

**TRANSCRIPTION/TRANSCRIPTION
BRIEFING/MISE À JOUR**

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PRINCIPAL(S)/PRINCIPAUX: Dr. Howard Njoo, Deputy Chief Public Health Officer of Canada
Heather Jeffrey, Global Affairs Canada
Stephen Johnson, Employment and Social Development Canada
Calvin Christiansen, Canada Border Services Agency
Patrick (Unidentified), ISED

SUBJECT/SUJET: The Public Health Agency of Canada (PHAC) holds a daily COVID-19 technical briefing for Parliamentarians with Deputy Chief Public Health Officer Howard Njoo.

Operator: Good afternoon ladies and gentlemen.

Bonjour mesdames et messieurs. Bienvenue à la séance d'information technique à l'intention des parlementaires sur l'appel COVID-19.

Welcome to the technical briefing to parliamentarians on COVID-19.

À vous la parole Mme Lavoie.

Please go ahead.

Marlene Lavoie: Thank you. Joining us today are the following departments and agencies: Employment and Social Development Canada, Service Canada, Global Affairs Canada, Canada Border Services Agency, Public Safety, Indigenous Services, Innovation, Science and Economic Development.

Les ministères et organismes suivants se joignent à nous aujourd'hui: Emploi et Développement social Canada, Service Canada, Affaires étrangères, Agence des services frontaliers du Canada, Sécurité publique, Services autochtones, Innovation des Science et du Développement économique.

Please note that callers will be permitted one question. We would ask that you keep the question to around 60 seconds as there are many callers on the line who wish to have a chance to ask their questions.

Veillez noter que vous pouvez poser une question à la fois. Nous vous demandons

de limiter la question à environ 60 secondes car il y a de nombreux appelants sur la ligne qui souhaitent avoir la possibilité de poser leurs questions.

Please identify yourself and inform us which riding you represent.

Veillez s'il vous plaît vous identifier et nous informer de la circonscription que vous représentez.

I would now like to turn the meeting over to Dr. Howard Njoo, Deputy Chief Public Health Officer of Canada.

J'aimerais maintenant céder la parole à Dr Howard Njoo, sous-administrateur en chef de la santé publique du Canada. à vous la parole Dr Njoo.

Dr. Howard Njoo: Okay, merci.

Thank you Marlene. Good afternoon or good day to everybody. I'm just going to give a very brief update in terms of number cases both around the world and in Canada. As you can imagine, numbers change rapidly, but I'll give you the latest data as we have it.

So globally, there are over 318,000 cases in over 185 countries. And as of noon Eastern time, today in Canada, there were 1,388 cases reported, including 19 deaths. Of note also, there's been over 92,000 people who have been tested for COVID-19 in Canada, for which test results are available.

En français, à l'échelle mondiale, il y a plus de 318,000 cas dans plus de 185 pays. À midi aujourd'hui, il y avait 1,388, comprenant aussi 19 décès au Canada, et plus de 92 (sic) personnes avaient subi un test de dépistage de COVID-19 au Canada.

In the interest of time, I'll open it up now for any questions. Thank you.

Operator: Thank you. Merci. Ladies and gentlemen, mesdames et messieurs, nous allons maintenant passer à la période de questions.

We will now take questions from the telephone lines. If you have a question and you are using a speaker phone, please lift your handset before making your selection.

Si vous avez une question et vous utilisez un téléphone mains libres, s'il vous plaît soulevez le combiné avant d'effectuer votre sélection. Si vous désirez poser une question, appuyez sur les touches *1 de votre clavier téléphonique.

If you have a question, please press *1 on your telephone keypad, and you may cancel your question if you wish, by dialling the pound sign.

Vous pouvez annuler votre question si vous voulez, en appuyant sur le dièse. S'il vous plaît appuyez sur *1 maintenant pour poser une question.

Please press *1 at this time if you have a question.

And the first question is from Mary Deacon. Please go ahead, your line is open.

Sen. Marty Deacon: Thank you. It's Marty Deacon. Senator. I'd like to thank the opportunity to thank all of you for the daily briefings and definitely the collective work that's taking place at quite a strong pace.

Today, the question I have is directed to you, sir, if you mind and to the Minister of Health. We are very concerned about the mental and physical of all of our Canadians, of course. Today, I wish to focus on something that may not be seen as a priority but it, initially, but it's those Paralympic and Olympic athletes that are doing their best globally to represent their country and prepare for Olympic Games and Paralympic Games still scheduled to start July 24.

Well, opportunities to train safely while social distancing are becoming an increasing challenge globally, this morning the IOC made an announcement that, that is different from the past days and the week. In Canada, we continue to communicate with our athletes, coaches and families. In light of the most recent announcement this morning by the International Olympic Committee, the IOC is looking at possible adjustments of events or postponement of the Olympic and Paralympic Games, which are current set to start on July 24th.

