

December 22, 2021
Deborah Carruthers
Director of Harmony Wellness Center

Dear Adrian Dix,
Cc: Dr. Bonnie Henry
Cc: Times Colonist
Cc Vancouver Sun

In my role as director of our Wellness Center, we have served countless numbers of clients/students in the past ten years to resolve mental and physical health issues. More importantly, we have created a community where folks feel safe, connected and supported in their personal journeys. The benefits of yoga and meditation are reduced stress, better sleep, improved mood, more energy and stronger immune systems.

Since COVID began, we have not had a single exposure, outbreak among staff and students, even when there was a major outbreak in our small community. The PHO orders have targeted the "alternative health and wellness" industry without providing any evidence to me or the public about a threat of outbreak that would justify closing my business for the fourth time in two years.

This recent closure asks gyms and fitness studios to close in the season that people restart their fitness programs. The financial losses for the small and medium business have been immense. There is no offer on the table to help us through the next couple of months. January is our busiest month and our losses will be over 10,000 dollars. Multiply that by the hundreds of businesses impacted by this latest round of restrictions.

If the yoga and wellness industry was a significant contributor to the outbreaks, I would feel this order would be justified, and with that I would expect data from the government to support this level of lock down. Sadly, this is not the case. To the bureaucrats who make these decisions, please show me the evidence that my industry is causing harm.

Finally, how long do we continue with these cycles of lockdowns, restrictions and false hope about the end of the pandemic. The measure of insanity is to keep approaching the problem with the same solutions. It is time that the powers that be offer us something better.

Thank you,
Deborah Carruthers
BA MA, CYT 500



FPT Deputy Ministers of Health Meeting

ZOOM or Teleconference

Dec 22, 2021

**Ministry of Health
Province of British Columbia**

**FPT Deputy Ministers of Health
Meeting Agenda**

December 22, 2021
4:00 pm to 5:00 pm (ET); 1:00 pm to 2:00 pm (PT)

Join Zoom Meeting

s.15; s.17

Meeting Passcode: s.15; s.17

Details to join by telephone

TOLL-FREE DIAL-IN NUMBERS (CANADA/US): s.15; s.17

MEETING ID: s.15; s.17

PARTICIPANT CODE: s.15; s.17

1. Opening Remarks <ul style="list-style-type: none">Approval of the Record of Decisions from the following meetings: November 30th HMM; December 8th HMM; December 13th CDM; and December 15th HMM.	<i>5 min.</i>
2. Epidemiological Update on COVID-19 <ul style="list-style-type: none">Dr. Tam will provide an epi update on COVID-19 including the Omicron variant.	<i>10 min.</i>
3. COVID-19 Response Efforts <ul style="list-style-type: none"><u>Rapid Testing</u>: DM Lucas will provide an update on rapid testing supplies.<u>Vaccine Rollout</u>: President Kochhar will provide an update on vaccine rollout.<u>Surge Support</u>: DM Lucas to provide an update on federal preparations and PTs will share updates on any work underway and anticipated needs.	<i>15 min.</i>
4. Roundtable <ul style="list-style-type: none">DMs will discuss current and planned response measures within their jurisdictions.	<i>25 min.</i>
5. Closing Remarks	<i>5 min.</i>

Meeting Overview for the FPT Deputy Ministers of Health Teleconference, December 22, 2021 (last updated at 10:30 a.m., Wed., Dec. 22)

Summary

- This is the first Health Deputy Minister's Meeting with BC taking on lead as FPT Health Co-Chair
- The Agenda consists of three substantive items (the first two federally-led, the last—a roundtable—involving all jurisdictions):
 - Epidemiological Update on COVID-19—*for information*;
 - COVID-19 Response Efforts —*for information*; and
 - Rapid Testing
 - Vaccine Rollout
 - Surge Support
 - Roundtable on COVID-19 Response Measures—*for discussion*.
- Records of Decision (RoDs) will be raised for approval. IGR has reviewed the RoDs and recommends approval.
 - Nov. 30 FPT HMM RoD
 - Dec. 8 FPT HMM RoD
 - Dec. 13 FPT CDM RoD
 - Dec. 15 FPT CDM RoD

Strategic Context

- Dec 22: Deputy Prime Minister Chrystia Freeland announced expansions to the Local Lockdown Program (wage and rent subsidy for employers) and the Canada Worker Lockdown Benefit (\$300/week worker benefit). The changes expand eligibility for these programs to include workers and businesses affected by capacity restrictions of 50 per cent or more and loosen the revenue-loss criteria for businesses accessing the Local Lockdown Program.
 - Dec 21: BC PHO Dr. Bonnie Henry and Health Minister Adrien Dix announced additional COVID-19 measures, including reduced capacities, at indoor venues, no organized indoor gatherings and closure of bars and fitness centres.
 - Dec 21: Alberta Premier Jason Kenney and Health Minister Jason Copping announced additional COVID-19 measures, including a 50 per cent capacity limit on venues over 1,000 and no food service at entertainment events to ensure masking.
 - Dec 20: Quebec Minister of Health Christian Dubé announced new COVID-19 restrictions, including closing schools until the new year, closing bars, gyms, and theaters, and restricting restaurants to 50 per cent capacity. On Tuesday, Quebec reported 5,043 new cases, the most by any PT on a single day since the beginning of the pandemic.
 - Dec 17: Ontario Premier Doug Ford announced new COVID-19 restrictions, including 50 per cent capacity limits at restaurants, bars, and several other indoor settings and limits on gathering size and the sale of alcohol at restaurants and bars.
 - Dec 16: Prime Minister Justin Trudeau released new mandate letters to his cabinet, including Minister of Health Jean-Yves Duclos and Minister of Mental Health and Addictions Carolyn Bennett. See **tabs 1d and 1e** for a summary of health items across mandate letters and copies of key mandate letters (Health, Mental Health and Additions, and Finance).
 - Dec 15: The government of Canada issued a travel advisory against nonessential international travel.
- **Agenda Item #1: Opening Remarks and Binder Frontmatter**
 - Supplemental supporting background documents compiled by IGR for this meeting:
 - **Tab 1a:** Meeting Overview (*this note*).

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- **Tab 1b:** List of FPT Ministers and Deputy Ministers of Health and Mental Health and Addictions [*n.b.: not a Participant List; just a general reference.*].
- **Tab 1c:** Records of Decision (RoDs) will be raised for approval. IGR has reviewed the RoDs and recommends approval.
 - Nov. 30 FPT HMM RoD
 - Dec. 8 FPT HMM RoD
 - Dec. 13 FPT CDM RoD
 - Dec. 15 FPT CDM RoD
- **Tab 1d:** Summary of Health Items in Federal Mandate Letters.
- **Tab 1e:** Federal Mandate Letters for Health (p 1), Mental Health and Addictions (p 9), Seniors (p 14), and Finance (p 18).

• **Agenda Item #2: Epidemiological Update on COVID-19**

- *For information, 10 minutes:* Dr. Tam will provide an epidemiological update on COVID-19 including the Omicron variant.
- **Tab 2a:** No federal materials provided.
- **BC Context**
 - As of Dec 21, 2021, BC is reporting 1,308 new cases of COVID-19, for a total of 229,643, cases to date in the province. Additional highlights are as follows:
 - One new death was reported, for an overall total of 2,403 deaths to date.
 - There are currently 6,348 active cases.
 - 192 individuals are hospitalized, including 76 in critical and intensive care.
 - 220,741 individuals have recovered.
 - 756 cases of the Omicron variant have been identified in BC.
 - Updated public health restrictions have been put in place effective Dec 22. **See agenda item 4 for details.**
- **Additional Context**
 - On Dec 15, 2021 Health Minister's Meeting, Dr. Theresa Tam provided an overview of the progressing situation with the Omicron variant both domestically and globally, including the latest evidence on increased transmissibility and lower vaccine effectiveness. She also noted there were still unknowns about the severity of illness produced by the variant.
 - On Dec 15, 2021 the National Advisory Committee on Immunization (NACI), provided guidance on the importance of vaccines and expanding booster eligibility to protect vulnerable populations, and emphasized the effectiveness of Moderna vaccine (Spikevax), in light of some preferential preference for Pfizer (Comirnaty) in certain areas of the country.

Vaccine allocation and distribution resources

- Federal vaccine allocation and distribution updates can be found at:
<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks/covid-19-vaccine-treatment/vaccine-rollout.html#a4>
- The federal government published COVID-19 vaccination statistics for Canada (updated every Friday) here: <https://health-infobase.canada.ca/covid-19/vaccination-coverage/>

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• Agenda Item #3 COVID-19 Response Efforts

- *For information (15 minutes):*
 - **Rapid Testing:** DM Lucas will provide an update on rapid testing supplies.
 - **Vaccine Rollout:** PHAC President Kochhar will provide an update on vaccine rollout.
 - **Surge Support:** DM Lucas will provide an update on federal preparations with respect to surge support and PTs will share update on any work underway and anticipated needs.
- **Supporting documents:**

No federal materials provided

 - **Tab 3a:** BC Program bullets – Rapid Testing
 - **Tab 3b:** BC Program Bullets – Surge Support Planning – COVID Response & Health Emergency Management Division (CRHEM)
 - **Tab 3c:** BC Program Bullets – Surge Support Planning - Health Sector Workforce and Beneficiary Services Division (HSWBSD)
- **Strategic Context:**
 - Dec 20: Quebec began distribution of 6.3 million rapid tests, 2 million of which have been sent to LTC facilities and 4.3 million of which have been sent to pharmacies.
 - Dec 15: Alberta Premier Jason Kenney announced that 500,000 rapid antigen test kits will be available at pharmacies starting Friday, Dec 17. Alberta also announced that Albertans aged 50 and older, and healthcare workers, are now eligible for a booster dose (provided the second dose was six months ago or earlier).
- **Additional Context:**

Rapid Testing

 - Health Canada has indicated strong support of BC distributing POC and rapid antigen tests, including on-label and off-label tests for at-home usage, to workplaces and individuals through federal and provincial testing programs.
 - On December 13, Health Canada released an interim enforcement approach, indicating they will not prioritize enforcement of off-label use of POC tests if distributed through a federal, provincial, or territorial testing initiative.
 - Health Canada has not indicated whether they will continue to supply provinces with POC rapid antigen tests for individual or workplace use beyond March 31, 2022.
 - As of December 13, 2021, BC has 1,932,833 tests and 263 analyzers available in provincial warehouses to be deployed to regions.
 - BC is expecting delivery of 200,000 Panbio Rapid POC Tests (nasal swab kits) by Dec. 31, 2021 as well as 500,000 BTNX tests with nasal swabs by late December 2021.
 - Between mid-December and mid-January, the existing stock of POC Test will be allocated to:
 - Sample collection sites for people with symptoms (700K)
 - Long term care for use by staff and all visitors (100K)
 - Acute care sites for use by symptomatic staff and/or close contacts (100K)

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- o Rural, remote, Indigenous, and vulnerable communities for symptomatic testing and case and contact management (1.2M)
 - o Business and other organizations to enable expanded workplace screening programs (250K)
 - o Case/Contact management and outbreaks for use at the direction of regional Medical Health Officers and health authorities (250K)
- **BC has requested their full per capita allotment of the 84 million tests Health Canada will be receiving in January or approximately 11 million rapid antigen tests and supports monthly per-capita allotment of federally supplied POC tests of all types.**
- With increased supplies rapid antigen testing in BC will be expanded in mid-January to provide tests for:
 - o Public health and health authorities to help manage community transmission through distribution to cases/contacts and clusters/outbreaks, and as additional tool to protect Clinically Extremely Vulnerable and 70+ population.
 - o K-12 students and staff to be deployed as needed to support return to school and continuity of in-person learning.
 - o Post-secondary symptomatic students, faculty, and staff to support return to campus.
 - o Expansion and/or replenishment of supply for long-term care, health care workers, rural remote and Indigenous communities, workplace screening, and case/contact management.
- BC has received 14,358 test new orders yesterday, report 14,457 tests and there 12,000 tests pending yesterday as of 8pm. Provincial turn around time is 30.6 hours (90th percentile).

Vaccine Rollout

- BC will increase vaccination capacity and accelerate booster campaign for age-based population from January to March 2022.
- 727,761 boosters/third doses administered, plus 101,266 pediatric vaccine.
- Currently operating at 35% more capacity than previously announced, including pharmacies and health authority clinics.
- 67% of people aged 70 plus have received a booster, more that 50 percent of people aged 65 plus.
- Approximately 65, 000 healthcare workers have received their booster.
- 125,000 clinically extremely vulnerable have received third doses.

Surge Support - COVID Response & Health Emergency Management Division (CRHEM)

- The fifth wave of COVID, dominated by the Omicron variant, is expected to result in significant increases in people with COVID-19 and potential surges in hospitalizations in BC.
- This wave comes as Delta is still circulating and during the traditional influenzas/RI season.
- BC expects that staff and/or their family members will be exposed or become symptomatic and be required to isolate or be off work, increasing pressure on an already strained workforce.
- BC health authorities are working to rapidly re-examine surge plans in this new set of circumstances to identify where additional support/planning may be needed.

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- BC continues to maintain a 20,000 COVID tests a day laboratory capacity. While the machine capacity is above target, the human resource capacity to deliver this testing is impacted by immunization efforts and other staff shortages. BC has received 14,358 new orders yesterday, report 14,457 tests and there 12,000 tests pending yesterday as of 8pm. Provincial turn around time is 30.6 hours (90th percentile).
- Contact tracing surge capacity continues to be a challenge in some health regions, particularly Vancouver Coastal Health, Fraser Health, and Vancouver Island Health Authority, where they are seeing sharp increases in cases.

Surge Support – **Health Sector Workforce and Beneficiary Services Division (HSWBSD)**

- Pressures for health human resources (HHR) are being felt across the system, professions and service areas, the following resources are currently the most in demand in the context of surge planning:
 - Registered Nurses are in high demand across all service areas, but is more acute for nurses with critical care and ICU experience and in long-term care
 - Respiratory Therapists
 - Medical Laboratory Assistants
- The BC Ministry of Health actively monitors COVID-19 case counts, hospitalizations and staffing levels by region and has mitigation strategies in place to support regions that may be experiencing limited capacity in critical care.
- Rural and remote regions, particularly in the northern part of the province, experience unique recruitment and retention challenges.
 - The northern region of BC has issues with critical care capacity. Critical care capacity is managed on a provincial level, so the pressures extend across all geographical regions.
- The BC Ministry of Health, regional health authorities, and other health system partners continue to implement strategies to address workforce shortages and improve surge capacity. These include:
 - Surge capacity planning undertaken by regional health authorities and evaluated by the Ministry of Health.
 - Extending the scope of a contract with the Canadian Red Cross to ensure administrative and non-clinical supports for vaccination clinics, contact tracing, and testing centres across BC.
 - Utilizing recently retired nurses and other health professionals who have Temporary Emergency Registration and redeploying staff across regions through the Emergency Health Provider Registry.
- Increased federal funding for health care is needed to support a variety of workforce development initiatives to address urgent challenges while increasing the overall national health workforce to sustain services going forward.
- With federal support, there are opportunities to advance a national approach to maximizing workforce supply and aligning distribution with the health needs of Canadians via national and regional training, recruitment and retention frameworks and strategies. Health human resource shortages lead to unproductive competition between jurisdictions.
- Administrative delays and other barriers need to be addressed for internationally trained nurses, physicians, allied health, and other professionals while ensuring our systems protect, promote, and preserve quality and patient safety.
- Federal immigration programs need to be flexible, focused, and facilitative to respond to the urgent needs of the health sector.
- Federal leadership and support for innovative approaches can contribute to the optimization of the health care system by maximizing the utilization of health care workers and increasing productivity

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while improving patient care. These approaches include emerging technologies (such as robotics and artificial intelligence) and the advancement of patient-centred clinical service models that leverage interdisciplinary team-based care.

- Improvements to national data sets (including the development and implementation of a standardized national approach to collecting diversity data and better understanding cross-jurisdictional migration patterns) are necessary to better understand workforce challenges and trends and to develop responsive actions at the federal and provincial/territorial levels.

• **Agenda Item #4 Roundtable on COVID-19 Response Measures**

- *For discussion (25 minutes):* DMs will discuss current and planned response measures within their jurisdictions.
- **Supporting documents:**
 - **Tab 4a:** No source documents provided
- **BC Context:**
 - Dec 21: BC has instituted new province wide health orders to limit the spread of COVID-19, to be effective December 22 11:59PM until at least January 18, 2022, including:
 - Indoor organized gatherings of any size (weddings, receptions, celebratory events, etc).
 - 50 percent capacity at indoor venues.
 - Closing bars, nightclubs and lounges, gyms, fitness centres, and dance studios.
 - Limiting groups to a maximum of six per table at restaurants and cafes.
 - Dec 17: BC implemented restrictions on indoor personal gatherings limited to one household plus 10 visitors or one other household and patrons of restaurants, and cafes must remain seated (restriction in place until January 31st).
 - BC expects to receive 700k rapid tests by the end of December
 - BC continues to scale up its booster rollout with a focus on those most at risk. Health authorities are ramping up capacity to deliver vaccines and secure vaccination sites.

• **Agenda Item #5 Closing Remarks**

- No supporting documents

**FEDERAL/PROVINCIAL/TERRITORIAL
MINISTERS AND DEPUTY MINISTERS OF
HEALTH & MENTAL HEALTH AND ADDICTIONS**

JURISDICTION	MINISTRY	MINISTER	DEPUTY MINISTER
BC	Health	Honourable Adrian Dix	Stephen Brown
	Mental Health and Addictions	Honourable Sheila Malcolmson	Christine Massey
AB	Health	Honourable Jason Copping	Paul Wynnyk
	Mental Health and Addictions	Honourable Mike Ellis (Associate Minister)	Paul Wynnyk
SK	Health	Honourable Paul Merriman	Max Hendricks
	Rural and Remote Health/Minister Responsible for Seniors	Honourable Everett Hindley	Max Hendricks
MB	Health and Seniors	Honourable Audrey Gordon	Karen Herd
	Mental Health, Wellness and Recovery	Honourable Audrey Gordon	Kymberly Kaufmann
ON	Health	Honourable Christine Elliott (Deputy Premier & Minister)	Dr. Catherine Zahn
	Mental Health and Addictions Province of Ontario	Honourable Michael Tibollo (Associate Minister)	Dr. Catherine Zahn
QC	Ministère de la Santé et des Services sociaux	<ul style="list-style-type: none"> • Christian Dubé (Ministre/Minister) • Lionel Carmant (Ministre délégué/Delegate Minister) • Marguerite Blais (Ministre responsable des Aînés et des Proches aidants/Minister responsible for Seniors and Caregivers) 	<ul style="list-style-type: none"> • Dominique Savoie (Sous-ministre/DM) • Daniel Desharnais (Sous-ministre adjoint/ADM)
NB	Health	Honourable Dorothy Shephard	Heidi Liston (Acting DM)
NS	Health and Wellness	Honourable Michelle Thompson	<ul style="list-style-type: none"> • Jeannine Lagasse • Craig Beaton (ADM)
	Office of Health Care Professionals Recruitment	Honourable Michelle Thompson ¹	Dr. Kevin Orrell (DM/CEO)
	Office of Mental Health and Addictions	Honourable Brian Comer ²	No DM announced. Chief MHA is Dr. Samuel Hickcox.
	Seniors and Long-term Care	Honourable Barbara Adams	Paul LaFleche ³
PEI	Health and Wellness	Honourable Ernie Hudson	Mark Spidel

¹ Minister Thompson will oversee the creation of this new Office. Nova Scotia is undertaking major restructuring of its senior health leadership. Karen Oldfield has been appointed CEOA new four-person health leadership team, led by Karen Oldfield, who has been appointed interim CEO of the Nova Scotia Health Authority (NSHA).

² Minister Comer will also be the Minister responsible for Youth and Communications Nova Scotia.

³ <https://novascotia.ca/news/release/?id=20210831007>

**FEDERAL/PROVINCIAL/TERRITORIAL
MINISTERS AND DEPUTY MINISTERS OF
HEALTH & MENTAL HEALTH AND ADDICTIONS**

JURISDICTION	MINISTRY	MINISTER	DEPUTY MINISTER
NL	Health and Community Services	Honourable Dr. John Haggie	Andrea McKenna
NU	Health	Honourable John Main	Colleen Stockley
NWT	Minister of Health and Social Services/Minister Responsible for Persons with Disabilities/Minister Responsible for Seniors	Honourable Julie Green	Bruce Cooper (DM of Health and Social Services)
YK	Health and Social Services	Honourable Tracy-Anne McPhee	Stephen Samis
CANADA	Health	The Honourable Jean-Yves Duclos	<ul style="list-style-type: none"> • Stephen Lucas (DM) • Heather Jeffrey (Assoc. DM)
	Mental Health and Addictions & Associate Minister of Health	The Honourable Carolyn Bennett	
	Public Health Agency of Canada	<ul style="list-style-type: none"> • Dr. Harpreet S. Kochhar (President) • Dr. Theresa Tam (Chief Public Health Officer) 	

CONFERENCE OF FPT MINISTERS OF HEALTH (HMM)

November 30th, 2021

RECORD OF DECISIONS

1. Introductions and Opening Remarks

- Minister Duclos welcomed federal and PT colleagues and noted that Minister Dix (BC) will be assuming the PT Co-Chair from Minister Elliott (ON) in the coming weeks.
- Minister Elliott also welcomed the new PT Ministers (Ministers Copping (AB), Gordon (MB), Thompson (NS) and Main (NU)) to the table and shared the current epidemiological situation in ON including cases of the Omicron variant in the province.

Decision / Next Steps: N/A

2. Omicron Variant of Concern

- Minister Duclos confirmed cases of the Omicron variant in the country and outlined the enhanced border measures the federal government recently announced to address the new variant, including enhanced testing.
- Dr. Tam provided an overview of the epidemiological situation of the Omicron variant both domestically and globally; noted work underway by the National Microbiology Lab to understand the impact of Omicron on testing and vaccine effectiveness; and, outlined the contact tracing efforts of the Public Health Agency of Canada (PHAC).
- During the roundtable, jurisdictions (QC and BC) sought clarification on details of the federal response efforts and enhanced border measures. In response, Minister Duclos and President Kochhar (PHAC) provided further information on the federal measures and requirements for testing and isolation, as well as compliance and enforcement.

Decision / Next Steps: N/A

3. COVID-19 Vaccines Update

- Dr. Tam provided an update on the ongoing work of the National Advisory Committee on Immunization (NACI) on: booster doses for the general population, the impacts of Omicron, and the use of vaccines for those under 30 in consideration of risks of myocarditis and pericarditis following administration of mRNA vaccines. She also noted that the Special Advisory Committee would also be meeting to discuss the NACI recommendations and would be aiming to complete work on a cohesive approach by the end-of-the week.
- President Kochhar highlighted the pediatric vaccine rollout across the country; the number of shipments of COVID-19 vaccines; and, the surplus vaccines being donated via COVAX.

Decision / Next Steps: N/A

4. Roundtable

- PTs (with the exception of SK) engaged in a roundtable discussion that highlighted their respective vaccination rates, pediatric vaccine rollout, and the status of case counts with several PTs raising specific questions and challenges:

- Minister Hudson (PEI) sought clarity regarding the testing requirements for those travelling on a connecting flight.
- Minister Dubé (QC) noted challenges with ensuring compliance of isolation requirements and emphasized the importance of close surveillance.
- Minister Main (NU) noted NU's logistical challenges in fulfilling federal quarantine requirements due to NU's housing crisis and asked it be taken into consideration.

Decision / Next Steps:

- ✓ *Federal officials will follow-up as required on questions raised by PTs during the roundtable including PEI's question on connecting flights and NU's housing challenges and quarantine.*

5. Closing Remarks

- Before concluding, Minister Duclos reminded the table that the domestic vaccine mandate for those travelling by train and air took effect on November 30th and Minister Elliott (ON) expressed interest in further advice and information on boosters.

Decision / Next Steps: N/A

Meeting Adjourned

Annex A

Participants

- Jean-Yves Duclos, Minister of Health, Health Canada (co-chair)
- Christine Elliott, Minister of Health, Ministry of Health, Ontario (co-chair)
- Adrian Dix, Minister of Health, Ministry of Health, British Columbia
- Dr. Rosana Salvaterra, Deputy Chief Medical Officer of Health, for Minister Jason Copping, Ministry of Health, Alberta
- Mark Goossens, Director, for Minister Paul Merriman, Ministry of Health, Saskatchewan
- Avis Gray, Assistant Deputy Minister, for Minister Audrey Gordon, Health and Seniors Care, Manitoba
- Christian Dubé, Ministère de la Santé et des Services sociaux, Québec
- Dorothy Shephard, Minister of Health, Department of Health, New Brunswick
- Jeannine Lagassé, Deputy Minister, for Minister Michelle Thompson, Ministry of Health and Wellness, Nova Scotia
- Ernie Hudson, Minister of Health and Wellness, Ministry of Health and Wellness, Prince Edward Island
- Dr. John Haggie, Minister of Health and Community Services, Department of Health and Community Services, Newfoundland and Labrador
- Mary Vanstone, Assistant Deputy Minister, for Minister Tracy McPhee, Health and Social Services, Yukon
- Julie Green, Minister of Health and Social Services, Department of Health and Social Services, Northwest Territories
- John Main, Minister of Health, Department of Health, Nunavut
- Dr. Harpreet Kochhar, President, Public Health Agency of Canada

Guests:

- Stephen Lucas, Deputy Minister, Health Canada
- Dr. Tam, Chief Public Health Officer of Canada, Public Health Agency of Canada

CONFERENCE OF FPT MINISTERS OF HEALTH (HMM)

December 8th, 2021

RECORD OF DECISIONS

1. Introductions and Opening Remarks

- Minister Duclos welcomed federal and PT colleagues. During her opening remarks, Minister Elliott (ON) emphasized the close monitoring of the Omicron variant in the province, the continued focus on vaccination, and ON's appreciation of federal support for additional border measures and the increased supply of rapid tests.

Decision / Next Steps: N/A

2. Epidemiological and Situational Update on Omicron

- Minister Duclos confirmed cases of the Omicron variant in the country and outlined the enhanced border measures recently announced by the federal government to address the new variant, including enhanced testing.
- Dr. Tam (PHAC) provided an overview of the epidemiological situation of the Omicron variant both domestically and globally.

Decision / Next Steps: N/A

3. Border and Testing Measures

- Minister Duclos highlighted the significant ramp up and collaboration required to increase testing capacity for travellers, noting intent to reach 100% capacity for non-US travellers by December 21st.
- DM Lucas noted discussions at the December 6th CDM, as well as through follow-up bilateral discussions, to seek support for collaboration on testing with PTs.
- President Kochhar provided an overview of the enhanced border measures and immediate action taken for travellers returning from the 10 listed countries, including requirements to stay in designated quarantine facilities, and follow-up with previously returned travellers to request testing. He highlighted intent to post an infographic to ensure clear communications to travellers.
- During the roundtable, Minister Merriman (SK) sought clarity on the PT support needed for capacity at airports. In response, DM Lucas noted that PHAC would work with PTs to determine and augment capacity at airports.
 - Minister Dubé highlighted QC's capacity challenges to provide additional testing capacity from provincial labs and he offered to support federal efforts via their private testing labs. In response, Minister Duclos clarified the intent was not to use PT resources but rather focus on contingency planning in anticipation of high demand.

Decision / Next Steps:

- ✓ *The federal government will continue to engage PTs on potential collaboration on arrival testing, as appropriate.*

4. Update on Rapid Testing

- Minister Duclos indicated that approximately 100 million rapid tests have been procured by the federal government to date, with 86 million sent out to the provinces. He indicated that an additional 34 million tests have been procured for December.
- During the roundtable, Minister Dubé (QC) made a request that the go-forward allocation of rapid testing be done on a per capita basis. Minister Elliott also highlighted the importance of rapid tests to ON's response, and supported Minister Dubé's per capita suggestion based on the understanding that the federal government will increase the overall supply of rapid tests to meet the needs of all jurisdictions.

Decision / Next Steps:

- ✓ *Officials will consider the go-forward approach to rapid testing allocation, to ensure an efficient and effective allocation to PTs.*

5. Closing Remarks

- Before concluding, Minister Duclos highlighted the recent federal announcement of the procurement of over 1.5 million courses of Merck and Pfizer antiviral treatments, pending Health Canada regulatory approval.

Decision / Next Steps: N/A

Meeting Adjourned

Annex A

Participants

- Jean- Yves Duclos, Minister of Health, Health Canada (co-chair)
- Dr. Harpreet Kochhar, President, Public Health Agency of Canada
- Christine Elliott, Minister of Health, Ministry of Health, Ontario (co-chair)
- Adrian Dix, Minister of Health, Ministry of Health, British Columbia
- Peter Pokorny, Associate Deputy Minister, Ministry of Health, British Columbia
- Monte Krueger, Deputy Incident Commander, Health Emergency Operations, for Minister Jason Copping, Ministry of Health, Alberta
- Paul Merriman, Minister of Health, Ministry of Health, Saskatchewan
- Karen Herd, Deputy Minister, for Minister Audrey Gordon, Health and Seniors Care, Manitoba
- Christian Dubé, Ministère de la Santé et des Services sociaux, Québec
- Rene Boudreau, Associate Deputy Minister, Ministry of Health, New Brunswick
- Michelle Thompson Minister of Health, Ministry of Health and Wellness, Nova Scotia
- Shaun MacNeill, Manager for Minister Ernie Hudson, Minister of Health and Wellness, Ministry of Health and Wellness, Prince Edward Island
- Karen Stone, Deputy Minister for Minister Dr. John Haggie, Department of Health and Community Services, Newfoundland and Labrador
- Stephen Samis, Deputy Minister, for Minister Tracy McPhee, Health and Social Services, Yukon
- Julie Green, Minister of Health and Social Services, Department of Health and Social Services, Northwest Territories
- Linnea Ingebrigtsen, Director, Policy and Planning for Minister John Main, Department of Health, Nunavut

Guests:

- Stephen Lucas, Deputy Minister, Health Canada
- Dr. Tam, Chief Public Health Officer of Canada, Public Health Agency of Canada

CONFERENCE OF FPT DEPUTY MINISTERS OF HEALTH (CDM)

December 13th, 2021

RECORD OF DECISIONS

1. Opening Remarks

- DM Lucas (HC) welcomed Newfoundland and Labrador's new Deputy Minister of Health and Community Services, Andrea McKenna, to the CDM Table.
- The Record of Decisions for the November 9th CDM was approved.

2. COVID-19

- Dr. Tam (PHAC) provided a situational update on the Omicron variant, including the latest reports of cases in Canada; an overview of the global situation; and the importance of booster doses in the strategy against variants.
- Dr. Kochhar (PHAC) provided an update on the implementation and next steps on border measures in Canada, including increasing testing capacity at airports, working with PTs to supplement testing capacity and ensuring consistency in messaging to travellers.

Decision / Next Steps: N/A

3. Chief Public Health Officer Annual Report

- Dr. Tam provided an overview of her annual report on the state of public health entitled *A Vision to Transform Canada's Public Health System*.
- This year's report includes an overview of the key epidemiological COVID-19 events in Canada; describes the role of public health in Canada including opportunities for system level improvements; and puts forward a vision for the transformation of public health in Canada.
- Dr. Tam noted her intent with this year's report was to encourage a national dialogue and catalyze collective action on public health system renewal. She emphasized that public health is a responsibility shared across governments, sectors, and communities.

Decision / Next Steps: N/A

4. Update on Virtual Care and Digital Health

- Before turning to Associate ADM Voisin (HC), federal co-chair of the FPT Virtual Care and Digital Health Table, to provide an update, DM Lucas introduced BC as the new PT co-chair of the FPT Virtual Care and Digital Health Table.
- Associate ADM Voisin presented an update of the table's collaborative work over the past 18 months, including the Virtual Care Summit with stakeholders held in June 2021. Associate ADM Voisin also provided an overview of a draft Action Plan, including a vision, principles and potential actions to guide future FPT work.
- During the roundtable, ADM Desharnais (QC) reiterated QC's position that they would not be participating in the work to develop a pan-Canadian framework on virtual care and requested that QC's position be reflected in any documents that are developed.

Decision / Next Steps:

- ✓ The FPT Virtual Care and Digital Health Table will return to CDM in the New Year for another update and to seek further endorsement of specific actions.

5. Closing Remarks

- DM Lucas closed by noting that Minister Duclos intended to convene an FPT Health Ministers' Meeting this week to discuss the Omicron variant, and that the federal government was working to fulfil requests to PTs on rapid tests.

Decision / Next Steps: N/A

Meeting Adjourned

Annex A

Participants

- Stephen Lucas, Deputy Minister, Health Canada (co-chair)
- Robert Francis, Director for Deputy Minister Catherine Zahn, Ontario (co-chair)
- Stephen Brown, Deputy Minister, Ministry of Health, British Columbia
- Ian Rongve, Assistant Deputy Minister, Ministry of Health, British Columbia
- Shannon Malovec, Chief Digital Innovation Officer, Provincial Health Services Authority, British Columbia
- Monte Krueger, Deputy Incident Commander, for DM Paul Wynnyk, Ministry of Health, Alberta
- Patricia De Ciman, Senior Policy Analyst, observer for DM Max Hendricks, Ministry of Health, Saskatchewan
- Avis Gray, Assistant Deputy Minister, for DM Karen Herd, Health and Seniors Care, Manitoba
- Daniel Desharnais, Assistant Deputy Minister, for DM Dominique Savoie, Ministère de la Santé et des Services sociaux, Québec
- René Boudreau, Associate Deputy Minister, for A/DM Heidi Liston, Health, New Brunswick
- Craig Beaton, Associate Deputy Minister, Ministry of Health and Wellness, Nova Scotia
- Mark Spidel, Deputy Minister, Ministry of Health and Wellness, Prince Edward Island
- John McGrath, ADM, for Andrea McKenna, Deputy Minister, Department of Health and Community, Newfoundland and Labrador
- Stephen Samis, Deputy Minister, Health and Social Services, Yukon
- Bruce Cooper, Deputy Minister, Department of Health and Social Services, Northwest Territories
- Colleen Stockley, Deputy Minister, Department of Health, Nunavut
- Dr. Harpreet Kochhar, President, Public Health Agency of Canada

Guests:

- Dr. Tam, Chief Public Health Officer of Canada, Public Health Agency of Canada
- Jocelyne Voisin, Associate Assistant Deputy Minister, Health Canada

CONFERENCE OF FPT MINISTERS OF HEALTH (HMM)

December 15th, 2021

RECORD OF DECISIONS

1. Introductions and Opening Remarks

- Minister Duclos welcomed federal and PT colleagues. Minister Elliott (ON) briefly noted the current epidemiological situation and recent measures to address the Omicron variant in ON. She also noted the end of her term as PT Co-Chair and welcomed Minister Dix (BC) as the incoming PT Co-Chair.

