# **Lockington, Elliott (SPAC/PSPC)**

From: Gordon2, Travis (HC/SC)
Sent: March 24, 2020 12:25 PM

To: Chan, Marco (IC); Caira, Celine (IC); Murdock, Kelly (SPAC/PSPC)

**Subject:** RE: Office of the Minister | Cabinet du ministre

Following up on this – here's the latest I have from PHAC. Re: the highlighted bit – I wonder if we can provide this as an initial # (I defer to Kelly on PSPC's ability to procure these additional 1880) for industrial capacity? I'm working to make sure my officials are looped in to yours to facilitate these conversations, though as I said these inter-departmental conversations are happening at senior levels.

## Thanks, Travis

With regard to specific work in terms of identifying national numbers/requirements for ventilators:

- Through the FPT DM Subgroup a request has been made for data on beds, ventilators etc. to better understand capacity in the health care system;
- PHAC is working with the Canadian Critical Care Society a voluntary not-for profit professional organization representing critical and intensive care physicians. They are doing a rapid assessment of need, identifying the number of ICU beds, hospital beds and mechanical ventilators looking at a two week turnaround this should give PHAC a good sense of the delta between what we have nationally and what we need.

#### In the meantime:

- PHAC has proceeded, with PSPC, to procure 570 ventilators.
  - A contract was awarded for 200 portable ventilators. Delivery of 50 units expected the week of April 1, then 50 units the week after;
  - PSPC finalized contracts for 350 units, deliveries anticipated within 10 to 16 weeks for most units;
  - PHAC is has finalized a contract to produce an additional 20 units from Thornhill which should be delivered to PHAC by April 1, 2020;
  - PHAC is working with PSPC to procure an additional 1880.

As of March 22, PHAC had 548 ventilators in the stockpile

- 44 of the PB-840 ventilators (WHO compliant) (preferred for use in ICU/Coronavirus)
- 489 of the HT-50 Ventilators —which can be used if an emergency, but more likely to be used for less critical patients, freeing up more sophisticated ventilators for acute use.

**From:** Gordon2, Travis (HC/SC) **Sent:** 2020-03-23 6:58 PM

To: Chan, Marco (IC) <marco.chan@canada.ca>; Caira, Celine (IC) <celine.caira@canada.ca>; Murdock, Kelly

(SPAC/PSPC) < kelly.murdock@canada.ca>

Subject: RE: Office of the Minister | Cabinet du ministre

Thanks Marco.

O-Two already has approval so no issue with HC. But fair call for PHAC. Just to be clear, O-Two has not made a bit through PSPC? This is the only context in which PHAC would be assessing their model.

On the Winnipeg model, again somebody will need to actually make a submission to HC if they can track down the schematics.

Message received re: Thornhill.

TG

From: Chan, Marco (IC) <marco.chan@canada.ca>

Sent: 2020-03-23 6:46 PM

To: Gordon2, Travis (HC/SC) < <a href="mailto:travis.gordon2@canada.ca">travis.gordon2@canada.ca</a>; Caira, Celine (IC) < <a href="mailto:celine.caira@canada.ca">celine.caira@canada.ca</a>; Murdock, Kelly

(SPAC/PSPC) < kelly.murdock@canada.ca >

Subject: RE: Office of the Minister | Cabinet du ministre

Hi Travis,

Thanks for this intel. Having a sense of where different ventilator models stand in approval is helpful for us to manage expectations.

To clarify on your question about what model APMA/Magna/Linamar are looking to advance – they are adopting a scattershot approach. So if O-Two moved in time to adapt model for PHAC approval, they'll go with that. If the defunct Winnipeg model gets approved, they'll do that. If Thornhill is willing to contract out, that.

Pure conjecture, but I imagine Thornhill et al aren't super eager to contract out to autos so movement on the O-Two or Winnipeg is what will likely relieve this pressure.

### Marco

From: Gordon2, Travis (HC/SC) < <a href="mailto:travis.gordon2@canada.ca">travis.gordon2@canada.ca</a>>

Sent: March 23, 2020 5:21 PM

To: Caira, Celine (IC) < celine.caira@canada.ca>; Murdock, Kelly (SPAC/PSPC) < kelly.murdock@canada.ca>

Cc: Chan, Marco (IC) < marco.chan@canada.ca>

Subject: RE: Office of the Minister | Cabinet du ministre

Hey,

Passing along a bit of intel I gleaned from a chat with my Director. This is a very live issue in the public service right now, including up to the Deputy level, in terms of working out specifics and making sure we're advising on the right model.

For example, with Thornhill, they make many different models of vents, not all of which are readily interoperable with various PT health systems. So more to come!

TG

From: Caira, Celine (IC) < celine.caira@canada.ca >

Sent: 2020-03-23 11:34 AM

To: Murdock, Kelly (SPAC/PSPC) < kelly.murdock@canada.ca>; Gordon2, Travis (HC/SC) < travis.gordon2@canada.ca>

Cc: Chan, Marco (IC) < marco.chan@canada.ca >

Subject: RE: Office of the Minister | Cabinet du ministre

Hey Team – just spoke with O-two, a leading Canadian manufacturer of ventilators. They have Bombardier, APMA, and Magna lined up and ready, but are just waiting for numbers. They tell me they are able to ramp up production to about 5,000 ventilators a month in 30 days and are exporting to UK, Spain, Portugal and the US, but not serving Canadians.

Is there a way we can expedite getting them numbers and get things rolling? Even if it is an estimate? Trying to get a sense of what the pain points are.

Thanks,

C

From: Helton < helton@otwo.com > Sent: March 23, 2020 10:18 AM

To: Caira, Celine (IC) < celine.caira@canada.ca>

Subject: RE: Office of the Minister | Cabinet du ministre

Importance: High

Hello Celine,

I tried calling you just now. Please let me know when is the best time to talk.

Best regards,

### **HELTON SANTOS**

Vice President Sales and Marketing

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From: Caira, Celine (IC) < celine.caira@canada.ca>

Sent: Sunday, March 22, 2020 8:20 PM

To: Resuscitation
Subject: Ventilators

Hello,

I would like to connect with someone in your company on your capacity to produce ventilators. Kindly let me know who would be best to connect with and we will find a time to connect by phone.

Many thanks and looking forward to discussing soon.

# Celine V. Caira

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