Today, I'm looking to ask the Honourable Minister of Health if she's able to answer, ask, excuse me, the World Health Organization to provide the International Olympic Committee in Canada with any evidence they have which would confirm the Games could go ahead safely and in compliance with WHO guidelines regarding controlling the COVID-19? And importantly, that there's evidence athletes can continue to train so then in a way that is compliant with all guidelines and restrictions put in place to control COVID-19.

Our athletes are, and our sport federations take the responsibility for world health as a first priority. And without this information, we'll be required to make decisions based on incomplete information and data. And thank you, this information is required and appreciated immediately.

Dr. Howard Njoo: Okay, well thank you very much for the question. I can't, I certainly can't speak for our Minister of Health and certainly that question could also be directed to her. To be honest, I'm just speaking as a public health physician, certainly in terms of the work I've done with my colleagues, both obviously here in Canada and internationally as well. And I can just be quite blunt looking at the situation as it's evolved. The fact is the global pandemic right now, countries are taking extraordinary measures for public health reasons and other considerations around the world, including here in Canada.

I can appreciate that the Olympics are still several months away – you say July 24th, etc. I'm a big sports fan. Normally I would love, I love watching sports, but look what's happened with even sports leagues here in North America, you know, the four major sports, etc. Obviously, the NBA, NHL season suspended, who knows, baseball, etc., and so on. So all I could say is that the COVID-19 pandemic it's certainly, experts around the world don't anticipate it's going to resolve in a, in a few months. And so even as Dr. Tam mentioned also at a previous media availability, the advice at the present time for Canadians, all Canadians is that avoid non-essential travel outside of Canada. And I would say that the Olympics I would not classify as essential travel. So that's all I can say at this point.

Thank you. Next question please?

Operator: Thank you. The next question is from, la question suivante vient de Yonah Martin. À vous la parole. Please go ahead.

Sen. Yonah Martin: Thank you. Senator Yonah Martin in BC. Thank you again to everyone for this opportunity.

My question is actually related to something that was raised yesterday by MP Marc Dalton. It was regarding orphans that are being adopted by Canadian families. I have more information and I have a specific question about these cases. So these, it's a multi-year process as you can imagine, and now the children are, everything has concluded and what they need to do is get the children to Port-au-Prince, where there is a flight being offered by Air Transat. The last one will be March 29th. Maybe there will be other flights, but this is the, the commercial flight. March 25th is just a few days away but March 29th, which is one week away.

So my question is so long as people on the ground in Haiti can get the children to the Canadian embassy in Port-au-Prince, in terms of some of the paperwork that would typically take a little bit longer, will the Canadian government waive some of, waive the process to let the children at least come to Canada because they are children of Canadians and they are of different ages, but is there a contact person or a number for the Canadian embassy in Port-au-Prince to help these families be reunited? It's been a multi-year process already and they're very worried about keeping the children in the country because the system, the medical system, as you know, is very devastated and the risks to them are very high.

So I'm curious about a contact number or a person at the Canadian embassy in Haiti or if there's somebody at Global Affairs abreast to these specific cases of adopted kids of Canadian families. So that's my question in relation to what Marc Dalton asked yesterday.

Dr. Howard Njoo: Okay, thank you very much. I'll pass it directly on to my colleague from Global Affairs Canada. Thank you.

Heather Jeffrey: Hello. It's Heather Jeffrey here from Global Affairs. So I'm going to do some follow-up on my end. Actually the documentation of these children in terms of their ability to enter Canada is with IRCC and so while the embassy would be the point at which those documents could be collected, it's not necessarily the embassy that has that authorization. So my undertaking is to find that contact point for you and we'll relay it through other channels so that you know who to be in touch with specifically on these issues. And then, the embassy will be able to facilitate the transit.

Dr. Howard Njoo: Okay. Thank you very much Heather. Next question please?

Operator: The next question is from, la question suivant vient de Marc Dalton. À vous la parole. Please go ahead.

Marc Dalton: Yes, thank you very much. Just some questions here about repatriation, and specifically what is Global Affairs doing to help Canadians get back from the cruise ships, including the Norwegian Jewel, Holland America and others? Are we in contact with them? Are we in contact with the, with the, our Canadians citizens there? I know that one ship, the Norwegian Jewel, is going to (inaudible), one of the propellers is no longer working and so (inaudible).

Also on Honduras, a number of Canadians there, and Pakistan. Those are three. And finally, if I can just throw this in, what direction are we giving shelters? I know that there is a concern because of the, how many people are in them and are we giving clear directions for food handling, separation, etc.? Thank you.

Dr. Howard Njoo: Okay. It's Howard Njoo again. I'll pass that question on the first part to Global Affairs Canada.

