

Belliveau, Sébastien

From: Exton, Adam (HC/SC) <adam.exton@canada.ca>
Sent: April 14, 2020 9:46 AM
To: Khalil, Samantha; Belliveau, Sébastien
Cc: Kiteley, Alana
Subject: RE: Modelling Technical Briefing / Briefing technique de modélisation
Attachments: English Critic Modelling Briefing.docx; Briefing de Luc Theriault.docx

Yep attached. No big flags from Friday's English briefing or the French one that happened yesterday. Only the critics participated.

From: Khalil, Samantha <Samantha.Khalil@pmo-cpm.gc.ca>
Sent: 2020-04-14 9:39 AM
To: Exton, Adam (HC/SC) <adam.exton@canada.ca>; Belliveau, Sébastien <Sebastien.Belliveau@pmo-cpm.gc.ca>
Cc: Kiteley, Alana <Alana.Kiteley@pmo-cpm.gc.ca>
Subject: RE: Modelling Technical Briefing / Briefing technique de modélisation

Adding alana here – can we get a read out of how these went?

From: Exton, Adam (HC/SC) <adam.exton@canada.ca>
Sent: Friday, April 10, 2020 12:34 PM
To: Khalil, Samantha <Samantha.Khalil@pmo-cpm.gc.ca>; Belliveau, Sébastien <Sebastien.Belliveau@pmo-cpm.gc.ca>
Subject: FW: Modelling Technical Briefing / Briefing technique de modélisation

Fyi – English critics briefing today. French Monday.

From: Exton, Adam (HC/SC)
Sent: 2020-04-10 12:29 PM
To: 'matt.jeneroux' <[REDACTED]>; 'Davies, Don - Personal' <[REDACTED]>; 'luc.theriault' <[REDACTED]>
Cc: 'Jeneroux, Matt - Assistant 1' <Matt.Jeneroux.A1@parl.gc.ca>; 'Davies, Don - Assistant 1' <don.davies.a1@parl.gc.ca>; 'Thériault, Luc - Comté 1C' <Luc.Theriault.C1C@parl.gc.ca>
Subject: RE: Modelling Technical Briefing / Briefing technique de modélisation

[le français suit]

Hi everyone,

Deck attached for today's English briefing and dial-in below.

Friday, April 10 1:00pm EDT

International Dial-in: 1.877.413.4788 | Local: 613.960.7513
Conference Code: 2685426

At the request of MP Thériault, we are moving the French briefing to Monday and I'll follow-up with a new time.

Adam

Bonjour à tous,

Documents ci-joints pour le briefing et la conférence téléphonique en anglais ci-dessous.

Vendredi 10 avril 13 h 00 HAE

Appel international: 1.877.413.4788 | Local: 613.960.7513

Code de la conférence: 2685426

À la demande du député Thériault, nous reportons le briefing français à lundi et je ferai un suivi avec l'heure exacte du briefing.

Adam

From: Exton, Adam (HC/SC)

Sent: 2020-04-09 11:42 PM

To: 'matt.jeneroux' <[REDACTED]>; 'Davies, Don - Personal' <[REDACTED]>; 'luc.theriault' <[REDACTED]>

Cc: 'Jeneroux, Matt - Assistant 1' <Matt.Jeneroux.A1@parl.gc.ca>; 'Davies, Don - Assistant 1' <don.davies.a1@parl.gc.ca>; 'Thériault, Luc - Comté 1C' <Luc.Theriault.C1C@parl.gc.ca>

Subject: Modelling Technical Briefing / Briefing technique de modélisation

[le français suit]

MPs Jeneroux, Thériault and Davies,

Today, the Government of Canada released national-level modelling on the COVID-19 epidemic in Canada. The modelling attempts to show how the epidemic might unfold over the coming months based on our knowledge of how the virus behaves and the potential impact of public health measures.

On behalf of Minister Hajdu, I wanted to offer you a technical briefing on the modelling. I understand that the Prime Minister spoke to each of the leaders regarding this today and they are also welcome to join.

Let me know if the suggested times below work and I will follow up with dial-in details.

English: Friday, April 10 1:00pm EDT

French: Friday, April 10 2:00pm EDT

Aux députés Jeneroux, Thériault et Davies,

Le gouvernement du Canada a publié aujourd'hui des données de modélisation nationale concernant la pandémie de COVID 19 qui sévit au Canada. Les données de modélisation visent à montrer comment l'épidémie pourrait évoluer au cours des prochains mois, selon nos connaissances du comportement du virus et des répercussions possibles des mesures de santé publique.

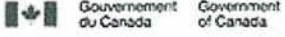
Au nom du ministre Hajdu, je voulais vous offrir une séance d'information technique sur la modélisation. Je comprends que le Premier ministre a parlé à chacun des dirigeants à ce sujet aujourd'hui et ils sont également les bienvenus.

Faites-moi savoir si les heures suggérées ci-dessous fonctionnent et je vous donnerai des détails sur la connexion.

Anglais : Vendredi le 10 avril 13:00 HE
Français : Vendredi le 10 avril 14:00 HE

Adam Exton

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Canada

Matt Jenneroux

Questions

1. This morning, the PM said until a vaccine is found. Do you see any scenario where we don't need to go back to social isolation? Will there be more enforcement in the summer?

A: Clinical trials are under way (Canada participating in many). At this point, no proven/effective treatment. Be careful with off-label use of Hydroxychloroquine. Hoping 12-18 months for potential vaccine and when some things could go back to normal. Lots of factors we don't know (i.e. immunity after people recover).