Decision / Next Steps: N/A

2. Epidemiological Update on COVID-19

- Dr. Tam provided an overview of the epidemiological situation of the Omicron variant both domestically and globally, including the latest evidence on the severity, transmissibility and vaccine effectiveness. She also noted guidance from the National Advisory Committee on Immunization (NACI), underscored the importance of vaccines and expanding booster eligibility to protect vulnerable populations, and emphasized the effectiveness of Moderna vaccine (Spikevax), in light of some preference for Pfizer (Comirnaty) in certain areas of the country.
- During the roundtable:
 - Minister Dix asked whether NACI intended to amend their guidance and for clarification on federal advice related to capacity limits for large indoor venues. In response, Dr. Tam noted that NACI reaffirmed their existing guidance on booster eligibility and dosing intervals and it would be looking at additional questions (e.g., additional boosters in long-term care). On capacity limits, Dr. Tam said that the Special Advisory Committee (SAC) would have further discussions in advance of any updated guidance.
 - Minister Dubé asked about the dosing intervals for boosters and the strength of the 6 month recommendation. In response, Dr. Tam reiterated NACI recommendations to follow the 6 month interval as it provided long lasting immunity and implement public health measures if cases rise.

Decision / Next Steps: N/A

3. Omicron Measures

- Before turning to President Kochhar (PHAC), Minister Duclos noted recent discussions by First Ministers as well as the announcement advising against non-essential travel.
- President Kochhar (PHAC) provided further details regarding the federal travel advisory as well as the status of ongoing testing and border measures.
- Minister Duclos and DM Lucas also provided an update on the procurement and approvals of rapid tests and ongoing discussions with PTs on the delivery of tests.

Decision / Next Steps: N/A

4. Roundtable

- Before engaging in the roundtable, Minister Bennett acknowledged the release of a recent report on opioid overdose deaths, and her commitment to working with PTs to address the ongoing opioids crisis.
- All PTs engaged in a roundtable discussion that highlighted their respective case counts, vaccination rates and rollout, rapid testing initiatives, and measures in place to address the Omicron variant with several PTs raising specific questions and issues:
 - Minister Copping (AB) noted that AB needed more vaccine supply, indicating imminent supply constraints. Minister Duclos assured Minister Copping that there was ample vaccine supply that could be provided as required.
 - Minister Main (NU) expressed concerns with the potential impact of outbreaks in NU due to their ongoing staffing challenges and service reductions at community health centres.
 - In response to Minister Dix's question about antivirals, it was noted that regulatory reviews were underway and that the federal government has purchased the Pfizer and Merck antivirals in advance of regulatory review.
 - Minister Green (NT) echoed Minister Main's comments and highlighted the acute nursing shortages in the Territories. She indicated her interest in a future discussion at the table on a national nursing recruitment strategy.
- Ministers also acknowledged and thanked Minister Elliott for her extended term as the PT Co-Chair.

Decision / Next Steps: N/A

5. Closing Remarks

Decision / Next Steps: N/A

Meeting Adjourned

Annex A

Participants

- Jean-Yves Duclos, Minister of Health, Canada (co-chair)
- Christine Elliott, Minister of Health, Ministry of Health, Ontario (co-chair)
- Adrian Dix, Minister of Health, Ministry of Health, British Columbia
- Jason Copping, Minister of Health, Ministry of Health, Alberta
- Paul Merriman, Minister of Health, Ministry of Health, Saskatchewan
- Karen Herd, Deputy Minister, for Minister Audrey Gordon, Health and Seniors Care, Manitoba
- Christian Dubé, Ministère de la Santé et des Services sociaux, Québec
- Dorothy Shephard, Minister of Health, Department of Health, New Brunswick
- Michelle Thompson, Minister of Health and Wellness, Ministry of Health and Wellness, Nova Scotia
- Ernie Hudson, Minister of Health and Wellness, Ministry of Health and Wellness, Prince Edward Island
- Andrea McKenna, Deputy Minister, for Minister John Haggie, Department of Health and Community Services, Newfoundland and Labrador
- Tracy McPhee, Minister of Health and Social Services, Yukon
- Julie Green, Minister of Health and Social Services, Department of Health and Social Services, Northwest Territories
- John Main, Minister of Health, Department of Health, Nunavut
- Dr. Harpreet Kochhar, President, Public Health Agency of Canada

Guests:

- Stephen Lucas, Deputy Minister, Health Canada
- Dr. Tam, Chief Public Health Officer of Canada, Public Health Agency of Canada

IGRS/Health IGR Summary of Federal Mandate Letters

Context

- On December 16, 2021, Prime Minister Justin Trudeau released mandate letters to his 38 cabinet members, roughly six weeks after ministers were sworn in.
- Mandate letters outline objectives each minister will work to accomplish.
- This note summarizes key items outlined in six of the 38 mandate letters which address health related federal objectives.

Common Preamble

All mandate letters include a preamble directing each Minister to:

- Seek opportunities to reduce emissions, create clean jobs and address climate-related challenges.
- Implement the United Nations Declaration on the Rights of Indigenous Peoples and work in partnership with Indigenous Peoples to advance their rights.
- Include and collaborate with various communities, and actively seek out and incorporate the diverse views of Canadians.
- Ensure that public policies are informed and developed through an intersectional lens (including GBA Plus).
- Maintain professional and respectful relationships with journalists.
- Update practices to develop more agile and effective ways to serve.
- Maintain constructive relationships with Opposition Critics.

Minister of Health (Minister Duclos)

- **COVID:** Ensure domestic supply of vaccines and therapeutics; availability of surge capacity supports for PTs; work with PTs and partners to ensure implementation and adherence to public health measures; support availability of rapid tests and self-tests; invest in a study of long-term health impacts of COVID-19.
- **Proof of Vaccination:** Launch Proof of Vaccination Fund to support PTs that implement proof of vaccine credentials for non-essential businesses & public spaces.
- **Life Sciences:** Advance the Biomanufacturing and Life Sciences Strategy.
- **Health Care Funding:** With the Deputy Prime Minister and Minister of Finance, lead work to increase funding to PTs to strengthen universal public health; ensure health care workers are supported and recruited across Canada; advance an integrated, comprehensive and patient-centric strategy that harnesses the full potential of data and digital systems. In particular:
 - Invest in initiatives that help to speed access to care for critical services.
 - Support PTs in hiring new family doctors, nurses and nurse practitioners.
 - Expand virtual care and help cover digital infrastructure and other system improvements to improve virtual medical consultations or remote monitoring.

- Expand the number of family doctors and primary health teams in rural communities and work to give rural communities greater access to a full suite of health and social services professionals.
- Strengthen compliance with and modernizing the interpretation of the *Canada Health Act* on matters of extra billing for publicly insured services.
- In consultation with PTs and partners, expedite work to create a world-class health data system that is timely, usable, open-by-default, connected and comprehensive.
- **Seniors and Long-Term Care:**
 - Work with Minister of Seniors to negotiate agreements with PTs to improve quality and availability of long-term care homes and beds, including improving infection prevention and control measures, identifying shared principles, and developing national standards and a *Safe Long-Term Care Act*.
 - Work with the Minister of Employment, Workforce Development and Disability Inclusion and PTs to train up to 50,000 new personal support workers and raise wages.
 -
- **Pharmacare:** Engage with willing PTs towards national universal pharmacare.
- **Autism:** Work with PTs, families and stakeholders on the development of a National Autism Strategy.
- **Mental Health:** Work with the Ministers of Mental Health and Addictions and Finance to establish a permanent, ongoing Canada Mental Health Transfer.
- **Women's Health:** Ensure access to reproductive and sexual health services, support establishment of mechanisms to help families cover the cost of in vitro fertilization, and support youth-led grassroots organizations to respond to the unique sexual and reproductive needs of young people.

Minister of Mental Health and Addictions, Associate Minister of Health (Minister Bennett)

- **Canada Mental Health Transfer:** Establish a permanent, ongoing Canada Mental Health Transfer to help expand the delivery of high-quality, accessible, and free mental health services, including for prevention and treatment.
- **Mental Health:** Develop service standards with focus on health equity; sustain access to virtual mental health services; implement suicide prevention hotline; introduce mental health fund for post-secondary students; oversee investments in mental health interventions; explore increasing mental health services in rural areas.
- **Substance Use:** Advance substance use strategy; create standards for treatment programs; work with PTs and Indigenous communities to provide evidence-based harm reduction and treatment.

- **Indigenous Health:** Work with the Minister of Indigenous Services to co-develop and invest in a distinctions-based mental health and wellness strategy to meet the needs of First Nations, Inuit and the Metis Nation
- **Rural Health:** With the support of the Minister of Rural Economic Development, explore pathways to increase the accessibility of mental health services in rural areas.

Deputy Prime Minister and Minister of Finance (Minister Freeland)

- **Funding and Mental Health:** Work with colleagues and PTs to increase funding to PTs, including establishing a new Canada Mental Health Transfer.
- **HHR:** Introduce one-time income tax deduction for new health care professionals setting up practice in rural communities.

Minister of Justice and Attorney General of Canada (Minister Lametti)

- **Mental Health:** Work with PTs and Minister of Mental Health and Addictions to provide those with mental health illnesses with a path to recovery, and expand access to culturally appropriate, trauma-informed services for Indigenous Peoples who access treatment through mental health courts.

Minister of Indigenous Services and Minister responsible for the Federal Economic Development Agency for Northern Ontario (Minister Hajdu)

- **Indigenous health:** Fully implement Joyce's Principle and ensure it guides work to co-develop distinctions-based Indigenous health legislation; with Minister of Mental Health and Addictions, co-develop and invest in a distinctions-based Mental Health and Wellness Strategy; co-develop Indigenous Long-term and Continuing Care Framework.

Minister of Employment, Workforce Development & Disability Inclusion (Minister Qualtrough – B.C.)

- **Personal Support Workers:** With Minister of Health and PTs, train up to 50,000 new personal support workers.
- **HHR:** Advance the Economic Mobility Pathways Pilot to welcome 2,000 skilled refugees to fill labour shortages in high-demand sectors, such as health care.

Minister of Health Mandate Letter

Dear Minister Duclos:

Thank you for agreeing to serve Canadians as Minister of Health.

From the beginning of this pandemic, Canadians have faced a once-in-a-century challenge. And through it all, from coast to coast to coast, people have met the moment. When it mattered most, Canadians adapted, helped one another, and stayed true to our values of compassion, courage and determination. That is what has defined our path through this pandemic so far. And that is what will pave our way forward.

During a difficult time, Canadians made a democratic choice. They entrusted us to finish the fight against COVID-19 and support the recovery of a strong middle class. At the same time, they also gave us clear direction: to take bold, concrete action to build a healthier, more resilient future. That is what Canadians have asked us to do and it is exactly what our Government is ready to deliver. We will work to build that brighter future through continued collaboration, engagement, and the use of science and evidence-based decision-making. With an unwavering focus on delivering results, we will work constructively with Parliamentarians and maintain our strong partnerships with provincial, territorial and municipal governments and Indigenous partners. This decade has had an incredibly difficult start, but this is the moment to rebuild a more resilient, inclusive and stronger country for everyone.

The science is clear. Canadians have been clear. We must not only continue taking real climate action, we must also move faster and go further. As Canadians are increasingly experiencing across the country, climate change is an existential threat. Building a cleaner, greener future will require a sustained and collaborative effort from all of us. As Minister, I expect you to seek opportunities within your portfolio to support our whole-of-government effort to reduce emissions, create clean jobs and address the climate-related challenges communities are already facing.

This year, Canadians were horrified by the discovery of unmarked graves and burial sites near former residential schools. These discoveries underscore that we must move faster on the path of reconciliation with First Nations, Inuit and Métis Peoples. We know that reconciliation cannot come without truth and our Government will continue to invest in that truth. As Ministers, each of us has a duty to further this work, both collectively and as individuals. Consequently, I am directing every Minister to implement the United Nations Declaration on the Rights of Indigenous Peoples and to work in partnership with Indigenous Peoples to advance their rights.

We must continue to address the profound systemic inequities and disparities that remain present in the core fabric of our society, including our core institutions. To this effect, it is essential that Canadians in every region of the country see themselves reflected in our Government's priorities and our work. As Minister, I expect you to include and collaborate with various communities, and actively seek out and incorporate in your work, the diverse views of Canadians. This includes women, Indigenous Peoples, Black and racialized Canadians, newcomers, faith-based communities, persons with disabilities, LGBTQ2 Canadians, and, in both official languages.

Across our work, we remain committed to ensuring that public policies are informed and developed through an intersectional lens, including applying frameworks such as Gender-based Analysis Plus (GBA Plus) and the quality of life indicators in decision-making.

Canadians continue to rely on journalists and journalism for accurate and timely news. I expect you to maintain professional and respectful relationships with journalists to ensure that Canadians are well informed and have the information they need to keep themselves and their families safe.

Throughout the course of the pandemic, Canadians and their governments have adapted to new realities. Governments must draw on lessons learned from the pandemic to further adapt and develop more agile and effective ways to serve Canadians. To this end, I expect all Ministers to evaluate ways we can update our practices to ensure our Government continues to meet the challenges of today and tomorrow.

The success of this Parliament will require Parliamentarians, both in the House of Commons and the Senate, to work together across all parties to get big things done for Canadians. I expect you to maintain constructive relationships with your Opposition Critics and coordinate any legislation with the Leader of the Government in the House of Commons. As Minister, you are accountable to Parliament both individually, for your style of leadership and the performance of your responsibilities, and collectively, in support of our Ministry and decisions taken by Cabinet. *Open and Accountable Government* sets out these core principles and the standards of conduct expected of you and your office. I expect you to familiarize yourself with this document, which outlines my expectations for each member of the Ministry.

Our platform lays out an ambitious agenda. While finishing the fight against the pandemic must remain our central focus, we must continue building a strong

middle class and work toward a better future where everyone has a real and fair chance at success and no one is left behind.

As Minister of Health, your immediate priority is to help finish the fight against COVID-19, working in close cooperation with provinces and territories. As we emerge from this pandemic, I expect you to work in partnership with provinces and territories to strengthen our universal public health care system and public health supports, backed by an early increase of investments in primary and virtual care and mental health services so all Canadians can get the care they need no matter where they live. Collaboration with provinces and territories will be key to ensuring the primary care system is positioned for the future, including accessible health system data, as well as working to improve the quality and availability of long-term care.

To realize these objectives, I ask that you achieve results for Canadians by delivering the following commitments.

- Continue to provide leadership to finish the fight against COVID-19, including by:
 - Working with colleagues, provinces and territories, municipalities, Indigenous communities and other partners to continue the roll-out of COVID-19 vaccines;
 - Working with colleagues to continue to ensure sufficient domestic supply of COVID-19 vaccines and therapeutics, evaluate our border posture and ensure surge capacity supports are available to assist provinces and territories;
 - Working with provinces and territories, municipalities, Indigenous organizations, the private sector and other partners to continue to ensure implementation of and adherence to public health measures, and support the availability of rapid tests and self-tests;
 - Launching a COVID-19 Proof of Vaccination Fund to support provinces and territories who implement a requirement for proof of vaccine credentials in their jurisdiction for non-essential businesses and public spaces;
 - Overseeing the Public Health Agency of Canada, ensuring they have the resources and support necessary to continue protecting the health and safety of Canadians; and

- Continue working with the Minister of Public Safety and the Minister of Transport to protect the health and safety of Canadians through safe, responsible and compassionate management of the border with the United States and other ports of entry into Canada.
- Work with the Minister of Innovation, Science and Industry to continue demonstrating leadership in public health by strengthening surveillance and capacity to detect and act on public health threats, strengthening the security of medical supply chains, working with colleagues to advance the Biomanufacturing and Life Sciences Strategy, and investing in the study of the long-term health impacts of COVID-19, including the effects of long COVID on different groups, notably vulnerable populations and children.
- With the support of the Deputy Prime Minister and Minister of Finance, lead our renewed commitment to work in partnership with and increase funding to provinces and territories to strengthen our universal public health system, ensure health care workers are supported and recruited across the country and advance an integrated, comprehensive and patient-centric strategy, harnessing the full potential of data and digital systems, including by:
 - Investing in supporting initiatives that will help to speed access to care for critical services;
 - Supporting provinces and territories to hire new family doctors, nurses and nurse practitioners;
 - Expanding virtual care, helping to cover digital infrastructure and other system improvements so that Canadians can access virtual medical consultations or remote monitoring;
 - Expanding the number of family doctors and primary health teams in rural communities and working to give rural communities greater access to a full suite of health and social services professionals;
 - Strengthening compliance with and modernizing the interpretation of the *Canada Health Act* on matters of extra billing for publicly insured services; and
 - In consultation with provinces and territories and a broad range of partners, expediting work to create a world-class health data system that is timely, usable, open-by-default, connected and comprehensive.
- Work with the Minister of Mental Health and Addictions and Associate Minister of Health and with the support of the Deputy Prime Minister and

Minister of Finance to establish a permanent, ongoing Canada Mental Health Transfer, to help expand the delivery of high-quality, accessible and free mental health services, including for prevention and treatment.

- With the support of the Minister of Seniors, negotiate agreements with provinces and territories to support efforts to improve the quality and availability of long-term care homes and beds. This includes working with provinces and territories to improve infection prevention and control measures, identify shared principles, and develop national standards and a Safe Long-Term Care Act to ensure seniors get the care they deserve. In support of this work, you will work with the Minister of Employment, Workforce Development and Disability Inclusion and provinces and territories to train up to 50,000 new personal support workers and raise wages.
- With the support of the Minister for Women and Gender Equality and Youth, work to ensure that all Canadians have access to the sexual and reproductive health services they need, no matter where they live, by reinforcing compliance under the *Canada Health Act*, developing a sexual and reproductive health rights information portal, supporting the establishment of mechanisms to help families cover the costs of in vitro fertilization, and supporting youth-led grassroots organizations that respond to the unique sexual and reproductive health needs of young people.
- Work with the Minister of Public Safety, President of the Queen's Privy Council for Canada and Minister of Emergency Preparedness, Minister of Fisheries, Oceans and the Canadian Coast Guard and Minister of Transport, among other colleagues, to ensure the Government of Canada continues to be prepared to proactively mitigate, and respond to, emerging incidents and hazards.
- In moving forward with a uniquely Canadian approach modeled on the Defense Advanced Research Projects Agency (DARPA), work with the Minister of Innovation, Science and Industry to develop a plan to modernize the federal research funding ecosystem to maximize the impact of investments in both research excellence and downstream innovation, with a particular focus on the relationships among the federal research granting agencies and the Canada Foundation for Innovation.
- With the support of the Chief Science Advisor, continue to ensure science and evidence are integrated into our pandemic response.

- With the support of the Minister of Foreign Affairs, work with the Minister of International Development to continue to reinforce international efforts to ensure that people around the world have access to health interventions to fight COVID-19, including vaccines, therapeutics and strengthened health systems.
- Work with partners to take increased and expedited action to monitor, prevent and mitigate the serious and growing threat of antimicrobial resistance and preserve the effectiveness of the antimicrobials Canadians rely upon every day.
- Continue engaging with willing provinces and territories towards national universal pharmacare, while proceeding with a national strategy on high-cost drugs for rare diseases and advancing the establishment of the Canada Drug Agency.
- To protect Canadians from harmful chemicals, strengthen the *Canadian Environmental Protection Act*, introduce mandatory labelling of chemicals in consumer products, introduce legislation to end testing on animals, increase testing of products for compliance with Canadian standards, and implement an action plan to protect Canadians, including firefighters, from exposure to toxic flame retardants found in household products.
- Work with the Leader of the Government in the House of Commons in their work to develop a plan to both make Parliament a more inclusive place for families and to respond with greater agility in the event of a future national health crisis.
- To ensure Canadians are protected from risks associated with the use of pesticides and to better protect human health, wildlife and the environment, modernize and strengthen the *Pest Control Products Act* to ensure it supports transparency, use of independent scientific evidence and input to the decision-making process.
- Recognizing that a healthy population is key to reducing vulnerability to health events, promote healthy eating by advancing the Healthy Eating Strategy. This includes finalizing the front-of-package labelling to promote healthy food choices and supporting restrictions on the commercial marketing of food and beverages to children.
- In support of the Indigenous Early Learning and Child Care system, continue to invest in Aboriginal Head Start in Urban and Northern Communities Program.

- In this, the UN Decade of Healthy Ageing (2021-2030), promote seniors' physical and mental health to enable them to live longer at home, including by supporting the Minister of Seniors in their work to establish an expert panel to provide recommendations for establishing an Aging at Home Benefit.
- In collaboration with provinces, territories, families and stakeholders, accelerate the development of the National Autism Strategy.

As Minister, you are also responsible for actively engaging with your Cabinet and Caucus colleagues. As we deliver on our platform commitments, it will be important that members of the Ministry continue to collaborate and work constructively to support rigorous and productive Cabinet decision-making. I expect you to support your colleagues in delivering their commitments, leveraging the expertise of your department and your own lived experiences.

To best achieve results for Canadians, Ministers must be rigorous and coordinated in our approach to implementation. I would therefore ask that you return to me with a proposed approach for the delivery of your mandate commitments, including priorities for early implementation. Furthermore, to ensure we are accountable for our work, I will be asking you to publicly report to me, and all Canadians, on your progress toward these commitments on a regular basis.

As we have been reminded throughout the pandemic, adapting to change is not only something government should do, it is something government must do. As you work to fulfil our commitments, I expect you to actively consider new ideas and issues as they emerge, whether through public engagement, your work with Parliamentarians or advice from the public service. I also expect you to work with your Deputy Minister to assess priorities on a continual basis as we build a better future for all Canadians. In addition to achieving results, you are responsible for overseeing the work of your department and ensuring the effective operation of your portfolio.

As you staff your office and implement outreach and recruitment strategies for federally appointed leadership positions and boards, I ask that you uphold the principles of equity, diversity and inclusion. This helps ensure that federal workplaces are dynamic and reflective of the Canadians we serve. You will also ensure your Minister's office and portfolio are reflective of our commitment to healthy and safe workplaces.

Canadians expect us to work hard, speak truthfully and be committed to advancing their interests and aspirations. When we make mistakes – as we all will – Canadians expect us to acknowledge them, and most importantly, to learn from them.

I know I can count on you to fulfill the important responsibilities entrusted in you, and to turn to me, and the Deputy Prime Minister, early and often to support you in your role as Minister.

Sincerely,

Rt. Hon. Justin Trudeau, P.C., M.P.
Prime Minister of Canada

*This Ministerial Mandate Letter was signed by the Prime Minister in the Minister's first official language.

Minister of Seniors Mandate Letter

Dear Minister Khera:

Thank you for agreeing to serve Canadians as Minister of Seniors.

From the beginning of this pandemic, Canadians have faced a once-in-a-century challenge. And through it all, from coast to coast to coast, people have met the moment. When it mattered most, Canadians adapted, helped one another, and stayed true to our values of compassion, courage and determination. That is what has defined our path through this pandemic so far. And that is what will pave our way forward.

During a difficult time, Canadians made a democratic choice. They entrusted us to finish the fight against COVID-19 and support the recovery of a strong middle class. At the same time, they also gave us clear direction: to take bold, concrete action to build a healthier, more resilient future. That is what Canadians have asked us to do and it is exactly what our Government is ready to deliver. We will work to build that brighter future through continued collaboration, engagement, and the use of science and evidence-based decision-making. With an unwavering focus on delivering results, we will work constructively with Parliamentarians and maintain our strong partnerships with provincial, territorial and municipal governments and Indigenous partners. This decade has had an incredibly difficult start, but this is the moment to rebuild a more resilient, inclusive and stronger country for everyone.

The science is clear. Canadians have been clear. We must not only continue taking real climate action, we must also move faster and go further. As Canadians are increasingly experiencing across the country, climate change is an existential threat. Building a cleaner, greener future will require a sustained and collaborative effort from all of us. As Minister, I expect you to seek opportunities within your portfolio to support our whole-of-government effort to reduce emissions, create clean jobs and address the climate-related challenges communities are already facing.

This year, Canadians were horrified by the discovery of unmarked graves and burial sites near former residential schools. These discoveries underscore that we must move faster on the path of reconciliation with First Nations, Inuit and Métis Peoples. We know that reconciliation cannot come without truth and our Government will continue to invest in that truth. As Ministers, each of us has a duty to further this work, both collectively and as individuals. Consequently, I am directing every Minister to implement the United Nations Declaration on the Rights of Indigenous Peoples and to work in partnership with Indigenous Peoples to advance their rights.

We must continue to address the profound systemic inequities and disparities that remain present in the core fabric of our society, including our core institutions. To this effect, it is essential that Canadians in every region of the country see themselves reflected in our Government's priorities and our work. As Minister, I expect you to include and collaborate with various communities, and actively seek out and incorporate in your work, the diverse views of Canadians. This includes women, Indigenous Peoples, Black and racialized Canadians, newcomers, faith-based communities, persons with disabilities, LGBTQ2 Canadians, and, in both official languages.

Across our work, we remain committed to ensuring that public policies are informed and developed through an intersectional lens, including applying frameworks such as Gender-based Analysis Plus (GBA Plus) and the quality of life indicators in decision-making.

Canadians continue to rely on journalists and journalism for accurate and timely news. I expect you to maintain professional and respectful relationships with journalists to ensure that Canadians are well informed and have the information they need to keep themselves and their families safe.

Throughout the course of the pandemic, Canadians and their governments have adapted to new realities. Governments must draw on lessons learned from the pandemic to further adapt and develop more agile and effective ways to serve Canadians. To this end, I expect all Ministers to evaluate ways we can update our practices to ensure our Government continues to meet the challenges of today and tomorrow.

The success of this Parliament will require Parliamentarians, both in the House of Commons and the Senate, to work together across all parties to get big things done for Canadians. I expect you to maintain constructive relationships with your Opposition Critics and coordinate any legislation with the Leader of the Government in the House of Commons. As Minister, you are accountable to Parliament both individually, for your style of leadership and the performance of your responsibilities, and collectively, in support of our Ministry and decisions taken by Cabinet. *Open and Accountable Government* sets out these core principles and the standards of conduct expected of you and your office. I expect you to familiarize yourself with this document, which outlines my expectations for each member of the Ministry.

Our platform lays out an ambitious agenda. While finishing the fight against the pandemic must remain our central focus, we must continue building a strong

middle class and work toward a better future where everyone has a real and fair chance at success and no one is left behind.

As Minister of Seniors, your immediate priority is to support and help advance the Government's commitment to increase Old Age Security and the Guaranteed Income Supplement. I also expect you to support the Minister of Health in improving the quality and availability of long-term care and to take concrete actions to support seniors who want to age at home. As well, you will continue to create opportunities for seniors to be more connected, supported, and active members of their communities through implementing the New Horizons for Seniors Program.

To realize these objectives, I ask that you achieve results for Canadians by delivering the following commitments.

- Building on our commitment to old age security, increase the Guaranteed Income Supplement by \$500 for single seniors and \$750 for couples starting at age 65.
- Ensure seniors' eligibility for the Guaranteed Income Supplement is not negatively impacted by receipt of the Canada Emergency Response Benefit (CERB) and the Canada Recovery Benefit (CRB).
- Establish an expert panel to provide recommendations for establishing an Aging at Home Benefit. You will be supported by the Minister of Health in this work.
- Assist community-based organizations in providing practical support that helps low-income and otherwise vulnerable seniors age in place, and support regional and national projects that help expand services that have already demonstrated results in helping seniors stay in their homes.
- Work with the Minister of Families, Children and Social Development to provide seniors with a single point of access to a wide range of government services and benefits.
- Continue to work with the Minister of Justice and Attorney General of Canada to strengthen Canada's approach to elder abuse by finalizing the national definition of elder abuse, investing in better data collection and establishing new offences and penalties in the *Criminal Code* related to elder abuse.
- Represent the Government of Canada at the Federal, Provincial and Territorial Ministers Responsible for Seniors Forum.
- Continue leading work within Employment and Social Development Canada on seniors' programming including the New Horizons for Seniors Program.

- Support the Minister of Health in their work to improve the quality and availability of long-term care homes and beds. This includes working with provinces and territories to improve infection prevention and control measures, identify shared principles, and develop national standards to ensure seniors get the care they deserve.

As Minister, you are also responsible for actively engaging with your Cabinet and Caucus colleagues. As we deliver on our platform commitments, it will be important that members of the Ministry continue to collaborate and work constructively to support rigorous and productive Cabinet decision-making. I expect you to support your colleagues in delivering their commitments, leveraging the expertise of your department and your own lived experiences.

To best achieve results for Canadians, Ministers must be rigorous and coordinated in our approach to implementation. I would therefore ask that you return to me with a proposed approach for the delivery of your mandate commitments, including priorities for early implementation. Furthermore, to ensure we are accountable for our work, I will be asking you to publicly report to me, and all Canadians, on your progress toward these commitments on a regular basis.

As we have been reminded throughout the pandemic, adapting to change is not only something government should do, it is something government must do. As you work to fulfil our commitments, I expect you to actively consider new ideas and issues as they emerge, whether through public engagement, your work with Parliamentarians or advice from the public service. I also expect you to work with your Deputy Minister to assess priorities on a continual basis as we build a better future for all Canadians. In addition to achieving results, you are responsible for overseeing the work of your department and ensuring the effective operation of your portfolio.

As you staff your office and implement outreach and recruitment strategies for federally appointed leadership positions and boards, I ask that you uphold the principles of equity, diversity and inclusion. This helps ensure that federal workplaces are dynamic and reflective of the Canadians we serve. You will also ensure your Minister's office and portfolio are reflective of our commitment to healthy and safe workplaces.

Canadians expect us to work hard, speak truthfully and be committed to advancing their interests and aspirations. When we make mistakes – as we all will – Canadians expect us to acknowledge them, and most importantly, to learn from them.

I know I can count on you to fulfill the important responsibilities entrusted in you, and to turn to me, and the Deputy Prime Minister, early and often to support you in your role as Minister.

Sincerely,

A handwritten signature in black ink, appearing to be 'Justin Trudeau', with a stylized, flowing script.

Rt. Hon. Justin Trudeau, P.C., M.P.
Prime Minister of Canada

Minister of Mental Health and Addictions and Associate Minister of Health Mandate Letter

Dear Minister Bennett:

Thank you for agreeing to serve Canadians as Minister of Mental Health and Addictions and Associate Minister of Health.

From the beginning of this pandemic, Canadians have faced a once-in-a-century challenge. And through it all, from coast to coast to coast, people have met the moment. When it mattered most, Canadians adapted, helped one another, and stayed true to our values of compassion, courage and determination. That is what has defined our path through this pandemic so far. And that is what will pave our way forward.

During a difficult time, Canadians made a democratic choice. They entrusted us to finish the fight against COVID-19 and support the recovery of a strong middle class. At the same time, they also gave us clear direction: to take bold, concrete action to build a healthier, more resilient future. That is what Canadians have asked us to do and it is exactly what our Government is ready to deliver. We will work to build that brighter future through continued collaboration, engagement, and the use of science and evidence-based decision-making. With an unwavering focus on delivering results, we will work constructively with Parliamentarians and maintain our strong partnerships with provincial, territorial and municipal governments and Indigenous partners. This decade has had an incredibly difficult start, but this is the moment to rebuild a more resilient, inclusive and stronger country for everyone.

The science is clear. Canadians have been clear. We must not only continue taking real climate action, we must also move faster and go further. As Canadians are increasingly experiencing across the country, climate change is an existential threat. Building a cleaner, greener future will require a sustained and collaborative effort from all of us. As Minister, I expect you to seek opportunities within your portfolio to support our whole-of-government effort to reduce emissions, create clean jobs and address the climate-related challenges communities are already facing.

This year, Canadians were horrified by the discovery of unmarked graves and burial sites near former residential schools. These discoveries underscore that we must move faster on the path of reconciliation with First Nations, Inuit and Métis Peoples. We know that reconciliation cannot come without truth and our Government will continue to invest in that truth. As Ministers, each of us has a duty to further this work, both collectively and as individuals. Consequently, I am directing every Minister to implement the United Nations Declaration on the Rights

of Indigenous Peoples and to work in partnership with Indigenous Peoples to advance their rights.

We must continue to address the profound systemic inequities and disparities that remain present in the core fabric of our society, including our core institutions. To this effect, it is essential that Canadians in every region of the country see themselves reflected in our Government's priorities and our work. As Minister, I expect you to include and collaborate with various communities, and actively seek out and incorporate in your work, the diverse views of Canadians. This includes women, Indigenous Peoples, Black and racialized Canadians, newcomers, faith-based communities, persons with disabilities, LGBTQ2 Canadians, and, in both official languages.

Across our work, we remain committed to ensuring that public policies are informed and developed through an intersectional lens, including applying frameworks such as Gender-based Analysis Plus (GBA Plus) and the quality of life indicators in decision-making.

Canadians continue to rely on journalists and journalism for accurate and timely news. I expect you to maintain professional and respectful relationships with journalists to ensure that Canadians are well informed and have the information they need to keep themselves and their families safe.

Throughout the course of the pandemic, Canadians and their governments have adapted to new realities. Governments must draw on lessons learned from the pandemic to further adapt and develop more agile and effective ways to serve Canadians. To this end, I expect all Ministers to evaluate ways we can update our practices to ensure our Government continues to meet the challenges of today and tomorrow.

The success of this Parliament will require Parliamentarians, both in the House of Commons and the Senate, to work together across all parties to get big things done for Canadians. I expect you to maintain constructive relationships with your Opposition Critics and coordinate any legislation with the Leader of the Government in the House of Commons. As Minister, you are accountable to Parliament both individually, for your style of leadership and the performance of your responsibilities, and collectively, in support of our Ministry and decisions taken by Cabinet. *Open and Accountable Government* sets out these core principles and the standards of conduct expected of you and your office. I expect you to familiarize yourself with this document, which outlines my expectations for each member of the Ministry.

Our platform lays out an ambitious agenda. While finishing the fight against the pandemic must remain our central focus, we must continue building a strong middle class and work toward a better future where everyone has a real and fair chance at success and no one is left behind.

As Minister of Mental Health and Addictions and Associate Minister of Health, you will work with the Minister of Health to build a healthier future, with a particular focus on ensuring that health inequities are understood and addressed, including for Indigenous Peoples, Black Canadians and vulnerable Canadians. You will work to ensure that mental health care is treated as a full and equal part of our universal health care system, working in close collaboration with provinces and territories, and lead a whole-of-society approach to address problematic substance use in Canada.

To realize these objectives, I ask that you achieve results for Canadians by delivering the following commitments.

- Work with the Minister of Health, and with the support of the Deputy Prime Minister and Minister of Finance, to establish a permanent, ongoing Canada Mental Health Transfer to help expand the delivery of high-quality, accessible and free mental health services, including for prevention and treatment.
- In order to support the mental health of Canadians, develop and implement a comprehensive, evidence-based plan, leveraging existing and new investments, including to:
 - Develop mental health standards, with a particular focus on health equity;
 - Sustain improved access to virtual mental health services with Wellness Together Canada;
 - Ensure timely access to perinatal mental health services;
 - Implement a three-digit suicide prevention hotline; and
 - Introduce a new fund for student mental health that will support the hiring of new mental health care counsellors, improve wait times for services, increase access overall and enable targeted supports to Black and racialized students at post-secondary institutions across Canada.
- Support the Minister of Indigenous Services to co-develop and invest in a distinctions-based Mental Health and Wellness Strategy to meet the needs of First Nations, Inuit and the Métis Nation, including culturally appropriate

wraparound services for addiction and trauma, suicide and life promotion and the building of treatment centres.