Heather Jeffrey: Hi, it's Heather here. So on cruise ships, there are many. We're monitoring actually 115 cruise ships that have Canadians aboard. There's an estimated 4,700 Canadians still out there aboard cruise ships. We, of course, advised Canadians not take cruises at this time, but for those that are out there, we have a whole unit here that's working on responding to those issues. As they come into port, we are working with the cruise companies whose responsibility it is to repatriate passengers. In general, they're chartering flights. We're working to facilitate transit and other arrival arrangements in Canada, and we work with the cruise companies to make sure that the routings that they're planning actually allow passengers to transit.

In most of the cases we have, there are no confirmed cases aboard the ship. It's just really the fear that we see in different ports. So we have a whole different range of responses. We're conducting diplomatic advocacy to convince port cities to receive these ships and allow passengers to transit home. So we've had some successes this week in terms of ships that were in (inaudible). We have another one that's coming in to San Diego. The repatriation is ongoing right now from Cape Town, the Norwegian

Spirit, and we have the MSC (inaudible) coming into Marseilles. So we have a big tracker here. We're following them, we're trying to communicate to passengers that we'll be, we're working in advance of their arrival at port with our likeminded countries to get them home.

So right now, it seems to be working better. I think these companies are now more sensitive to the demands and the challenges of it and we're working very closely with them directly every day.

In terms of Honduras, that is one of the destinations that were working with Canadian carriers to bring people home from. In general, carriers are working with us to go into these places and we are providing the, the diplomatic facilitation and advocacy to allow countries that have closed their borders to allow these flights to land and to repatriate Canadians. So for Honduras, we're working with Air Transat and we expect to have an announcement shortly about the timings of those flights that will be happening this week.

And there will be also timings on all the other destinations that Minister Champagne has already spoken about, including, we've already announced new flights for Morocco, in addition to the one that came yesterday. We have flights going into Peru, Spain, El Salvador, Guatemala, Honduras and Ecuador all this week and we'll be using the (inaudible) messages to send out to Canadians in those regions how to access those flights.

Dr. Howard Njoo: Okay. Thank you very much Heather. To the last part of the question, it's a point well taken. Certainly our technical staff have been working on sorts of guidance documents. Obviously we're working also with our counterparts colleagues in the provinces and territories. And certainly point well taken about certain vulnerable populations in this case. Shelters, obviously long-term care facilities, lots of other high-risk settings. And so, I will pass this along to them to consider whether we do stand-alone, sort of, guidance documents for (inaudible) recognizing there are maybe some unique considerations in those settings or maybe it's maybe an overarching one with then maybe subcomponents and so on.

So point taken, and certainly we'll bring it back to our technical group.

So with that, I'll take the next question.

Operator: Certainly. The next question is from, la question suivante vient de Pat Duncan. À vous la parole. Please go ahead.

Sen. Pat Duncan: Thank you very much. I appreciate – hello? Can you hear me?

Dr. Howard Njoo: Yes. Hello?

Sen. Pat Duncan: Yes, thank you. Hello? Yes, my questions – first of all, thank you very much for these daily briefings and the work being done by the public service. It is greatly appreciated.

The, my question has to do with dental services. Most dental services are not part of provincial health care plans and services, and I, my concern is that dental offices may be falling between the cracks in the declaration of health emergencies in provinces and territories. And I'm particularly concerned that the, of the new dentists who have graduated with substantial debt load and may have just purchased a practice, they're not usually considered a small business category and eligible for such measures as the government has put in place for businesses.

So my concern is for those individuals, also of course, the dental hygienists. And I'd like to express my compliment, congratulations, thanks to Indigenous Services, non-insured health benefits to pay for travel for Indigenous folks for travel from dental services. And they limited that last week to emergency services only. And, so my concern is for the (inaudible) to maybe unemployed as a result of this and also that individuals may fall between the cracks as we don't often mention dental services as part of our overall health care services. There's mention of doctors, there's mention of health technologists and nurses, of course, but we often overlook the dental, dentists.

Thank you.

Dr. Howard Njoo: Okay, thank you very much for your question. I'll, I'll take the first part of it and then I'll pass it on to my colleagues at ESDC in terms of, I think, your component of the question dealing with them as small businesses.

So certainly aware obviously, you know, dentists and dental hygienists are an important part of I would say, our overall health system. My understanding, obviously dentists, such, similar to physicians are regulated, sort of, on a province by province basis. And even from my own personal experience, my understanding is that, you know, maybe province by province or at least in the province of Ontario where, where I live, dentists have been directed to stop all but sort of urgent, sort of, emergencies in terms of dental work.

So like, routine appointments, etc. really are sort of being put aside and in each of the, sort of, taken on a case by case basis in terms of evaluation if there's something more urgent that needs to be dealt with. I get that obviously there's an impact on them financially as there is across the board for a whole range of services. So the point's taken, but certainly in terms of protecting both the dentist but also the general public in terms of the fact they work in close quarters, they might seeing multiple, you know, patients per day. That's all, I think, part of the mix to why I think the dental, sort of, regulatory boards, etc., have directed that dentists to take the step.

