infrastructures are permitted to enter Canada. They include truck drivers, firefighters and medical workers.
- Cross-border supply chains are vital to ensure the continued flow of goods, including food and medical supplies for all Canadians. CBSA is working with other federal partners to share information with commercial stakeholders and provide reassurance that commercial traffic is unimpeded.

ArriveCAN Mobile App

- In accordance with the Emergency Orders issued under the *Quarantine Act*, all persons entering Canada must quarantine (self-isolate) or isolate themselves for 14 days.
- To guarantee that the Order is properly observed, all travellers entering Canada are required, upon arrival, to provide the Government of Canada with essential contact information, report their symptoms and confirm that they have prepared a self-isolation plan.
- Until now, this information had been collected on a paper or online form upon travellers' arrival in Canada.
- The ArriveCAN mobile app, launched during the week of April 29, is an alternative to the paper form that can speed up the entry process at the Canadian border. Travellers are encouraged to use it.
- With ArriveCAN, travellers arriving in Canada can enter their information quickly, easily and securely into a digital version of the coronavirus form.



- Electronic reporting further protects travellers and border services/quarantine officers by reducing physical contact.
- Through the app, travellers can enter the same information as requested on the paper and online coronavirus forms.
- Additional information is now required from travellers, such as flight or border crossing information, whether they have any COVID-19 symptoms and whether they have a self-isolation plan in place.
- Personal information collected through the paper form, online form and the ArriveCAN app by border services officers and quarantine officers will enable the Public Health Agency of Canada to check that travellers are complying with the Quarantine Act. The information will be shared with the provinces and territories, and law enforcement agencies to ensure compliance with the Order.
- The protection of Canadians' personal information is a priority for the Government of Canada, and any tool used to collect personal information undergoes a rigorous privacy assessment.
- Personal information is used to administer and enforce the *Minimizing the Risk of Exposure to COVID-19 in Canada Order (Mandatory Isolation) No. 2*, under the Quarantine Act or the Department of Health Act. Personal information may be used or disclosed for the following purposes: (1) to monitor, verify and/or enforce compliance with the Mandatory Isolation Order (2) to inform travellers to help them comply with the Mandatory Isolation Order, and (3) to support public health follow-up activities.
- In accordance with the *Privacy Act* and its regulations, CBSA and PHAC must retain personal information entrusted to them. Personal information used for administrative purposes, such as that collected through the application, is retained for at least two years following the date of the last use of the information.
- The ArriveCAN app supports the Government of Canada's digital service delivery strategy and its Government Greening Strategy.

Non-essential travel restrictions (Canada-US)

- 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-U.S. border in response to the spread of COVID-19.
- As of March 21 at 12:01 a.m. EST, there is a temporary 30-day restriction on all non-essential travel between the Canada-U.S. border. This initial period of 30 days is renewable.
- All travel of an optional or discretionary nature, including tourism and recreation, are affected by these measures. Travel for healthy people who need to cross the border to go to work or for other essential purposes, such as medical care, continue.



- Examples of essential travel purposes:
 - crossing the border for work or study
 - economic services and supply chains
 - critical infrastructure support
 - health (immediate medical care), safety and security
 - shopping for essential goods such as medication or goods necessary to preserve 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 Registered Indians under the *Indian Act* have the right to enter Canada. They are provided with a pamphlet from the Public Health Agency of Canada, which advises the travellers that they must self-isolate for 14 days from the date they enter Canada.

Canada has also implemented measures at airports designed to:

- reinforce health screening;
- increase their presence to conduct further health screenings and public interventions;
- increase signage throughout the arrival areas to encourage travellers to follow the latest public health guidance;
- prevent all travellers who having COVID-19 symptoms, regardless of their citizenship, from boarding international flights to Canada;
 - airlines will conduct a basic health assessment of all travellers based on the Public Health Agency of Canada directives
- This includes making information readily available and raising awareness among **all** travellers about what they should do if they develop COVID-19 symptoms. In addition, we continue to advise travellers coming from any destination to monitor themselves for signs and symptoms of COVID-19.
- We continue to monitor and assess the global risk associated with the COVID-19. To keep pace with the evolving situation, our response measures are being adjusted and improved in accordance with the global risk assessment. This includes updating our travel health notices concerning increased risk levels.