- Oversee the implementation of our investments in mental health interventions and supports for people disproportionately impacted by COVID-19, including health care workers, front-line workers, seniors, Indigenous people, and Black and racialized Canadians.
- Work with the Minister of Families, Children and Social Development and Minister for Women and Gender Equality and Youth to ensure mental health supports are accessible to children and youth as they recover from the impact of the pandemic.
- Advance a comprehensive strategy to address problematic substance use in Canada, supporting efforts to improve public education to reduce stigma, and supporting provinces and territories and working with Indigenous communities to provide access to a full range of evidence-based treatment and harm reduction, as well as to create standards for substance use treatment programs.
- Require tobacco manufacturers to pay for the cost of federal public health investments in tobacco control.
- Support the Minister of Public Safety to continue advancing Canada's first-ever National Action Plan on Post-Traumatic Stress Injuries, including additional investment to support the health and well-being of first responders.
- Support the Minister of Veterans Affairs to ensure Canadian Armed Forces members and Veterans have access to adequate mental health resources, services and training programs tailored to their specific needs.
- With the support of the Minister of Rural Economic Development, explore pathways to increase the accessibility of mental health services in rural areas.

As Minister, you are also responsible for actively engaging with your Cabinet and Caucus colleagues. As we deliver on our platform commitments, it will be important that members of the Ministry continue to collaborate and work constructively to support rigorous and productive Cabinet decision-making. I expect you to support your colleagues in delivering their commitments, leveraging the expertise of your department and your own lived experiences.

To best achieve results for Canadians, Ministers must be rigorous and coordinated in our approach to implementation. I would therefore ask that you return to me with a proposed approach for the delivery of your mandate commitments, including priorities for early implementation. Furthermore, to ensure we are accountable for our work, I will be asking you to publicly report to me, and all Canadians, on your progress toward these commitments on a regular basis.

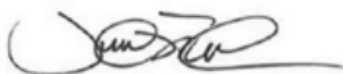
As we have been reminded throughout the pandemic, adapting to change is not only something government should do, it is something government must do. As you work to fulfil our commitments, I expect you to actively consider new ideas and issues as they emerge, whether through public engagement, your work with Parliamentarians or advice from the public service. I also expect you to work with your Deputy Minister to assess priorities on a continual basis as we build a better future for all Canadians. In addition to achieving results, you are responsible for overseeing the work of your department and ensuring the effective operation of your portfolio.

As you staff your office and implement outreach and recruitment strategies for federally appointed leadership positions and boards, I ask that you uphold the principles of equity, diversity and inclusion. This helps ensure that federal workplaces are dynamic and reflective of the Canadians we serve. You will also ensure your Minister's office and portfolio are reflective of our commitment to healthy and safe workplaces.

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Sincerely,

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Rt. Hon. Justin Trudeau, P.C., M.P.
Prime Minister of Canada

Deputy Prime Minister and Minister of Finance Mandate Letter

Dear Minister Freeland:

Thank you for continuing to serve Canadians as Deputy Prime Minister and Minister of Finance.

From the beginning of this pandemic, Canadians have faced a once-in-a-century challenge. And through it all, from coast to coast to coast, people have met the moment. When it mattered most, Canadians adapted, helped one another, and stayed true to our values of compassion, courage and determination. That is what has defined our path through this pandemic so far. And that is what will pave our way forward.

During a difficult time, Canadians made a democratic choice. They entrusted us to finish the fight against COVID-19 and support the recovery of a strong middle class. At the same time, they also gave us clear direction: to take bold, concrete action to build a healthier, more resilient future. That is what Canadians have asked us to do and it is exactly what our Government is ready to deliver. We will work to build that brighter future through continued collaboration, engagement, and the use of science and evidence-based decision-making. With an unwavering focus on delivering results, we will work constructively with Parliamentarians and maintain our strong partnerships with provincial, territorial and municipal governments and Indigenous partners. This decade has had an incredibly difficult start, but this is the moment to rebuild a more resilient, inclusive and stronger country for everyone.

The science is clear. Canadians have been clear. We must not only continue taking real climate action, we must also move faster and go further. As Canadians are increasingly experiencing across the country, climate change is an existential threat. Building a cleaner, greener future will require a sustained and collaborative effort from all of us. As Minister, I expect you to seek opportunities within your portfolio to support our whole-of-government effort to reduce emissions, create clean jobs and address the climate-related challenges communities are already facing.

This year, Canadians were horrified by the discovery of unmarked graves and burial sites near former residential schools. These discoveries underscore that we must move faster on the path of reconciliation with First Nations, Inuit and Métis Peoples. We know that reconciliation cannot come without truth and our Government will continue to invest in that truth. As Ministers, each of us has a duty to further this work, both collectively and as individuals. Consequently, I am directing every Minister to implement the United Nations Declaration on the Rights

of Indigenous Peoples and to work in partnership with Indigenous Peoples to advance their rights.

We must continue to address the profound systemic inequities and disparities that remain present in the core fabric of our society, including our core institutions. To this effect, it is essential that Canadians in every region of the country see themselves reflected in our Government's priorities and our work. As Minister, I expect you to include and collaborate with various communities, and actively seek out and incorporate in your work, the diverse views of Canadians. This includes women, Indigenous Peoples, Black and racialized Canadians, newcomers, faith-based communities, persons with disabilities, LGBTQ2 Canadians, and, in both official languages.

Across our work, we remain committed to ensuring that public policies are informed and developed through an intersectional lens, including applying frameworks such as Gender-based Analysis Plus (GBA Plus) and the quality of life indicators in decision-making.

Canadians continue to rely on journalists and journalism for accurate and timely news. I expect you to maintain professional and respectful relationships with journalists to ensure that Canadians are well informed and have the information they need to keep themselves and their families safe.

Throughout the course of the pandemic, Canadians and their governments have adapted to new realities. Governments must draw on lessons learned from the pandemic to further adapt and develop more agile and effective ways to serve Canadians. To this end, I expect all Ministers to evaluate ways we can update our practices to ensure our Government continues to meet the challenges of today and tomorrow.

The success of this Parliament will require Parliamentarians, both in the House of Commons and the Senate, to work together across all parties to get big things done for Canadians. I expect you to maintain constructive relationships with your Opposition Critics and coordinate any legislation with the Leader of the Government in the House of Commons. As Minister, you are accountable to Parliament both individually, for your style of leadership and the performance of your responsibilities, and collectively, in support of our Ministry and decisions taken by Cabinet. *Open and Accountable Government* sets out these core principles and the standards of conduct expected of you and your office. I expect you to familiarize yourself with this document, which outlines my expectations for each member of the Ministry.

Our platform lays out an ambitious agenda. While finishing the fight against the pandemic must remain our central focus, we must continue building a strong middle class and work toward a better future where everyone has a real and fair chance at success and no one is left behind.

As Deputy Prime Minister, you will work in close collaboration with me in setting and implementing our Government's agenda. At the core of our work is continuing to have Canadians' backs. In your capacity as Minister of Finance, your immediate priority is to ensure targeted supports remain available, as needed, for Canadians and businesses that continue to struggle as we finish the fight against COVID-19. I also expect you to bolster inclusive economic recovery and growth that supports our efforts to achieve our 2030 climate goals and accelerates the transition to a net-zero economy no later than 2050. Furthermore, you will work to make life more affordable for middle class Canadians and their families, including building off our sustained investment in early learning and child care and taking significant action on housing affordability, while maintaining our sound fiscal trajectory.

To realize these objectives, I ask that you achieve results for Canadians by delivering the following commitments.

- Continue to ensure the overall fiscal health of the government, including by working to implement the fiscal plan outlined in Budget 2021 and driving a plan for long-term economic growth.
- Support the Minister of Health and the Minister of Mental Health and Addictions and Associate Minister of Health in advancing our renewed commitment to work in partnership with and increase funding to provinces and territories to strengthen our universal public health system, including by establishing the new Canada Mental Health Transfer.
- Top up the Safe Return to Class Fund for ventilation improvement projects across Canada, provide funding for First Nations to improve indoor air quality in on-reserve schools, and introduce a tax credit for small businesses to make it easier for them to invest in better ventilation.
- Increase the Eligible Educator School Supply Tax Credit to 25 per cent, expand eligibility to include tech devices, and ensure that teaching supplies purchased for employment duties are eligible no matter where those duties are performed.
- Continue to support business recovery and workers, including by securing the passage of and implementing legislation that extends the Canada Recovery Hiring Program, introduces temporary rent and wage supports for

the hard-hit tourism and hospitality sectors and arts and culture industries, and provides emergency support to businesses and workers in the event of future public health lockdowns.

- Ensure that all Canadians and businesses contribute their fair share to a stronger economic recovery by:
 - Introducing legislation to raise the corporate income tax payable by banks and insurance companies that earn more than \$1 billion and requiring them to pay a temporary Canada Recovery Dividend;
 - Establishing a minimum 15 per cent tax rule for top-bracket earners;
 - Implementing a tax on luxury cars, boats and planes;
 - Investing in the Canada Revenue Agency to close the tax gap and combat aggressive tax planning and avoidance; and
 - Modernizing the general anti-avoidance rule regime to focus on economic substance and restrict the ability of federally regulated entities, including financial institutions such as banks and insurance companies, to use tiered structures as a form of corporate tax planning that flows Canadian-derived profit through entities in low-tax jurisdictions in order to reduce taxes back in Canada.
- To protect Canadian supply chains and ensure that Canada's trading relationships are mutually beneficial economic relationships, work with the Minister of International Trade, Export Promotion, Small Business and Economic Development to introduce a reciprocal procurement policy that will ensure goods and services are procured from countries that grant Canadian businesses a similar level of market access.
- To address labour shortages and help businesses grow, introduce a Labour Mobility Tax Credit of up to \$600 a year for workers in the building and construction trades in eligible travel and temporary relocation expenses, and a Career Extension Tax Credit of up to \$1,650 a year for seniors who want to stay in the workforce. You will be supported in this work by the Minister of Labour.
- Work with me to champion the adoption of a global minimum standard on carbon pricing while continuing to consult with Canadians and actively engage with provinces, territories and key trading partners, including the United States and the European Union, to inform the development of an approach to applying Border Carbon Adjustments to imports from countries

that are not doing their part to reduce carbon pollution and fight climate change. Consider applying Border Carbon Adjustments to emissions-intensive imports, such as steel, cement and aluminum.

- Ensure budgetary measures are consistent with the Government's climate goals and the legislated requirement to achieve net-zero emissions by no later than 2050. To support these efforts and foster jobs and growth across industries, regions and supply chains, make appropriate investments to achieve a 100 per cent net-zero electricity system by 2035, accelerate the adoption of zero-emissions vehicles and other clean technologies, and advance the decarbonization of buildings and broader industry.
- Work with the Minister of Environment and Climate Change, and with the support of the Minister of Natural Resources, to accelerate our G20 commitment to eliminate fossil fuel subsidies from 2025 to 2023, develop a plan to phase out public financing of the fossil fuel sector, including by federal Crown corporations, and eliminate flow-through shares for oil, gas and coal projects.
- Introduce an investment tax credit for capital invested in Carbon Capture, Utilization and Storage projects.
- In support of comprehensive action to achieve a Just Transition, help ensure that workers and communities prosper as we move to net-zero by working with the Minister of International Trade, Export Promotion, Small Business and Economic Development to establish a new Futures Fund for Alberta, Saskatchewan and Newfoundland and Labrador that supports local and regional economic diversification and place-based strategies. You will be supported in this work by the Ministers responsible for the Atlantic Canada Opportunities Agency and Prairies Economic Development Canada, the Minister of Rural Economic Development and the Minister of Tourism and Associate Minister of Finance.
- Support clean energy and clean technologies by introducing additional investment tax credits for renewable energy and battery storage solutions; doubling the Mineral Exploration Tax Credit for minerals essential to the manufacture of vital clean technologies; and establishing an investment tax credit of up to 30 per cent for a broad range of clean technologies, both market-ready and emerging, to be identified in ongoing consultation with experts.

- Supported by the Minister of Environment and Climate Change, work with provinces and territories to move toward mandatory climate-related financial disclosures based on the Task Force on Climate-related Financial Disclosures framework and require federally regulated institutions, including financial institutions, pension funds and government agencies, to issue climate-related financial disclosures and net-zero plans.
- Launch an annual program of green bond issuances with an initial issuance of \$5 billion; and consult with financial experts, including the Sustainable Finance Action Council, to develop a net-zero capital allocation strategy to accelerate Canada's transition to a prosperous net-zero future.
- To extend the life of home appliances, introduce a 15 per cent tax credit of up to \$500 to cover the cost of repairs performed by technicians.
- Support first-time home buyers by introducing legislation to double the First-Time Home Buyers' Tax Credit; working with financial institutions to create a tax-free First Home Savings Account; and, as an option to the current shared-equity mortgage, developing with the Canada Mortgage and Housing Corporation (CMHC) a loan program, repayable only at the time of sale.
- Support home owners by introducing legislation to double the Home Accessibility Tax Credit and to establish a new Multigenerational Home Renovation tax credit; and ensure CMHC undertakes a review of its insurance policies to assess whether such policies are appropriately supportive of CMHC's aspiration that, by 2030, everyone in Canada has a home that they can afford and that meets their needs.
- Support the Minister of Housing and Diversity and Inclusion in making critical investments and priority policy decisions to expand Canada's housing supply, and in continuing to advance our investments in affordable housing and extending the model of co-operative housing to new communities.
- In support of a Fairness in Real Estate Action Plan, work with the Minister of Housing and Diversity and Inclusion to deter "renovictions" and address housing affordability in Canada, including by:
 - Introducing amendments to the *Income Tax Act* to require landlords to disclose in their tax filings the rent they receive pre- and post-renovation and to pay a proportional surtax if the increase in rent is excessive;

- Establishing an anti-flipping tax on residential properties, requiring properties to be held for at least 12 months;
 - Implementing Canada's tax on non-resident, non-Canadian owners of vacant, underused housing, and subsequently working to include foreign-owned vacant land within large urban areas;
 - Reviewing and considering possible reforms to the tax treatment of Real Estate Investment Trusts, reviewing the down payment requirements for investment properties, and developing policies to curb excessive profits while protecting small independent landlords;
 - Considering measures to increase consumer protection and transparency in real estate transactions, including a ban on blind bidding;
 - Identifying how federal regulators can be better positioned to respond to housing price fluctuations and to help ensure a more stable Canadian housing market; and
 - Establishing a ban on foreign investment capital in non-recreational residential property for the next two years.
- Advance the priority of Indigenous communities to reclaim full jurisdiction over tax matters.
 - Support the Minister of Intergovernmental Affairs, Infrastructure and Communities in work to continue to ensure the Canada Infrastructure Bank has the support it needs for its core purpose of attracting private sector and institutional investment to expand the scope of public infrastructure investment in Canada, in line with the Government's public policy objectives.
 - Continue to work with our global partners to bring the new OECD/G20 agreement on tax reform related to the world's largest corporations into effect and then legislate its implementation, while also moving ahead with legislation to implement a Digital Services Tax to come into effect in 2024 if the treaty is not in force.
 - To boost business investment and productivity, introduce amendments to the *Income Tax Act* to allow privately owned, Canadian-controlled businesses to expense up to \$1.5 million of growth-enhancing investments, such as software, patents and machinery; and reform the Scientific Research and Experimental Development Program to reduce red tape, align eligible

expenses with today's innovation and R&D, and make the program more generous for companies that take the biggest risks.

- Introduce a one-time income tax deduction for health care professionals who are just starting out in their careers to help with the costs of setting up their practice in a rural community.
- Introduce amendments to the *Income Tax Act* to make anti-abortion organizations that provide dishonest counselling to pregnant women about their rights and options ineligible for charitable status, and to expand the Medical Expense Tax Credit to include costs reimbursed to surrogate mothers for IVF expenses. You will be supported in this work by the Minister for Women and Gender Equality and Youth.
- Move forward with a national tax on vaping products.
- Convert the Canada Caregiver Credit into a refundable tax-free benefit, allowing caregivers to receive up to \$1,250 a year.
- Work with provinces and territories over the next review cycle to increase the Canada Pension Plan and Quebec Pension Plan survivor's benefit by 25 per cent.
- Move forward on our commitment to adapt and apply the *Canada Business Corporations Act* diversity requirements to federally regulated financial institutions to ensure diversity in senior ranks.
- Require federally regulated financial institutions to offer flexible repayment options to individuals who face a life event causing financial stress, including a six-month deferral of mortgage payments in qualifying circumstances.
- Establish a permanent Council of Economic Advisors to provide the Government with independent advice and policy options on long-term economic growth that will help Canada achieve a higher standard of living, better quality of life, inclusive growth and a more innovative and skillful economy.
- Establish a single, independent ombudsperson, with the power to impose binding arbitration, to address consumer complaints involving banks.
- Crack down on predatory lenders by lowering the criminal rate of interest.
- Advance legislation to enhance the powers of the Financial Consumer Agency of Canada to review bank fees and charges and to require adjustments if they are excessive.

- Support the Minister of Public Safety in their work to consider options to strengthen laws and investigative powers related to major financial crimes and to bring forward a proposal to establish a Canada Financial Crimes Agency.
- Work with the Minister of Innovation, Science and Industry, and with the support of the Minister of National Revenue, to implement a beneficial ownership registry.
- Continue to engage with stakeholders to lower the average overall cost of interchange fees for merchants, proceeding in a way that ensures small businesses benefit from this work and protects existing reward points of consumers.

As Minister, you are also responsible for actively engaging with your Cabinet and Caucus colleagues. As we deliver on our platform commitments, it will be important that members of the Ministry continue to collaborate and work constructively to support rigorous and productive Cabinet decision-making. I expect you to support your colleagues in delivering their commitments, leveraging the expertise of your department and your own lived experiences.

To best achieve results for Canadians, Ministers must be rigorous and coordinated in our approach to implementation. I would therefore ask that you return to me with a proposed approach for the delivery of your mandate commitments, including priorities for early implementation. Furthermore, to ensure we are accountable for our work, I will be asking you to publicly report to me, and all Canadians, on your progress toward these commitments on a regular basis.

As we have been reminded throughout the pandemic, adapting to change is not only something government should do, it is something government must do. As you work to fulfil our commitments, I expect you to actively consider new ideas and issues as they emerge, whether through public engagement, your work with Parliamentarians or advice from the public service. I also expect you to work with your Deputy Minister to assess priorities on a continual basis as we build a better future for all Canadians. In addition to achieving results, you are responsible for overseeing the work of your department and ensuring the effective operation of your portfolio.

As you staff your office and implement outreach and recruitment strategies for federally appointed leadership positions and boards, I ask that you uphold the principles of equity, diversity and inclusion. This helps ensure that federal workplaces are dynamic and reflective of the Canadians we serve. You will also

ensure your Minister's office and portfolio are reflective of our commitment to healthy and safe workplaces.

Canadians expect us to work hard, speak truthfully and be committed to advancing their interests and aspirations. When we make mistakes – as we all will – Canadians expect us to acknowledge them, and most importantly, to learn from them.

I know I can count on you to fulfill the important responsibilities entrusted in you, and to turn to me early and often to support you in your role as Minister.

Sincerely,

A handwritten signature in black ink, appearing to be 'Justin Trudeau', written in a cursive style.

Rt. Hon. Justin Trudeau, P.C., M.P.
Prime Minister of Canada

BC Program Bullets

Agenda Item

3. COVID-19 Testing and Vaccine Rollout

- DM Lucas will provide an update on rapid testing supplies.
- President Kochhar will provide an update on vaccine rollout.

Recommended BC Position/Key Messages

- Health Canada has indicated strong support of BC distributing POC and rapid antigen tests, including on-label and off-label tests for at-home usage, to workplaces and individuals through federal and provincial testing programs.
- On December 13, Health Canada released an interim enforcement approach, indicating they will not prioritize enforcement of off-label use of POC tests if distributed through a federal, provincial, or territorial testing initiative.
- Health Canada has not indicated whether they will continue to supply provinces with POC rapid antigen tests for individual or workplace use beyond March 31, 2022.
- As of December 13, 2021, BC has 1,932,833 tests and 263 analyzers available in provincial warehouses to be deployed to regions.
- BC is expecting delivery of 200,000 Panbio Rapid POC Tests (nasal swab kits) by Dec. 31, 2021 as well as 500,000 BTNX tests with nasal swabs by late December 2021.
- Between mid-December and mid-January, the existing stock of POC Test will be allocated to:
 - Sample collection sites for people with symptoms (700K)
 - Long term care for use by staff and all visitors (100K)
 - Acute care sites for use by symptomatic staff and/or close contacts (100K)
 - Rural, remote, Indigenous, and vulnerable communities for symptomatic testing and case and contact management (1.2M)
 - Business and other organizations to enable expanded workplace screening programs (250K)
 - Case/Contact management and outbreaks for use at the direction of regional Medical Health Officers and health authorities (250K)
- **BC has requested their full per capita allotment of the 84 million tests Health Canada will be receiving in January or approximately 11 million rapid antigen tests and supports monthly per-capita allotment of federally supplied POC tests of all types.**
- With increased supplies rapid antigen testing in BC will be expanded in mid January to provide tests for:
 - Public health and health authorities to help manage community transmission through distribution to cases/contacts and clusters/outbreaks, and as additional tool to protect Clinically Extremely Vulnerable and 70+ population.
 - K-12 students and staff to be deployed as needed to support return to school and continuity of in-person learning.
 - Post-secondary symptomatic students, faculty, and staff to support return to campus.

BC Program Bullets

- Expansion and/or replenishment of supply for Long Term Care, health care workers, rural remote and Indigenous communities, workplace screening, and case/contact management.

BC Background

- Rapid COVID-19 POC testing has been underway in BC since December 2020, including in long-term care, provincial corrections centres, urban underserved populations, rural and remote and Indigenous communities, to support outbreak investigations, and at the discretion of the Medical Health Officer.
- BC's Rapid COVID-19 POC Testing Strategy released March 4, 2021, permits wider use in workplaces and settings where there is a higher risk of outbreak and/or transmission including, but not limited to, industrial camps, food processing plants and post-secondary residences.
- BC's Rapid COVID-19 POC Screening Program is administered by the Provincial Health Services Authority in collaboration and partnership with the BC Centre for Disease Control, Public Health Laboratory, and the Ministry of Health. The program provides support for POC implementation, supplies all health authorities in BC with rapid POC tests, and provides intake, assessment, quality assurance, and reporting services to BC workplaces providing POC screening. Eligible organizations access testing kits through the program at no cost.
- Organization can also access test kits through provincial and federally supported programs, including:
 - Business Council of BC's *Safe Screen BC Program* for BC businesses (Provincial)
 - Canadian Red Cross' *Stop the Spread and Stay Safe! COVID-19 Screening Program for Community Organizations* (Federal)
 - *Government of Canada Direct Delivery Program* for select national organizations and non-profit organizations operating in BC (Federal)
 - *Pharmacy Initiative* where small and medium-sized businesses access tests through local pharmacies (Federal)

Prepared by: Glenn Armitage, December 21, 2021

Approved by: Mariana Diacu (a/ADM), December 21, 2021

BC Program Bullets

COVID Response & Health Emergency Management Division (CRHEM)

Agenda Item

4. Surge Support Planning:

DM Lucas to provide an update on federal preparations and PTs to share updates on any work underway and anticipated needs.

Recommended BC Position/Key Messages

- The fifth wave of COVID-19, dominated by the Omicron variant, is expected to result in significant increases in people with COVID-19 and potential surges in hospitalizations in BC.
- This wave comes as Delta is still circulating and during the traditional influenzas/RI season.
- BC expects that staff and/or their family members will be exposed or become symptomatic and be required to isolate or be off work, increasing pressure on an already strained workforce.
- BC health authorities are working to rapidly re-examine surge plans in this new set of circumstances to identify where additional support/planning may be needed.
- BC continues to maintain a 20,000 COVID tests a day laboratory capacity. While the machine capacity is above target, the human resource capacity to deliver this testing is impacted by immunization efforts and other staff shortages.
- Contact tracing surge capacity continues to be a challenge in some health regions, particularly Vancouver Coastal Health, Fraser Health, and Vancouver Island Health Authority, where they are seeing sharp increases in cases.

BC Background

- *In fall 2021, BC's health authorities developed surge plans detailing how they would operationalize base beds and surge beds for both acute and critical care, including:*
 - *Identifying existing practices that maximize surge capacity including redeployments, acuity-based assignments, alternative staffing models, congestion/patient flow management/ALC management etc.*
 - *supporting a measured approach to patient impacts in those areas identified for service reduction/modification.*
 - *Specific to critical care the plans identify a stepwise approach to increase critical care surge capacity including any service reductions/modifications that would be required*

BC Program Bullets

COVID Response & Health Emergency Management Division (CRHEM)

- to create surge capacity at each step. This is managed provincially so as not to impact patients in one region significantly more than another region.*
- *Management of critical care surge capacity is supported by daily active management of staffing, monitoring and the development of 'system alerts' to inform further planning and escalation as required.*
 - *On December 19, 2021, BC's capacity utilization was 45% and averaged 39% last week (December 12-16) i.e. 9611 tests on Sunday, with a 7-day average of 8,827 tests/day. BC's capacity utilization is trending upwards since November.*
 - *The BCCDC reports a combined public and private turnaround time (TAT) of 18.4 hours; however, the 7-day moving average TAT appears stable at approximately 15 hours.*
 - *The federal government requested assistance with COVID testing of international travelers by using the existing capacity within BC's public health system. While LifeLabs has sufficient capacity allocated for that purpose under the existing contracts with the federal government, BC could assist if requested.*
 - *Regarding contact tracing surge capacity: generally managing but with no capacity for additional contact tracing.*
 - **FNHA:** *minimal surge capacity internally for contact tracing - relies on the RHAs. The Province has funded Community Liaison positions which serve many First Nations communities and provide support to individuals to get them to testing centres where testing capabilities don't exist in community, wrap around supports to individuals required to self-isolate to ensure access to food, medication, cultural support etc., as well support for vaccine clinics and public health messaging.*
 - **IHA:** *80 – 300 cases per day: continue current service delivery model. 5+ days of 325+ cases AND not meeting target response times: reduction in individual follow up of cases in low-risk settings; all else remains the same. 400+ cases per day AND not meeting target response times: focus only on cases and contacts in high-risk settings and outbreaks in LTC/AL, acute and FN communities. Also: Updated testing site messaging created so people know where to go to get information if they test positive and how to communicate to their close contacts in case follow up time is*

BC Program Bullets

COVID Response & Health Emergency Management Division (CRHEM)

delayed. Confirmed with STATSCAN and BCCDC that their capacity continues and can be expanded as needs arise.

- **VCH, FH & BCCDC:** working together to streamline tools and approaches to optimize contact tracing capacity. Currently managing the demand surge.
- **NHA & VIHA:** minimal surge capacity for additional contact tracing. VIHA is at limit with contact tracing (full case investigation and notification of contacts by public health) being prioritized for the following priority settings:
 - Long-term care facility
 - Assisted living facility
 - Acute care site (e.g. hospital or urgent care centre)
 - Adult day program
 - Correctional facility
 - Shelters/Underhoused
 - Group home (e.g. congregate housing for people with disabilities or other health needs)
 - Work Camp
 - Immunocompromised
- Cases that do not meet criteria above are receiving a triage call with information on isolation and guidance on how to notify their own close contacts
- Current capacity to triage 100-125 cases per day within 24–36 hour timeframe
- Next step to screen based on priority groups above and direct non-priority cases to online resources to support isolation and contact notification

Prepared by: Kirsten Youngs, December 21, 2021, with input via K. Anderson, M. Diacu, Health Authority Pandemic VPs

Approved by: Ian Rongve, ADM, December 22, 2021

BC Program Bullets

Health Sector Workforce and Beneficiary Services Division (HSWBSD)

Agenda Item

Roundtable discussion where DMs would be asked to speak to current Health Human Resources challenges within their jurisdictions related to COVID (or more generally) and any current plans to address them.

Recommended BC Position/Key Messages

- Pressures for health human resources (HHR) are being felt across the system, professions and service areas, the following resources are currently the most in demand in the context of surge planning:
 - Registered Nurses are in high demand across all service areas, but is more acute for nurses with critical care and ICU experience and in long-term care
 - Respiratory Therapists
 - Medical Laboratory Assistants
- The BC Ministry of Health actively monitors COVID-19 case counts, hospitalizations and staffing levels by region and has mitigation strategies in place to support regions that may be experiencing limited capacity in critical care.
- Rural and remote regions, particularly in the northern part of the province, experience unique recruitment and retention challenges.
 - The northern region of BC has issues with critical care capacity. Critical care capacity is managed on a provincial level, so the pressures extend across all geographical regions.
- The BC Ministry of Health, regional health authorities, and other health system partners continue to implement strategies to address workforce shortages and improve surge capacity. These include:
 - Surge capacity planning undertaken by regional health authorities and evaluated by the Ministry of Health.
 - Extending the scope of a contract with the Canadian Red Cross to ensure administrative and non-clinical supports for vaccination clinics, contact tracing, and testing centres across BC.
 - Utilizing recently retired nurses and other health professionals who have Temporary Emergency Registration and redeploying staff across regions through the Emergency Health Provider Registry.
- Increased federal funding for health care is needed to support a variety of workforce development initiatives to address urgent challenges while increasing the overall national health workforce to sustain services going forward.
- With federal support, there are opportunities to advance a national approach to maximizing workforce supply and aligning distribution with the health needs of Canadians via national and regional training, recruitment and retention frameworks and strategies. Health human resource shortages lead to unproductive competition between jurisdictions.

BC Program Bullets

Health Sector Workforce and Beneficiary Services Division (HSWBSD)

- Administrative delays and other barriers need to be addressed for internationally trained nurses, physicians, allied health, and other professionals while ensuring our systems protect, promote, and preserve quality and patient safety.
- Federal immigration programs need to be flexible, focused, and facilitative to respond to the urgent needs of the health sector.
- Federal leadership and support for innovative approaches can contribute to the optimization of the health care system by maximizing the utilization of health care workers and increasing productivity while improving patient care. These approaches include emerging technologies (such as robotics and artificial intelligence) and the advancement of patient-centred clinical service models that leverage interdisciplinary team-based care.
- Improvements to national data sets (including the development and implementation of a standardized national approach to collecting diversity data and better understanding cross-jurisdictional migration patterns) are necessary to better understand workforce challenges and trends and to develop responsive actions at the federal and provincial/territorial levels.

BC Background

- Similar to other jurisdictions, B.C. is experiencing decades-long growth in the demand for health services and an increasingly competitive labour market for health workers provincially, nationally, and globally.
 - Challenges include a growing and aging population, a higher prevalence of chronic conditions, advances in care, strategic investments to expand access and improve quality, shifting societal expectations, and other factors.
 - According to Ministry of Health modelling, if changes are not made, by 2030¹:
 - Medical Services Plan utilization will increase by over 20%.
 - Health system costs will grow by more than 30%.
 - Health service demand will grow by 14%, exceeding population growth of 13%.
 - Rising costs and service demands over the next 10 years will be driven by rapid growth among groups that require more healthcare including:²
 - 25% growth in the number of people with medium chronic conditions.
 - 36% growth in the number of people with high chronic conditions.
 - 51% growth in people in long-term care with frailty.
 - 40% growth in end-of-life patients.
 - Health authorities, partners/stakeholders, and health care workers themselves report increased burnout and that mental health/resilience are becoming increasingly strained as health care providers struggle to cope with the effects of COVID-19 while maintaining patient care and service delivery.

¹ Health Sector Information Analytics and Reporting Division. Health System Matrix Forecasts, October 2021

² Ibid.

BC Program Bullets

Health Sector Workforce and Beneficiary Services Division (HSWBSD)

- Tighter labour markets are resulting in greater difficulty in providing optimal staffing levels, more time to fill vacancies, increasing turnover and higher levels of stress and burnout due to increasing workloads.
 - The Ministry of Health (MOH) views surplus workforce demand as a primary impediment to timely and effective health service delivery. If left unaddressed, workforce-related constraints are also likely to be a significant barrier to the scaling and strategic repositioning of services required to meet the patient and population health needs now and in the future.
- Additionally, the Winter season is expected to increase non-COVID respiratory admissions and further strain the system. The mandatory vaccination requirement for health care workers, may further impact staffing in some regions of the province.
- B.C.'s publicly funded health sector employs over 216,000 workers at a cost of more than \$19 billion, or 51% of total compensation in the provincial public sector.³
 - Between 2010 and 2019, overall employment in B.C.'s Health Care Sector increased from 201,400 to 269,500 or 33.8%, compared to population growth of 14.5%. Consistent with this trend, the proportion of workers employed in the BC health sector has increased by well over 50% since 1987 – from 1 in 20 workers to 1 in 12.
 - The health workforce has grown faster than the population, yet overtime is up 46% in 5 years.⁴
- Despite workforce growth, B.C.'s 2019 Labour Market Outlook projects that health care will continue to see large increases in job openings to 2029 – 117,100 over the 2019 baseline and 13.6% of total provincial job openings. 56% of these will come from the need to replace retiring workers, while the remaining 44% will result from expansion in response to growing service needs.⁵
 - Vacancies in BC have increased less than the national average but are still up substantially. 12,120 total vacancies in health occupations are reported in the province, which is 10% of all vacancies in the province. Total job vacancies are up 69% in the provincial economy since 2016 but are up 102% in health occupations.⁶
 - The largest contributor is nursing occupations with 4300 vacancies listed (up 86% since 2016), followed by 'assisting' occupations at 3,415 vacancies (up 129% since 2016).⁷
 - The highest overall jump in health vacancies was during 2020 when health vacancies rose 40% during Q1 and a further 39% during Q2, Q3 and Q4.⁸

³ Public Sector Employers Council, B.C. Public Sector Compensation Annual Forecast, 2021

⁴ Health Sector Information, Analytics, and Reporting Division Data. October 13, 2021.

⁵ BC Stats, British Columbia Employment by Detailed Industry, Annual Averages, January 2021

⁶ [Table 14-10-0356-01](#) Job vacancies and average offered hourly wage by occupation (broad occupational category), quarterly, unadjusted for seasonality

⁷ Ibid.

⁸ Ibid.

BC Program Bullets

Health Sector Workforce and Beneficiary Services Division (HSWBSD)

- MOH operates a continuous provincial health workforce planning process in collaboration with health authorities and other health system partners. In recognition of the importance of a robust and well-supported workforce, the Ministry is developing a comprehensive provincial HHR strategy as outlined in the Minister of Health's 2020/21 Mandate Letter.
 - The Provincial HHR Plan (to be finalized in FY 2021/22) is organized around the four cornerstones of a healthy and productive workforce: Retention, Recruitment, Redesign, and Training.
 - The Plan features a Gender-Based Analysis Plus (GBA+) approach, provincial commitments to the United Nations Declaration of the Rights of Indigenous Peoples (UNDRIP), and recommendations from the *In Plain Sight* report.
 - The Plan also builds on the \$96 million committed in Budget 2021 to add over 1000 new permanent health education/training seats across the province and a wide range of occupations and to fund the education component of the Health Career Access Program – an innovative employer-sponsored training model for non-clinical care providers to become health care assistants.