But maybe I'll pass it on to my colleague at ESDC in terms of, I guess, the business impacts.

Stephen Johnson: Sure. So I would just say here that we're, we're continuing to move forward with recognizing the urgency and importance of the new emergency benefits that were announced last week. Those are targeted at people who are working, employed. That includes self-employed, which, which I suspect would be mostly the situation for, for dentists. And if those individuals lose their jobs, reduce their hours, these, these benefits would, would be available. Typically, Employment Insurance is based on a certain number of hours or certain number of earnings in a, in a recent period.

Dr. Howard Njoo: Okay. Thank you very much. We'll move on to the next question please.

Operator: The next question is from, la question suivante vient de Diane Griffin. À vous la parole. Please go ahead.

Sen. Diane Griffin: Hello. I have a question related to people who are coming back to Prince Edward Island that are arriving internationally via Toronto or Moncton, or first Toronto, then Moncton. That's what's happened with our third case that's been confirmed with the virus. So how is CBSA sharing information on the three Maritime provinces? For instance, you know, if somebody coming in to Moncton, are they taking down the information and passing it to New Brunswick or are they also immediately sending it to Prince Edward Island and Nova Scotia based on where the traveller resides?

Dr. Howard Njoo: Okay, well thank you for the question. I'll maybe pass that to my colleague at CBSA for, for his response and then maybe I'll add to that afterwards. So over to you, Calvin.

Calvin Christiansen: Alright, thank you Dr. Njoo. Thanks very much for your question. My name is Calvin Christiansen, I'm with the Canada Border Services Agency. And so far, what we have been doing is when a traveller arrives that is symptomatic, that means showing symptoms of COVID-19 or coronavirus, what we do is we request information from the traveller with regard to what Canadian address they'll be staying at. And then, we have that information, give it to the Public Health Agency of Canada. So there's a collection of information that's available should it be needed if a traveller or person becomes sick or ill after they come through if they're asymptomatic.

Sorry. This is, I need to step back here for a second. I got that a little bit mixed up. If someone comes in and shows symptoms, what we do is we ask that person to fill out an information card and we have that data kept for availability with the Public Health Agency of Canada. The other thing that we do is if someone comes in and shows symptoms, we require them to register or call the Public Health Authority from whatever area they are going to. So for example, if someone is going from Toronto and is identified by the CBSA as being symptomatic, then they're advised within 24 hours, they need to call the Public Health Authority, for example, in Prince Edward Island.

If they're coming in as asymptomatic with no symptoms at all, then we don't require them to provide us with their address information and we do not forward the information of all travellers that are crossing into Canada and are coming into any of the provinces. We do hold the information and we make it available on request for a, a medical authority within a province if they need to know, for example, which flight they were on, who they sat beside, things like that, and we do our best to get that information back to them. But in all cases, with travellers that are arriving into the various provinces, we do not provide a list of names to the provinces. What we do is we provide information back on request.

And, you know, just as an example, for the land border travellers yesterday, we had 52,000 persons that crossed the land border yesterday, and I don't have the number for air right in front of me, but it is significant.

Turning over to you Dr. Njoo.

Dr. Howard Njoo: Thank you very much Calvin. What I can add is that obviously, there are active discussions going on with the Chief Medical Officers of Health from a public health perspective as to what could or should happen with these returning travellers. So, the main focus I would put on right now is, let's say on air travellers, as I think from the Prime Minister on to Minister Champagne, it's been clear that all travellers coming to Canada taking air flights, they will be having a, sort of a check, a health screening prior to even getting on the airplane at the point of embarkation. And if they are found to be symptomatic, have symptoms consistent with COVID-19, they will not be allowed to board.

I think that's been recognized that includes Canadians. And so, those Canadians, if they are actually in another part of the world, will have to get a medical certificate or some proof afterwards showing that they've recovered, they're cleared medically before being allowed to come back to Canada. So that's number one. So in that case, certainly if they come to Canada, you would expect them to be asymptomatic upon arrival. There, maybe there are situations in which someone develops symptoms, you know, onboard the flight or so, and then when they actually land here in Canada, they may show symptoms.

In that case, as with the Quarantine Act, even with COVID-19, certainly anyone who is ill has a requirement to report, you know, to CBSA and then subsequent Quarantine Officers for medical assessment, and obviously ill enough to need further medical evaluation. They are forwarded right away for that evaluation. In terms of then going onwards, if they are asymptomatic, it means that they look and feel perfectly fine. That is, that is, you know, something that we also put in the system now, that they have to acknowledge they have no symptoms and obviously they check as well, but they have to acknowledge that they've been asked to go into 14 days of self-isolation after they arrive in Canada.