The Government of Alberta introduces enhanced screening measures at border crossings and ports of entry

- All levels of government are working closely together, to the extent possible, to streamline public health measures to address the COVID-19 pandemic.
- Public health authorities are closely monitoring the outbreak in Canada to see when there will be a stable and sustained slowdown, while carefully evaluating approaches to easing public health restrictions when and where possible.
- The epidemiological characteristics of COVID-19 vary from one province and territory to another. As a result, public health measures will vary across provinces and territories, and possibly even across regions of 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 checks.
- Federal officials responsible for screening travellers entering Canada continue to follow guidelines requiring them to ask people to report the presence of any symptoms related to COVID-19.
- Each province or territory in Canada examines different situations and develops risk-based approaches and assessments, depending on what is happening within its borders.
- The Government of Canada is working with provincial, territorial and international partners to ensure that its response to the COVID-19 pandemic is based on the latest science and assessments.
- 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 10 – Mandatory isolation

- The Government of Canada's top priority is the health and safety of Canadians. We are taking unprecedented action to fight the COVID-19 outbreak. One of these measures is continuously assessing risks in order to adapt our response accordingly.
- The Emergency Order issued by the Government of Canada under the *Quarantine Act* already requires individuals entering Canada by air, land, or sea to self-isolate for 14 days if displaying symptoms of COVID-19 or quarantine for 14 days if they are asymptomatic to limit the spread of the disease.
- An updated Order in Council is issued to clarify terminology. It is based on new scientific data showing that asymptomatic people can spread the virus.
- Under the updated Order, travellers arriving in Canada, symptomatic or not, cannot self-isolate or quarantine themselves (when applicable) in the same place as vulnerable people, such as adults 65 years of age or older or people with pre-existing medical conditions.
- In addition, each traveller needs to confirm that they can self-isolate or quarantine in a suitable place where they have access to essential goods such as food and medication. Travellers need to make arrangements for self-isolation or quarantine prior to arriving in Canada. Travellers without a suitable place to isolate or quarantine must go to a location designated by the Chief Public Health Officer of Canada. These criteria are newly applied to asymptomatic travellers.
- Compliance with this Order is mandatory for anyone entering Canada on or after April 15, 2020.



- If symptomatic travellers do not have private transportation or an appropriate place to isolate, they must isolate in a location designated by the Chief Public Health Officer of Canada for 14 days.
- Asymptomatic travellers are still at risk of infecting others and must wear a non-medical mask or face shield (i.e., manufactured to completely and comfortably cover the nose and mouth and that fits securely with ear loops or ties behind the head and neck) on the way to their destination where they are required to quarantine for 14 days. They must also follow the public health authority's instructions designated by the Screening Officer or Quarantine Officer if they develop signs and symptoms of COVID-19. They will be provided with a mask if they do not have one.
- Symptomatic travellers arriving in Canada are also required to wear a non-medical mask or face covering while proceeding to their final destination where they isolate; or when they cannot stay more than two metres away from other people.
- Asymptomatic travellers who do not have an appropriate location to self-isolate or quarantine are subject to the same requirements as symptomatic travellers and must go to a location designated by the Chief Public Health Officer of Canada.
- Certain people who cross the border regularly to ensure the continued flow of goods and essential services, as well as individuals who receive or provide other essential services to Canadians, are exempt from self-isolation, as long as they are asymptomatic (i.e., do not have symptoms of COVID-19).
- Those exempted must wear a non-medical mask or face shield while travelling to their final destination. Upon arrival at their destination, individuals exempt from the Order must practise physical distancing, consider wearing a mask or any other face covering when physical distancing at two metres from others is not possible, self-monitor for symptoms, stay in their place of residence as much as possible, and follow the instructions of their local public health authority if they feel sick.
- This decision was based on the latest scientific data and discussions we have had with the provinces and territories.
- These supplementary measures will contribute to containing the outbreak and preventing further spread of COVID-19 in Canada.
- They also help protect older people and people with pre-existing medical conditions that are at greater risk of severe health complications related to COVID-19.
- The Government of Canada continues to work closely with regional, provincial, territorial and international partners to limit the introduction of COVID-19.

Enforcement of the Act:

- Spot checks are conducted by the Government of Canada to ensure compliance.



- Penalties for non-compliance with this Order include a maximum fine of up to \$750,000, six months imprisonment, or both.
- A person who causes a risk of imminent death or serious bodily harm to another person while deliberately or recklessly contravening the Quarantine Act could be liable to a fine of up to \$1 million, up to three years imprisonment, or both.
- Amendments are being made to the Contraventions Regulations specific to offences under the Quarantine Act as contraventions. These offences will be designated as contraventions subject to fines.
- The fine amounts could range between \$75 and \$1,000. For a contravention committed by a young person, the fine is \$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 Montréal.
- 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 considered necessary.