Program Area: Health Sector Workforce and Beneficiary Services Division

Approved by: Mark Armitage, ADM, December 21, 2021

Program Area Contact: Miranda Mason, ED, Health Workforce Planning, and Implementation



ORDER OF THE PROVINCIAL HEALTH OFFICER

(Pursuant to Sections 30, 31, 32, 39, 54, 56, 67 (2) and 69 *Public Health Act*, S.B.C. 2008)

GATHERINGS AND EVENTS – DECEMBER 22, 2021

The *Public Health Act* is at:

<http://www.bclaws.ca/civix/content/complete/statreg/08028/?xsl=/templates/browse.xsl>
(excerpts enclosed)

- TO: OCCUPANTS OF PRIVATE RESIDENCES OR VACATION ACCOMMODATION**
- TO: PERSONS WHO HOST OR ATTEND SOCIAL GATHERINGS IN PRIVATE RESIDENCES OR VACATION ACCOMMODATION**
- TO: OWNERS AND OPERATORS OF PLACES**
- TO: PERSONS WHO ORGANIZE EVENTS**
- TO: PERSONS WHO ATTEND EVENTS**
- TO: MEDICAL HEALTH OFFICERS**

WHEREAS:

- A. On March 17, 2020 I provided notice under section 52 (2) of the *Public Health Act* that the transmission of the infectious agent SARS-CoV-2, which has caused cases, clusters and outbreaks of a serious communicable disease known as COVID-19 among the population of the Province of British Columbia, constitutes a regional event, as defined in section 51 of the *Public Health Act*;
- B. A person infected with SARS-CoV-2 can infect other people with whom the infected person is in contact;
- C. Vaccination is safe, highly effective, and the single most important preventive measure a person can take to protect themselves, their families, and other persons with whom they come into contact from infection, severe illness and possible death from COVID-19. In particular:
- (a) the vaccines available in British Columbia, in company with other protective and preventive measures, are highly effective and provide protection across all eligible age groups against infection and strong protection against severe illness and death;

- (b) most British Columbians have strong and durable protection from SARS-CoV-2 resulting from the extended interval between dose one and dose two of vaccine that is being utilized in British Columbia; in addition, a new vaccine is now being offered which only requires one dose to be effective, and booster doses are being implemented in order to reinforce the protection afforded by vaccination;
 - (c) a full course of vaccine provides more effective and durable protection against infection and severe illness than natural immunity from prior COVID-19 infection alone, or natural immunity in combination with a single-dose of vaccine; and
 - (d) a full course of vaccine provides highly effective and durable protection from severe illness resulting in hospitalization or death from COVID-19, with illness being mostly milder in vaccinated people who become infected than in unvaccinated people.
- D. Vaccines, which prevent or reduce the risk of infection with SARS-CoV-2, have been and continue to be readily available in British Columbia and while substantial progress has been made in vaccinating the population of British Columbia 12 years of age and older, and children aged 5 to 11 years of age are now being vaccinated, a portion of the public remains unvaccinated and there are communities where vaccination rates are low;
 - E. Communities with low vaccination rates have experienced rapid spread of SARS-CoV-2, causing serious illness and increases in hospitalizations and intensive care admissions, primarily in unvaccinated people. By contrast, communities with high vaccination rates have seen corresponding lower transmission and case rates;
 - F. Unvaccinated people are at a significantly greater risk than vaccinated people of being infected with SARS-CoV-2, and those who are infected, experience significantly higher rates of hospitalization, ICU-level care and invasive mechanical ventilation, complications and death when compared with vaccinated people. Unvaccinated people are also at higher risk of transmitting SARS-CoV-2 to other people, including vaccinated people;
 - G. People who are vaccinated can be infected with SARS-CoV-2, but experience less severity of illness than unvaccinated people, especially in younger populations. Vaccinated persons who contract COVID-19 can transmit SARS-CoV-2 but are also generally contagious for shorter periods of time, are less symptomatic, and are less likely to transmit SARS-CoV-2, when compared to unvaccinated infected persons;
 - H. This situation has been exacerbated over time, first by the arrival of the highly transmissible Delta variant of SARS-CoV-2, which is now circulating in British Columbia and causing significantly more rapid transmission and increased severity of illness, particularly in younger unvaccinated people, than earlier variants, and now by the arrival of the even more transmissible Omicron variant, which is responsible for a surge in infections in the province, and which I expect will very shortly overtake the Delta variant as the dominant strain of SARS-CoV-2 circulating in the province;
 - I. Absent vaccination, British Columbia would be in a far more challenging situation than the fragile balance our current immunization rates have provided, but the transmissibility of the Delta and now the Omicron variant means that higher vaccination rates than previously

expected are now required to maintain this balance, control transmission, reduce case numbers and serious outcomes, and reduce the burden on the healthcare system, particularly hospital and intensive care admissions;

- J. The recent appearance of the Omicron variant, which is leading to significant surges in infection in other provinces and other parts of the world in addition to British Columbia, underlines the importance of vaccination in protecting the population and in removing the conditions which foster the development of variants which pose ever greater threats to public health;
- K. The Omicron variant has introduced significant uncertainty into the course of the pandemic, and the rapidly rising infection rates in British Columbia and experience in other places have lead me to conclude that unless measures are put in place immediately to check the spread of Omicron there will be sufficient serious illness among the public to overwhelm the Province's health care system, which is already operating beyond capacity;
- L. Preserving the ability of the public health and health care systems to protect and care for the health needs of the population, including providing care for health needs other than COVID-19, is critical. High incidence of transmission and illness in one or more regions have spill-over effects on health care delivery across the Province, including in critical care and surgical services. Our public health and health care systems are currently experiencing severe stress, and are stretched beyond capacity in their efforts to prevent and respond to illness resulting from the transmission of COVID-19 in the population, primarily among unvaccinated people;
- M. Both the public health and the health care systems are using disproportionate amounts of their resources in their efforts to prevent and respond to the transmission of SARS-CoV2, and to provide care for those who become ill with COVID-19, primarily unvaccinated people who comprise the majority of hospitalizations and ICU admissions;
- N. While people who have contracted SARS-CoV-2 may develop some natural immunity for a period of time following infection, the strength and duration of that immunity varies depending on a multitude of factors, including severity of infection. The risk of reinfection and hospitalization is significantly higher in people who remained unvaccinated after contracting SARS-CoV-2 than in those who were vaccinated post-infection. Vaccination, even after infection, remains an important measure to protect against reinfection. It does so by providing a stronger immune response that is known to be effective for a longer period of time and against a wider variety of strains of SARS-CoV-2 that are currently circulation in British Columbia, including the Delta variant;
- O. Vaccination is the single most important preventive measure a member of a community can take to protect themselves and other members of the community, from infection, severe illness and possible death from COVID-19;
- P. People over 70 years of age, and people with chronic health conditions or compromised immune systems, are particularly vulnerable to severe illness and death from COVID-19, even if they are vaccinated;

- Q. Included among the members of the community who are more likely to be infected are children aged 5 to 11 years. This is because children in this age group have only recently become eligible for vaccination and it will take some time before the members of this group can be fully vaccinated. Children under the age of 5 will remain unprotected from infection until a vaccine is available for them;
- R. Adults and children who are either particularly vulnerable to infection with SARS-CoV-2 or too young to be immunized depend upon the people with whom they come into contact to protect them from the risk of infection;
- S. Unvaccinated people in close contact with other people can promote the transmission of SARS-CoV-2 and increase the number of people who develop COVID-19 and become seriously ill; in particular, social mingling, particularly when coupled with the consumption of alcohol which increases risky behavior, is associated with increases in the transmission of SARS-CoV-2;
- T. Gatherings and events pose a risk of promoting the transmission of SARS-CoV-2, including to and from vaccinated people, and increasing the number of people who develop COVID-19 and become seriously ill and who may die;
- U. Singing, chanting and reading can propel infected material significant distances and increase the risk of the transmission of SARS-CoV-2, particularly among a group of people who are in close contact with one another in an inside place over a period of time;
- V. Teams of people travelling, playing and socializing together for the purpose of sports tournaments and then returning home has recently proved to be a significant contributor to the transmission of SARS-CoV-2 in the community;
- W. Programs that require that proof of vaccination be provided have been shown to increase vaccination uptake in populations, thereby reducing the public health risk of COVID-19;
- X. There are difficulties and risks in accommodating persons who are unvaccinated, since no other measures are nearly as effective as vaccination in reducing the risk of contracting or transmitting SARS-Co-2, and the likelihood of severe illness and death;
- Y. I have considered and continue to consider based on the currently available generally accepted scientific evidence whether other measures, such as natural immunity, PCR testing or rapid antigen testing, are as effective as vaccination in reducing the risk of transmission SARS-Co-2 and or the severity of illness if infected;
- Z. Routine COVID-19 testing of asymptomatic people is not recommended in British Columbia and polymerase chain reaction (PCR) testing capacity is reserved for people who may be ill with COVID-19 to promote public health case identification, follow up and control measures. Asymptomatic testing increases the likelihood of generating false positive tests, which can unnecessarily consume public health resources in following up false positive tests. Similarly, rapid testing, which is followed up with confirmatory PCR testing for positive tests, is reserved for specific settings in which additional layers of protection are needed to protect people at higher risk of serious outcomes of COVID-19, such as in long-term care and

assisted living facilities, or in remote communities where obtaining results of PCR testing may be delayed;

- AA. There are clear, objective criteria for determining whether a person has a medical deferral to a COVID-19 vaccination, and very few people fall into this category;
- BB. Various options for establishing vaccine status, including in paper and online format, are readily available to members of the public;
- CC. I recognize the societal effects, including the hardships, which the measures which I have and continue to put in place to protect the health of the population have on many aspects of life, and, with this in mind, continually engage in a process of reconsideration of these measures, based upon the information and evidence available to me, including infection rates, sources of transmission, the presence of clusters and outbreaks, the number of people in hospital and in intensive care, deaths, the emergence of and risks posed by virus variants of concern, vaccine availability, immunization rates, the vulnerability of particular populations and reports from the rest of Canada and other jurisdictions, with a view to balancing the interests of the public, including constitutionally protected interests, in gatherings and events, against the risk of harm to public health created by gatherings and events and unvaccinated persons;
- DD. I further recognize that constitutionally protected interests include the rights and freedoms guaranteed by the *Canadian Charter of Rights and Freedoms*, including specifically freedom of religion and conscience, freedom of thought, belief, opinion and expression, and the right not to be deprived of life, liberty or security of the person, other than in accordance with the principles of fundamental justice. I understand that making decisions about whether to get vaccinated may engage these rights and freedoms. However, these rights and freedoms are not absolute and are subject to such reasonable limits, prescribed by law as can be demonstrably justified in a free and democratic society, which include proportionate, precautionary and evidence-based measures, including vaccination, to prevent loss of life, serious illness and disruption of our health system and society. When exercising my powers to protect the health of the public from the risks posed by COVID-19, I am aware of my obligation to choose measures that limit the *Charter* rights and freedoms of British Columbians less intrusively, and balance these rights and interests in a way that is consistent with the protection of public health. I have concluded that the measures which I am putting in place in this Order are proportionate, rational and tailored to address the risk, and are neither arbitrary, overbroad, nor grossly disproportionate in light of the need to protect public health at this time. In my view, any limits on constitutionally protected rights and freedoms arising from this Order, are proportionate and reasonable in the interests of protecting public health and there are no other reasonable alternatives that would provide the same level of protection for the population. I am not prohibiting outdoor assemblies for the purpose of communicating a position on a matter of public interest or controversy, subject to my expectation that persons organizing or attending such an assembly will take the steps and put in place the measures recommended in the guidelines posted on my website in order to limit the risk of transmission of COVID-19;

EE. In addition, I recognize privacy interests and the interests protected by the *Human Rights Code*, and have taken these into consideration when exercising my powers to protect the health interests of members of the public from the risk created by being in contact with unvaccinated persons in gatherings and events, particularly with the arrival of the Omicron variant in the province;

FF. I am also mindful that the volume of requests for reconsideration of my Orders, and the time and expertise which considering them entails, has become beyond my capacity and that of my office and team of medical health officers to manage, and is using resources which are better directed at assessing and responding to the protection of the public as a whole;

GG. This Order does not apply to the Executive Council; the Legislative Assembly; a council, board, or trust committee of a local authority as defined under the Community Charter, the Local Government Act or the Islands Trust Act, or a school board; the distribution of food or other supplies to people in need; health or social services provided to people in need, such as warming or cooling centres; fitness facilities or pools which are located in a workplace for the benefit of workers, in a residential building for the benefit of residents, in a hotel for the benefit of guests; rehabilitation or exercise therapy programs; health care related events, including immunization clinics, COVID-19 testing centres and blood donation clinics; drug and alcohol support group meetings; court sittings wherever they occur; workers at a workplace, including at a social gathering for the workers in their workplace as long as no member of the public is present; work camps; before, during or after school programs for students of public or independent schools (schools) organized by a school; home education or distributed learning activities; educational activities, including a practicum or research, involving students or researchers of post-secondary institutions in any location when provided or arranged by a post-secondary institution; language courses; employment related training; a funeral reception held at a funeral home; the use of any place for local, provincial or federal government purposes; services provided by or on behalf of any level of government, other than events, as defined in the Order, provided inside by or on behalf of a recreation centre or a library;

HH. Part C, section 15, and Part D, section 23, do not apply to the Province as owner of a place;

II. I have reason to believe and do believe that

(a) the continued presence of unvaccinated people in the population, more so in some age groups and some communities where vaccination rates continue to be low, coupled with the emergence of the highly transmissible Omicron variant, poses a risk to the health of the population, threatens the capacity of the public health and health care systems to address the health care needs of the population, and constitutes a health hazard;

(b) in order to protect the health of the public and the health care system it is necessary for me to put in place preventive measures to reduce the risk of the transmission of SARS-CoV-2 at events, which could lead to widespread infection and serious illness and overwhelm the public health and the health care systems;

- (c) it is in the public interest for me to proceed on a precautionary basis to exercise the powers in sections 30, 31, 32, 39, 54, 56, 67 (2) and 69 of the *Public Health Act* **TO ORDER** as follows:

THIS ORDER

- A. REPEALS AND REPLACES MY ORDER MADE ON DECEMBER 3, 2021, WITH RESPECT TO *GATHERINGS AND EVENTS*,**
- B. CONFIRMS MY VARIANCE OF NOVEMBER 12, 2021,**
- C. APPLIES THAT VARIANCE TO THIS ORDER AS VARIED BY THIS ORDER**

DEFINITIONS:

“adult” means a person 19 years of age or older;

“event” means

- (a) a gathering of participants in a private residence or vacation accommodation for a social purpose,
- (b) a gathering of participants in a place for an inside event or an outside event,
- (c) a sports tournament;

“exemption” means a variance issued to a person under the *Public Health Act* on the basis of a medical deferral to a vaccination with respect to an event or type of event;

“high performance athlete” means a person who is identified by the Canadian Sport Institute Pacific as a high-performance athlete affiliated with an accredited provincial or national sports organization;

“inside event” means

- (a) a gathering of participants in an inside place for one of the following purposes:
 - (i) a form of entertainment involving a performance such as a theatrical production, a concert, a symphony performance, a choral performance, any other type of musical performance or a dance performance;
 - (ii) business, but limited to a lecture or presentation;
 - (iii) a wedding reception;
 - (iv) a funeral reception not held at a funeral home,

- (v) a sponsored or ticketed party;
- (vi) a gathering for the purpose of acknowledging or celebrating a significant event, such as a birth, a birthday, a coming of age, an upcoming marriage, a promotion, the receipt of an award, a retirement or a celebration of life;
- (b) a gathering of participants in an inside place for one of the following purposes
 - (i) a business purpose not described in (a), and including a conference, convention, commercial trade fair or workshop or home show;
 - (ii) gambling;
 - (iii) recreational education or classes, including arts, crafts, music, photography, culture, or travel education or classes
- (c) a gathering of participants in an inside place for the purpose of an adult exercise or fitness activity or class, or an adult dance class, but not including a swimming activity;
- (d) a gathering of participants in an inside place for the purpose of a swimming activity or an adult sports activity;
- (e) a sports event in an inside place;
- (f) a program for children or youth in an inside place;
- (g) a worship service in an inside place;
- (h) a gathering of participants in an inside place for the purpose of celebrating New Year's Eve;

“occupant” means

- (a) a person who resides in a private residence, or
- (b) a person who is staying in or has the use of vacation accommodation;

“organizer” means

- (a) the person responsible for organizing an event in a place, or
- (b) hosting an event in a private residence or vacation accommodation;

“outside event” means an organized gathering of participants in an outside place with seating provided for spectators;

“participant” means

- (a) an occupant of a private residence or vacation accommodation and a visitor to a private residence or vacation accommodation but does not include an occupant who is a host;
- (b) a person who is present at an inside event or an outside event, including a spectator, but does not include an organizer, event staff member, official, volunteer, officiant, or any other person who is acting in an official or service capacity, or a paid performer, player or athlete;

“party” means another person or other persons who accompany a person to an event;

“patron” means a participant;

“person” does not include the Province;

“photo identification” means one of the following:

- (a) a photo BC Services Card within the meaning of the Identification Card regulation;
- (b) a temporary or permanent driver’s licence, issued by a government of a province of Canada;
- (c) a certificate of Indian Status;
- (d) a Métis Nation British Columbia citizenship and identification card;
- (e) a passport attesting to citizenship or other national status, issued by a government of any jurisdiction and including a photograph of the holder;
- (f) another form of identification, issued by a government of any jurisdiction, including a photograph of the holder;
- (g) a military identification card that is issued by a government of any jurisdiction, which includes a photograph of the holder;

“physical barrier” means a barrier which is designed, installed and maintained in accordance with WorkSafeBC guidance at <https://www.worksafebc.com/en/resources/health-safety/information-sheets/covid-19-health-safety-designing-effective-barriers?lang=en>;

“place” means a venue, other than a private residence or vacation accommodation, and includes a hotel ballroom or conference room, a banquet hall, conference hall, auditorium, recreation centre, theatre, movie theatre, multi-movie theatre complex, casino, work-out gym, exercise or dance facility or studio, recreational facility arena, stadium, or a tent;

“private residence” means the primary residence of a person;

“program for children or youth” means a structured educational program not provided by a school, including music, art, drama, dance, recreational, sport, exercise, or social activity and provided primarily for persons under 22 years of age, but not including parenting programs or breast feeding programs;

“proof of exemption” means

- (a) in the case of a person who is more than 18 years of age, photo identification and an exemption certificate,
- (b) in the case of a person who is 18 years of age or younger, an exemption certificate;

“proof of vaccination” means

- (a) in the case of a person who is more than 18 years of age, photo identification and a vaccine card;
- (b) in the case of a person who is 18 years of age or younger, a vaccine card;

“sports tournament” means a single or multi-day gathering of three or more sports teams from different leagues, who come together outside regular league play for the purpose of the teams playing against multiple other teams, but does not include

- (a) a gathering where team members compete on an individual basis against members of other teams, or
- (b) a gathering where the result will decide if a team will advance to play in a national or international competition;

“tent” includes a marquee;

“vacation accommodation” means a house, townhouse, cottage, cabin, apartment, condominium, mobile home, recreational vehicle, hotel suite, tent, yurt, houseboat or any other type of living accommodation, and any associated deck, garden or yard, in which a person is staying or of which a person has the use, but which is not the person’s primary residence;

“vaccinated” means to have received all doses of a vaccine or a combination of vaccines, but not including a booster dose, as recommended by

- (a) the provincial health officer, with respect to vaccines approved for use in Canada by the department of the federal government responsible for regulating drugs, or
- (b) the World Health Organization, with respect to vaccines approved by the World Health Organization but not approved for use in Canada;

“vaccine” means a vaccine intended for use in humans against SARS-CoV-2;

“vaccine card” means proof in one of the following forms that the holder is vaccinated:

- (a) electronic proof or a printed copy of an electronic proof,
 - (i) issued by the government in the form of a QR code, accessible through the Health Gateway online platform, and
 - (ii) showing the name of the holder;
- (b) proof in writing, issued by the government for the purpose of showing proof of vaccination in accordance with orders of the provincial health officer made under the *Public Health Act*;
- (c) proof, whether electronic or in writing, issued
 - (i) by the government of Canada or of a province of Canada, and
 - (ii) for the purpose of showing proof of vaccination in accordance with an order made in the exercise of a statutory power with respect to the protection of public health or the facilitation of international travel;
- (d) in the case of an international visitor,
 - (i) proof, whether electronic or in writing, relied upon to enter Canada, and
 - (ii) the person's passport or photo identification;

“variance” means the *Variance of Gatherings and Events & Food and Liquor Serving Premises Orders to Suspend Reconsideration re Proof of Vaccination – November 12, 2021*;

“visitor” means a person other than an occupant or event staff who is present in a private residence or vacation accommodation for the purpose of an event.

A. EVENTS

1. A person must not permit a private residence, vacation accommodation or a place to be used for an event, or host, organize, work or volunteer at, be a participant in or a spectator at or be otherwise present at an event, except in compliance with this Order.
2. A person must not permit a place to be used for, organize, work or volunteer at, participate in, be a spectator at or be otherwise present at a sports tournament.
3. For certainty,
 - (a) an event held in a tent with one or more sides is an inside event; and
 - (b) an event held in a tent without any sides is an outside event.
4. Nothing in this Order prevents a high- performance athlete from training, travelling or competing in sport in accordance with the athlete's respective provincial or national sports organization and Canadian Sport Institute Pacific COVID-19 safety protocols, and none of the provisions of this Order apply to a high performance athlete when so engaged.

B. EVENTS IN PRIVATE RESIDENCES OR VACATION ACCOMMODATION

1. An occupant may host an event in a private residence or vacation accommodation, if the provisions of this Part are complied with.
2. In addition to the occupants, no more than 10 other persons, including visitors and event staff, or the occupants of one other private residence or vacation accommodation who live communally and event staff, whichever is the greater number of people, may attend an event in a private residence or vacation accommodation.
3. An occupant must not host an event in a private residence or vacation accommodation, unless
 - (a) section 2 is complied with, and
 - (b) the occupant is satisfied that all the occupants, visitors over the age of 11 years, and event staff are vaccinated or have an exemption.
4. A person over the age of 11 years must not attend or be event staff at an event in a private residence or vacation accommodation, unless
 - (a) the person is vaccinated, or has an exemption, and
 - (b) section 2 is complied with.

C. OUTSIDE EVENTS

1. A person may permit a place to be used for, may organize, may work or volunteer at, may participate in, may be a spectator at, or may be otherwise present at an outside event, if the provisions of this Part are complied with.
2. No more than 5,000 persons are present, or 50% of the seated operating capacity of a place is used, excluding event staff, whichever number permits the greater number of people to be present.
3. There is an organizer.
4. Access to the event is controlled.
5. There is seating available for each participant.
6. Participants are seated throughout the place in such a way as to use all available space.
7. If there is a food or drink station,
 - (a) hand washing facilities or alcohol-based sanitizers are within easy reach of the station;

- (b) signs reminding participants to wash or sanitize their hands before touching self-serve food, drink or other items, are posted at the self-serve station; and
 - (c) high touch surfaces at the station, and utensils that are used for self-serve, are frequently cleaned and sanitized.
8. Hand sanitation supplies are readily available to participants.
 9. Toilet facilities with running water, soap and paper towels for hand washing and drying purposes, or hand sanitation supplies, are available for participants.
 10. The organizer monitors the number of persons present, and ensures that the number of persons present does not exceed the maximum number permitted for the event.
 11. A participant must not attend an event at which there are more persons present than are permitted in this Part, and must not enter a place, or must leave a place, if so directed by the organizer or a member of staff.
 12. A participant must comply with the requirements in this Part, and with measures, or guidance or directions from the organizer or a member of staff, intended to avoid the congregation of participants.
 13. If an event is held in part of a place which is completely separated from the rest of the place, additional persons who are not attending the event may be present in other parts of the place.
 14. If there is more than one area in which events may be held in a place, there may be an event in each of the areas.
 15. If the organizer is not the owner or occupant of the place in which an outside event is held, the owner or occupant must be satisfied that the organizer is aware of the conditions and requirements in this Part, and has the capacity to fulfill them.

D. INSIDE EVENTS

1. This Part does not apply to a worship service.
2. A person may permit a place to be used for, may organize, may work or volunteer at, may participate in, may be a spectator at, or may be otherwise present at an inside event, if the provisions of this Part and Part E are complied with.
3. A person must not permit a place to be used for or must not organize an inside event with a purpose described in paragraph (a) (iii) to (vi), (c) or (h) of the definition of an “inside event”.

4. A person must not permit a place to be used for or must not organize an inside event with a purpose described in paragraph (a) (i) or (ii) of the definition of an “inside event”, unless the event is held as a seated inside event.
5. A person must not permit a place to be used for or must not organize an inside event as a standing event, if the purpose of the event is described in paragraph (a) (i) or (ii) of the definition of “inside event”.
6. A person must not participate in an inside event
 - (a) with a purpose described in paragraph (a) (iii) to (vi), (c) or (h) of the definition of an “inside event”;
 - (b) held as a standing event, if the purpose of the event is described in paragraph (a) (i) or (ii) of the definition of “inside event”.
7. A person may provide, and a person may participate in an activity described in paragraph (c) of the definition of “inside event” if the activity is provided by virtual means and the participants do not gather with one another in an inside place for the purpose of the activity.
8. An adult must not participate in exercise or fitness in a gym or fitness facility on either an individual or group basis.
9. No more than 50% of the seated capacity of a place, excluding event staff, may be used for a seated event.
10. No more than 50% of the standing capacity of a place, excluding event staff, may be used for a standing event.
11. No more than 50% of the seated capacity of the gambling area of a casino, excluding event staff, may be used.
12. There is an organizer.
13. Access to the event is controlled.
14. If the event is described in paragraph (a) (i) or (ii) of the definition of “inside event”, the following apply to the event:
 - (a) there must be a seat available for each participant;
 - (b) each participant must be provided with a seat;
 - (c) participants must be seated throughout the place in such a way as to use all available space;

- (d) no more than 6 participants may sit at a table;
 - (e) participants must
 - (i) be seated throughout the event,
 - (ii) not move from seat to seat or table to table,
 - (iii) not leave their seat except
 - A. to use a food or drink station,
 - B. to use washroom facilities,
 - C. to provide assistance to another person who requires care or first aid, or
 - D. to leave or return to the premises;
15. If there is a food or drink station,
- (a) hand washing facilities or alcohol-based sanitizers are within easy reach of the station;
 - (b) signs reminding participants to wash or sanitize their hands before touching self-serve food, drink or other items, are posted at the self-serve station; and
 - (c) high touch surfaces at the station, and utensils that are used for self-serve, are frequently cleaned and sanitized.
16. Hand sanitation supplies are readily available to participants.
17. Toilet facilities with running water, soap and paper towels for hand washing and drying purposes or hand sanitation supplies are available for participants.
18. Dance floors are closed with physical barriers or occupied with tables, unless they are being used for a dance performance.
19. Participants do not dance, unless they are performing at an event or a child or youth participating in a program for children or youth.
20. If there is more than one area in a place in which events may be held, there may be an event in each of the areas.
21. An organizer must ensure that participants comply with the face covering requirements in the *Face Coverings (COVID-19) Order*.
22. A participant must comply with the requirements in this Part and in Part E, and with measures, guidance or directions from the organizer or a member of staff, intended to

avoid the congregation of participants and ensure compliance with the *Face Coverings (COVID-19) Order*.

23. If the organizer is not the owner or occupant of the place in which an inside event is held, the owner or occupant must be satisfied that the organizer is aware of the conditions and requirements in this Part and Part E, and has the capacity to fulfill them.

E. PROOF OF VACCINATION

1. This Part applies to inside events, except worship services.
2. This Part does not apply to
 - (a) a person under 12 years of age, or
 - (b) a person 12 to 21 years of age who is participating in a program for children or youth.
3. The following requirements apply with respect to an inside event:
 - (a) An organizer must obtain
 - (i) proof that a participant is vaccinated by way of proof of vaccination, or
 - (ii) proof that a participant has an exemption by way of proof of exemption.
 - (b) A participant must provide an organizer with
 - (i) proof of being vaccinated by way of proof of vaccination, or
 - (ii) proof of having an exemption by way of proof of exemption.
 - (c) An organizer must not permit a participant who has not provided the organizer with
 - (i) proof of being vaccinated by way of proof of vaccination, or
 - (ii) proof of having an exemption by way of proof of exemption,to enter or remain in a place for the purpose of an event or to participate in an event.
 - (d) A participant who has not provided an organizer with
 - (i) proof of being vaccinated by way of proof of vaccination,
 - (ii) or proof of having an exemption by way of proof of exemption,

must not enter or remain in a place for the purpose of an event or participate in an event.

- (e) If an event takes place on more than one day, the requirements in this section apply on each of those days.
4. Commencing at 12:01 AM on December 31, 2021, an organizer must scan the QR code on a vaccine card in order to determine whether a participant is vaccinated.
 5. An organizer must not scan the QR code on a vaccine card with any tool other than a BC Vaccine Card Verifier App.
 6. Subject to section 6, an organizer must not retain proof of vaccination or proof of exemption provided by a participant, or use it for any purpose other than to confirm that a participant has been vaccinated or has an exemption, as required by this Order.
 7. Despite section 5, with the written consent of a participant, an organizer may keep a record of the fact that the participant has provided proof of vaccination or proof of exemption as required by this Part, and the organizer may rely upon this record to satisfy the requirements in this Part with respect to future participation by the participant in an event at the same place.
 8. A person, including a parent, must be vaccinated, if the person is
 - (a) leading, supervising or assisting with a program for children or youth on a volunteer basis, including if the person receives an honorarium for doing so, or
 - (b) required to be present with a child or youth at a program for children or youth.
 9. A person, including a parent, who is not vaccinated must not
 - (a) lead, supervise or assist with a program for children or youth on a volunteer basis, including if the person receives an honorarium for doing so, or
 - (b) be present with a child or youth at a program for children or youth.
 10. Section 3 applies with respect to a person to whom section 8 applies.
 11. For certainty, neither section 8 nor 9 applies to a person who is employed to lead, supervise or assist with a program for children or youth.

F. WORSHIP SERVICES

1. A person may permit a place to be used for, may organize, may work or volunteer at, be a participant at or be otherwise present at a worship service if the provisions of this Part are complied with.

2. A faith community may use up to 100% of the seated capacity of a place for a worship service if the officiant and all participants over the age of 11 years are vaccinated.
3. A faith community may use up to 50% of the seated capacity of a place for a worship service if the officiant or any of the participants over the age of 11 years is not vaccinated.
4. A faith community must not use more than 50% of the seated capacity of a place for a worship service, unless the officiant and all participants over the age of 11 years are vaccinated.
5. A person must not permit a place to be used for, organize or be present at a worship service where more than 50% of the seated capacity of the place is being used, unless the officiant and all participants over the age of 11 years are vaccinated.

G. DELEGATION OF AUTHORITY TO THE MEDICAL HEALTH OFFICER TO CONSIDER AND MAKE A DECISION WITH RESPECT TO A REQUEST FOR AN EXEMPTION ON THE BASIS OF A MEDICAL DEFERRAL

Under the authority vested in me by section 69 of the *Public Health Act*, I delegate my authority under section 43 of the *Public Health Act* to the medical health officer for the geographic region of the Province in which an event occurs or will occur to receive, consider, and make a decision with respect to a request for reconsideration made by a person on the basis of a medical deferral to a vaccination, and to add conditions to or change conditions on an exemption, or to suspend or cancel an exemption.

H. RELATED MEDICAL HEALTH OFFICERS ORDERS

Recognizing that the risk differs in different regions of the province, and that medical health officers are in the best position to assess local circumstances and to determine whether additional or more restrictive steps need to be taken to reduce the risk of the transmission of COVID-19, **I FURTHER ORDER:**

1. A medical health officer may issue an order further to this Order, for the purpose of having the provisions of the order incorporated into this Order, or may add conditions to or change conditions on an exemption, or suspend or cancel an exemption. An order may add further prohibitions, or impose more restrictive limitations or conditions, in the whole or part of the geographic area of the Province for which the medical health officer is designated and, subject to section 2, the provisions of the order are incorporated into this Order when posted on my website. For certainty, a contravention of an order of a medical health officer issued further to this Order, and posted on my website, is a contravention of this Order.

2. While it is in force, a provision in an order made by a medical health officer further to this Order and posted on my website, which adds further prohibitions or imposes more restrictive limitations or requirements than this Order, applies in the whole or part of the geographic area of the Province for which the medical health officer is designated, despite the provisions of this Order.

Except as provided in Part E, section 5, which comes into effect at 12:01 AM on December 31, 2021, the provisions of this Order come into effect at 11:59 PM on December 22, 2021, and expire as follows:

Part A section 1, as it applies to events in a private residence or vacation accommodation and inside events, and section 2 expire at 12:01 A.M. on January 18, 2022;

Part A section 1, as it applies to outside events, and sections 3 and 4 expire at 12:01 A.M. on January 31, 2022;

Part B expires at 12:01 A.M. on January 18, 2022;

Part C expires at 12:01 A.M. on January 31, 2022;

Part D expires at 12:01 A.M. on January 18, 2022; and

Part E expires at 12:01 A.M. on January 31, 2022.

After weighing the interests of participants and staff at gatherings and events against the interests of persons who are not vaccinated for reasons other than a medical deferral to vaccination, and taking into account the importance of protecting the health of participants and staff, the stress under which the public health and health care systems are currently operating, and the impact this is having on the provision of health care to the population, the burden which responding to more clusters and outbreaks of COVID-19 would put on the public health system, the burden which responding to more patients with serious illness would place upon an already overburdened health care system, the increased risk to the population arising from the presence of the Omicron variant in the Province, and the risk inherent in accommodating persons who are not vaccinated, and for the reasons set out in my Variance of November 12, 2021 posted on my website, I have decided, pursuant to section 54 (1) (h) of the *Public Health Act*, and in accordance with the emergency powers set out in Part 5 of the *Act*, to confirm the application of the Variance to this Order, except as varied below with respect to worship services, and, in accordance with the Variance, will not be accepting requests for a reconsideration of this Order, except from an individual on the basis of a medical deferral to a vaccination with respect to an event or type of event.

For the purposes of this Order, I am varying the Variance to the extent that I will not be accepting requests for reconsideration with respect to the provisions of or exemptions with

respect to the provisions of Part F of this Order on any basis, including on the basis of a medical deferral to a vaccination. The reason for this is the heightened risk of transmission of SARS-CoV2 in worship spaces which are densely packed with participants, particularly during the current period of increased religious observance on the part of many faith communities. Instead, I have made provision for faith communities to hold worship services with fewer participants in order to permit faith communities to accommodate community members who are not vaccinated by providing them with a less risky space in which to engage in communal religious observance.