I can tell you right now this is something that's under active discussion that how strict or to what extent beyond, sort of, you know, that acknowledgement and going into self-isolation for 14 days, those individuals, how will that be monitored and so on. So just to let you know, from a public health perspective, the expectation, the demand – I even sort of put it in a media availability today, saying that you, hey, if you're a returning snowbird or whoever coming back to Canada as a Canadian, I think the expectation, I think, on you from your fellow Canadians is that you've been outside of Canada. Certainly you might have been exposed to COVID-19 based on, you know, how it's circulating in many other, many parts of the world, and you, you have to stay in self-isolation for 14 days.

So what other measures, etc., may be brought to bear to bring home that point, that'll maybe be seen in the following days. So certainly, that's the public health posture.

So thank you for that question, and we'll go on to the next question.

Operator: The next question is from, la question suivante vient de Nelly Shin. À vous la parole. Please go ahead.

Nelly Shin: Hi. So Nelly Shin, Port Moody—Coquitlam. My question was asked yesterday, but no one was available to answer, and that is there are a lot of constituents in my riding who are part of the entertainment industry and in the arts and culture industry. Obviously with the stopping of festivals and concerts, they're out of work. A lot of them are contract workers, self-employed. This also applies to business owners who, who are self-employed obviously, but do not qualify for some of the assistance that has been stated because they are not personally sick and they're not taking care of sick people in their home. So has the government planned anything to support these members of my constituency?

Dr. Howard Njoo: Okay, thank you for the question. I'll pass it directly on to my colleagues from ESDC.

Stephen Johnson: Okay, so again, like similar to what I was mentioning earlier, we do have the benefits that were announced last week. Those would cover employed and self-employed. In terms of some of the very specific requirements on that, I'm not sure that I fully understood all of them, but I'll, I'll take, I'll take that on board and, and I'll have to check back again and, and see. What I will reiterate for now, I understand there were some questions yesterday perhaps around international students and others is that certainly for Employment Insurance – and there were a few changes that were announced around Employment Insurance like waiving the waiting period for quarantine and the need for a medical certificate.

Employment insurance is, is typically based on what we would call insured hours or insured earnings as opposed to necessarily a residency status. And again, some of the benefits that have been identified so far do touch on both the employed and the self-employed, but I'm not certain actually with the specific ones that you're identifying

today.

Dr. Howard Njoo: Okay, thank you very much. We'll go on to the next question, please.

Operator: The next question is from, la question suivante vient de Wayne Easter. À vous la parole. Please go ahead.

Hon. Wayne Easter: Thank you very much. And I want to thank everyone there for your efforts from every, every department. It is amazing.

My question relates to the seasonal workers and seasonal industries. I don't think we've completely sorted out yet those, those that are facing what is commonly called the black hole in Employment Insurance, meaning the time period for Employment Insurance is now running out. They don't go back to work till probably late April, early May, so they're already or near out of Employment Insurance.

Now, their, their operations that they normally work at are not going to open up. How are we going to, to handle them because they haven't worked a new season and got new hours? And the business, the seasonal industry they normally work in is not likely going to open, at least for the first month or so. And I would also say that Dr. Njoo, I wish it were so that people are not coming back, but what we're seeing here is too many snowbirds are coming back, going to the grocery store before they go home and it's a real problem.

Dr. Howard Njoo: So thank you for, for the question. Before I pass it on, I think, in terms of the seasonal worker, your point's well taken. It's been brought to our attention as well. In terms of snowbirds and their activities post-arrival, that's something we take, we're taking a close look at, and I know that some provinces have enacted, you know, more stringent measures and I think we're discussing what might further action be in terms of ensuring I would say compliance with, with the self-isolation direction. So that point's taken.

I'm not sure, I think it might be my colleague again from ESDC, maybe talking about sort of the employment issues there. Thank you.

Stephen Johnson: It is. So it's Stephen Johnson here again. So I'll just say it's, it's a really important issue. We are aware of this issue of the seasonal workers and insufficient hours. I'm not in a position to give an answer specifically to that today, but can just reiterate again, we, we are fully seized with the urgency and importance of getting the, the details of these new benefits finalized and communicated out so that Canadians can start applying.

Dr. Howard Njoo: Okay. Good. Thank you very much Stephen. Next question please?

Operator: The next question is from, la question suivante vient

de Carol Hughes. À vous la parole. Please go ahead.

Carol Hughes: Thank you very much. And really appreciate all that you're doing.

Two quick ones. One of them is if you can tell me if there's flights coming in from Mexico and if when cause I do a constituent down there that has diabetes and is going to run out of his medication. I've provided all of the information and asked for some information back so I can try and flag it with the Parliamentary Secretary, but I missed the briefing this morning, I haven't had a chance to listen to it, so, but I will later on. But I'm just wondering if you have anything there to provide to me information?