OIC 11 - Minimizing the Risk of Exposure to COVID-19 Coronavirus Disease in Canada Order (prohibition of entry into Canada from the United States)

- Foreign nationals who may enter Canada include temporary foreign workers, some students, persons delivering urgent medical supplies and certain categories of asylum claimants, including persons who arrive in Canada at a land point of entry and may make a claim for refugee protection under the Safe Third Country Agreement (STCA).
- All foreign nationals permitted to enter Canada must meet the requirements of the Emergency Orders made under the *Quarantine Act*, including mandatory quarantine for 14 days upon entering Canada unless they have received a specific exemption. They must also comply with provincial and territorial emergency orders and local health guidelines.
- Foreign nationals typically will not be allowed to enter Canada for optional or discretionary purposes if they have any symptoms of COVID-19.
- Temporary foreign workers are necessary to ensure the resilience of our food industry and supply chain in order for all Canadians to have access to essential food and products during this pandemic.
- The *Minimizing the Risk of Exposure to COVID-19 Coronavirus Disease in Canada Order (prohibition of entry into Canada from the United States)* is in force from April 22 to May 21, 2020.



- The amendments to this Order will ensure that Canada continues to meet its international obligations with respect to refugees and asylum seekers.
- These measures will help prevent the spread of the disease in Canada while guaranteeing that essential travel and supply chains are not disrupted.

On foreign nationals who wish to make an asylum claim

- Foreign nationals who enter Canada between official ports of entry to make an asylum claim will still be sent back to the United States, which is designated as a safe third country.
- Any foreign national arriving from the U.S. who presents at an official land port of entry and meets one of the STCA exemptions—whether symptomatic or not—is exempted from the prohibition on entry, and may enter to make a claim for refugee protection.
- Claimants who are unable to meet Canada’s mandatory quarantine/isolation requirements will be transferred to a federal location.

On the enforcement of this Order

- Failure to comply with this Order is an offence under the *Quarantine Act*.
- Maximum penalties include a fine of up to \$750,000 or imprisonment for six months, or both. In addition, any person who causes a risk of imminent death or serious bodily harm to another person while deliberately or recklessly contravening this Act or the regulations could be liable for a fine of up to \$1,000,000 or imprisonment of up to three years, or both.
- In addition, amendments have been made to the Contraventions Regulations to make non-compliance with specific requirements under the *Quarantine Act* contraventions for which tickets can be issued.
- Statements of offence can lead to fines ranging from \$275 to \$1,000. For young persons, the fine is \$100.

On essential travel to Canada by foreign nationals departing from the United States

- Essential travels continue without restriction. Both governments recognize the importance of maintaining vital supply chains between the two countries. These supply chains ensure that food, fuel, and essential pharmaceuticals reach people on both sides of the border.

If pressed



Foreign nationals permitted to enter Canada include:

- Persons who arrived at an official land port of entry and are permitted to make a claim for refugee protection pursuant to the Safe Third Country Agreement
- Persons who are Registered Indians under the *Indian Act*
- Protected persons

In addition, provided that they are seeking entry into Canada for reasons that are not optional or discretionary and that do not present COVID-19 symptoms, foreign nationals in the following categories may also enter into Canada.

Foreign nationals in these categories must still prove that they are travelling to Canada for essential purposes and they 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 that was approved 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 paragraph 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
- Canadian citizens' and permanent residents' immediate family
- persons authorized by consular services to enter Canada for purposes of reuniting with immediate family
- Transportation crews (e.g., air, boat, etc.) or workers on marine vessels
- diplomats
- persons invited by Canada for the purpose of assisting in the COVID-19 response
- Individuals on military flights or others that support the Canadian military
- protected persons
- French citizens that reside in Saint-Pierre and Miquelon, and have only been to Saint-Pierre and Miquelon, the United States or Canada during the 14 day period before the day on which they arrived to Canada
- persons whose entry is in the national interest in terms of public safety and emergency preparedness
- persons who provide essential services or who are essential for the transport of goods, such as truck drivers and marine carriers
- emergency service workers
- licensed health care 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 similar body parts, that are required for patient care in Canada
- persons who, in the opinion of the Chief Public Health Officer of Canada, do not pose a risk of significant harm to public health