In addition, I am also varying the Variance to provide that I will not be accepting requests for reconsideration with respect to the provisions of Part E, sections 8 and 9, of this Order on any basis, including on the basis of a medical deferral to a vaccination. The reason for this is that these sections apply to a volunteer position rather than to an essential position for the purpose of providing a program for children and youth, and the inconvenience of losing an unvaccinated volunteer is less than the risk to children or youth created by the involvement of an unvaccinated volunteer.

A request for an exemption from being vaccinated or providing proof of vaccination on the basis of a medical deferral to a vaccination must be made on the basis that the health of the person would be seriously jeopardized if the person were to be vaccinated, and must follow the guidelines posted on my website. (<https://www2.gov.bc.ca/gov/content/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/current-health-topics/covid-19-novel-coronavirus>).

A request under section 43 may be submitted to me at PHOExemptions@gov.bc.ca with the subject line “Request for Reconsideration about Proof of Vaccination”.

Pursuant to section 54 (1) (h) of the *Public Health Act*, and in accordance with the emergency powers set out in Part 5 of the Act, I will not be accepting requests for a review of this Order.

You are required under section 42 of the *Public Health Act* to comply with this Order.


Failure to comply with this Order is an offence under section 99 (1) (k) of the *Public Health Act*.

If you fail to comply with this Order, I have the authority to take enforcement action against you under Part 4, Division 6 of the *Public Health Act*.

You may contact me at:

Dr. Bonnie Henry, Provincial Health Officer
4th Floor, 1515 Blanshard Street
PO Box 9648 STN PROV GOVT, Victoria BC V8W 9P4
Fax: (250) 952-1570
Email: ProvHlthOffice@gov.bc.ca

DATED THIS: 22nd day of December 2021

SIGNED: 
Bonnie Henry
MD, MPH, FRCPC
Provincial Health Officer

DELIVERY BY: Posting to the BC Government the BC Centre for Disease Control websites.

Enclosure: Excerpts of the *Public Health Act*.

ENCLOSURE

Excerpts of the *Public Health Act* [SBC 2008] c. 28

Definitions

1 In this Act:

"health hazard" means

- (a) a condition, a thing or an activity that
 - (i) endangers, or is likely to endanger, public health, or
 - (ii) interferes, or is likely to interfere, with the suppression of infectious agents or hazardous agents, or
- (b) a prescribed condition, thing or activity, including a prescribed condition, thing or activity that
 - (i) is associated with injury or illness, or
 - (ii) fails to meet a prescribed standard in relation to health, injury or illness;

When orders respecting health hazards and contraventions may be made

30 (1) A health officer may issue an order under this Division only if the health officer reasonably believes that

- (a) a health hazard exists,
- (b) a condition, a thing or an activity presents a significant risk of causing a health hazard,
- (c) a person has contravened a provision of the Act or a regulation made under it, or
- (d) a person has contravened a term or condition of a licence or permit held by the person under this Act.

(2) For greater certainty, subsection (1) (a) to (c) applies even if the person subject to the order is complying with all terms and conditions of a licence, a permit, an approval or another authorization issued under this or any other enactment.

General powers respecting health hazards and contraventions

31 (1) If the circumstances described in section 30 [*when orders respecting health hazards and contraventions may be made*] apply, a health officer may order a person to do anything that the health officer reasonably believes is necessary for any of the following purposes:

- (a) to determine whether a health hazard exists;
- (b) to prevent or stop a health hazard, or mitigate the harm or prevent further harm from a health hazard;
- (c) to bring the person into compliance with the Act or a regulation made under it;
- (d) to bring the person into compliance with a term or condition of a licence or permit held by that person under this Act.

(2) A health officer may issue an order under subsection (1) to any of the following persons:

- (a) a person whose action or omission
 - (i) is causing or has caused a health hazard, or
 - (ii) is not in compliance with the Act or a regulation made under it, or a term or condition of the person's licence or permit;
- (b) a person who has custody or control of a thing, or control of a condition, that
 - (i) is a health hazard or is causing or has caused a health hazard, or
 - (ii) is not in compliance with the Act or a regulation made under it, or a term or condition of the person's licence or permit;
- (c) the owner or occupier of a place where
 - (i) a health hazard is located, or
 - (ii) an activity is occurring that is not in compliance with the Act or a regulation made under it, or a term or condition of the licence or permit of the person doing the activity.

Specific powers respecting health hazards and contraventions

32 (1) An order may be made under this section only

(a) if the circumstances described in section 30 [*when orders respecting health hazards and contraventions may be made*] apply, and

(b) for the purposes set out in section 31 (1) [*general powers respecting health hazards and contraventions*].

(2) Without limiting section 31, a health officer may order a person to do one or more of the following:

(a) have a thing examined, disinfected, decontaminated, altered or destroyed, including

(i) by a specified person, or under the supervision or instructions of a specified person,

(ii) moving the thing to a specified place, and

(iii) taking samples of the thing, or permitting samples of the thing to be taken;

(b) in respect of a place,

(i) leave the place,

(ii) not enter the place,

(iii) do specific work, including removing or altering things found in the place, and altering or locking the place to restrict or prevent entry to the place,

(iv) neither deal with a thing in or on the place nor dispose of a thing from the place, or deal with or dispose of the thing only in accordance with a specified procedure, and

(v) if the person has control of the place, assist in evacuating the place or examining persons found in the place, or taking preventive measures in respect of the place or persons found in the place;

(c) stop operating, or not operate, a thing;

(d) keep a thing in a specified place or in accordance with a specified procedure;

- (e) prevent persons from accessing a thing;
 - (f) not dispose of, alter or destroy a thing, or dispose of, alter or destroy a thing only in accordance with a specified procedure;
 - (g) provide to the health officer or a specified person information, records, samples or other matters relevant to a thing's possible infection with an infectious agent or contamination with a hazardous agent, including information respecting persons who may have been exposed to an infectious agent or hazardous agent by the thing;
 - (h) wear a type of clothing or personal protective equipment, or change, remove or alter clothing or personal protective equipment, to protect the health and safety of persons;
 - (i) use a type of equipment or implement a process, or remove equipment or alter equipment or processes, to protect the health and safety of persons;
 - (j) provide evidence of complying with the order, including
 - (i) getting a certificate of compliance from a medical practitioner, nurse practitioner or specified person, and
 - (ii) providing to a health officer any relevant record;
 - (k) take a prescribed action.
- (3) If a health officer orders a thing to be destroyed, the health officer must give the person having custody or control of the thing reasonable time to request reconsideration and review of the order under sections 43 and 44 unless
- (a) the person consents in writing to the destruction of the thing, or
 - (b) Part 5 [*Emergency Powers*] applies.

Contents of orders

39 (3) An order may be made in respect of a class of persons.

Duty to comply with orders

42 (1) A person named or described in an order made under this Part must comply with the order.

(2) Subsection (1) applies regardless of whether the person leaves the geographic area for which the health officer who made the order is designated.

Reconsideration of orders

43 (1) A person affected by an order, or the variance of an order, may request the health officer who issued the order or made the variance to reconsider the order or variance if the person

(a) has additional relevant information that was not reasonably available to the health officer when the order was issued or varied,

(b) has a proposal that was not presented to the health officer when the order was issued or varied but, if implemented, would

(i) meet the objective of the order, and

(ii) be suitable as the basis of a written agreement under section 38 [*may make written agreements*], or

(c) requires more time to comply with the order.

(2) A request for reconsideration must be made in the form required by the health officer.

(3) After considering a request for reconsideration, a health officer may do one or more of the following:

(a) reject the request on the basis that the information submitted in support of the request

(i) is not relevant, or

(ii) was reasonably available at the time the order was issued;

(b) delay the date the order is to take effect or suspend the order, if satisfied that doing so would not be detrimental to public health;

(c) confirm, rescind or vary the order.

(4) A health officer must provide written reasons for a decision to reject the request under subsection (3) (a) or to confirm or vary the order under subsection (3) (c).

(5) Following a decision made under subsection (3) (a) or (c), no further request for reconsideration may be made.

(6) An order is not suspended during the period of reconsideration unless the health officer agrees, in writing, to suspend it.

(7) For the purposes of this section,

(a) if an order is made that affects a class of persons, a request for reconsideration may be made by one person on behalf of the class, and

(b) if multiple orders are made that affect a class of persons, or address related matters or issues, a health officer may reconsider the orders separately or together.

(8) If a health officer is unable or unavailable to reconsider an order he or she made, a similarly designated health officer may act under this section in respect of the order as if the similarly designated health officer were reconsidering an order that he or she made.

General emergency powers

54 (1) A health officer may, in an emergency, do one or more of the following:

- (i) not reconsider an order under section 43 [*reconsideration of orders*], not review an order under section 44 [*review of orders*] or not reassess an order under section 45 [*mandatory reassessment of orders*];

Emergency preventive measures

56 (1) The provincial health officer or a medical health officer may, in an emergency, order a person to take preventive measures within the meaning of section 16 [*preventive measures*], including ordering a person to take preventive measures that the person could otherwise avoid by making an objection under that section.

(2) If the provincial health officer or a medical health officer makes an order under this section, a person to whom the order applies must comply with the order unless the person delivers to a person specified by the provincial health officer or medical health officer, in person or by registered mail,

(a) a written notice from a medical practitioner stating that the health of the person who must comply would be seriously jeopardized if the person did comply, and

(b) a copy of each portion of that person's health record relevant to the statement in paragraph (a), signed and dated by the medical practitioner.

(3) If a person delivers a notice under subsection (2), the person must comply with an instruction of the provincial health officer or a medical health officer, or a person designated by either of them, for the purposes of preventing infection with, or transmission of, an infectious agent or a hazardous agent.

Offences

99 (1) A person who contravenes any of the following provisions commits an offence:

(k) section 42 [*failure to comply with an order of a health officer*], except in respect of an order made under section 29 (2) (e) to (g) [*orders respecting examinations, diagnostic examinations or preventive measures*];



ORDER OF THE PROVINCIAL HEALTH OFFICER

(Pursuant to Sections 30, 31, 32, 39 (3), 43, 54, 56, 67 (2) and 69 *Public Health Act*, S.B.C. 2008)

FOOD AND LIQUOR SERVING PREMISES - DECEMBER 22, 2021

The *Public Health Act* is at:

<http://www.bclaws.ca/civix/content/complete/statreg/08028/?xsl=/templates/browse.xsl>
(excerpts enclosed)

- TO: OWNERS AND OPERATORS OF FOOD SERVICE ESTABLISHMENTS WITH TABLE SERVICE, FOOD PRIMARY OR LIQUOR PRIMARY ESTABLISHMENTS, INCLUDING PUBS, BARS, LOUNGES AND NIGHTCLUBS, LIQUOR MANUFACTURING FACILITIES THAT HAVE TASTING ROOMS WITH SEATING, PRIVATE CLUBS OR CERTAIN LICENSED COUNTER SERVICE, TAKE-OUT OR QUICK SERVICE FOOD SERVICE ESTABLISHMENTS**
- TO: PATRONS OF FOOD SERVICE ESTABLISHMENTS WITH TABLE SERVICE, FOOD PRIMARY OR LIQUOR PRIMARY ESTABLISHMENTS, INCLUDING PUBS, BARS, LOUNGES AND NIGHTCLUBS, LIQUOR MANUFACTURING FACILITIES THAT HAVE TASTING ROOMS WITH SEATING, PRIVATE CLUBS OR CERTAIN LICENSED COUNTER SERVICE, TAKE-OUT OR QUICK SERVICE FOOD SERVICE ESTABLISHMENTS**
- TO: MEDICAL HEALTH OFFICERS**

WHEREAS:

- A. On March 17, 2020 I provided notice under section 52 (2) of the *Public Health Act* that the transmission of the infectious agent SARS-CoV-2, which has caused cases, clusters and outbreaks of a serious communicable disease known as COVID-19 among the population of the Province of British Columbia, constitutes a regional event, as defined in section 51 of the *Public Health Act*;
- B. A person infected with SARS-CoV-2 can infect other people with whom the infected person is in contact;
- C. Vaccination is safe, highly effective, and the single most important preventive measure a person can

Ministry of Health

Office of the
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take to protect themselves, their families, and other persons with whom they come into contact from infection, severe illness and possible death from COVID-19. In particular:

- (a) the vaccines available in British Columbia, in company with other protective and preventive measures, are highly effective and provide protection across all eligible age groups against infection and strong protection against severe illness and death;
 - (b) most British Columbians have strong and durable protection from SARS-CoV-2 resulting from the extended interval between dose one and dose two of vaccine that is being utilized in British Columbia; in addition, a new vaccine is now being offered which only requires one dose to be effective, and booster doses are being implemented in order to reinforce the protection afforded by vaccination;
 - (c) a full course of vaccine provides more effective and durable protection against infection and severe illness than natural immunity from prior COVID-19 infection alone, or natural immunity in combination with a single-dose of vaccine; and
 - (d) a full course of vaccine provides highly effective and durable protection from severe illness resulting in hospitalization or death from COVID-19, with illness being mostly milder in vaccinated people who become infected than in unvaccinated people.
- D. Vaccines, which prevent or reduce the risk of infection with SARS-CoV-2, have been and continue to be readily available in British Columbia and while substantial progress has been made in vaccinating the population of British Columbia 12 years of age and older, and children aged 5 to 11 years of age are now being vaccinated, a portion of the public remains unvaccinated and there are communities where vaccination rates are low;
 - E. Communities with low vaccination rates have experienced rapid spread of SARS-CoV-2, causing serious illness and increases in hospitalizations and intensive care admissions, primarily in unvaccinated people. By contrast, communities with high vaccination rates have seen corresponding lower transmission and case rates;
 - F. Unvaccinated people are at a significantly greater risk than vaccinated people of being infected with SARS-CoV-2, and those who are infected, experience significantly higher rates of hospitalization, ICU-level care and invasive mechanical ventilation, complications and death when compared with vaccinated people. Unvaccinated people are also at higher risk of transmitting SARS-CoV-2 to other people, including vaccinated people;
 - G. People who are vaccinated can be infected with SARS-CoV-2, but experience less severity of illness than unvaccinated people, especially in younger populations. Vaccinated persons who contract COVID-19 can transmit SARS-CoV-2 but are also generally contagious for shorter periods of time, are less symptomatic, and are less likely to transmit SARS-CoV-2, when compared to unvaccinated infected persons;
 - H. This situation has been exacerbated over time, first by the arrival of the highly transmissible Delta variant of SARS-CoV-2, which is now circulating in British Columbia and causing significantly more rapid transmission and increased severity of illness, particularly in younger unvaccinated people, than earlier variants, and now by the arrival of the even more transmissible Omicron variant, which is responsible for a surge in infections in the province, and which I expect will very shortly overtake the Delta variant as the dominant strain of SARS-CoV-2 circulating in the province.

- I. Absent vaccination, British Columbia would be in a far more challenging situation than the fragile balance our current immunization rates have provided, but the transmissibility of the Delta and now the Omicron variant means that higher vaccination rates than previously expected are now required to maintain this balance, control transmission, reduce case numbers and serious outcomes, and reduce the burden on the healthcare system, particularly hospital and intensive care admissions;
- J. The Omicron variant has introduced significant uncertainty into the course of the pandemic, and the rapidly rising infection rates in British Columbia and experience in other places have led me to conclude that unless measures are put in place immediately to check the spread of Omicron there will be sufficient serious illness among the public to overwhelm the Province's public health and health care systems, which is already operating beyond capacity.
- K. Preserving the ability of the public health and health care systems to protect and care for the health needs of the population, including providing care for health needs other than COVID-19, is critical. High incidence of transmission and illness in one or more regions have spill-over effects on health care delivery across the Province, including in critical care and surgical services. Our public health and health care systems are currently experiencing severe stress, and are stretched beyond capacity in their efforts to prevent and respond to illness resulting from the transmission of COVID-19 in the population, primarily among unvaccinated people;
- L. Both the public health and the health care systems are using disproportionate amounts of their resources in their efforts to prevent and respond to the transmission of SARS-CoV2, and to provide care for those who become ill with COVID-19, primarily unvaccinated people who comprise the majority of hospitalizations and ICU admissions;
- M. While people who have contracted SARS-CoV-2 may develop some natural immunity for a period of time following infection, the strength and duration of that immunity varies depending on a multitude of factors, including severity of infection. The risk of reinfection and hospitalization is significantly higher in people who remained unvaccinated after contracting SARS-CoV-2 than in those who were vaccinated post-infection. Vaccination, even after infection, remains an important measure to protect against reinfection. It does so by providing a stronger immune response that is known to be effective for a longer period of time and against a wider variety of strains of SARS-CoV-2 that are currently circulating in British Columbia, including the Delta variant;
- N. Vaccination is the single most important preventive measure a member of a community can take to protect themselves and other members of the community, from infection, severe illness and possible death from COVID-19;
- O. People over 70 years of age, and people with chronic health conditions or compromised immune systems, are particularly vulnerable to severe illness and death from COVID-19, even if they are vaccinated;
- P. Included among the members of the community who are more likely to be infected are children aged 5 to 11 years. This is because children in this age group have only recently become eligible for vaccination and it will take some time before the members of this group can be fully vaccinated. Children under the age of 5 will remain unprotected from infection until a vaccine is available for them;
- Q. Adults and children who are either particularly vulnerable to infection with SARS-CoV-2 or too young to be immunized depend upon the people with whom they come into contact to protect them

from the risk of infection;

- R. Unvaccinated people in close contact with other people can promote the transmission of SARS-CoV-2 and increase the number of people who develop COVID-19 and become seriously ill; in particular, social mingling, particularly when coupled with the consumption of alcohol which increases risky behavior, is associated with increases in the transmission of SARS-CoV-2;
- S. Programs that require that proof of vaccination be provided have been shown to increase vaccination uptake in populations, thereby reducing the public health risk of COVID-19;
- T. There are difficulties and risks in accommodating persons who are unvaccinated, since no other measures are nearly as effective as vaccination in reducing the risk of contracting or transmitting SARS-Co-2, and the likelihood of severe illness and death;
- U. I have considered and continue to consider, based on the currently available generally accepted scientific evidence whether other measures, such as natural immunity, PCR testing or rapid antigen testing, are as effective as vaccination in reducing the risk of transmission of SARS-Co-2 or the severity of illness if infected;
- V. Routine COVID-19 testing of asymptomatic people is not recommended in British Columbia and polymerase chain reaction (PCR) testing capacity is reserved for people who may be ill with COVID-19 to promote public health case identification, follow up and control measures. Asymptomatic testing increases the likelihood of generating false positive tests, which can unnecessarily consume public health resources in following up false positive tests. Similarly, rapid testing, which is followed up with confirmatory PCR testing for positive tests, is reserved for specific settings in which additional layers of protection are needed to protect people at higher risk of serious outcomes of COVID-19, such as in long-term care and assisted living facilities, or in remote communities where obtaining results of PCR testing may be delayed;
- W. There are clear, objective criteria for determining whether a person has a medical deferral to a COVID-19 vaccination, and very few people fall into this category;
- X. Various options for establishing vaccine status, including in paper and online format, are readily available to members of the public;
- Y. I recognize the societal effects, including the hardships, which the measures which I have and continue to put in place to protect the health of the population have on many aspects of life, and, with this in mind, continually engage in a process of reconsideration of these measures, based upon the information and evidence available to me, including infection rates, sources of transmission, the presence of clusters and outbreaks, the number of people in hospital and in intensive care, deaths, the emergence of and risks posed by virus variants of concern, vaccine availability, immunization rates, the vulnerability of particular populations and reports from the rest of Canada and other jurisdictions, with a view to balancing the interests of the public, including constitutionally protected interests, in gatherings and events, against the risk of harm to public health created by gatherings and events and unvaccinated persons;
- Z. I further recognize that constitutionally protected interests include the rights and freedoms guaranteed by the *Canadian Charter of Rights and Freedoms*, including specifically freedom of religion and conscience, freedom of thought, belief, opinion and expression, and the right not to be deprived of life, liberty or security of the person, other than in accordance with the principles of

fundamental justice. I understand that making decisions about whether to get vaccinated may engage these rights and freedoms. However, these rights and freedoms are not absolute and are subject to such reasonable limits, prescribed by law as can be demonstrably justified in a free and democratic society, which include proportionate, precautionary and evidence-based measures, including vaccination, to prevent loss of life, serious illness and disruption of our health system and society. When exercising my powers to protect the health of the public from the risks posed by COVID-19, I am aware of my obligation to choose measures that limit the *Charter* rights and freedoms of British Columbians less intrusively, and balance these rights and interests in a way that is consistent with the protection of public health. I have concluded that the measures which I am putting in place in this Order are proportionate, rational and tailored to address the risk, and are neither arbitrary, overbroad, nor grossly disproportionate in light of the need to protect public health at this time. In my view, any limits on constitutionally protected rights and freedoms arising from this Order, are proportionate and reasonable in the interests of protecting public health and there are no other reasonable alternatives that would provide the same level of protection for the population.

AA. In addition, I recognize privacy interests and the interests protected by the *Human Rights Code*, and have taken these into consideration when exercising my powers to protect the health interests of members of the public from the risk created by being in contact with unvaccinated persons in food or liquor serving premises, particularly with the arrival of the Omicron variant in the province;

BB. For certainty, this Order is not directed at food or liquor serving premises which are located in airports or at BC Ferries terminals or on BC ferries; designated onsite liquor retail and dedicated sampling room areas without seating attached to a liquor manufacturing facility; a person providing or collecting take-out food or liquor; a person who delivers food or liquor to, or who receives food or liquor in a place other than a food service establishment or liquor serving premises; unlicensed counter service, take-out or quick service food service establishments without table service; licensed counter service take-out or quick service food service establishments without table service which do not sell liquor for consumption on the premises; unlicensed self-serve food areas; food courts and food trucks; drive-through food service establishments; cafeterias in grocery stores; hospitals; licensed care facilities; assisted living residences; independent living facilities; correctional facilities; industrial camps; public or independent schools; post-secondary institutions; workplace cafeterias; cafeterias for resident students attending educational institutions; or other places in which food or liquor is served to residents, rather than to the general public.

CC. I have reason to believe and do believe that

- (a) the continued presence of unvaccinated people in the population, more so in some age groups and some communities where vaccination rates continue to be low, coupled with the emergence of the highly transmissible Omicron variant, poses a risk to the health of the population, threatens the capacity of the public health and health care systems to address the health care needs of the population, and constitutes a health hazard;
- (b) in order to protect the health of the public health and the health care system it is necessary for me to put in place preventive measures to reduce the risk of the transmission of SARS-CoV-2 in food and liquor serving premises, which if left unchecked could lead to widespread infection and serious illness and overwhelm the health care system;
- (c) it is in the public interest for me to proceed on a precautionary basis to exercise the powers in sections 30, 31, 32, 39, 54, 56, 67 (2) and 69 of the *Public Health Act* **TO ORDER** as follows:

THIS ORDER

- A. REPEALS AND REPLACES MY ORDER MADE ON DECEMBER 12, 2021, WITH RESPECT TO FOOD AND LIQUOR SERVING PREMISES,**
- B. CONFIRMS MY VARIANCE OF NOVEMBER 12, 2021,**
- C. APPLIES THAT VARIANCE TO THIS ORDER**

Definitions in this Order:

“food service establishment” has the same meaning as in the Food Premises Regulation;

“full meal service” includes food provided by a caterer to the premises or available from a food truck located beside or on the premises, but does not include snacks, appetizers or tapas on their own;

“life cycle event” means a significant event in a person’s life, including a birth, a birthday, a coming of age, an engagement, an upcoming marriage, a promotion, the receipt of an award, a retirement or a celebration of life;

“nightclub” means a liquor primary establishment at which the main activities are selling liquor and providing music to which patrons can dance;

“operator” means a person who operates a premises;

“party” means another person or other persons who accompany a person to a food or liquor serving premises;

“patron” means a person who is present as a customer on premises, but does not include an owner, operator or member of staff;

“premises” includes both the inside and outside area of a place being operated as a

- (a) a food service establishment with table service, including a buffet with table service, or a cafe,
- (b) a food primary or liquor primary establishment, including a pub, bar, lounge, nightclub, liquor manufacturing facility that has a tasting room with seating, or a private club; or
- (c) a licensed counter, take-out or quick service food service establishment without table service which sells liquor for consumption on the premises;

“physical barrier” means a barrier which is designed, installed and maintained in accordance with WorkSafeBC guidance at <https://www.worksafebc.com/en/resources/health-safety/information-sheets/covid-19-health-safety-designing-effective-barriers?lang=en>;

“table service” includes providing any of the following services:

- (a) taking a reservation from a patron;

- (b) greeting a patron at the entrance, seating a patron, or providing any other hosting services;
- (c) providing a place setting at a table, in a booth or at a counter for a patron;
- (d) providing a menu to a seated patron;
- (e) providing water to a seated patron;
- (f) taking a food or drink order from a seated patron;
- (g) serving food or drink, or providing condiments to a seated patron;
- (h) re-filling a drink for a seated patron;
- (i) clearing dishes, glasses, cups or cutlery after use by a patron while a patron is still at the table;
- (j) taking payment from a patron after a meal;
- (k) taking payment from a patron at their seat;
- (l) providing service to a patron other than from behind a counter;
- (m) providing any other service to a patron at their seat;

“variance” means the *Variance of Gatherings and Events & Food and Liquor Serving Premises Orders to Suspend Reconsideration re Proof of Vaccination – November 12, 2021*.

A. LICENSED PREMISES WITHOUT FULL MEAL SERVICE

1. Premises which are licensed to serve liquor, and which do not have full meal service, must be closed.
2. An owner or operator must not operate a licensed premises which does not have full meal service.
3. No person may be present as a staff member or a patron in a licensed premises which does not have full meal service.

B. FOOD SERVICE ESTABLISHMENTS WITH TABLE SERVICE, FOOD PRIMARY OR LIQUOR PRIMARY ESTABLISHMENTS INCLUDING PUBS, LIQUOR MANUFACTURING FACILITIES THAT HAVE TASTING ROOMS WITH SEATING OR PRIVATE CLUBS

1. For certainty, this Part does not apply to a counter, take-out or quick service food service establishment without table service.
2. An operator must not operate a food service establishment with table service, or a food primary or liquor primary establishment, including a pub, liquor manufacturing facility that has a tasting room with seating, or a private club, except in compliance with the provisions of this Part and Part B.
3. The operator must take steps to prevent the congregation of patrons outside the premises, such as by taking reservations and requesting patrons to remain in their cars or elsewhere until notified by telephone or an App that there is seating available for them on the premises.
4. The operator must assess the premises for places where patrons may congregate and put in place measures to avoid congregation.
5. There must be sufficient seating for patrons on the premises, whether at a table, in a booth or at a counter.

6. In licensed premises, other than private clubs or tasting rooms with a liquor manufacturer licence, patrons must be assigned to a table, booth or counter and shown to their seats.
7. Patrons must stay in the seat to which they are assigned, or at which they seat themselves, and must not move from table to table or mingle with patrons from other parties when not seated.
8. No more than 6 patrons may be seated at a table, unless the party consists of one set of parents and their minor children.
9. Liquor may only be served to a patron who is seated, other than in private clubs or tasting rooms with a liquor manufacturer licence.
10. Patrons must remain seated, other than in private clubs or tasting rooms with a liquor manufacturer's licence, except
 - (a) to use a self-serve food or drink station,
 - (b) use a self-serve lottery ticket dispenser,
 - (c) pay at a pay station,
 - (d) use washroom facilities,
 - (e) to provide assistance to another person who requires care or first aid,
 - (f) when leaving the premises, or
 - (g) for the purpose of doing any of the following with a maximum of five other persons who are in the same party as the patron and who are seated with the patron:
 - (i) play pool, billiards, snooker, or darts; or
 - (ii) bowl, if there is a bowling alley on the premises.
11. There must be a distance of two metres between the backs of the seats of patrons seated at adjacent tables or booths, even if members of the same party are seated at adjacent tables or booths, unless the adjacent tables or booths are separated by physical barriers.
12. There must be two metres between patrons seated at a counter, unless the patrons are in the same party or they are separated by physical barriers.
13. If there is a self-serve food or drink station on the premises,
 - (a) hand washing facilities or alcohol-based sanitizers must be within easy reach of the station;
 - (b) signs reminding patrons to wash or sanitize their hands before touching self-serve food, drink or other items must be posted at the self-serve station; and

- (c) high touch surfaces at the station, and utensils that are used for self-serve, must be frequently cleaned and sanitized.
- 14. If there are physical barriers between tables or booths or seats at a counter, the tops and bottoms of the physical barriers must be positioned so that the physical barriers block the transmission of droplets produced by breathing, talking, coughing or sneezing between patrons who are seated at adjacent tables, booths or seats at a counter.
- 15. Dance floors must be closed with physical barriers or occupied with tables.
- 16. Patrons must not dance on the premises.
- 17. There must be a sufficient number of staff at premises, other than at private clubs or tasting rooms with a liquor manufacturer's licence, to ensure that
 - (a) patrons remain seated,
 - (b) no more than 6 patrons are seated at a table, unless the party consists of one set of parents and their minor children, and
 - (c) patrons comply with the *Face Coverings (COVID -19) Order*.
- 18. An operator must ensure that there is compliance with this Part.
- 19. Despite the *Gatherings and Events Order*, a person may celebrate a life cycle event in a food or liquor serving premises to which this Part applies, as long as the requirements of this Part and Part C are complied with.

C. PROOF OF VACCINATION

- 1. This Part does not apply to a patron under 12 years of age.
- 2. This Part applies to
 - (a) a premises to which Part B applies, and
 - (b) a licensed counter service, take-out or quick service food service establishment without table service which sells liquor for consumption on the premises
- 3. In this Part

“exemption” means a variance of this Order issued to a person under the *Public Health Act* on the basis of a medical deferral to a vaccination;

“photo identification” means one of the following:

- (a) a photo BC Services Card within the meaning of the Identification Card regulation;
- (b) a temporary or permanent driver's licence, issued by a government of a province of Canada;

- (c) a certificate of Indian Status;
- (d) a Métis Nation British Columbia citizenship and identification card;
- (e) a passport attesting to citizenship or other national status, issued by a government of any jurisdiction and including a photograph of the holder;
- (f) another form of identification, issued by a government of any jurisdiction, including a photograph of the holder;
- (g) a military identification card that is issued by a government of any jurisdiction, which includes a photograph of the holder;

“proof of exemption” means

- (a) in the case of a person who is more than 18 years of age, photo identification and an exemption certificate;
- (b) in the case of a person who is 18 years of age or younger, an exemption certificate.

“proof of vaccination” means

- (a) in the case of a person who is more than 18 years of age, photo identification and a vaccine card;
- (b) in the case of a person who is 18 years of age or younger, a vaccine card;

“vaccinated” means to have received all doses of a vaccine or a combination of vaccines, but not including a booster dose, as recommended by

- (a) the provincial health officer, with respect to vaccines approved for use in Canada by the department of the federal government responsible for regulating drugs, or
- (b) the World Health Organization, with respect to vaccines approved by the World Health Organization but not approved for use in Canada;

“vaccine” means a vaccine intended for use in humans against SARS-CoV-2;

“vaccine card” means proof in one of the following forms that the holder is vaccinated:

- (a) electronic proof or a printed copy of an electronic proof,
 - (i) issued by the government in the form of a QR code, accessible through the Health Gateway online platform, and
 - (ii) showing the name of the holder;
- (b) proof in writing, issued by the government for the purpose of showing proof of vaccination in accordance with orders of the provincial health officer made under the *Public Health Act*;
- (c) proof, whether electronic or in writing, issued
 - (i) by the government of Canada or of a province of Canada, and
 - (ii) for the purpose of showing proof of vaccination in accordance with an order made in the exercise of a statutory power with respect to the protection of public health or the facilitation of international travel;
- (d) in the case of an international visitor,
 - (i) proof, whether electronic or in writing, relied upon to enter Canada, and
 - (ii) the person’s passport or photo identification;

4. Subject to a direction by me, on the recommendation of a medical health officer, that this Part of the Order does not apply to a premises in the geographic area of the Province for which the medical health officer is designated, the following requirements apply:

- (a) An operator must only serve patrons who are vaccinated or have an exemption and who have provided proof of vaccination or proof of exemption.
 - (b) A patron must be vaccinated or have an exemption and must provide an operator with proof of vaccination or proof of exemption in order to be served in a premises.
 - (c) An operator must not permit a patron who is not vaccinated or does not have an exemption and who has not provided the operator with proof of vaccination or proof of exemption, to remain on the premises.
 - (d) A patron who is not vaccinated or who does not have an exemption and who has not provided an operator with proof of vaccination or proof of exemption must not be on or remain on the premises.
5. Commencing at 12:01 AM on December 31, 2021, an operator must scan the QR code on a vaccine card in order to determine whether a participant is vaccinated.
 6. An operator must not scan the QR code with a tool other than a BC Vaccine Card Verifier App.
 7. Subject to section 8, an operator must not retain proof of vaccination or proof of exemption, or use it for any purpose other than to confirm that a patron has been vaccinated or has an exemption as required by this Order.
 8. Despite section 7, with the written consent of a patron, an operator may keep a record of the fact that the patron has provided proof of vaccination or proof of exemption in compliance with this Part until this Order expires or is repealed, and the operator may rely upon this record to satisfy the requirements in this Part with respect to the service or presence of the patron at the premises.

D. PATRONS OF PREMISES TO WHICH PARTS B OR C APPLY

1. A patron must not enter premises, or must leave premises, if so directed by the operator or a member of staff.
2. A patron must comply with the requirements or prohibitions in Parts B or C which apply to a premises, and with measures, guidance or direction from an owner, operator, or member of staff, intended to avoid the congregation of patrons, to implement the provisions of this Order and to ensure compliance with the *Face Coverings (COVID-19) Order*.

E. DELEGATION OF AUTHORITY TO THE MEDICAL HEALTH OFFICER

Under the authority vested in me by section 69 of the *Public Health Act*, I delegate my authority under section 43 of the *Public Health Act* to the medical health officer for the geographic region of the Province in which a person resides to receive, consider, and make a decision with respect to a request for reconsideration made by the person on the basis of a medical deferral to a vaccination, and to add conditions to or change conditions on an exemption, or to suspend or cancel an exemption.

F. RELATED MEDICAL HEALTH OFFICERS ORDERS

Recognizing that the risk differs in different regions of the province, and that medical health officers are in the best position to assess local circumstances and to determine whether additional or more restrictive steps need to be taken to reduce the risk of the transmission of COVID-19, **I FURTHER ORDER:**

1. A medical health officer may issue an order further to this Order, for the purpose of having the provisions of the order incorporated into this Order. An order may add further prohibitions, or impose more restrictive limitations or conditions, in the whole or part of the geographic area of the Province for which the medical health officer is designated and, subject to section 2, the provisions of the order are incorporated into this Order when posted on my website. For certainty, a contravention of an order of a medical health officer issued further to this Order, and posted on my website, is a contravention of this Order.
2. While it is in force, a provision in an order made by a medical health officer further to this Order and posted on my website, which adds further prohibitions or imposes more restrictive limitations or requirements than this Order, applies in the whole or part of the geographic area of the Province for which the medical health officer is designated, despite the provisions of this Order.