The most important one at this point in time is certainly the self-employed. Based on the information that has been provided online and everything that I've read, it's only if they are affected by the COVID themselves, if they have to quarantine themselves or if they're taking care of somebody. We have businesses that are really panicking right now. Is there going to be another announcement very shortly about how to, self-employed people can actually support themselves who are not being affected, you know, who, who have, don't have the illness. They just have to close their shop at this point.

And then the other piece on that is for the employees because they're having to lay them off and having to pay them two-week wa-, that the vacation and all of that. But those people as well are being told that they're just going on regular benefits. And so they're going to have to wait for their money, go through that whole process. So it's quite problematic for everybody and I understand that it's stressful and that you're trying to do your best, but the self-employed are asking as well what about us?

Dr. Howard Njoo: Okay. Thank you very much for your question. I see there's two parts, so I'll pass it on first to my colleague from Global Affairs Canada in terms of flights from Mexico, and then on to my colleague from ESDC.

Heather Jeffrey: Yeah, thanks. So for Mexico, I would say we have a really large Canadian population that's there. The good news is for Mexico that they have not implemented any, any travel bans or restrictions. It's just a question of a lot of people deciding to leave at once. But there are quite a lot of commercial flights coming and out with all of the major Canadian airlines. So, but in terms of your constituent, they should register with the registry of Canadians abroad for their medication issues, if there's any assistance that can be rendered by Mexico. It's one of the places where you might not be able to get out today, but there are lots of flights coming back, and the airlines, we're working with the airlines to add more commercial flights to try and ease some of the capacity constraints when everyone tries to leave at once. I just wanted to add to the earlier question on the Norwegian Jewel. We've confirmed that it will be docking tonight in Honolulu and onward flights to Vancouver have been arranged for all the Canadian passengers tomorrow and the next day. So everyone should be home safe pretty soon.

Dr. Howard Njoo: Okay. ESDC?

Stephen Johnson: In terms of the self-employed businesses, I, I'll just say I'll take that on board. I understand the concerns and obviously, I don't, I don't a specific reaction for you or response today, but we'll, we'll take that back as we consider to think through the benefits announced and what, you know, what new potential measures may be needed as this continues to evolve.

Dr. Howard Njoo: Okay. Thank you very much. Next question, please?

Operator: La question suivante vient de, the next question is from Gord Johns. À vous la parole. Please go ahead.

Gord Johns: Hi there. Thank you for having these daily briefings. They are greatly appreciated. We're getting, you know, a lot of concerns raised from tourism communities that have very limited infrastructure for health: Tofino, Ucluelet, Haida Gwaii, Quadra Island. All of these communities have put out statements asking visitors to go home and for people to stop visiting. Ninety-five percent of businesses have closed their doors. They're adhering to the requests of the community, taking courageous decisions on behalf of, of their community members, fellow community members and, and, you know, advocating for community health right now during this crisis, yet, there's still a few that are operating and there's still people flooding those communities and we need the federal government to show leadership.

This is happening across the country and you know, the Prime Minister is saying to stay home, but there needs to be much more behind that in terms of non-discretionary travel right now. It needs to stop and we need the government, the federal government to take leadership. Downloading to local governments and, and provinces is just not good enough. The tourism industry is going to need a major bailout package because they're just getting hammered, but right now they're also taking some of the greatest leadership in the hospitality and tourism industry and it's not consistent and it's leaving a lot of people vulnerable and they're feeling like the government doesn't have their back. So wondering if the government's going to make a decision soon around non-discretionary travel that has teeth behind it.

Dr. Howard Njoo: It's Howard Njoo here. So I, thank you for the questioning. Certainly yes, that issue is very top of mind. I could say, quote a technical level (ph) and I said that at a briefing this morning that certainly what Chief Medical Officers of Health and, and Dr. Tam and myself, we're all on the same page in terms of non-discretionary or what we call non-essential travel, you know, telling people through all the means we can, you know, press briefings, social media, saying as clearly as possible, exhorting, recommending, saying very strongly that you shouldn't travel.

If you heard our Minister this morning, I think she had a very good, almost like a

three-part thing saying, you know, we're asking, we're recommending but you know, there are other tools available to both the federal government and also at provincial levels. I'm aware that certainly with certain legislation, Quarantine Acts and so on, Public Health Acts in provinces and territories, there are certain powers that can be brought to bear. Usually, we would consider them a measure of last resort not something you want to do, but they have been taking steps.

I understand, for example, some provinces they're fining people who should be in self-isolation, giving fines, etc. and so on. So I think yes, even at the federal level, that, that's something that's on the table for further, further action as necessary and appropriate. So that's all I can say at this point.

So thank you very much for that, and we'll move on to the next question.

Operator: The next question is from, la question suivante vient de Ken Hardie. À vous la parole, please go ahead.