Health screening of Canadian travellers returning to Canada

- As part of Canada's enhanced border measures to restrict further introduction and spread of COVID-19, airlines conduct a health check on all travellers before they board 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 are screened for the following symptoms by the airline crew:
 - fever
 - cough
 - difficulty breathing
- If an airline observes a traveller with symptoms or if the passenger answers yes to any of the health check questions, the airline won't allow them to board for 14 days or until they provide a medical certificate confirming that their symptoms are not related to COVID-19.
- Further instructions and advice is provided to travellers who are denied boarding advising them to follow the guidance of local public health authorities. These travellers are also referred to the appropriate consular services.
- These measures help protect the health of all Canadians.

On the health check

- Airline staff will be instructed to maintain distance between themselves and travellers at all times, and to encourage travellers to do so as well.
- Airline staff will verify if travellers show symptoms of COVID-19 and ask every traveller if they have fever, a cough or difficulty breathing.
- They also ask if travellers have been denied boarding in the past 14 days due to a medical reason related to COVID-19.
- Travellers can provide a medical certificate certifying that any symptoms they have are unrelated to COVID-19.
- These measures affect travellers, not flight crew members.

On enforcement



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

When you arrive in Canada

- All travellers found to be symptomatic during the flight are met by border services officers upon arrival at a Canadian airport. Officers ensure to keep them away from other passengers and escort them to public health personnel, who assume responsibility for them from there.
- All persons arriving in Canada at an air, land, marine or rail border are asked about the purpose of their visit and whether they are feeling ill or unwell. The border services officer may ask additional questions to determine whether the travel is essential or non essential.
- CBSA officers observe for signs of illness and refer any traveller suspected of being ill to the Public Health Agency of Canada for further medical assessment, regardless of how travellers respond 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 amongst others during periods of uncertainty. It is part of a multi-level government response strategy.
- CBSA officers remain vigilant and are highly trained to identify travellers seeking entry into Canada who may pose a health and safety risk.
- CBSA officers provide symptomatic travellers with a kit that includes a surgical mask and instructions on how to use it.
- These measures complement routine traveller screening procedures already in place 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 of all air, land, rail and sea ports of entry:
 - “Do you currently have a cough, difficulty breathing, or feel feverish?”
 - “I/we acknowledge that I/we must self-isolate for 14 days to prevent the potential spread of COVID-19.”
- CBSA Officers don’t only query travellers on the state of their health, they are trained to observe visible signs of illness. They will refer any traveller whom they suspect is ill, regardless of how the traveller responded to the health screening question.
- Travellers presenting symptoms of COVID-19 are referred to a PHAC staff member for further assessment.
- These travellers are provided with a kit that includes a mask, instructions and a pamphlet on mandatory isolation.



- All travellers entering Canada are given a pamphlet from the Public Health Agency of Canada 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 publishes travel health notices to inform Canadians of increased or unexpected potential health risks in a country or region outside of Canada.
- Travel health notices also provide information about precautions to take to reduce risks.
- The following points are taken into consideration when adding countries or areas to the list of regions affected by COVID-19:
 - the disease has spread to numerous people in the community (multiple clusters; not all cases are in a defined context, such as a household)
 - evidence of geographic spread
 - ability to link cases to an exposure source (i.e. to another case or due to travel to a country where COVID-19 continues to spread)
- The list of regions affected by COVID-19 shown at Canada.ca/coronavirus includes all countries with travel health notices regarding COVID-19.

Cottage season and COVID-19

- Public health guidance has been changing but that's because the situation is changing rapidly and we are learning more about COVID-19 every day.
- Based on the available evidence, we encourage Canadians to help limit the spread of COVID-19 by avoiding non-essential travel, especially to small and rural communities, where health care systems could easily be overwhelmed.
- That's why we are asking everyone to avoid visiting cottages, campgrounds, or vacation properties during the COVID-19 pandemic.
 - Unless the property is your principal residence, or in the same community as your principal residence, you should wait until the situation in Canada changes before going.
 - If you get sick, you may not be able to get the help you need. Stopping for gas or provisions on the way increases your risk of exposure and, if you're asymptomatic, you could pass on the virus to others.
 - An influx of people into a small community can also threaten the food supply and other essentials for residents.



- If you must go to your cottage for insurance reasons, you should only make one round trip and go straight home.
- All Canadians must continue to do everything they can to flatten the curve and protect the health of our friends and families. This includes staying home.