Except as provided in section 5 of Part C, which comes into effect on 12:01 AM on December 31, 2021, the provisions of this Order come into effect at 11:59 PM on December 22, 2021, and

- (a) Part A expires at 12:01 A.M. on January 18, 2022,
- (b) Sections 6 to 12, 14 and 17 of Part B expire at 12:01 A.M. on January 31, 2022,
- (c) Part C expires at 12:01 A.M. on January 31, 2022,
- (d) Sections 1 to 5, 13, 15, 16 and 19 of Part B do not have an expiration date.

After weighing the interests of patrons and staff in food and liquor serving premises, against the interests of persons who are not vaccinated for reasons other than a medical deferral to vaccination, and taking into account the importance of protecting the health of participants and staff, the stress under which the public health and health care systems are currently operating, and the impact this is having on the provision of health care to the population, the burden which responding to more clusters and outbreaks of COVID-19 would put on the public health system, the burden which responding to more patients with serious illness would place upon an already overburdened health care system, and the risk inherent in accommodating persons who are not vaccinated, and for the reasons set out in my Variance of November 12, 2021, posted on my website, I have decided, pursuant to section 54 (1) (h) of the *Public Health Act*, and in accordance with the emergency powers set out in Part 5 of the *Act*, to confirm the application of the Variance to this Order, and, in accordance with the Variance, will not be accepting requests for a reconsideration of this Order, except from an individual on the basis of a medical deferral to a vaccination.

A request for an exemption from providing proof of vaccination must be made on the basis that the health of the person would be seriously jeopardized if the person were to be vaccinated, and must follow the guidelines posted on the Provincial Health Officer's website (<https://www2.gov.bc.ca/gov/content/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/current-health-topics/covid-19-novel-coronavirus>).

A request under section 43 may be submitted to the Provincial Health Officer at PHOExemptions@gov.bc.ca with the subject line “Request for Reconsideration about Proof of Vaccination”.

Pursuant to section 54 (1) (h) of the *Public Health Act*, and in accordance with the emergency powers set out in Part 5 of the Act, I will not be accepting requests for a review of this Order.

You are required under section 42 of the *Public Health Act* to comply with this Order.

Failure to comply with this Order is an offence under section 99 (1) (k) of the *Public Health Act*.

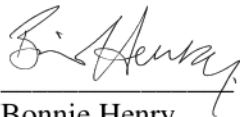
If you fail to comply with this Order, I have the authority to take enforcement action against you under Part 4, Division 6 of the *Public Health Act*.

You may contact me at:

Dr. Bonnie Henry, Provincial Health Officer
s.15; s.19
P O Box 9648 STN PROV GOVT, Victoria BC V8W 9P4
Fax: (250) 952-1570
Email: ProvHlthOffice@gov.bc.ca

DATED THIS: 22nd day of December 2021

SIGNED:



Bonnie Henry
MD, MPH, FRCPC
Provincial Health Officer

Delivery By: Posting on the BC Government and the BC Centre for Disease Control websites.

Enclosure: Excerpts of the *Public Health Act*.

ENCLOSURE

Excerpts of the *Public Health Act* [SBC 2008] c. 28

Definitions

1 In this Act:

"health hazard" means

- (a) a condition, a thing or an activity that
 - (i) endangers, or is likely to endanger, public health, or
 - (ii) interferes, or is likely to interfere, with the suppression of infectious agents or hazardous agents, or
- (b) a prescribed condition, thing or activity, including a prescribed condition, thing or activity that
 - (i) is associated with injury or illness, or
 - (ii) fails to meet a prescribed standard in relation to health, injury or illness;

When orders respecting health hazards and contraventions may be made

30 (1) A health officer may issue an order under this Division only if the health officer reasonably believes that

- (a) a health hazard exists,
- (b) a condition, a thing or an activity presents a significant risk of causing a health hazard,
- (c) a person has contravened a provision of the Act or a regulation made under it, or
- (d) a person has contravened a term or condition of a licence or permit held by the person under this Act.

(2) For greater certainty, subsection (1) (a) to (c) applies even if the person subject to the order is complying with all terms and conditions of a licence, a permit, an approval or another authorization issued under this or any other enactment.

General powers respecting health hazards and contraventions

31 (1) If the circumstances described in section 30 [*when orders respecting health hazards and contraventions may be made*] apply, a health officer may order a person to do anything that the health officer reasonably believes is necessary for any of the following purposes:

- (a) to determine whether a health hazard exists;

- (b) to prevent or stop a health hazard, or mitigate the harm or prevent further harm from a health hazard;
- (c) to bring the person into compliance with the Act or a regulation made under it;
- (d) to bring the person into compliance with a term or condition of a licence or permit held by that person under this Act.

(2) A health officer may issue an order under subsection (1) to any of the following persons:

- (a) a person whose action or omission
 - (i) is causing or has caused a health hazard, or
 - (ii) is not in compliance with the Act or a regulation made under it, or a term or condition of the person's licence or permit;
- (b) a person who has custody or control of a thing, or control of a condition, that
 - (i) is a health hazard or is causing or has caused a health hazard, or
 - (ii) is not in compliance with the Act or a regulation made under it, or a term or condition of the person's licence or permit;
- (c) the owner or occupier of a place where
 - (i) a health hazard is located, or
 - (ii) an activity is occurring that is not in compliance with the Act or a regulation made under it, or a term or condition of the licence or permit of the person doing the activity.

Specific powers respecting health hazards and contraventions

32 (1) An order may be made under this section only

- (a) if the circumstances described in section 30 [*when orders respecting health hazards and contraventions may be made*] apply, and
- (b) for the purposes set out in section 31 (1) [*general powers respecting health hazards and contraventions*].

(2) Without limiting section 31, a health officer may order a person to do one or more of the following:

- (a) have a thing examined, disinfected, decontaminated, altered or destroyed, including

- (i) by a specified person, or under the supervision or instructions of a specified person,
- (ii) moving the thing to a specified place, and
- (iii) taking samples of the thing, or permitting samples of the thing to be taken;
- (b) in respect of a place,
 - (i) leave the place,
 - (ii) not enter the place,
 - (iii) do specific work, including removing or altering things found in the place, and altering or locking the place to restrict or prevent entry to the place,
 - (iv) neither deal with a thing in or on the place nor dispose of a thing from the place, or deal with or dispose of the thing only in accordance with a specified procedure, and
 - (v) if the person has control of the place, assist in evacuating the place or examining persons found in the place, or taking preventive measures in respect of the place or persons found in the place;
- (c) stop operating, or not operate, a thing;
- (d) keep a thing in a specified place or in accordance with a specified procedure;
- (e) prevent persons from accessing a thing;
- (f) not dispose of, alter or destroy a thing, or dispose of, alter or destroy a thing only in accordance with a specified procedure;
- (g) provide to the health officer or a specified person information, records, samples or other matters relevant to a thing's possible infection with an infectious agent or contamination with a hazardous agent, including information respecting persons who may have been exposed to an infectious agent or hazardous agent by the thing;
- (h) wear a type of clothing or personal protective equipment, or change, remove or alter clothing or personal protective equipment, to protect the health and safety of persons;
- (i) use a type of equipment or implement a process, or remove equipment or alter equipment or processes, to protect the health and safety of persons;
- (j) provide evidence of complying with the order, including

(i) getting a certificate of compliance from a medical practitioner, nurse practitioner or specified person, and

(ii) providing to a health officer any relevant record;

(k) take a prescribed action.

(3) If a health officer orders a thing to be destroyed, the health officer must give the person having custody or control of the thing reasonable time to request reconsideration and review of the order under sections 43 and 44 unless

(a) the person consents in writing to the destruction of the thing, or

(b) Part 5 [*Emergency Powers*] applies.

Contents of orders

39 (3) An order may be made in respect of a class of persons.

Duty to comply with orders

42 (1) A person named or described in an order made under this Part must comply with the order.

(2) Subsection (1) applies regardless of whether the person leaves the geographic area for which the health officer who made the order is designated.

Reconsideration of orders

43 (1) A person affected by an order, or the variance of an order, may request the health officer who issued the order or made the variance to reconsider the order or variance if the person

(a) has additional relevant information that was not reasonably available to the health officer when the order was issued or varied,

(b) has a proposal that was not presented to the health officer when the order was issued or varied but, if implemented, would

(i) meet the objective of the order, and

(ii) be suitable as the basis of a written agreement under section 38 [*may make written agreements*], or

(c) requires more time to comply with the order.

(2) A request for reconsideration must be made in the form required by the health officer.

(3) After considering a request for reconsideration, a health officer may do one or more of the following:

(a) reject the request on the basis that the information submitted in support of the request

(i) is not relevant, or

(ii) was reasonably available at the time the order was issued;

- (b) delay the date the order is to take effect or suspend the order, if satisfied that doing so would not be detrimental to public health;
 - (c) confirm, rescind or vary the order.
- (4) A health officer must provide written reasons for a decision to reject the request under subsection (3) (a) or to confirm or vary the order under subsection (3) (c).
- (5) Following a decision made under subsection (3) (a) or (c), no further request for reconsideration may be made.
- (6) An order is not suspended during the period of reconsideration unless the health officer agrees, in writing, to suspend it.
- (7) For the purposes of this section,
- (a) if an order is made that affects a class of persons, a request for reconsideration may be made by one person on behalf of the class, and
 - (b) if multiple orders are made that affect a class of persons, or address related matters or issues, a health officer may reconsider the orders separately or together.
- (8) If a health officer is unable or unavailable to reconsider an order he or she made, a similarly designated health officer may act under this section in respect of the order as if the similarly designated health officer were reconsidering an order that he or she made.

General emergency powers

- 54** (1) A health officer may, in an emergency, do one or more of the following:
- (h) not reconsider an order under section 43 [*reconsideration of orders*], not review an order under section 44 [*review of orders*] or not reassess an order under section 45 [*mandatory reassessment of orders*];

Emergency preventive measures

- 56** (1) The provincial health officer or a medical health officer may, in an emergency, order a person to take preventive measures within the meaning of section 16 [*preventive measures*], including ordering a person to take preventive measures that the person could otherwise avoid by making an objection under that section.
- (2) If the provincial health officer or a medical health officer makes an order under this section, a person to whom the order applies must comply with the order unless the person delivers to a person specified by the provincial health officer or medical health officer, in person or by registered mail,
- (a) a written notice from a medical practitioner stating that the health of the person who must comply would be seriously jeopardized if the person did comply, and
 - (b) a copy of each portion of that person's health record relevant to the statement in paragraph (a), signed and dated by the medical practitioner.

(3) If a person delivers a notice under subsection (2), the person must comply with an instruction of the provincial health officer or a medical health officer, or a person designated by either of them, for the purposes of preventing infection with, or transmission of, an infectious agent or a hazardous agent.

Offences

99 (1) A person who contravenes any of the following provisions commits an offence:

(k) section 42 [*failure to comply with an order of a health officer*], except in respect of an order made under section 29 (2) (e) to (g) [*orders respecting examinations, diagnostic examinations or preventive measures*];

Dr. Bonnie Henry
Weekly Media Update
December 24, 2021

OPENING

- Good afternoon.
- As many people begin their holiday celebrations, I would like providing guidance on what to do if you develop symptoms of COVID-19 and when to get tested.
- What we are seeing is that the Omicron virus is a very different from previous variants. In a sense, we are in a different pandemic now.
- Earlier this week I mentioned that all of us will likely be exposed to the virus, but this does not mean all of us will get sick.
- Using your layers of protection, limiting your contact with others and being full vaccinated will help protect you.

- However, people are getting infected with a much smaller amount of the virus, much more quickly. And, they are passing it onto others.
- With Omicron variant the incubation period is very fast, which means you can pass it onto others before you even realize you are positive for the virus.
- This means, if you are at all sick and even if you think it isn't COVID-19, you should take precautions and stay away from others.
- The speed of transmission is at a point that public health does not have sufficient time to complete contact tracing with primary close contacts to slow the spread.
- This means we need your help to do that.

When to get Tested

- Our testing centres are at maximum capacity.
- I would like to be very clear. Do not go to a testing centre unless you have symptoms.
- The testing centres are not for pre-travel screening nor to give you a green light to spend time with others.
- The testing centres are to confirm that someone with symptoms of the virus has COVID-19.
- The BCCDC symptom checker is a good tool to use, if you are unsure.
- PCR tests are being used for those who are highest risk, hospital workers, emergency responders and others who need to continue to work.
- Rapid testing is being used for people with symptoms, but are at lower risk.

Vaccinated with Mild Symptoms

- Given the rate of transmission, if you have any symptoms of COVID-19, you should assume you have the virus and take measures to avoid passing it on.
- If you are fully vaccinated and have mild, but multiple symptoms, you should assume you are positive, stay home and stay away from others for 7 days.
- If you are not fully vaccinated you must self-isolate for 10 days from when your symptoms began or were confirmed positive through testing.
- You should notify your close contacts. All contacts should monitor for symptoms for 14 days and any of your contacts who are unvaccinated need to self-isolate for a 10 days.
- This means you will regrettably need to adjust your holiday plans and isolate from those in your household and anyone coming to your home. You will need to have your turkey dinner delivered to you instead.
- Your close contacts and anyone that you live with should limit their interactions with others and closely monitor themselves for symptoms as well.

Self-Care Guidance

- If your symptoms are mild with such things as a sore throat, headache, fatigue or body ache, the best thing you can do is rest and drink plenty of fluids.
- A humidifier or hot shower may help to ease a cough and you can take Tylenol or ibuprofen to help with your fever.

Serious Illness / Complex Symptoms

- If your symptoms worsen, or you are having difficulty breathing, have chest pain, can't drink anything, or your self-care is not helping you manage your illness, then contact 811 or seek immediate care.
- While I caution about the need to get tested, if you are seriously unwell, please do not hesitate to seek care immediately.

CLOSER

Safe Holidays

- This is a different virus and this is once again a different holiday season for all of us.
- For many, including me, physical activity, going to a gym is a key part of mental and physical well-being.
- I would like to assure you that the uncertainty around this virus remains high, but we'll be back to our gyms and fitness centres as soon as we know more.
- While we need to keep our groups small and limit our in-person connections, let's ensure we are maintaining those important social connections – in a safe way.
- I encourage you to reach out to people who may be alone, deliver a meal or baking to someone who may be isolating, connect virtually.
- Let's give each other a booster shot of communal kindness and safe connection.
- And I ask you to let's continue to please be kind, be calm and be safe.

From: s.22
Sent: December 27, 2021 4:31 PM
To: Henry, Bonnie HLTH:EX
Subject: Recent closures

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Hi Bonnie,

How can I go to a crowded mall, movie theatre, restaurants and countless other things but not the gym. We are working out with masks on and only a portion of the gyms capacity is being utilized.

Please explain.

Thank you
s.22

Sent from my iPhone

From: s.22
Sent: December 27, 2021 3:25 PM
To: Henry, Bonnie HLTH:EX
Subject: Gyms and Mandates

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Hi Bonnie Henry,
It's time for you to scrap these ridiculous mandates as they're both 'unscientific' and divisive.

Sent from my iPhone

From: s.22
Sent: December 27, 2021 3:15 PM
To: Henry, Bonnie HLTH:EX
Subject: Attn. Bonnie henry on restrictions
Attachments: s.22

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Please give me an actual explanation on why this is ok but going to a gym is not. I'm at a loss on why the casinos, movie theaters, stations, malls/food courts (where you don't have to be vaccinated) and pools can be open but going to the gyms are closed. 95% of people in gyms are cleaner and healthier than the people going to casinos and food courts

Sent from Yahoo Mail on Android

From: s.22
Sent: December 27, 2021 2:42 PM
To: Henry, Bonnie HLTH:EX
Subject: Why is this ok and not gyms

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

s.22

Sent from my iPhone

From: s.22
Sent: December 27, 2021 8:41 AM
To: Henry, Bonnie HLTH:EX
Subject: Gym closure please open

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

To whom it may concern,

I appreciate that you are trying to keep us safe but what you are doing is causing more harm than good. I want to know who I need to speak to, to reverse this mandate.

Why is it ok for you to force us to stay home? We are aware of the risks and choose to go to the gym. You are also effecting peoples livelihoods. Are you offering compensation?

I got double vaccinated so I could go to the gym as well as the threat of losing my job.

How absolutely ridiculous is this? You are now taking it away despite coercing us into following your mandates? This is people's mental health you are threatening with these closures. We build a community that helps keep each other alive and relatively sane during this time and you want to take that away from us?

Make us sign a waiver or whatever legal document you need. I'd rather take that risk than follow whatever mandates you keep making.

If I die at least I'm dying living my life closer to what is actually thriving. I can't mentally keep doing this and I'm sure many feel the same way.

Do I need me to prove it?

Your mandates never end. It's terrible that I can't even trust my own government when they say January 18th. I dont believe you.

We need to learn to live with Covid NOT let it control us. If we were free and it kills me or someone close to me, I would consider that a better life than what you are offering us now.

What do you need to reverse this and STOP doing this?

I will be sending emails until I get a response.

s.22

s.22

From:
Sent: December 26, 2021 10:15 PM
To: Henry, Bonnie HLTH:EX
Subject: New Covid Regualtions (please read)

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

To: Bonnie Henry

You don't know me, my name is s.22 and you might never read this but on the small chance you do there's something I would like you to know:

s.22

s.22 Gym owners have said they haven't had any issue with the omnicron varient and we all wear masks and are vaccinated! I just don't understand why you kept malls, restaurants, pubs, movie theatres and etc open when I know people don't wear masks just because they are sitting. Gyms have masks on at all times and even spray equipment with sanitizer.
Please Bonnie Henry change the restriction or at least please respond with some sort of information on why you specifically targeted gyms, the only thing that made me actually have control and feel sane. I'm not mad you, I just want to know why...

Thanks,
s.22

From: s.22
Sent: December 26, 2021 9:34 AM
To: Henry, Bonnie HLTH:EX
Subject: Supportive but why gyms?

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Hi Dr. Henry,

I'm a ^{s.22} who has followed all the rules and just received my booster vaccine today. I'm struggling with the decision to close gyms. At a time when people are struggling with mental health the gym is a place where many keep mental and physical health in check, myself included. Everyone that attends my gym is double vaccinated, wears masks when moving about, maintains distance and carries a disinfectant bottle and rag to clean all equipment after use. It's a much safer place than the mall, for example. I can understand cancelling large group classes, but fail to see the rational behind shutting down all fitness spaces. Is spread in gyms a major issue? This is a difficult time as it is in terms of maintaining mental health. Indoor gym spaces are critical in maintaining positive mental and physical well being. Please reconsider.

Sincereley,

s.22

Sent from my iPad

From: s.22
Sent: December 25, 2021 4:04 PM
To: Henry, Bonnie HLTH:EX
Subject: For Christmas please open our gyms again!

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

To whom it may concern,

I appreciate that you are trying to keep us safe but what you are doing is causing more harm than good. I want to know who I need to speak to, to reverse this mandate.

Why is it ok for you to force us to stay home? We are aware of the risks and choose to go to the gym. You are also effecting peoples livelihoods. Are you offering compensation?

I got double vaccinated because of not being able to go to the gym as well as the threat of losing my job.

How absolutely ridiculous is this? You are now taking it away despite coercing us into following your mandates?

This is people's mental health. We build a community that helps keep each other alive and relatively sane during this time and you want to take that away from us?

Make us sign a waiver or whatever legal document you need. I'd rather take that risk than do whatever mandates you keep making.

If I die at least I'm dying living my life closer to what is actually thriving. I can't mentally keep doing this and I'm sure many feel the same way.

Do I need me to prove it?

Your mandates never end. It's terrible that I can't even trust my own government when they say January 18th. I dont believe

you.

We need to learn to live with Covid NOT let it control us. If we were free and it kills me or someone close to me, I would consider that a better life than what you are offering us now.

What do you need to reverse this and STOP doing this?

I will be sending emails until I get a response.

s.22

From: Nicola Lambrechts <nicola@nlkstrategies.ca>
Sent: December 24, 2021 9:13 AM
To: Henry, Bonnie HLTH:EX
Subject: Talking points - Dec 24
Attachments: Dr Bonnie Henry - Dec 24 (v1).docx

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Hi Bonnie - Here are your talking points.

Thanks so much,
Nicola

Nicola Lambrechts
NLK Strategies
604.970.9113
nicola@nlkstrategies.ca

www.nlkstrategies.ca

From: The Climbing Physio <theclimbingphysio@gmail.com>
Sent: December 24, 2021 8:59 AM
To: Henry, Bonnie HLTH:EX
Subject: Keep BC gyms open

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Dear Bonnie Henry

I am writing to voice my strong opinion that BC should keep fitness gyms of all kinds open with restrictions as before. Masks, sanitizing, restrict numbers, whatever else, but please, keep the gyms open. This is the one thing that BC residents can do to deal with the stress of covid, and to keep themselves healthy and out of hospitals.

I as a healthcare practitioner, think it's ludicrous to close the gyms for any extended period of time.

The negative effect on people's physical, emotional and mental health & well-being, far outweighs the effects of covid overall at this period in time. There's a large percentage of people vaccinated with passports. Anyone weary of catching covid will make the decision not to go.

Until we start recognizing physical, emotional, and mental health as a whole we're going to keep exasperating this pandemic. We need to look towards long-term health of people not just this short-term pandemic.

Sincerely

Nina Tappin, RPT, BScPT
Physiotherapist

Instagram: [climbing_physiotherapy](#)
www.climbingphysiotherapy.com

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From: s.22
Sent: December 23, 2021 10:49 PM
To: Henry, Bonnie HLTH:EX
Subject: Letter of Hope

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Dear Dr. Henry,

I want to start this letter by acknowledging that I am writing it out of complete hopelessness and despair during this Holiday season. I doubt you will ever read it, but I have to do it for myself.

Just like a year ago, this Christmas, I will be alone, without my family next to me. And my only Christmas wish is for the provincial government to reconsider recent gym closures. Throughout covid, my gym never had a single outbreak. It kept us safe, healthy, and strong – both mentally and physically. As someone who has been struggling with multiple and severe mental health problems over years, I found my gym routine and community to be an essential path to my healing and overall well-being.

We worked out in our tiny and isolated pods. We wore masks while exercising. We never questioned a single decision made by you or the government. I personally got vaccinated as soon as possible and was always defending your mandates.

Yet this time, I have to respectfully disagree with you. Given that my gym, like many other gyms, has never had a recorded outbreak it is unfair and unreasonable to shut it. My gym was the only thing that kept me, and so many of BC residents motivated and engaged throughout our days. In times of a total mental crisis, it was **helping me to stay alive**. And now, my hopes are going away.

I hope you take an opportunity to reconsider recent gym closures and acknowledge the importance not only of stopping the spread of Covid-19 but also the **importance of mental health**.

Withal, I wish you and your loved ones a happy and safe holiday season.

Thank you for everything you do.

--

Kind Regards,

s.22

From: s.22
Sent: December 23, 2021 7:49 PM
To: Henry, Bonnie HLTH:EX
Cc: Minister, HLTH HLTH:EX
Subject: Re-Open Gym

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Hi Bonnie,

I hope you are doing well. I am writing this email in regards to the gym closure in British Columbia. I don't think it makes sense to close gyms which actually help public to stay healthy. We should consider closing shopping malls and crowded places which can are actually dangerous for spreading viruses. Majority of the gym have all the equipments to keep it clean. Please reconsider reopening the gyms.

Thank you,
s.22

From: s.22
Sent: December 23, 2021 7:36 PM
To: Minister, HLTH HLTH:EX
Subject: Concerned citizen; Keep BC's Gyms Open for the Fully Vaccinated, Please

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Hello,

I am fully vaccinated + booster, and have been following all protocols laid out by the provincial government. However, this most recent restriction on gym attendance by the vaccinated population oversteps what is reasonable for the population.

The gym can be modified in terms of operating procedures as it has been earlier during the pandemic to allow those who derive great mental and physical health benefits from it to continue to attend, safely.

There is an ongoing online petition which over a ~3-day period has 21,000+ signatures in support of keeping the gyms open for the fully vaccinated. It has grown by 2,000 signatures alone in the past 2 hours.

<https://www.change.org/p/john-horgan-keep-bc-s-gyms-open>

Amongst my circle of acquaintances, I have also heard musings that more people would be willing to protest (in person) for this issue above any others, and the sentiment is growing stronger and stronger the longer that the government does not act on this issue.

In my view, it would be wise for the government to own up and admit their mistake and backrack the restriction on gym attendance for the fully vaccinated population.

Thank you for your time.

s.22

From: s.22
Sent: December 23, 2021 6:57 PM
To: Henry, Bonnie HLTH:EX
Subject: Gyms/Fitness Centre Closures

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Bonnie,

Do you really think that closing down these facilities is going to help people?? People who are STRUGGLING with their mental health, drug addictions, physical health?? This is going to do nothing other than create MORE problems!! Do you not see the spike in overdose? The spike is suicide? The BIGGER picture to this madness? It's is absolutely ridiculous! There is so much more going on this world then COVID-19! You guys should be ashamed by these decisions that are being made and the effect it is having on the people on this province, this country!! You guys need to make a change... this is to far!

Sincerely,

s.22

Sent from my iPhone

From: s.22
Sent: December 23, 2021 3:51 PM
To: Henry, Bonnie HLTH:EX
Subject: PLEASE KEEP GYMS OPEN

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

I don't even think you'll ever read this Dr.Bonnie, but if you do please keep gyms open, do whatever you gotta do but please don't close them down. From personal experiences I've noticed more people's mental health affected from this pandemic compared to the actual virus, the gym was one of the few things keeping me sane during these unprecedented times, and I know I speak for many others. If casinos can stay open then there is no reason gyms shouldn't be allowed to operate, I know this situation is bad for everyone but people's mental health can't be put on the back burner.

Sent from my iPhone

From: s.22
Sent: December 23, 2021 3:36 PM
To: Henry, Bonnie HLTH:EX
Subject: Dec 22,2021 Closure of Fitness Centres

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Dr. Henry,

I have been a member of^{s.22} YMCA since June 2020
I participate in numerous fitness classes during the week.

The announcement that our YMCA would be closed until January 18, 2022 has been very disappointing. The Staff informed us that there have been no incidents of COVID spread within the YMCA because of its **double-vaccinated** members, the social-distancing in place, mask-wearing throughout the facility and the sanitizing of equipment pre and post-use. Staff has worked diligently to ensure all these safety protocols were followed.

I understand that some facilities have not been following the rules laid down by the Ministry of Health, with COVID cases resulting. But for those facilities (like the YMCA) which have paid attention to what is needed to protect its membership from COVID, why are these facilities penalized along with those who have not complied?

s.22

You have allowed restaurants, movie theatres, Rogers' Arena, etc. to remain open and have penalized people who want to remain fit physically and mentally. I am hoping you will reconsider the decision to close down fitness facilities as it is tough to get outdoors to exercise with all the rain and snow.

Dr. Henry, I do understand and am thankful for all that you have done since COVID. I sure would not want to have to make these most difficult and unpopular decisions! **Please reconsider the decision to close down fitness facilities - to protect the segment of society that desire and maintain their health through exercise.**

Thank you!

s.22

From: s.22
Sent: December 23, 2021 12:34 PM
To: Henry, Bonnie HLTH:EX
Subject: BC gyms need to stay open!

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Bonnie,

There are multiple studies proving that covid transmission is LOW in gyms across BC. Not to mention with vaccine passports in place to enter a gym, the likelihood of contracting covid in the gym is minimal!
Malls can stay open, concerts can happen, sports games are happening, fast food restaurants are operating with dine in option for unvaccinated, yet the ONE PLACE people go to work on their physical and mental health has been taken away from them.

This is unjust, unfair, and COMPLETELY UNNECESSARY.

OPEN THE GYMS IN BC.

Sincerely,
s.22

From: s.22
Sent: December 23, 2021 9:45 AM
To: Dan Albas MP; Ashton.MLA, Dan LASS:EX; Minister, HLTH HLTH:EX; Henry, Bonnie HLTH:EX
Cc: tboot@summerland.ca; rbarkwill@summerland.ca; ecarlson@summerland.ca; dholmes@summerland.ca
Subject: Fwd: Provincial Health Order Update - Aquatic & Fitness Centre
Attachments: image001.gif

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Good Morning,

I am emailing because I am extremely concerned about the recent changes to the provincial passport programs.

Last night without warning swimming pools were switched from an essential service to a "luxury" that requires a vaccine passport.

s.22

As I am sure you are aware we live near multiple lakes and kids learning to swim is an essential skill that can make a difference between life and death. Youth programs that require parents to participate should be exempt from the passport rules. Parents should be exempt so they can participate in the lessons and their children can learn to swim.

I am fine if you want to exclude me from restraunts and concerts but I am pleading with you as parents please don't excludes.22 from swimming lessons.

These are taxpayer funded facilities, how is it fare to discriminate against families. Especially when cases are currently higher in the vaccinated then the unvaccinated. Also the children in these classes are all younger then 5 and can't be vaccinated at all, so how is it any different if mys.22 is in the facility unvaccinated vs if his unvaccinated parent is in the water? There is no logic to this development.

Please do something so that toddlers are not suffering and missing out.

Thank you

s.22

----- Forwarded message -----

From: **Laura McCarron** <lmccarron@summerland.ca>

Date: Thu., Dec. 23, 2021, 8:48 a.m.

Subject: RE: Provincial Health Order Update - Aquatic & Fitness Centre

To:s.22

Hello,

Thank you for your email. I have reviewed the current Provincial Health Order and parents attending Parent & Tot Swim will be required to show proof of vaccination to attend this program.

We can exempt a person from the proof of vaccine requirements only if they present the exemption certificate and ID.

Thank you,

Laura McCarron | Recreation Coordinator | Community Services



Ph: 250-494-0447

Direct Line: 250-404-4031

13205 Kelly Ave

Summerland BC V0H 1Z0

[Website](#) | [Facebook](#) | [Twitter](#)

From: s.22

Sent: Wednesday, December 22, 2021 10:20 PM

To: Recreation Website Email <recreation@summerland.ca>

Subject: Fwd: Provincial Health Order Update - Aquatic & Fitness Centre

----- Forwarded message -----

From:s.22

Date: Wed., Dec. 22, 2021, 10:18 p.m.

Subject: Re: Provincial Health Order Update - Aquatic & Fitness Centre
To: Summerland Recreation <recreation@summerland.ca>

s.22

On Wed., Dec. 22, 2021, 10:55 a.m. Summerland Recreation, <recreation@summerland.ca> wrote:

Having trouble viewing this email? [Click here](#)

Good Morning,

On December 21st, the Province of British Columbia announced new provincial health orders that will impact our facilities and programs.

Please note that this information is subject to further announcements/Orders from the Province.

Summerland Aquatic & Fitness Centre

- Fitness Centre and Sauna will be **CLOSED from Dec 23 to Jan 18.**
- Pool & Hot Tub will remain **OPEN**
- Aquatic Programming (Lane Swim, Public Swim, Swim Lessons, AquaFit, Aqua Zumba etc.) will resume as normal.

For those individuals with Health Club passes two options are available. Your pass can be extended by 27 days (the length of the closure) or we can terminate your pass and refund to your account to be used at a later date. Payment refunds are available please call the recreation department at 250-494-0447 or email recreation@summerland.ca for more information.

Community Programs (Yoga, Pilates, Qigong, etc.)

- Adult Low and High Intensity Programs will be **suspended until Jan 18th**. Classes will resume the week of January 24th.
- Children & Youth programs (Puddle Jumpers, DancePL3Y etc.) will resume as normal.

For those individuals registered in an adult low & high intensity program that is suspended until January 18th, we will be issuing a refund for the classes we had to cancel. You will not be withdrawn from the whole program, as they will resume the week of January 24th.

Summerland Arena

- Arena will remain **OPEN.**
- Public Skating, Noon Hour Hockey and Parent & Tot skates will resume with Proof of Vaccination for 12+ years.

Our Winter 2022 Recreation Guide will be updated today, Dec 22 and will be posted to the website.

If you have any questions regarding memberships for the fitness centre or program registration, please reach out to us at 250-494-0447 or recreation@summerland.ca

Thank you and Happy Holidays from Summerland Recreation

From: s.22
Sent: December 23, 2021 7:53 AM
To: Henry, Bonnie HLTH:EX
Subject: Gyms to stay open

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Dear Bonnie Henry,

The gym has been a crucial part of my day to day life in terms of mental health. Where I live it is not safe to run alone outside. My gym is an extremely safe gym that has gone above and beyond to make everyone safe. (Plexiglass between equipment, hand washing and equipment washing essentials at every station. Masks are being worn throughout the gym) some of us here the gym is our job we work extremely hard throughout the year to enter into competitions to hopefully one day get our pro card. The gym is a place of sanctuary for those that go their for self therapy. Some people go to a gym because they feel part of a family their. Going to a gym that is a 24/7 gym is locked to regular public and only assessable to members.

Please reconsider the gym it's my job my life and having it closed won't ready myself for the competition ahead and I am also speaking for many others

s.22

From: s.22
Sent: December 23, 2021 7:14 AM
To: Rice.MLA, Jennifer LASS:EX; Dix.MLA, Adrian LASS:EX; Henry, Bonnie HLTH:EX
Subject: Open the gyms

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Please sign this petition to re-open the gyms of British Columbia. You know the place people can get healthy.

<https://chnng.it/zSKsK868sB>

Thanks

s.22

From: s.22
Sent: December 22, 2021 9:25 PM
To: Dix.MLA, Adrian LASS:EX; Minister, HLTH HLTH:EX; Henry, Bonnie HLTH:EX
Subject: Concerns re Fitness Centers and Gyms

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Mr. Adrian Dix and Ms. Bonnie Henry,

I am emailing you to let you know that I am disappointed in the latest Provincial Health Orders closing gyms and fitness centers. Many British Columbians, like myself, rely on these facilities for our physical and mental health. These facilities have strict covid protocols in place and could operate at a lower capacity. There is no logic as to why shopping centers, spas, restaurants, barbers shops etc remain open and yet I cannot attend a fitness center that has proper ventilation, appropriate social distancing protocols and requires everyone in attendance to be fully vaccinated.

I have tried my best to follow all the health orders, even when I didn't agree with them. My wife and I are both fully vaccinated. I recently received my booster dose. It is getting to the point that it is becoming too onerous to follow the health orders and the consequences on mental and physical health are disproportionate to the benefit.

I respectfully request that the orders be amended to allow gyms and fitness centers to reopen with covid policies and reduced capacity limits in place. Closing all gyms and fitness centers is not a proportionate response to the recent rise in cases.

Respectfully,

s.22

Kelowna, British Columbia

s.22

From:
Sent: December 22, 2021 7:52 PM
To: Henry, Bonnie HLTH:EX
Subject: Gyms and Fitness Centers

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Hello Doctor Bonnie Henry,

I contact you in hopes that you overturn your decision about closing small and independent gyms. I am aware of the dangers of the new Covid-19 variant, but I am also aware it is much less severe than further strands. Although it does spread much easier, the safety the gyms have out in make it much safer. We are required to wipe down the things we touch and we all focus on doing a good job in hopes that the gyms stay open. It confuses me how people are able to go to a movie theatre, eat junk food, and not benefit there health, but going to the gym and getting healthier so we have a better immune system is no longer allowed. It is so very important to stay healthy in times like this, and closing the gym is a very harmful thing to do in these times. As my last point on this subject, Covid-19 has extremely bad mental health impacts on people. With many things closed these days, the gym is a wonderful way to help with mental health. Lifting weights is amazing to help relieve emotions and it has been so vital and keeping my mental health in check. Since I started going, I have felt much happier and my life has improved in so many ways. I ask of you that you please rethink your decision on closing small and independent gyms. Although I doubt it, I truly hope that you see this and I would love a response. People around B.C. are signing petitions and many people currently agree with me. Thank you for reading.