Ken Hardie: Thank you very much. One of my constituents has Type 2 diabetes and, you know, there's lots of folks out there with that condition. He was wondering obviously what impact or risk he's facing with the coronavirus. And I wonder, obviously people with respiratory issues have a lot to be concerned but there's a lot of other people with things like Type 2 diabetes and I'm wondering first if you can talk about Type 2 and if there are some specific risks there. But are there other, if you like, everyday conditions that a lot of people are living with that make them, you know, more vulnerable in this situation?

Dr. Howard Njoo: Okay, well first of all, I guess as a physician, I want to say right off the bat that it's difficult, it's hard obviously to give advice on any individual patient obviously without being their personal physician and doing an actual history and physical. Certainly, what I would say as a physician is that people can appreciate that with this virus, certainly we highlighted two main groups being particularly vulnerable to having a more severe consequence if they were to get COVID-19. That obviously is the group of I would say seniors, the elderly and we can see some of the devastating results should the virus go into something like a long-term care facility. So, so that's number one.

And then we say people with other underlying medical conditions. And that's, that's a pretty broad category. So obviously, I think right off the bat, something that's quite simple you can appreciate is anyone with sort of an underlying immunodeficiency condition. Certainly they're less able to fight off, you know, even colds and influenza, other infections. So something like COVID-19 certainly would give them greater, sort of, problems than maybe someone else in sort of better health.

When you get to other conditions, be it Type 2 diabetes and so on, sometimes there are lots of other things going on. So, you know, Type 2 diabetes obviously it's a problem, you know, metabolism blood sugar, but a lot of times, these folks have other conditions, be it high blood pressure, etc., maybe could, you know, stand to lose a few pounds,

etc., and so on. So there's an overall health assessment that's beyond just, quote, specific labels and specific conditions. So I would just say that, you know, people need to, as best they can, by staying healthy, you know, eating well, etc., taking their medications as appropriate.

The only other point I would make is that even though those are the two highest risk groups, we're also seeing from the experience in other countries, that there are also younger people. People appear to, you know, be in good health overall with no major health conditions or problem. And they're also having quite serious consequences. So I think the other point to underline is that it's not just, you know, the elderly and people with conditions. Everyone's at risk. And even if you aren't at risk in terms of having a serious consequence and you yourself might have the mild, sort of, sort of illness if you were to get it, you could easily be passing it on to others who obviously would have a more serious consequence.

And so that's part of the public health message we're also trying to drive, you know, forward to the general public as much as possible. And you can certainly, just by reading the news, seeing what's happening, especially in Europe right now, to recognize what, you know, how do you say, the worst case scenario could be for Canada if we don't, as, I think as a country or as individuals, say (inaudible) take it seriously and do everything we can to, as they say, flatten the curve.

So with that, I'll take the next question.

Operator: And the next question is from, la question suivante vient de Paul Manly. À vous la parole. Please go ahead.

Paul Manly: Well thank you again and thank you for doing these regular briefings. I've heard a lot of questions today that actually answer questions that I have.

One of the things that I'm concerned about hearing a lot from small businesses we're seeing are downtown, boarded up right now. Small businesses are closing down and people are really worried about, you know, covering their bills and their expenses. And this program that's been rolled out isn't, isn't enough to help small businesses survive. You know, they're, they need more than, than this 10% employee retention. They, borrowing money is not an option. A lot of people are, you know, in small businesses are already close to the bone.

And so I'm just wondering if there's going to be other programs rolled out to ensure that small businesses survive this crisis because they employ a lot of Canadians and we're getting examples of small business support in other countries where there's much more support in place to make sure that they retain employees and they're able to pay the bill while, while they're shut down. That's my question.

Dr. Howard Njoo: Okay. Thank you very much. I'll turn it quickly over

to ESDC.

Stephen Johnson: Oh, hi. Actually so that's really more of a question I think that would fall under Innovation, Science and Economic Development in terms of those kind of direct supports to small businesses.

Dr. Howard Njoo: Okay.

Patrick (unidentified): Hi. It's Patrick, I'm here from ISED. I think the department is obviously following this issue quite closely. The, the government has announced measures initially, of course, to support workers, but the, the department is speaking with and in close contact with other federal partners, including Finance, on this issue. So we understand the concerns (inaudible) small businesses and this is a, an area where we continue to monitor and explore what best can be done to support the small businesses.

Dr. Howard Njoo: Okay, thank you very much. Sorry, I directed the question to the wrong department.

So we'll take the next question please? Thank you.

Operator: The next question is from, la question suivante vient de Mike Duffy. À vous la parole.

Sen. Mike Duffy: Thank you very much, and thank you for all the work you're doing. It's very apprec-, very much appreciated and I hope these daily briefings will continue because there's no shortage of questions from our constituents.

