McKenna, Neil

From:

Stickney, Matt

Sent:

Saturday, April 4, 2020 3:44 PM

To:

Sabina Saini

Subject:

Fwd: Summary: Ontario Update

FYI. Fords chief called KT about the slow process of getting health Canada certification. Give me a buzz to discuss. They are looking at their legal risk at going ahead without it.

Sent from my iPhone

Begin forwarded message:

From: "Khalil, Samantha" <Samantha.Khalil@pmo-cpm.gc.ca>

Date: April 4, 2020 at 3:40:40 PM EDT

To: "PMO.F Senior Staff / personnel supérieur F.CPM" < PMO. Senior Staff-personnel superieur. CPM@pco-

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Subject: Summary: Ontario Update

Ontario COVID update with Dr. David Williams and Dr. Barbara Yaffe.

Dr. Williams said that Ontario has somewhat bent the curve and health measures seem to be working. There are 152 people on ventilators in Ontario.

Dr Williams was also asked about Health Canada approvals on supplies and said he believed the Premier had spoken about this earlier but that if supplies have been approved by Ontario they shouldn't need a full approval process by Health Canada.

Remarks

- Have bent the curve in some extent and need to continue distancing measures
- 20% of cases have some travel history
- 94 deaths
- 3,630 confirmed cases (+375 from yesterday)
 - o Almost 33% are 60 years and older
 - o 52% reside in GTA
 - o 12% had close contact
 - 18% spread through community
- 1,219 resolved cases
- 506 cases in hospital, of that 196 are in ICU and 152 of the ICU patients are on ventilator
- 36 outbreaks in longterm care facilities
- Tested 72,674 people only 1,336 tests pending

Q. CBC – Premier said Ontario is waiting too long for manufacturers to be approved to make supplies domestically. Can you provide specifics on what we are waiting for from health Canada? Also any concerns on PPE from US?

A. Williams – I think premier was saying that to go through a drawn out approval process if we are satisfied with them here in Ontario, is that really necessary. So I think the Premier is asking that those processes would be handled expeditiously. On the US impact, I see there is ongoing discussions. Optimistic that things will still be carried out in a proper way amongst trading partners. There is also still a flow of materials still going from Canada to the US.

Global – preventative measures in long term care homes?

A. Many measures put in place based on what we do normally with outbreaks plus additional directives. There are instances where a patient in hospital can be transferred to long term care facility if they pass screening, would be put in 14 day quarantine. Twice daily screening of every staff and resident, cohorting of staff and ideally only have staff working at one facility. One case in a long term care facility would now be considered an outbreak and we try to prevent spread as much as possible.

Q. Global – We have obtained docs that show long term care patients being bocked from hospitals. Can you confirm?

A. no directive for how long term care facilities transfer to hospital. There is more intensive screenings. If there is an outbreak that person would have to be cared for in a responsible way. There has been no directive to long term care facilities or hospitals in that regard. Some confusion that if someone is in final stages and has documents that they wouldn't want certain things done that's their decision and decision of their care takers and doctors.

Q. Medical students and retired workers coming back, how does that work?

A. Want to use them in appropriate way that wouldn't put them in compromised situation or beyond their scope of practice, including some volunteers. Our task is to document and train the need to the specific taks. A lot of work now on contact tracing which is laborious but critical and essential.

Q. Reports of 2 year wait period for a vaccine?

A. lots of people around the world trying to develop a vaccine. Usually a vaccine takes at least 18 months, anything less than that is being extremely optimistic. Keeping up to date and remain hopeful.

Q. CTV – On hospital and ICU beds are we approaching crisis levels or are you happy with where we are now.

A. What we noted from the model is that if we hadn't taken measures early we would be a lot worse off. Would I like the numbers lower, of course. As we dealt with inflows from around the world, like China, Europe and USA, of hundreds of thousands coming in we've dealt with that and that's one of our success stories. We hope to see it go lower as travel has declined. Our percentage and cases are on par with others. The mortality and age groups seem to be consistent with out settings. If people don't follow the measures we'll have to deal with increased pressure on healthcare system.

Q. expecting to see new cases decline as we approach two week mark of travel reductions?

A, this weekend and over next week will show how well our public health measures are working because its in our control. If it doesn't it may tell us our measures are not being followed enough. When we were increasing public health measures we discuss when to roll back. For example during SARS we rolled back too soon and saw a second wave increase. Very much based on the data we are gathering.

Q. QP Briefing – Long term care centers limiting staff movement between facilities. Is this a directive being issued and if so does it reply to retirement homes as well?

A. have made that point aware that staff are to inform their employer if they are working at multiple locations. If there is an outbreak at one you can't work at the other. Also implementing staff cohorting to limit interactions and potential of spread. BC has implemented a little bit ago can check with them on how that's going.

Q. – QP Briefing – If staff member not displaying symptoms but outbreak in a facility would they be allowed to work at another?

A. No we are asking that they not do that. Would need to isolate and get tested. Asking employees to inform employers of other facility work.

Sam Khalil

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