As a last note, forcing vaccines this much is not right. It breaks the Charter of Freedoms and Rights and is so wrong for a free country to be doing this. I am not anti-vaccine, nor pro-vaccine. I am simply pro choice. It is discriminatory to be not allowing certain people in certain spots just for their medical history. It is not right for me to ask a stranger if they have their flu shot and measles shot, and neither of those are required. Making the Covid-19 shot mandatory for people to go to restaurants, gyms, and more, is very discriminatory. It should not be anyones business about others medical history.

I hope you take the time to consider my points and respond.

Thank you for your time and consideration,

s.22

From: s.22
Sent: December 22, 2021 7:30 PM
To: Henry, Bonnie HLTH:EX
Subject: New Restrictions in BC - Not the Answer

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Hi Dr. Henry,

I understand the difficulty of your job and appreciate all that you've done for the province of BC.

That being said, these new restrictions are not the answer. You spent the first half of your announcement on Friday talking about how mild the symptoms are with the new variant, then you go ahead and shut everything down. We have learned from the past that lockdowns do not work - vaccines and booster shots do. If you continue at this rate we will lose more people to suicide than Covid. And don't even get me started on the negative health risks associated with shutting down gyms. This is a common cold and the risks to the general public are minimal. We live in a democracy yet for some reason the public gets no say in your restrictions? Please take my opinion into consideration as you continue to create rules that negatively impact our province.

Once again, I appreciate your hard work. I hope you understand where I am coming from.

Sincerely,

s.22

From: s.22
Sent: December 22, 2021 7:21 PM
To: OfficeofthePremier, Office PREM:EX; health.minister@bc.gov.ca; Henry, Bonnie HLTH:EX; Davies.MLA, Dan LASS:EX
Subject: Keep BC Gyms Open!

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Hello.

Throughout the COVID-19 pandemic the fitness community has followed Public Health orders without question. We have obeyed vaccination requirements, mask mandates, and reduced capacity measures. Earlier today, Health Minister Adrian Dix and Provincial Health Officer Dr. Bonnie Henry made the unilateral decision to close gyms until January 18, 2022, rather than consider alternative options.

It makes little sense why people can still be crowded into large sports arenas or movie theaters, but are not allowed to participate in socially distanced exercise in a gym. If businesses have to adopt capacity limits in order to remain open, why can't fitness centres be granted this same opportunity? Fitness centres already have the systems in place to go back to the reduced capacities from last year, including arranged bookings and distanced machines to prevent the spread of the virus. There is no reason why these practices cannot resume, especially since they are acceptable in venues with more people inside and far more opportunities for the virus to spread.

This doesn't even consider that many people in this province use fitness centres not only as a form of exercise, but also to improve their mental health. This pandemic has caused physical, financial, and emotional stress to all across the globe. People are tired. Fitness centres are one of the few places remaining where people have the opportunity to unwind and try to maintain a healthy mental state during this challenging time.

I call on Premier John Horgan, Health Minister Adrian Dix and Dr. Bonnie Henry to allow fitness centres to remain open. The decision to close fitness centres without consideration for any sort of additional options is both erroneous and a disservice to the community that has obeyed the Provincial Health orders without pause. Rather than a knee-jerk reaction, the province should work with the industry to explore alternative measures. Being healthy is our best defence against COVID-19 and it's time for our provincial government to recognize that.

s.22

s.22

From:
Sent: December 22, 2021 5:36 PM
To: Henry, Bonnie HLTH:EX
Subject: New Restrictions & Closures

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Good evening Dr. Bonnie Henry.

I am so disappointed that the Oxygen Yoga Fitness studio in North Vancouver is once again being closed down. Not because I will not have access to it but because I know there is a ^{s.22}

s.22

s.22

It is not right and it is not fair! While people in the medical field may be overwhelmed by COVID-19 those that are under restrictions of retaining their own self employment are being devastated. \$300 per week compensation for closing does not pay for the rent and food on her table. She is extremely hard working and does her best each and every day to improve all our lives that attend Oxygen Yoga Fitness.

If you are going to insist upon these new restrictions, then please also consider the damage that you are creating in demanding these closures. ^{s.22}

s.22

I am also asking you to consider what your Health Authority did not do and that was to insist that everyone get vaccinated or alternatively stand at the back of the line for medical treatment should they require it once infected. Those that are deemed by medical professionals as not suitable for vaccination are the exception!

The large majority have towed the line for the BC Medical profession for a year and a half doing what you have asked of us. There are many other people dying because of those that would not get vaccinated and ended up in ICU's and delaying much needed surgeries. At this point, I personally am twice vaccinated and will get a booster when suggested by you. I will simply ask you in the meanwhile to take care of the people that take care of so many others that will do whatever they can not to further burden the healthcare industry.

Please consider these people equally when making these restrictions once again that so many can no longer afford. Thank you!

Sincerely,

s.22

From: s.22
Sent: December 22, 2021 5:23 PM
To: Henry, Bonnie HLTH:EX
Cc: s.22
Subject: Fitness gyms

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Dear Dr Henry,
s.22

s.22

the gym full.

Masks & strong sanitary protocols are in place.

I, and many other seniors, need this facility to stay open.

Please remove this type of facility from the current closures.

Thank you,

s.22

There is usually no more than 25% of

From: s.22
Sent: December 22, 2021 5:20 PM
To: Henry, Bonnie HLTH:EX
Cc: tonglouie@gv.ymca.ca
Subject: Dec. 22. 2021 Closure of Fitness Centres

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Dr. Henry,
s.22

Because of the appearance of COVID in March 2020, the YMCA was closed for 3 months - from March to May. When the YMCA reopened June 2020, their protocols for controlling the spread of COVID were strongly in place and reinforced, i.e. social-distancing, mask-wearing throughout the facility and sanitizing equipment pre and post-use. Staff worked extremely hard every hour sanitizing all equipment. Fitness classes resumed with dedicated volunteer instructors; members had to reserve for classes and staff checked members in for each class. Once vaccinations became available early 2021, only members who availed themselves of getting vaccinated were allowed to use the YMCA facilities. Non-vaccinated members were not allowed in the YMCA! Staff made regular patrols of the Fitness Floor, tactfully reminding all vaccinated members about these protocols.

Yesterday members and YMCA staff were shocked, dismayed and extremely disappointed to learn that as of midnight Dec. 22, 2021, our local YMCA would be closed until Jan. 18, 2022. Staff informed us that there have been no incidents of COVID spread within the YMCA because of its **double-vaccinated** members. This is because of how hard staff have worked to protect the membership from the ravages of COVID and the members who abide by the rules.

It is difficult to understand why every fitness facility must now be closed, given our obedience of all the rules to keep us safe. I understand that some facilities have not been following the rules laid down by the Ministry of Health, with COVID cases resulting. But for those facilities (like the YMCA) which have paid attention to what is needed to protect its membership from COVID, why are these facilities penalized along with those who have not complied?

Working out is not simply for physical health, but also mental health. You have allowed restaurants, movie theatres, Rogers' Arena, etc. to remain open. There is a huge disconnect for me of why those of us who want to remain fit physically and mentally are now penalized, while the population who attend theatres, restaurants, sporting events are allowed to still attend?

Dr. Henry, I am so thankful for all that you have done since March 2020 to protect BC's population. How stressful and emotionally upsetting it has been for you to make these most difficult decisions! **Please re-consider the decision to close down fitness facilities - to protect the segment of society that desire and maintain their health through exercise.**

Thank you Dr. Bonnie! Stay safe and well! BC needs you!

s.22

From: Mark Preston-Horin <mph@workability.ca>
Sent: December 22, 2021 5:06 PM
To: Minister, HLTH HLTH:EX; Henry, Bonnie HLTH:EX
Subject: Fitness Facility Closures - Ministry Order

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Dear Health Leadership,

Despite appreciating the intentions of the latest restrictions, I must formally bring to your attention that the decision to close gyms and fitness facilities may reap disastrous consequences.

Imperical evidence supports the adoption of fitness programing as a healthy outlet for a number of physical and mental health conditions. Research indicates that structuring fitness into a regular schedule is complementary to many sucessful multidisciplinary treatments.

Acute and ongoing physical rehabilitation following injury/surgery is an obvious case, as are regimes to reduce and manage the effects of cardiovascular disease and obesity.

Many individuals are prescribed exercise as complementary treatment for addiction and eating disorder recovery, as well as PTSD and emotional disregulation (and anger management). Exercise makes good medicine.

In my professional opinion, the decision to close these treatment facilities is short-sighted and I ask you to reconsider this aspect of the restrictions as they knowingly cause harm.

Kind regards,

Mark

Mark Preston-Horin
Tel (CA): [250 886 6999](tel:2508866999)
Tel (US): [206 669 9344](tel:2066699344)
Email: mph@workability.ca
Web: www.workability.ca

Communicate. Collaborate. Resolve.

From: s.22
Sent: December 22, 2021 4:47 PM
To: Henry, Bonnie HLTH:EX
Subject: Gyms and fitness centres

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Dear Doctor Henry,

While I understand why the restrictions are back in place, I believe that gyms and fitness centres should be kept open. You've said yourself that it is for mental health and physical activity. It's a stressful time already and physical activity is one way to help reduce it.

Please consider reopening the gyms but at half capacity. People need this!

Thank you

s.22

From: s.22
Sent: December 22, 2021 4:46 PM
To: Henry, Bonnie HLTH:EX
Subject: Clarification on new provincial restrictions

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Dear Dr. Henry,

s.22

I recognize the importance of implementing new CoVid restrictions that were announced yesterday and are to be put into place tonight and remain until Jan. 18th.

I am specifically concerned with yesterday's blanket announcement of the shutting of gyms and fitness areas.

I belong to a family recreation club, the Arbutus Club. No one can enter the club without having shown their Vaccination card and ID.

Last time you put in gym and fitness area restrictions, the Arbutus Club fitness area was exempt because of our well managed registration system only allowing few members at a time with strict protocols in place. It was a very successful program supported by the Public Health Department.

For the health and wellness of our members, I am requesting you review your edict for our workout areas. It is curious why people can play squash and tennis without masks, yet others can't do strength and stretching exercises with masks on. For aerobics, there are full length plastic partitions between equipment. One must sanitize before and after using the equipment.

The CEO of the club, Brent Ellington has also written to you.

I know you are ridiculously busy, however a positive response would be a wonderful Christmas gift which will help to keep many people, including a lot of seniors, in a healthy physical and mental state.

I do hope you will be able to take some restorative times over the Christmas holidays.

Merry Christmas Dr. Bonnie,

s.22

Sent from my iPad

From: s.22
Sent: December 22, 2021 4:45 PM
To: Henry, Bonnie HLTH:EX; Minister, HLTH HLTH:EX
Subject: Fitness Facility Closures

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

I am writing to ask that gyms be kept open in BC, WITH COMPROMISES/CONDITIONS. Please do not close gyms completely and entirely.

This is a health crisis and anything we can do to keep healthy activities and healthy businesses open, we should. I understand there have been transmissions in gyms, but there are also transmissions in restaurants, at workplaces, at the casinos, and frankly, transmissions in a lot of places where activities continue to be allowed under the new restrictions. This does not make sense. Why are gyms being singled out and forced to close when it is a place of promoting health and not just physical health, but also psycho-emotional health. Anything we can do to improve the mental and physical health of British Columbians during this fifth wave is absolutely critical and necessary.

I am willing to make the following concessions to a place where only fully vaccinated people can visit:

1. Go back to making appointments for the gym, or capacity control, time limits, or line-ups.
2. Masks required the whole time.
3. No socialization.
4. No locker use.
5. Constant sanitization.
6. Physical distanced.

I know friends who own gyms and their operating expenses are \$40,000/month. These costs continue to mount and without membership revenues, there is no money to pay for those ongoing expenses. I am happy to support my gyms and continue to pay my membership fees, but I also need the gym, and to that end, I am willing to make sacrifices and concessions, in order for them to remain open.

From: s.22
Sent: December 22, 2021 4:39 PM
To: Minister, HLTH HLTH:EX; Henry, Bonnie HLTH:EX
Cc: Chen.MLA, Katrina LASS:EX
Subject: PHO Gym Closure Consideration

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Hello Minister Dix and Dr. Bonnie Henry,

I am writing to you as a citizen of Burnaby, BC. First, I want to say thank you for all the work, blood, sweat, and tears you have both poured into managing the pandemic the past 2 years keeping British Columbians safe and healthy.

I want you to know that I agree with most of the recent PHO COVID measures put in place except for one, the gym closures.

Here are the reasons why I think gyms should remain open and how they can be kept safe with additional measures.

Why I think gyms should remain open:

- We are entering the coldest weeks BC has ever experienced in a while making outdoor activities less safe and accessible to all
- Months of December to January are the darkest months in BC and many depend on indoor spaces to exercise outside of work hours
- Many British Columbians need exercise to maintain their mental and physical well-being
- Regular exercise improves the quality of life and reduces the risk of diseases - that you already know, but still worth mentioning

Suggested measures to keep gym environments safe:

- Mask Mandatory with no exceptions
- Decreased Capacity
- Limiting capacity to all group fitness sessions
- Allowing personal training only
- Wiping down equipment before and after use
- Maintain Vaccination Card Requirement

s.22

For the sake of all our sanity, I hope you'll consider my plea and amend the measures around gym usage.

Thank you,

s.22

From: s.22
Sent: December 22, 2021 3:29 PM
To: Minister, HLTH HLTH:EX; Henry, Bonnie HLTH:EX
Subject: Please do not close gyms completely and entirely

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

I am writing to ask that gyms be kept open in BC, WITH COMPROMISES/CONDITIONS. Please do not close gyms completely and entirely. This is a health crisis and anything we can do to keep healthy activities and healthy businesses open, we should. I understand there have been transmissions in gyms, but there are also transmissions in restaurants, at workplaces, at the casinos, and frankly, transmissions in a lot of places where activities continue to be allowed under the new restrictions. This does not make sense. Why are gyms being singled out and forced to close when it is a place of promoting health and not just physical health, but also psycho-emotional health. Anything we can do to improve the mental and physical health of British Columbians during this fifth wave is absolutely critical and necessary. I am willing to make the following concessions to a place where only fully vaccinated people can visit:

1. Go back to making appointments for the gym, or capacity control, time limits, or line-ups.
2. Only allow those with their booster shots to go.
3. Masks required the whole time.
4. No socialization.
5. No locker use.
6. Constant sanitization.
7. Physical distanced. I know friends who own gyms and their operating expenses are \$40,000/month. These costs continue to mount and without membership revenues, there is no money to pay for those ongoing expenses. I am happy to support my gyms and continue to pay my membership fees, but I also need the gym, and to that end, I am willing to make sacrifices and concessions, in order for them to remain open.

From: s.22
Sent: December 22, 2021 3:21 PM
To: Minister, HLTH HLTH:EX; Henry, Bonnie HLTH:EX
Subject: Casinos Open - Fitness Centres Closed??

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Hello....could you help me to understand why I CANNOT go to the gym and work out and be healthy but I CAN go to a casino and drink and gamble??? Please explain how this new restriction is helpful to those trying to maintain a healthy lifestyle.

Thank you

s.22

s.22

From:
Sent: December 22, 2021 2:50 PM
To: Minister, HLTH HLTH:EX; Henry, Bonnie HLTH:EX
Subject: Please keep gyms open

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Dear Minister Dix and Dr. Henry:

I am writing to ask that gyms be kept open in BC, WITH COMPROMISES/CONDITIONS. Please do not close gyms completely and entirely.

This is a health crisis and anything we can do to keep healthy activities and healthy businesses open, we should. I understand there have been transmissions in gyms, but there are also transmissions in restaurants, at workplaces, at the casinos, and frankly, transmissions in a lot of places where activities continue to be allowed under the new restrictions. This does not make sense. Why are gyms being singled out and forced to close when it is a place of promoting health and not just physical health, but also psycho-emotional health. Anything we can do to improve the mental and physical health of British Columbians during this fifth wave is absolutely critical and necessary.

I am willing to make the following concessions to a place where only fully vaccinated people can visit:

1. Go back to making appointments for the gym, or capacity control, time limits, or line-ups.
2. Only allow those with their booster shots to go.
3. Masks required the whole time.
4. No socialization.
5. No locker use.
6. Constant sanitization.
7. Physical distanced.

I know friends who own gyms and their operating expenses are \$40,000/month. These costs continue to mount and without membership revenues, there is no money to pay for those ongoing expenses. I am happy to support my gyms and continue to pay my membership fees, but I also need the gym, and to that end, I am willing to make sacrifices and concessions, in order for them to remain open.

s.22

From: s.22
Sent: December 22, 2021 2:30 PM
To: Henry, Bonnie HLTH:EX
Subject: Concerns about the new restrictions and it's impact on British Columbians health.

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Good Afternoon,

The recent restrictions placed on gyms was a rather surprising decision, while certainly meditated and difficult to make, I have some concerns. Earlier this year there were restrictions placed on gyms to have limited capacity and reserved spots to ensure efficient tracking of gym patrons and to maximize physical distancing. This was during a time of hospital overflow and terrible stress that was being placed on the medical system due to the Delta variant. We are now faced with Omicron which stands to be further studied, and while less sever in it's symptoms compared to the past few variants of coronavirus, we should stay vigilant.

However, this new restriction has a brute force approach of completely halting access to fitness facilities. In this cold and aggressive winter when people are the least likely to go outside for a run, or to get some cardiovascular endurance to stay healthy, you close the gyms. As an enthusiastic biology student, I find this extremely concerning when it comes to the protection we as BC people get in terms of immune system strength. A vital and crucial role in maintaining a strong immune system is keeping blood sugar levels healthy so that hyperglycemia does not impact immune function, to maintain a strong and healthy cardiovascular system for efficient recovery and blood flow, and for the body to flush out toxins and radicals which accumulate due to a lack of sweating and activity. These are very evidence based and solid facts when it comes to understanding the immune system. How are British Columbians expected to stay healthy in a season like this, when stress levels can rise even more, with the added salt in the wound of those who are trying to better their physical and mental fitness through exercise? Some of us are not so affluent and cannot afford a home gym or do not even have the space. Some of us have one thing to look forward to in life which is going to the gym and bettering ourselves, some of us are on the brink of suicide, and I believe this restriction placed on the gyms is not a decision made in the best efforts to protect health, but rather out of fear.

Please Dr. Bonnie, negotiate an effort to have some form of reservation system and limited capacity within gyms, this decision is not something we can handle, it's going to push some people over the edge for certain.

s.22

From: Kim, Jong [NH] <Jong.Kim@northernhealth.ca>
Sent: December 22, 2021 1:52 PM
To: Henry, Bonnie HLTH:EX; Emerson, Brian P HLTH:EX
Cc: XT:Robbestad, Melanie HLTH:IN
Subject: Provincial and regional event and gathering order update
Attachments: PHO- Class Order Gatherings and Events (COVID-19) Dec. 22 final.pdf; Food and Liquor Serving Premises Order Dec. 22 final.pdf

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Bonnie and Brian, thanks for the update on the provincial order and measures. I will update the NH order this week.

I plan to keep some additional restrictions in NH order (ie. worship services where we require vaccination or no in-person gathering, and outside event's capacity limit). Otherwise, we will align with the provincial updates (ie. no inside events and closure of gyms and fitness centres). I will keep the regional order's Jan 31 as overall expiration date, and will plan for next update before Jan 18 with the change in provincially effective restrictions.

Brian, could you share word documents version of the PHO order? That will really help us updating NH order and align with the provincial orders.

Please let me know any question or comment. Thanks so much for your help and support.

Jong

Dr. Jong Kim, MD, MSc, FRCPC
Chief Medical Health Officer
Northern Health

Tel: 250-261-7235
Cell: s.22

From: s.22
Sent: December 22, 2021 1:15 PM
To: Henry, Bonnie HLTH:EX
Subject: Fitness Center Closures

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Good afternoon,

I am a British Columbia resident reaching out to you about the new PHO dated December 21, 2021, which orders gyms, fitness centers, and dance studios to be closed.

I understand that the Provincial government is trying its best in navigating through COVID; however, it seems counterintuitive that malls, indoor dining, and other indoor activities are to remain open and not gym and fitness centers. Fitness centers are an indoor place where people can go to better their physical and mental health especially in the winter where outside exercise is limited. Perhaps a better solution is reducing the capacity to 50% or less instead of closing them completely.

These facilities already have the infrastructure for limited capacity as well as requiring scheduled usage. Keeping these facilities open should be prioritized over the commercialism of malls and other indoor activities as they are beneficial to the health and wellness of British Columbians.

I have included a link below to an ongoing petition that has currently been signed by over 2,000 British Columbians. Health and wellness should not be sacrificed as a solution to a health crisis when exercise is beneficial to building a strong immune system.

<https://www.change.org/p/john-horgan-keep-bc-s-gyms-open>

Best Regards,

s.22

From: s.22
Sent: December 22, 2021 12:55 PM
To: Henry, Bonnie HLTH:EX
Subject: Gym is closed but swimming pool and skating ring are opened

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Dear Dr. Henry,

s.22

at Seaparc Recreational facility in Sooke.

Today is the last day that the gym is opened - until at least January 18.

Upon registering at the reception, the attendant told me: "You know that today is the last day you can use the weight room. But you can swim if you wish."

And so, I learned that the swimming pool will remain open. Also learned that aquafit classes will continue to be offered. And if the swimming pool is opened, it means that the change room (and showers) will also be available to users of the pool.

And I learned that the skating ring will remain open to play ice hockey. And this also means that the change room (and showers) will be available to the 25 or so players.

It is a mystery that the weight room will be closed while the swimming pool and the skating ring will remain open. More than a mystery. It seems to make no sense. Is there really empirical evidence showing that a gym is a riskier environment than a swimming pool (offering aquafit classes) or a ice hockey ring (with players sitting in close proximity to one another)? If anything, gym use is a much more individual activity than at least ice hockey and aquafit classes (why would aquafit classes be deemed safer than fitness classes?).

For gym use, the rules should simply be as they have been in recent weeks and indeed were for most of 2020 and 2021:

- Only full vaccinated people are allowed in the gym (as it has indeed been the case since the fall of 2021);
- Masks must be used at all times (as it was the case for most of 2020 and 2021 - this requirement was relaxed in the fall of 2021 requiring face mask only when moving from one equipment to another; this requirement could easily be re-instated);
- Drop-ins are not allowed, and users must register 24-hour in advance to use the gym for any given 90-minute time slot (as it was the case for most of 2020 and 2021 - this requirement was relaxed in the fall of 2021 and drop-ins became allowed; this requirement could easily be re-instated);
- Capacity constraint: No more than 1 user per 30 square meter is allowed in the gym in any given time slot. Since the gym at Seaparc is 334 square meter, no more than 10 users are allowed in the gym in any given time slot (this capacity constraint was indeed in place for most of 2020 and 2021 and could easily be re-instated);
- Between two gym time slots, all equipment is sanitized by Seaparc staff.

One fails to see how gym use with the above conditions would be any riskier than the use of any swimming pool or skating ring.

For your consideration.

Best regards,

s.22

From: BC IGR HLTH:EX <BCIGR@gov.bc.ca>
Sent: December 22, 2021 12:35 PM
To: Henry, Bonnie HLTH:EX
Cc: Thompson, Laurel HLTH:EX
Subject: E-Binder for FPT Deputy Ministers of Health Meeting Today at 1:00
Attachments: 2021 12 22_FPT DM's of Health e-binder.pdf

Good afternoon:

Please find attached the e-binder for the FPT Deputy Ministers of Health Meeting today at 1:00 pm BC time.

Many thanks,



Erin Peterson (*she/her*), Project Analyst
Intergovernmental Relations
Office of the Deputy Minister
Ministry of Health

Phone: 236-478-1409

Email: Erin.Peterson@gov.bc.ca

I gratefully acknowledge that I am living and working on the traditional territories of the Lekwungen speaking peoples of the Songhees and Esquimalt Nations.

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From: s.22
Sent: December 22, 2021 12:00 PM
To: Henry, Bonnie HLTH:EX; Walker, Adam LASS:EX; Dix.MLA, Adrian LASS:EX; Horgan.MLA, John LASS:EX
Cc: edit@pqbnew.com; dobee@timescolonist.com
Subject: Fwd: Health Orders and double/triple vaccinated

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Please see correspondence sent earlier this morning to the Health Minister's Office, Hon Adrian Dix.

I am a tripled vaccinated citizen, and my whole family is double vaccinated, including my children.

s.22

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----- Forwarded message -----

From: s.22
Date: Wed, Dec 22, 2021 at 7:01 AM
Subject: Health Orders and double/triple vaccinated
To: <HLTH.Minister@gov.bc.ca>

Honorable Minister Dix,

I am sure this email will fall on deaf ears, but I am obligated to write it on behalf of those around me and my family that are fully vaccinated and suffering mentally from the removal of their ability to participate in healthy fitness activities.

We are a healthy, active family, and so are our friends. The current Health Order closes our pools and gyms, all of which you need to be double vaccinated to attend. We are seeing a real contradiction in the issuing of this Order, when malls and movie theaters remain open. Last night, I sat in a movie theater with 100 plus people, all unmasked, in a closed room with very little ventilation, for 3 hours. I also went to the mall, mingled with about 500 vaccinated and unvaccinated people, yet the Yoga Studio that I go too which requires everyone to be fully vaccinated, and can only have 15 people in a class (and most times its just 10 or less of us) is shut down. My pool is closed, my masters swim team is canceled. But liquor stores, pot shops remain open and you can enter unvaccinated. The Malls, where hundreds of people are interacting (the food courts don't require masks) are open. This makes ABSOLUTELY no sense, and I would argue your Ministry is creating more harm to the public under this new Order.

I am asking that your Ministry and Dr. Bonnie Henry reconsider this current Order, and either shut everything down, including Theaters, retail stores, Malls, restaurants etc, or go back to two days ago, when fully

vaccinated people and the businesses that required only entry of fully vaccinated continue to operate. It makes no sense for fully vaccinated people and businesses to suffer like this.

Regards,

s.22

The content of this email is confidential. Please do not copy, forward, or alter without written consent. If you have received this email in error, please delete and notify sender.

From: Emerson, Brian P HLTH:EX <Brian.Emerson@gov.bc.ca>
Sent: December 22, 2021 11:23 AM
To: Henry, Bonnie HLTH:EX
Subject: RE: Climbing Gym Closures?

It would be a sport and allowed to continue.

Thanks.

Brian

Dr. Brian P. Emerson, Deputy Provincial Health Officer
BC Ministry of Health, PO Box 9648 Stn Prov Govt, Victoria, BC V8W 9P1
T 250.952.1701 C^{s.17} F. 250.952. 1713 brian.emerson@gov.bc.ca

From: Henry, Bonnie HLTH:EX <Bonnie.Henry@gov.bc.ca>
Sent: December 22, 2021 11:22 AM
To: Emerson, Brian P HLTH:EX <Brian.Emerson@gov.bc.ca>
Subject: FW: Climbing Gym Closures?

Where did we put rock climbing last time? Sport?

*Dr Bonnie Henry
Provincial Health Officer
Office of the PHO
Ministry of Health
Mailing address:
PO Box 9648, STN PROV GOVT
Victoria, BC
V8W 9P4*

I gratefully acknowledge that I live and work on the traditional unceded territory of the Lekwungen Peoples, specifically the Songhees and Esquimalt First Nations. Hay'sxw'qu Si'em

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From: On The Rocks Climbing Gym On The Rocks Climbing Gym <rockgym@telus.net>
Sent: December 22, 2021 9:29 AM
To: Henry, Bonnie HLTH:EX <Bonnie.Henry@gov.bc.ca>; MacKinnon, Charlene <Charlene.MacKinnon@viha.ca>; HPES.Nanaimo@viha.ca; HLTH HLBC HealthLinkBC HLBC:EX <HealthLinkBC@gov.bc.ca>
Subject: Climbing Gym Closures?

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Dear PHO & Public Health Authorities,

I am contacting you to seek clarification with regard to the latest set of restrictions, coming into effect at the close of day, Wednesday 22nd December.

I own an indoor rock climbing facility and since March 2020, climbing gyms have led the way and been at the forefront in regards to COVID safety.

Climbing is all about risk mitigation...and my business - On The Rocks Climbing Gym - implemented structures and submitted COVID Action plans to you and other climbing gyms, long before they were requested by the Health Authorities.

We regularly adjusted our systems and plans to follow the changing mandates and protocols in order to keep my staff and clients safe.

As an individual who's been involved with coaching and sports most of my life, I, like you, understand the benefits of taking part in regular exercise.

Not just the physical benefits but the mental and social rewards. In the past On The Rocks has worked closely with special needs climbers and the local John Howard Society that runs 'Youth At Risk' programs.

Climbing develops trust and communication. It requires and augments problem solving skills and regular physical activity has been shown to have a number of brain benefits with reference to Neuroplasticity. Research suggests that regular exercise helps prevent neuron losses in key areas of the hippocampus, a part of the brain involved in memory and other functions.

Many of the local climbing community are professionals, Dr's, Nurses, Care Workers, Teachers etc. They have very stressful occupations and take part in this sport and use my facility to decompress. I am an advocate for PTSD and climbing/exercise is for many an **essential service**.

Often over the past two years small businesses have had to deal with and bear the brunt of angry and frustrated elements of the public. These confrontations could have been alleviated if the information distributed had been succinct. We have, on many occasions, been left with no support and required to fill in the 'grey areas'. A recent example - QR Codes/Vaccine Passports. Out of Province individuals who do not possess a QR code. We found ourselves in an awkward position and allowed individuals into the facility despite not knowing the legitimacy of these documents?

Again, the recent mandate does not make things clear...? Quote from BC Health Authority website.

Gyms and fitness centres

Adult gyms, fitness centres and dance studios are closed

Are 'Youth' exempt from this? Can we open our doors to climbers under 19 year olds?

As someone who has followed strict protocols, it is hugely frustrating to be told to close my business again, when individuals can travel abroad, go to a hockey game, congregate in malls, liquor stores etc....

Also there has been no mention of financial compensation?

Considering what I have referred to in this correspondence, I am requesting and urging you to reconsider the closure of climbing gyms/fitness centers. Or offer clear and concise policies and procedures that we, small business owners and the general public can fully understand and adhere to.

Regards, Ian D Graham

'Exercise is an essential service'

From: s.22
Sent: December 22, 2021 11:10 AM
To: Henry, Bonnie HLTH:EX

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Hi Bonnie I am a 16 year old student from Kelowna bc. I truly am so confused on why the gyms are closing! You are ruining so many peoples lives. Closing gyms at this type of year is gonna have a very negative impact on 1000s of people. I am stunned on how you are taking care of this situation, I do not understand the logic behind this new public health measures. As a vaccinated individual I can attend an event, yet I cannot go to the gym? And the public pools are still opened and you don't need to be vaccinated to go! There is no logic to your actions. At the gym I wear my mask, don't talk to anyone, I am fully vaxxed and your closing the gyms? I am sick of the way you guys are handling things. This is enough you are ruining our country, our health. You are not making things better, by doing the exact same thing over and over again thinking something will change, cause guess what IT WONT. So please reconsider this decision, because this decision is reckless.

Merry Christmas!

From: s.22
Sent: December 22, 2021 11:03 AM
To: Henry, Bonnie HLTH:EX
Subject: Gyms and fitness centers CLOSED???

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

I am personally disgusted with how COVID is being managed by incompetent decision makers in healthcare. Your advisors ONLY and you've caused more harm to the people of BC by your irrational incompetent decision making than good.

You've also allowed the media to fear monger, misreporting, (not reporting all the data) only the information that slants the narrative to the "dramatic" side to make the story much more fearfully impactful. Reporters don't have a clue how to interpret COVID CDC data and you are not presenting the full picture. COVID has ~98% survival rate. A ~2% mortality risk.

Unfortunately, COVID impacts the vulnerable; ~75% over the age of 65, ~21% 45 to 64 and 4.1% under the age of 4 and mostly with underlying comorbidities. That's unfortunate for those demographics and plain sad. Influenza also claims these poor souls, as do other diseases. Just another sad fact.

The young, the healthy and workable people are being hamstrung once again by poor decisions by healthcare workers who only view the world through their narrow lens.

You are not leaders, your health care workers unable to view the world through appropriate wider leadership lenses.

What's the rationale behind closing fitness clubs? They are being managed appropriately; people are following the "rules" while exercising, at least where I work out, Club Sixteen Tsawwassen.

My reason that I depend on gyms, I am at risk for cardiovascular disease and now you've removed my only vehicle right now to maintain proper cardiovascular health for me as luckily, I am not in the vulnerable demographic, yet. But you are helping me get there!

Where's the data that supports the responsible COVID adult health clubs have created outbreaks or become hot spots?

What, one children's dance club in Chilliwack..... Pretty weak to make the decision to shut every adult gym down. Remember, you are making poor decisions which impact on intelligent adults, not children.

The day may come where these business owners pursue a class action lawsuit against you personally and I think they'd win, and who wouldn't support it?

If you are going to shut a business down, you better have audited the business and proved non-compliance to COVID prevention measures and verified COVID cases have resulted from said business otherwise you are negligent and causing undue harm and suffering to the business operating responsibly and their patrons.

Where's the evidence?

You may someday be called to task on your shot-gun approach to managing COVID without the evidence to do so. That puts you at risk.

Please start behaving responsibility, make data and evidence driven decisions and not politically driven decisions. Your actions affect a lot of responsible intelligent people.

Respectfully,

s.22

From: s.22
Sent: December 22, 2021 10:59 AM
To: Henry, Bonnie HLTH:EX
Subject: Keep the gyms open please!

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Hello mam
Hope you're doing good
But we're not! Why gyms are closed?
We put the mask all the time in the gym.

We are told to get vaccinated because the vaccine
work. Then we had both the vaccines!

It's not fair that we can go to swimming, movie
theatre, bowling etc where we sitting beside the
random stranger.

But we can't go to gym where
people build immunity, mental and physical
strength so we can fight with any disease. And
on top of it it's holidays and it's snowing and
raining everyday we can't even go for walk
outside! People just can overthink and
depressed.

It's our humble request please keep the gyms
open. Just make it as before that we can book
an appointment with gym and then we can go
on our time.

Thank you so much!

From: s.22
Sent: December 22, 2021 10:28 AM
To: Henry, Bonnie HLTH:EX; Dix.MLA, Adrian LASS:EX; Robinson.MLA, Selina LASS:EX
Subject: Please reconsider the decision to close gyms and fitness centres

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

To: Dr. Bonnie Henry, Hon. Adrian Dix, Hon. Selina Robinson
From: Bev King, Coquitlam

s.22

People want and need to use their workout facilities. When the privilege is taken away, they suffer, both mentally and physically. Please reconsider and keep the facilities open, with adjustments if deemed necessary.