As you've heard from my colleagues earlier, PEI is a seasonal economy, and our, one of our biggest seasons is coming up and it looks very bleak for tourism. We have, we expect the government will announce next week, and congratulations for them, what they've done so far. We're expecting to see assistance for workers in the gig economy and people have been laid off, but we have literally hundreds of artists and actors who make their living over the summertime and the season is now in doubt. And on top of that, we have literally scores of non-profits that run these community halls which provide the audiences, which provide the money to provide the income for these artists and actors.

And I'm hoping that somewhere in all of the planning you're doing, there's assistance not only for the unemployed individuals, but for the organizations that have bills to pay, mortgages and so on on their premises. And finally, the same thing applies to many of our social interest groups, social assistance groups in the cities where the staff may be able to get some help but the organization itself is then stuck trying to wrestle with the rent and the other overhead. So anyone with thoughts on that would be greatly appreciated.

Dr. Howard Njoo: Okay, thank you very much for the question. I think what I'll do is I'll pass that to my colleagues both at ESDC and also ISED for any response they're able to give at this point. Thank you.

ESDC, hello? Or ISED?

Patrick (unidentified): It's ISED here. So obviously the issue of what's happening to businesses is a huge concern. Again, I don't want to, to, it's obviously something that the government is looking at seriously. We are, I know, sitting down with colleagues from the Department of Finance and, and other Crown Corporations (inaudible) such as BDC and EDC. I think we are looking at, as a department and with our colleagues the best tools available to support and inject as much solution into the, to support companies, including liquidity, addressing business issues.

Like, there's still a lot to understand and to work out, but I know that effort to support businesses is still ongoing.

Dr. Howard Njoo: Okay, thank you. I'm wondering anyone from ESDC, anything to add to that?

Stephen Johnson: Sure, I'll just add again, with the benefits that were announced last week, I think there was recognition that these would cover both those who would traditionally eligible for Employment Insurance as well as those Canadians who, who lose their job or face reduced hours who, who are not eligible for, for Employment Insurance. So we're working on that quite urgently and details should be coming in the very near future.

Dr. Howard Njoo: Okay. Thank you very much. With that, we're running out of time. I'm going to take one more question please.

Operator: Certainly. Our last question is from, la dernière question vient de Elizabeth May. Please go ahead. À vous la parole.

Elizabeth May: Thank you. (Inaudible) Saanich—Gulf Islands. Repeating again, on a Sunday, so many officials. I'm so grateful to you and I love that I hear someone's child in the background. We got a lot in common here. We're all in it together.

I have a question, a very specific – someone raised dentistry earlier, but we have some urgent serious health problems for people. This is not a constituent, but someone's reached out to me from Quebec, where all the clinics are closed until at least the 27th. They had had a recent implant that's gotten infected and no one can get access to the records of the dentist. Everything is shut down, and there are no dental surgeons available right now. Going to the hospital isn't really an option because the work that was done was done by a dentist and all of the records of that particular surgery, dental surgery are shut down inside a clinic with the doors locked.

I know it's highly specific and it's mostly provincial, but again, the issue of dental care is health care and there is a really serious risk of this becoming a very serious health crisis. Is there anything in the federal-provincial conversations that are taking place that focused on how do we make sure people have access to dentistry, particularly when it's a medical emergency?

Dr. Howard Njoo: It's Howard Njoo here. Just repeating what I said before is that I will bring it back to our, we do have a Chief Dental Officer here at, obviously at the federal level and he obviously works closely with his provincial counterparts. The point's been taken and I, the only thing I would say is that I wouldn't disagree. Urgent emergency dental service is required and just the delay, etc. could certainly lead to other health problems.

But that same issue applies to, across even the medical field, you know, elective surgeries and other types of treatments, etc., being also delayed and also having a negative consequence, you might say, on the health of individuals because of the diversion, you know, for COVID-19 and also, you know, obviously to free up beds, etc. at the health care system. Planning, you know, not, not, you know, anticipating, hoping for the worst but certainly planning for any eventuality.

I could even tell you at a personal level, I do some, some clinics and TB, tuberculosis and I haven't gone since the beginning of January, so I can imagine for lots, even other infectious diseases, people have to shift, etc., in terms of expectations for, for certain types of care and treatment for a whole range of issues. But your point's taken. I will pass it on to our Chief Dental Officer and see what else could, you know, obviously be done for the discussions with PT colleagues. So, so thank you for that question.

With that, I think I'd like to bring it to a close. It is a Sunday, I think people do need to hopefully get out to get some fresh air, but obviously with good, we call it, either social or we call it maybe even now physical distancing. So with that, thank you very much everyone for your questions, also to my colleagues online for their, for their support. And with that, I'll pass it on back to the Moderator.

Operator: Certainly sir. Thank you. Merci.

Ladies and gentlemen, your conference is now ended.

Maintenant, la conférence est maintenant terminée.

Please disconnect your lines at this time.

Veillez s'il vous plaît raccrocher votre ligne, et merci à tous les participants qui se sont joints.

Thank you for your participation.