We'll never go back to completely where we were before (I.e. protections for long term care facilities).

2. With regards to testing, we're seeing different levels of testing in different PTs. Will GoC do federal guidelines (i.e. for asymptomatic people)

A: The current testing regime is based on molecular testing from the genetic sequencing. Issues around swaps/reagents, everyone is working on this.

Our NML is looking to validate certain point of care tests. But we can't validate tests that don't work – giving false positives doesn't help anyone.

3. Any improvements on serology testing?

A: Looking at all of this as part of our testing strategy, but they need to work.

4. Dr Njoo – can you share needs of PTs on PPEs? What are we doing to address this?

A: Very fluid situation. All levels of gov are working together. It's a competitive world market, everyone is taking what they can get. In Canada, we're going to global space to see what we can get and have a formal approach to distribute to provinces (population per capita and need). We give it to the PTs and they distribute to hospitals.

5. Are temporary hospitals being considered?

A: Done at local/provincial level. Different context in different PTs and what they may do to increase capacity. Some PTs are building additional wings or wards that can help free up beds. Need to also have staff for these as well.

6. It sounds like you're meeting regularly with PTs. Is there a needs assessment or some level of coordination?

A: Guidance is GoC. There are also sub-committees that are working and lots of coordination. The federal leadership is the convening role – we bring PTs together and problem solve as a group and share best practices. It's not prescriptive (i.e. you shall do this).

7. Then how much PPE is needed in ON/NS, etc?

A: No, we're focused on public health issues. In terms of procurement, there are other tables meeting on those needs. Steve Lucas and Tina are meeting on those. Njoo can't provide those tables.

Don Davies

1. Estimated about 5000 ventilators. How many do you think Canada will need to have to get us through a likely scenario?

A: Based on initial inventory (done shortly after SARS) but not able to give exact figures since #s are still coming in, but it's more than 5000.

Difficult to predict how many we will need. In a best case scenario, we need much fewer ventilators versus higher one and it's spread out over time. For example, let's say in a region there are 1000 people who get the infection and need a ventilator. They'll either need it all at once, or spread out if we do social distancing. We can't predict this.

2. PM announced he was trying to arrange production for up to 30K ventilators. Is it correct we need more than we have? Do we not have a range of how many ventilators we'll need to procure?

A: It's not the # of ventilators but how spread out it is over time. I think we want to over prepare (hence all the procurement). It's not an acknowledgement that we don't have enough but we should prepare. Also, as we increase domestic production of ventilators, if we have a surplus we could consider exporting one day.

3. Neurological testing – BTES INC has developed a rapid response test. It's been approved in US/Europe. Understand they need to be accurate, but this test kit is being made in Ontario – why hasn't it been approved by HC?

A: Can't speak for HC, but at NML they're looking at a range of tests to validate them.

4. Quebec is higher than everyone else. Presume it must be because they're testing more. Do we have any sense of how many Canadians may be immune, based on modelling?

A: The dynamic models don't distinguish between the different types of cases. But clearly there is some data analysis going on to look at reported deaths/cases with a general view of how this goes.

5. Any comments on herd immunity?

A: The issue of herd immunity is that people get immunity through natural infection to a pathogen or through a vaccine. We don't have a vaccine now so the only herd immunity creeping up through those people who had COVID, recovered, and hopefully have some immunity.

What is concerning is people thinking of "covid-19 parties" like chicken pox. This is very risky with many young adults getting very ill. Don't recommend everyone try to get naturally infected – goal is vaccine.

6. What does "not back to normal" look like?

A: The workplace of the future may be different. More remote working and less socializing.

Briefing sur la modélisation – Questions du député Luc Thériault

- Seeing that we now have a few more days of data, is he being too optimistic by saying that we are really on the right track and that we are getting closer to flattening the curve?
- Understands that Quebec bought 200K test kits that can get results in under an hour, he asks if those test kits will get widespread distribution all over the country, if they are not too expensive, where they are produced, etc.
- Are other provinces ramping up their testing these days, like Quebec did?
- How many days in a row with less and less deaths do we need to observe to say with confidence that we are flattening the curve?
- Says he thinks that outside of the problems we have seen in certain nursing homes, the situation we are living with is pretty close to the numbers presented. Impossible to predict outbreaks in places like nursing homes to a certain degree (impossible to predict which ones are going to get hurt badly by an outbreak vs those who won't)
- Says one of the biggest difficulty will be how to manage the 2nd wave effectively. Says that with certain pandemics, deadliest wave has been the 2nd one from his understanding so we must not rush the return to normal too much.
- His understanding of what is to come in terms of managing the 2nd wave: as long as we don't have the manufacturing capacity for medical equipment and the capacity to detect really quickly, we must be extremely careful on how much we relax certain measures.
- Is worried by what is happening in the states, Asks Dr Njoo what he thinks about this, is it an additional challenge for us?
- If we have good testing capacity, should we simply test everybody coming from the states straight up?
- Says there are still people in scientific literature, saying that 48 hours prior to showing any symptoms, we can be contagious. Is it actually true, what do you think?
- Are we worried with TFWs whatsoever?
- Like the idea brought forward by Dr Njoo to do modelling updates every 2-3 weeks. Thinks it will help people understand and accept measures even better.
- Wants to have as many information as possible so to better evaluate the necessity to use the Emergency Measures Act. Will follow this closely. Wants to make sure we let the freedom in the hands of provinces, don't think it's a good idea to centralise.
- Doesn't have any question on methodology.
- Thanks everybody for publishing those numbers, super interesting and helpful.