There are consequences for all decisions. The cost (depression, suicide, lethargy, feelings of hopelessness, bad habits that can lead to addictions, and so on) for this decision may not outweigh the benefits (which many people are very unclear on).

Thank you for your consideration.

From: s.22
Sent: December 22, 2021 10:25 AM
To: Rice.MLA, Jennifer LASS:EX; Dix.MLA, Adrian LASS:EX; Henry, Bonnie HLTH:EX
Subject: Open up the gyms

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Gyms are places people can improve their health both mental and physically but yet you close them down. This strain is not severe but yet you panic. Peoples mental health has been deteriorating so much over the course of this pandemic and you close gyms. I can still go to a mall and be shoulder to shoulder with other shoppers yet I can got improve my physical well being and at the same time helping give my body a better immune system. You're decisions are no longer rational. Open the gyms back up.

s.22

From: s.22
Sent: December 22, 2021 8:38 AM
To: Health, HLTH HLTH:EX; Minister, HLTH HLTH:EX; Henry, Bonnie HLTH:EX; Emerson, Brian P HLTH:EX; Martin.lavoie@fraserhealth.ca
Subject: Mental Health Crisis - KEEP GYMS OPEN

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Dear health department personnel,

As health department employees, I sincerely hope most of you exercise and workout regularly, so I'm sure you know personally the irrefutable benefits of regular exercise and its ability to help mitigate the constant stress and pressures I'm sure you feel from your current jobs.

Weight training in specific, regulates insulin, lowers inflammation, improves sleep and mood, all of which contribute to a **stronger immune system** and stave of disease.

<https://globalnews.ca/news/3513498/8-reasons-why-weight-training-is-incredible-for-your-health/>

Not to mention the incredible **mental health** benefits associated with working out; a lifeline during this pandemic, dark rainy winters and prolonged separation of families and friends due to travel restrictions.

Closing gyms yet keeping non-essentially services open such as restaurants, concerts, large sporting events, casinos??? and bars (alcohol significantly degrades immune response and regenerative sleep), is illogical and will increase the severity of the current mental and physical health crisis we are in and lead to suicides.

Furthermore, people working out at gyms are:

- Spaced apart
- Working at their own private weight station
- Have to be vaccinated to enter
- Wear masks except when at their workout station (exactly like masks off whilst eating/drinking at bars & restaurants except there is no one directly opposite or next to them talking and spluttering food and saliva)
- Everyone sanitizer wipes their equipment after use + gym employees regularly do laps of the gym and spray disinfectant over the equipment.
- The gym has high quality air filtration systems that most pubs and restaurants do not.
- Some gyms are 24/7 therefore people are spread out throughout the day and night vs hospitality venues operating mainly during peak times.
- Building self-esteem and relieving stress/depression caused by lockdowns, the pandemic and the lack of hope for the future

These are all significantly valid reasons to KEEP GYMS OPEN during this time of need and should be classified as an essential health service.

Please reconsider your decision to close gyms, not everyone has the luxury of space and money to set up their own home gym, especially in expensive areas such as Vancouver.

All the best,
s.22

From: s.22
Sent: December 22, 2021 8:29 AM
To: Henry, Bonnie HLTH:EX
Subject: Closure of Gyms

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Dr. Henry,

I am absolutely dismayed at the fact that gyms are closed until mid January. I am a fully vaccinated British Columbian who has abided by all your health orders and continue to do so.s.22

s.22

Only fully vaccinated individuals can attend the gym, there's provisions to protect everyone, and I don't understand why they are being shut down at this point. I have spoken to friends and colleagues and no one is understanding why this decision was made.

I am asking you to reconsider this decision and not wait further. People like me need this stress release, we need it for our mental health and especially during the holidays, when not everyone is in the Christmas spirits.s.22

s.22

I fully support my government, and I find this decision completely unreasonable. I understand having restrictions that make sense, but this one certainly doesn't, and there is no support for it from the people I have spoken with, including myself.

Thank you for your time.

s.22

Sent from my iPad

From: s.22
Sent: December 22, 2021 8:21 AM
To: Henry, Bonnie HLTH:EX
Subject: Keep the gyms open please!

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Hello mam

Hope you're doing good

But we're not! Why gyms are closed?

We put the mask all the time in the gym. We are told to get vaccinated because the vaccine work. Then we had both the vaccines!

It's not fair that we can go to swimming, movie theatre, bowling etc where we sitting beside the random stranger. But we can't go to gym where people build immunity, mental and physical strength so we can fight with any disease. And on top of it it's holidays and it's snowing and raining everyday we can't even go for walk outside! People just can overthink and depressed.

It's our humble request please keep the gyms open. Just make it as before that we can book an appointment with gym and then we can go on our time.

Thank you so much!

From: Harmony Yoga <harmonyyogaduncan@gmail.com>
Sent: December 22, 2021 7:20 AM
To: Henry, Bonnie HLTH:EX; Dix.MLA, Adrian LASS:EX; letters@timescolonist.com; Horgan.MLA, John LASS:EX; Furstenau.MLA, Sonia LASS:EX; Rachel Dean; Fiji McAlpine; editor@cowichannewsleader.com; Judy Lamontagne; Stephanie Cebulka; Sachiko Walton; Rhonda Fergason; Shelley D'Amico; Shelley DAmico
Subject: Fwd: Letter to editor
Attachments: Untitled document.pdf

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

HarmonyYoga Center
Yoga and Wellness for Every Body
103-360 Duncan Street,
Duncan BC V9L 3W4
<http://www.harmonyyogaduncan.com>
harmonyyogaduncan@gmail.com
phone: 250-597-1919

From: s.22
Sent: December 21, 2021 10:03 PM
To: Henry, Bonnie HLTH:EX
Subject: KEEP GYMS OPEN

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Dr. Henry,

The gym has been my sanctuary and weightlifting has been the one thing keeping me sane and healthy throughout the last two years. I can't go through this again. KEEP GYMS OPEN ON DEC 23!!!!

s.22

--

s.22

From: Dean Neuls <deann@essentialsofathletics.com>
Sent: December 21, 2021 9:11 PM
To: Dix.MLA, Adrian LASS:EX; niki.sharma@bcndp.ca; OfficeofthePremier, Office PREM:EX; vpalmer@postmedia.com; Henry, Bonnie HLTH:EX; Minister, PSSG PSSG:EX; Alexis, Pam LASS:EX; Anderson, Brittny LASS:EX; Ashton.MLA, Dan LASS:EX; Babchuk, Michele LASS:EX; Bailey, Brenda LASS:EX; Bains.MLA, Harry LASS:EX; Banman.MLA, Bruce LASS:EX; Beare.MLA, Lisa LASS:EX; Begg.MLA, Garry LASS:EX; Bond.MLA, Shirley LASS:EX; Bernier.MLA, Mike LASS:EX; Brar.MLA, Jagrup LASS:EX; Cadieux.MLA, Stephanie LASS:EX; Chandra Herbert.MLA, Spencer LASS:EX; Chant, Susie LASS:EX; Chen.MLA, Katrina LASS:EX; Chouhan.MLA, Raj LASS:EX; Chow.MLA, George LASS:EX; Clovechok.MLA, Doug LASS:EX; Conroy.MLA, Katrine LASS:EX; Coulter, Dan LASS:EX; Cullen, Nathan LASS:EX; Davies.MLA, Dan LASS:EX; de Jong.MLA, Mike LASS:EX; D'Eith.MLA, Bob LASS:EX; Doerkson.MLA, Lorne LASS:EX; Donnelly, Fin LASS:EX; Fleming.MLA, Rob LASS:EX; Dykeman, Megan LASS:EX; Eby.MLA, David LASS:EX; Elmore.MLA, Mable LASS:EX; Farnworth.MLA, Mike LASS:EX; Furstenau.MLA, Sonia LASS:EX; Glumac.MLA, Rick LASS:EX; Greene, Kelly LASS:EX; Halford.MLA, Trevor LASS:EX; Heyman.MLA, George LASS:EX; Horgan.MLA, John LASS:EX; Kahlon.MLA, Ravi LASS:EX; Kang.MLA, Anne LASS:EX; Kirkpatrick.MLA, Karin LASS:EX; Kylo.MLA, Greg LASS:EX; Lee.MLA, Michael LASS:EX; Leonard.MLA, Ronna-Rae LASS:EX; Letnick.MLA, Norm LASS:EX; Lore, Grace LASS:EX; Ma.MLA, Bowinn LASS:EX; sheila.malcolmson.MLA@leg.bc.ca; Mercier, Andrew LASS:EX; Merrifield.MLA, Renee LASS:EX; Milobar.MLA, Peter LASS:EX; Morris.MLA, Mike LASS:EX; Oakes.MLA, Coralee LASS:EX; Olsen.MLA, Adam LASS:EX; Osborne, Josie LASS:EX; Paddon, Kelli LASS:EX; Paton.MLA, Ian LASS:EX; Popham.MLA, Lana LASS:EX; Ralston.MLA, Bruce LASS:EX; Rankin, Murray LASS:EX; Rice.MLA, Jennifer LASS:EX; Robinson.MLA, Selina LASS:EX; Ross.MLA, Ellis LASS:EX; Routledge.MLA, Janet LASS:EX; Routley.MLA, Douglas G LASS:EX; Singh.MLA, Rachna LASS:EX; Russell, Roly LASS:EX; Rustad.MLA, John LASS:EX; Sandhu, Harwinder LASS:EX; Sharma, Niki LASS:EX; Shypitka.MLA, Tom LASS:EX; Simons.MLA, Nicholas LASS:EX; Sims.MLA, Jinny LASS:EX; Singh, Aman LASS:EX; Starchuk, Mike LASS:EX; Stewart.MLA, Ben LASS:EX; Stone.MLA, Todd LASS:EX; Sturdy.MLA, Jordan LASS:EX; Tegart.MLA, Jackie LASS:EX; Walker, Adam LASS:EX; Wat.MLA, Teresa LASS:EX; Whiteside, Jennifer LASS:EX; Wilkinson.MLA, Andrew LASS:EX; Yao.MLA, Henry LASS:EX
Subject: Covid 19 upcoming Restrictions - the end of small business and Fitness operators in BC and impending suicides

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Good afternoon

As an owner of a gym in Vancouver I eagerly watched this afternoon's press conference and was deeply concerned at the new restrictions coming in. Being in a facility that provides in excess of 200 square feet per person while training, has 100% compliance in terms of vaccination – not just by clients but by staff as well, has full compliance in terms of mask wearing when clients are not working out – I am positively devastated by the most recent news gyms will be forced to be closed for the next 3 weeks. This is the most critical time of the year for gyms and sets the stage for success throughout the year. For the government to shut us completely down and go far beyond what any other jurisdiction have done makes no sense. A return to reduced capacity, the implementation of masks 100% of the time and the possible closure of group classes I could understand. But to completely shut us down ensures that a number of gyms that were teetering on the edge to begin with will no longer be able to survive and will no longer exist. And I know several operators who I can see at very least consider ending their lives..... We have all committed every cent to stay afloat – now there is nothing left to keep us going.

Any time I have dealt with someone who has been anti government due to Covid restrictions, I have been very clear that Auntie Bonnie, Uncle Adrian and the rest of the government are doing their best to keep us safe. I have been a fervent

supporter of all government initiatives including the vaccine passport – but given this unnecessary attack on gyms I can no longer support this stance. These restrictions simply do not make sense given the other possibilities available. There were other options available and you picked ones that guarantee the end of independent fitness facilities in BC. Just like Amazon, Costco and other big businesses have thrived due to the way restrictions have played out – while small operators have went out of business – you are about to see the mass (Unnecessary) closure of several independent fitness centers while only the big centers end up surviving long term. You have miscalculated your restrictions this time.

s.22

s.22 . To have nothing in place at the time of this announcement to support small business only adds to our horror leading into Christmas.

s.22

s.22

s.22 Gyms simply have been painted with one brush without any apparent attempt to see what is being done to maintain a safe environment. The PHO and the government are completely failing us. If any of the decision makers would actually like to see how those of us in the industry are creating the safest environments possible, I will be at my facility at^{s.22} in Vancouver at 430am to begin the cleaning and disinfecting process for what may be our final 6am opening ever.

Dean Neuls
Essentials of Athletics
604-428-9478



From: Dean Neuls <deann@essentialsofathletics.com>

Sent: Friday, November 27, 2020 10:43 AM

To: adrian.dix.mla@leg.bc.ca; niki.sharma@bcndp.ca; premier@gov.bc.ca; vpalmer@postmedia.com; bonnie.henry@gov.bc.ca

Subject: Re: Covid 19 upcoming Restrictions

Good Morning

I reached out 10 days ago as a very concerned owner of a Fitness center in Vancouver. As an Industry we have been in an up and down roller coaster ride as to what we can and cannot do. After the last update where we told not to do any group classes, we were promised there would be updated guidelines coming out detailing the criteria. While I understand there is much to do, all I want to do is feed my family and not lose my home - and I want the same thing for my staff. I respectfully ask that we get a timeline for what has been promised. I would also respectfully request that the government takes the time to consult with the Fitness Industry as well and would be happy to give my time. My staff has an international pedigree with tremendous experience

that could prove invaluable - and I believe our facility already exceeds any health and safety standards set out anywhere in BC.

I kindly and respectfully request that we are at least provided with a time frame so we can make plans. Every time we have to shut down all or parts of our businesses there are costs involved up and above the revenue we lose. There are also costs involved in the restarting of our businesses.

Respectfully and In Good Health

Dean Neuls
Essentials of Athletics

From: Dean Neuls

Sent: Wednesday, November 18, 2020 11:55 AM

To: adrian.dix.mla@leg.bc.ca <adrian.dix.mla@leg.bc.ca>; niki.sharma@bcndp.ca <niki.sharma@bcndp.ca>; Jenny.Kwan@parl.gc.ca <Jenny.Kwan@parl.gc.ca>; premier@gov.bc.ca <premier@gov.bc.ca>; vpalmer@postmedia.com <vpalmer@postmedia.com>; bonnie.henry@gov.bc.ca <bonnie.henry@gov.bc.ca>

Subject: Covid 19 upcoming Restrictions

Good morning Respected members of the BC Legislature and Parliament

Like most people, I am very concerned about Covid 19 impacts on society, individuals and businesses. I like to believe I am a hyper responsible member of the community - I very rarely go out of my home environment unless it is to go to work or purchase the necessities of life. My family and I always wear masks in any public space and in any situation where social distancing is difficult. We are trying to do our part to stop the spread of covid.

I also own a gym in Vancouver where we believe we have set the standard for health and safety for the industry. Every client has upwards of 220 square feet of space to themselves, are required to book in advance and are limited to the amount of time they can be in the building. We also have enhanced disinfecting procedures that usually exceed provincial standard. I am very concerned that the recent uptick in Covis cases - primarily in the Fraser Health Region and Surrey in particular, is going to lead to further blanket restrictions across the Lower Mainland - and against responsible citizens and business owners like myself. I genuinely hope that the new updates focus on controlling the true problem areas, not those areas doing everything they can to be responsible and provide environments where people can safely exercise.

We just leveraged and fought our way into a position where we think we can succeed long term. Getting further restrictions could very well be the end of our business.

I am going to respectfully request that whatever measures are put in place going forward, do not represent a blanket approach - yet acknowledge regional and business policy differences. Simply to restrict all businesses going forward based on the poor actions of a few businesses is not the correct approach. It is like sanctioning all politicians because Donald Trump is unethical.

With respect and In good health

Dean Neuls
Essentials of Athletics Owner

From: s.22
Sent: December 21, 2021 8:53 PM
To: Henry, Bonnie HLTH:EX
Cc: Chant, Susie LASS:EX
Subject: Pool Public Health Measures Inquiry - concerned worker

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Dear Dr. Bonnie Henry,

My name is s.22 and I'm a resident of North Vancouver. I'm emailing regarding the public health orders as of December 21, 2021 and to express my concerns about the status of my workplace in light of the new fitness and exercise public health restrictions, which has not been addressed by these orders in any capacity that I can understand. I am a lifeguard in North Vancouver, and it is still currently not a requirement that any individuals who visit the pools be vaccinated against COVID-19, or show a vaccine passport to gain access to pool areas. In light of the new circumstances and spread of the omicron variant, I'm surprised that while gyms have been closed, pools remain open and open to unvaccinated individuals, and I feel like those of us who work in the pools have been overlooked in these new public health orders. I do not want to be going to work with this much more transmissible spread of COVID, while at my pool, people walk past where I guard, and I am often unable to keep 6 ft of distance due to the layout of the pool deck. Of course, these individuals are also breathing, often for hours, into the enclosed pool space without wearing any masks, while swimming and sitting in the hot tub and sauna. I'm advocating for further measures to be placed for the safety of those who work at pools in our communities, who are no less at risk than those who work in gyms and fitness centres. I hope that my concerns will be heard and acted on.

Thank you,

s.22

From: s.22
Sent: December 21, 2021 8:25 PM
To: Henry, Bonnie HLTH:EX
Subject: Open our gyms

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Dear Dr Henry,

I am one of hundreds, actually probably thousands in BC who do not understand why the gyms are closing. I have followed the science, I have followed the rules and understood why. I am fully vaccinated including the booster. I wear masks, wash my hands, keep my distance, watch for any symptoms etc etc etc

Am I tired ? Yes

Do I carry on with all the measures ? Yes

But the closing of the gyms, it's doesn't make any sense. My daughter goes to the gym 6 days a week and has been doing that for years (excluding when gyms were closed in 2020 for a few months). We have received one notification of someone who had covid in the gym area during that time and it did not result in any spread, or outbreak or closure. Gyms are generally very well ventilated and kept very clean. Since before the pandemic it is the habit of most gym goers to clean the equipment before and after use.

Closing the gyms isn't following the science at all. Please reconsider this decision.

This is extremely important for mental health and physical health.

This is not something that can be replicated at home or outside especially with our winters.

There are so many more reasons that I'm sure you're getting emails about to reopen the gyms, not least of which is you are losing the trust of folks like me who are doing everything right and know why we are doing it.

Please and thank you!

Regards

s.22

From: s.22
Sent: December 21, 2021 8:14 PM
To: Henry, Bonnie HLTH:EX
Subject: Life

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Hello Dr. Henry (I assume you will not be reading emails);

s.22

s.22 No gym now. I am choked. I've done everything required. I'm a little annoyed at the various governments who opened up travel as if we were past Covid. I said previously we are in for a long hall, maybe 10 years. All the places where there are no or little vaccines (like Africa or Asia) will be breeding grounds for variants. I knew this. You must have known. WTF? Long story short, why can't you open gyms at a reduced capacity with special rules, so people like my self can try to maintain a healthy life?

If you took the time to read this, thank you so much.

s.22

From: s.22
Sent: December 21, 2021 6:38 PM
To: Henry, Bonnie HLTH:EX
Subject: Closure of climbing gyms

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

To those putting policy recommendations together,

Climbing gyms, from my perspective, are operating safely. Lots of space between people, places to wash hands, masks worn. Vertical space and good airflow.

I have not seen my family in over 2 years because they are over the border and I have chosen not to travel to decrease the spread. I was planning to go to the climbing gym to escape the deep freeze that is about to hit, and to avoid being completely alone over the holidays. I am not going out to eat, or seeing anyone. This is the activity that preserves my mental health. I work from home. I don't see anyone in person except at the climbing gym.

What about setting capacity limits? Why complete closure?

Please take note of the severe negative impacts that this extreme measure will have.

s.22

From:
Sent: December 21, 2021 5:14 PM
To: Henry, Bonnie HLTH:EX
Subject: Clarification of the new PHO guidelines

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Mrs Henry

I initially sent this email to my MLA Mrs. Beare but would be more appropriate to send to you.

We can all appreciate the difficult position you are in. However, one of your guidelines (gym closures) versus guidelines of large public events with potentially thousands in attendance I will dare say have left many confused.

Dan

From: s.22
To: "Lisa Beare MLA" <Lisa.Beare.MLA@leg.bc.ca>
Sent: Tuesday, December 21, 2021 5:03:53 PM
Subject: Clarification of New PHO guidelines

Mrs. Beare

I am contacting you as a constituent who lives in Pitt Meadows. I am hoping that you can seek some clarification of the new PHO guidelines and generate some discussion.

One of the PHO guidelines is gym closures even though one needs to be fully vaccinated to attend the gym. By the same order venues with over 1000 people capacity are to be reduced to 50%.

So by this logic one can attend an event with thousands of people. But the same person may not attend a gym with 20 people. The previous guidelines (stage 2?) allowed for gym attendance restricting group fitness but mandatory physical distancing and mask wearing. Having spoken to several people I know these new gym guidelines to put it bluntly do not make any sense. It is a known fact that physical exercise is one of the best avenues for stress relief. In this time of year with minimal access to outdoor activities this restriction will have a negative impact on a population who value their physical health. I would go a step further and suggest that folks who are physically active have better odds not to develop extreme illness due to covid.

I hope that further discussions will take place regarding this particular restriction.

Regards

s.22

From: s.22
Sent: December 21, 2021 4:10 PM
To: Henry, Bonnie HLTH:EX
Subject: Keep Gyms OPEN in BC

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Hello Dr Henry

> As you know gyms and fitness centres promote wellness: physical, mental and emotional
>
> Please don't take these away from our community right now
>
> There is no reason why they can't remain open with physical distancing, booked time slots and limited capacity
>
> Thank you for your consideration
>
> s.22

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>

From: s.22
Sent: December 21, 2021 3:51 PM
To: Henry, Bonnie HLTH:EX
Subject: Covid Lockdown

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Hello Dr. Henry,

I just read about the lockdowns again. So frustrating. Why do the vaccinated continue to be the ones being punished?? In the places that require proof of vaccines and masks, why are they being shut down? Do the vaccines and masks not work? Makes people wonder when the places keep getting locked down. I sincerely hope the BC Government is going to compensate all the employees that are now out of work for a month, especially right before Christmas. That is not very nice to happen to people who are trying to keep a roof over their heads and food on the table.

Why not keep places like the gyms and fitness centres open at least since they have to show proof of vaccines as well as wear masks? Why can't the rapid tests be used every day on anyone coming in there rather than shutting them right down? Isn't that what the rapid tests are for? Would help people keep their jobs as well as the fact that people need places like this to keep themselves active and help with their stress. I can understand big crowds of people being a problem but that is not what the gyms are like. People are spaced very far apart even before Covid so do not know why these places are being shut down. Please open them up as they are not the problem.

Thank you.

s.22

From: s.22
Sent: December 21, 2021 3:22 PM
To: Henry, Bonnie HLTH:EX
Subject: Please keep Gyms Open!

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Dr Henry,

I am a vaccinated health care worker who has followed every rule you've put in place. I need to go to the gym daily for my physical health as a paramedic and for my mental Heath. I can not survive a month without the gym.

Gyms are for vaccinated persons and we wear masks while there. I do not understand this rule. Please reconsider. How can drinking and eating and sitting at sports events be healthier than exercising?!

Thank you

s.22

--

Sent from Gmail Mobile

From: s.22
Sent: December 21, 2021 3:02 PM
To: Henry, Bonnie HLTH:EX
Subject: Gyms

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

s.22

s.22

most of the time in the small town of tumbler ridge there is only one or maybe a few more people in the gym, closing it because you compare it to large gyms in cities, is not right, I have always supported you ! But now I am starting to go the other way, if you don't start investigating before making decisions, and what I mean is your people investigating you will loose support from a large amount of people that listened to you from day one including following all your directions, shots, masks gathering, but now you are starting to make people upset, please look again at small town and villages on gyms and dancing classes, yours truly,s.22

s.22 Sent from my iPad

From: s.22
Sent: December 21, 2021 2:44 PM
To: Henry, Bonnie HLTH:EX
Subject: Importance of Gyms for Physical and Mental Health

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Dear Dr. Bonnie Henry,

I would like to understand the justifications of closing fitness centers such as recreational gyms. As BC heads into a cold snap, we are unable to workout outside as per request. We can all understand the last two years have been incredibly hard on many individuals and right now, in Canada, our mental health crisis is at an all-time high. Many people, including myself, use the gym for therapy and to improve and stay healthy. The only stress-relief I get in a day from nursing school is at the gym, my sanctuary. Your reasoning to close gyms is unjustifiable. Every individual that attends the gym 1) Wears a mask 2) Use hand washing and sanitizer and wipes down equipment before and after use 3) social distances 4) Most importantly, every single individual has their vaccine as they cannot enter the facility without showing a vaccine passport. The wait times for mental health help are ridiculous and the cost to attend therapy is too much for many people.

Why are we allowed to go to Costco, Walmart and other stores and breathe down each other's necks or sit at a table for 6 other people at a restaurant where we are eating? Why am I, a fully vaccinated, mask-wearing, sanitizing, social distancing human being who needs exercise for their physical and mental health being told I cannot access a gym? Why aren't you giving gyms a chance to limit capacity? Make it make sense.

We have complied with every single rule the BC government has set out the last two years and quite frankly, it feels like a huge slap in the face.

You need to keep gyms open for the physical and more importantly, mental health of others, or provide some sort of compensation for therapy or mental health services.

Sincerely,

All of British Columbia

From: s.22
Sent: December 21, 2021 2:30 PM
To: Henry, Bonnie HLTH:EX
Subject: Gym closures

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

I'm not sure what the thought effort was on this . With the weather that's been happening around bc many of us with seasonal depression depend on some activity to stay sane .

s.22

I struggle to work full time and having access to a gym / studio is the only thing that keeps me moving and being able to still go to work full time .

You leave the casinos open where thousands of people are addicted and destroy their own well-being but your going to punish vaccinated people that would like to maintain physical activity .

My local anytime fitness can book time slots and at most times there less then 5-10 people inside their facility . Everyone wears there masks . I can see Steve nash or Trevor Linden gyms with massive facilities struggle to keep things decent . Small boutique gyms don't need to be punished .

This strongly needs to be reconsidered .

Sent from my iPhone

From: Emerson, Brian P HLTH:EX <Brian.Emerson@gov.bc.ca>
Sent: December 20, 2021 5:43 PM
To: Machell, Aileen GCPE:EX
Cc: Henry, Bonnie HLTH:EX; Brown, Stephen R HLTH:EX; XT:Lambrechts, Nicola GCPE:IN
Subject: Re: new measures

Not closing wine tasting rooms.

Just stopping sports tournaments, adult, youth and child. Regular competitions can continue.

Gyms, fitness centres, dance studios etc will be closed to in person activity but can do virtual workouts.

Thanks.

Brian
Dr. Brian P. Emerson, Deputy Provincial Health Officer
BC Ministry of Health, PO Box 9648 Stn Prov Govt, Victoria, BC V8W 9P1
T 250.952.1701 Cs.17 F. 250.952. 1713 brian.emerson@gov.bc.ca

On Dec 20, 2021, at 5:34 PM, Machell, Aileen GCPE:EX <Aileen.Machell@gov.bc.ca> wrote:

Ok. Another Q likely to come up is – are wine tasting rooms closed? And adult sports, or just adult fitness centres/gyms.

Thanks.

From: Henry, Bonnie HLTH:EX <Bonnie.Henry@gov.bc.ca>
Sent: December 20, 2021 5:19 PM
To: Machell, Aileen GCPE:EX <Aileen.Machell@gov.bc.ca>; Brown, Stephen R HLTH:EX <Stephen.Brown@gov.bc.ca>; XT:Lambrechts, Nicola GCPE:IN <nicola@nlkstrategies.ca>; Emerson, Brian P HLTH:EX <Brian.Emerson@gov.bc.ca>
Subject: RE: new measures

No casinos are more in with concerts etc. They have strong safety plans so they would be 50% capacity and masks and vaccine card
b

*Dr Bonnie Henry
Provincial Health Officer
Office of the PHO
Ministry of Health
Mailing address:
PO Box 9648, STN PROV GOVT
Victoria, BC
V8W 9P4*

I gratefully acknowledge that I live and work on the traditional unceded territory of the Lekwungen Peoples, specifically the Songhees and Esquimalt First Nations. Hay'sxw'qu Si'em

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From: Machell, Aileen GCPE:EX <Aileen.Machell@gov.bc.ca>

Sent: December 20, 2021 4:09 PM

To: Henry, Bonnie HLTH:EX <Bonnie.Henry@gov.bc.ca>; Brown, Stephen R HLTH:EX <Stephen.Brown@gov.bc.ca>; XT:Lambrechts, Nicola GCPE:IN <nicola@nlkstrategies.ca>; Emerson, Brian P HLTH:EX <Brian.Emerson@gov.bc.ca>

Subject: RE: new measures

Looks good to me. So, in place for four weeks? And are casinos being closed along with bars and nightclubs?

From: Henry, Bonnie HLTH:EX <Bonnie.Henry@gov.bc.ca>

Sent: December 20, 2021 3:29 PM

To: Brown, Stephen R HLTH:EX <Stephen.Brown@gov.bc.ca>; Machell, Aileen GCPE:EX <Aileen.Machell@gov.bc.ca>; XT:Lambrechts, Nicola GCPE:IN <nicola@nlkstrategies.ca>; Emerson, Brian P HLTH:EX <Brian.Emerson@gov.bc.ca>

Subject: new measures

1. Cancelling of all indoor organized social events and gatherings including parties, wedding receptions, celebration of life (but not the wedding, funeral that can continue with safety measures in place) in events spaces (banquet halls/hotels etc.) or in restaurants.
 2. For all sports events, theatres, movie theatres, concerts capacity reduced to 50% regardless of size of venue, plus QR code checking of vaccine card as well as masking
 3. Restaurants must check vaccine card , mask wearing and no moving between tables as per last week but adding tables limited to 6 people
 4. Bars and nightclubs closed
 5. Gyms, fitness centres, group activities for adults must move to virtual services (Brian I am looking at closing gyms, fitness activities in person for adults here^{s.13}
- s.13

These measure will come into effect Wednesday at 11:59 and will be in place until 18 January 2022.

Thoughts?

Dr Bonnie Henry

Provincial Health Officer

Office of the PHO

Ministry of Health

Mailing address:

PO Box 9648, STN PROV GOVT

Victoria, BC

V8W 9P4

I gratefully acknowledge that I live and work on the traditional unceded territory of the Lekwungen Peoples, specifically the Songhees and Esquimalt First Nations. Hay'sxw'qu Si'em

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From: van Baarsen, Amanda HLTH:EX <Amanda.vanBaarsen@gov.bc.ca>
Sent: December 17, 2021 10:02 AM
To: Henry, Bonnie HLTH:EX
Subject: events

“event” means a gathering of persons for a purpose;

"inside event" means:

(a) a gathering of more than 50 participants in an inside place for one of the following purposes:

- (i) a form of entertainment involving a performance such as a theatrical production, a concert, a symphony performance, a choral performance, any other type of musical performance or a dance performance;
- (ii) business, but limited to a lecture or presentation;
- (iii) a wedding reception;
- (iv) a funeral reception not held at a funeral home, 7
- (v) a sponsored or ticketed party at which there is musical entertainment, other than for the purpose of providing background sound;

(b) a gathering of more than 50 participants in an inside place for one of the following purposes

- (i) a business purpose not described in (a), and including a conference, convention, commercial trade fair or workshop or home show;
- (ii) gambling;
- (iii) recreational education or classes, including arts, crafts, music, photography, culture, or travel education or classes

(c) a gathering of any number of participants in an inside place for the purpose of an adult sports activity, an adult exercise or fitness activity or class, or an adult dance class;

(d) a sports event in an inside place; (e) a program for children or youth in an inside place;

(f) a worship service in an inside place.

From: s.22
Sent: December 14, 2021 5:04 PM
To: Henry, Bonnie HLTH:EX
Subject: Email on Covid & fitness centres

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Hello,

Here is a copy of an email I sent to Goodlife Fitness Center management today - I am hoping we can change policy to NOT allow staff who are unvaccinated work in any public setting. Please read below :

I have concerns over a recent change coming to Goodlife Kelowna, BC. Kelowna Goodlife is attempting to allow Instructors who are unvaccinated to return under certain conditions. This idea, in any kind of format will pose a health risk to us all. This is both reckless and extremely unprofessional. Not to mention a double standard.

s.22

s.22 I believe in the science behind vaccination, and I believe in its validity in both the workplace and public places to keep Canadians safe.

I find it deeply concerning that Goodlife, as a leader in health and fitness across Canada, would start to allow unvaccinated persons into any fitness facility across Canada. While I understand the need for retaining unvaccinated clients and unvaccinated staff, you will be placing others at risk. A gym is public facility where there is great potential to transmit disease due to the mechanics of group classes and workouts, and you will most certainly be exposing Canadians unnecessarily to sickness.

Covid 19 and its many variants are still a risk. It is far from over. You will, without a doubt lose many loyal clients if you allow unvaccinated staff or clients into the facility. I can promise you, you will lose many good clients who have the common sense to follow scientific fact, ones who have followed the rules, and taken their health seriously.

I will follow up this email with a phone call to your head office.

Regards,

s.22

From: s.22
Sent: December 14, 2021 11:31 AM
To: media@interiorhealth.ca
Cc: Henry, Bonnie HLTH:EX
Subject: Covid-19 and fitness facilities

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Hello:

I belong to GoodLife Fitness in Kelowna and on Monday we learned that non-vaccinated fitness instructors will be allowed to return to teaching due to a change in the mandate from Interior Health. I am struggling to understand the reasoning behind this as we, as members, are required to be double vaccinated before even entering the facility. How can Interior Health think it is okay for an unvaccinated individual to stand in front of a class of participants, no mask and no other safety protocols in place (i.e. regular testing), possibly fans running, breathing heavily and speaking continuously. From what we know of the new omicron variant, it is highly transmissible and the timing of the removal of the mandate makes no sense.

I strongly urge IH to reconsider reinstating the requirement for all fitness instructors to be double vaccinated before being allowed to teach. When one enters a retail space (hair salons, stores, etc.), all employees are wearing masks, vaccinated or not so for this group to be exempt from that is not only wrong, but unfair.

I appreciate your consideration.

Regards,

s.22

Concerned Citizen

From: s.22
Sent: September 12, 2021 9:36 PM
To: Henry, Bonnie HLTH:EX; OfficeofthePremier, Office PREM:EX; Health, HLTH HLTH:EX
Subject: Fitness center vaccines

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Hello

I am emailing regarding the new forced implementation of proof of vaccine in order to use certain facilities. Fitness centre's and gyms are included in this, and while I very much oppose the outlandish dictator mandate on all fronts, the fitness center is definitely something that should be deemed essential.

It is required for many people to maintain their health (which is what this is supposed to be about in the first place), their mental stability, their lifestyle and their way of life for many.

Those of us with physical issues due to work, whether it is sitting all day, standing all day/repetitive motions that cause ailments that need to be balanced and corrected. Rec centre's and fitness centre's are essential for those of us that don't have ability or access to space or equipment to help our bodies to align and heal and function properly.

The same goes for people with physical disabilities, or mental illness.

You need to take a stand where it counts right now. You are meant to work for the people and these continuous rules, shaming, pressure, and misinformation is tearing us apart.

Reinforce our Healthcare, push for vitamin intake and exercise, encourage listening and understanding, and for God's sake give us our freedom to think and do freely in a safe, and loving country!

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