

PHO Exemption Update for Dec 16 2021

From: HLTH PHO Exemptions HLTH:EX^{s.15}
s.15

To: XT:Flatt, Alexandra HLTH:IN <aflatt@phsa.ca>, Saremi, Alireza HLTH:IN <alireza.saremi@phsa.ca>, andrew.lam@phsa.ca

Sent: December 16, 2021 at 1:14:05 PM Pacific Standard Time

Good afternoon,

Please see below for the updates on the exemptions received to date.

Health Authority	Number of Medical Exemption Requests Received	Exemption Status:
Vancouver Coastal	53	All Pending
Fraser Health	47	All Pending
Interior Health	44	All Pending
Island Health	36	All Pending
Northern Health	8	All Pending
PHSA	35	All Pending
TOTAL:	223	-----

Thanks kindly,
Haley obo the OPHO

RE: PHO Exemption Update for Dec 17 2021

From: HLTH PHO Exemptions HLTH:EX <PHOExemptions@gov.bc.ca>
To: XT:Flatt, Alexandra HLTH:IN <aflatt@phsa.ca>, Saremi, Alireza HLTH:IN <alireza.saremi@phsa.ca>, andrew.lam@phsa.ca
Sent: December 17, 2021 at 2:58:08 PM Pacific Standard Time
Good afternoon,

Please see below for the updates on the exemptions received to date.

Health Authority	Number of Medical Exemption Requests Received	Exemption Status:
Vancouver Coastal	53	All Pending
Fraser Health	47	All Pending
Interior Health	44	All Pending
Island Health	36	All Pending
Northern Health	8	All Pending
PHSA	35	All Pending
TOTAL:	223	-----

All the best,
Kendall obo the OPHO

Briefing session with federal officials with focus on vaccine mandates in the federally regulated transportation sector - feedback requested from PHEC

From: Lavoie, Martin HLTH:EX <Martin.Lavoie@gov.bc.ca>
To: HLTH PPH Planning HLTH:EX <PPHplanning@gov.bc.ca>, Daly, Patty [VCH] <Patricia.Daly@vch.ca>, XT:HLTH Brodtkin, Elizabeth <elizabeth.brodtkin@fraserhealth.ca>, cleaver, dennis [NHA] <dennis.cleaver@northernhealth.ca>, Gustafson, Reka HLTH:IN <reka.gustafson@phsa.ca>, XT:HLTH Stanwick, Richard <richard.stanwick@viha.ca>, Jong.Kim@northernhealth.ca, XT:McDonald, Shannon HLTH:IN <Shannon.McDonald@fnha.ca>, Henry, Bonnie HLTH:EX <Bonnie.Henry@gov.bc.ca>, XT:HLTH Pollock, Sue <sue.pollock@interiorhealth.ca>, Sterloff, Trish HLTH:EX <Trish.Sterloff@gov.bc.ca>, XT:Hampe, Tanis NHA:IN <Tanis.Hampe@northernhealth.ca>, Karen Bloemink <karen.bloemink@interiorhealth.ca>
Cc: Robinson, Jonathan M HLTH:EX <Jonathan.Robinson@gov.bc.ca>, Achampong, Bernard HLTH:EX <Bernard.Achampong@gov.bc.ca>, Emerson, Brian P HLTH:EX <Brian.Emerson@gov.bc.ca>, Naus, Monika [BCCDC] <Monika.Naus@bccdc.ca>, Amyot, Sarah HLTH:EX <Sarah.Amyot@gov.bc.ca>, Sagar, Brian HLTH:EX <Brian.Sagar@gov.bc.ca>, Jepsen, Donna HLTH:EX <Donna.Jepsen@gov.bc.ca>, XT:Tylar, Ingrid FRHA:IN <ingrid.tylar@fraserhealth.ca>, Miller, Haley HLTH:EX <Haley.Miller@gov.bc.ca>, Billing, Sukhmani HLTH:EX <Sukhmani.Billing@gov.bc.ca>, XT:Lysyshyn, Mark Dr. HLTH:IN <Mark.Lysyshyn@vch.ca>, Carnegie, Lynn HLTH:EX <Lynn.Carnegie@gov.bc.ca>, Bell, Erika <Erika.Bell@vch.ca>, Halicki, Ashley HLTH:EX <Ashley.Halicki@gov.bc.ca>, Thompson, Laurel HLTH:EX <Laurel.Thompson@gov.bc.ca>, marianne.henderson@bccdc.ca, XT:Morimoto, Courtney HLTH:EX <Courtney.Morimoto@fraserhealth.ca>, XT:Robbestad, Melanie HLTH:IN <melanie.robbestad@northernhealth.ca>, XT:HLTH Stajduhar, Linda <linda.stajduhar@interiorhealth.ca>, XT:Gallacher, Dorothy HLTH:IN <Dorothy.gallacher@viha.ca>, XT:Carpenter, Lori HLTH:IN <lori.carpenter@fnha.ca>, XT:Concon, Virginia HLTH:IN <virginia.concon@phsa.ca>, Isaac, Lori HLTH:EX <Lori.Isaac@gov.bc.ca>, Metcalfe, Rhonda HLTH:EX <Rhonda.Metcalfe@gov.bc.ca>, Bergevin, Niomi HLTH:EX <Niomi.Bergevin@gov.bc.ca>, XT:Mema, Dr. Silvina HLTH:IN <Silvina.Mema@interiorhealth.ca>, Kamran.golmohammadi@fnha.ca, Bark, Diana HLTH:EX <Diana.Bark@gov.bc.ca>, michael.benusic@islandhealth.ca, Ward, Cindy HLTH:EX <Cindy.Ward@gov.bc.ca>, Lindsay.Kaluza@interiorhealth.ca
Sent: December 20, 2021 at 1:27:57 PM Pacific Standard Time
Attachments: Vaccine Mandate - Remote Communities Accommodation Consultation Paper (Dec 12).docx
Hi everyone,

Like I mentioned earlier today during PHEC meeting, I attended this meeting on Bonnie's behalf this morning.

- *briefing session with federal officials is planned for **Monday December 20 at 1:30 PM EST**, with focus on vaccine mandates in the federally regulated transportation sector (please see attached consultation paper from Transport Canada).*

See consultation paper, attached. Let me know if you have any feedback, thoughts or concerns, and I will relay it to the federal group. If you could collate your feedback by HA to reduce the number of replies, that would be great.

Their timelines are end of December for this consultation.

Thanks,

Martin

Dr. Martin Lavoie

Deputy Provincial Health Officer

Office of the Provincial Health Officer, Ministry of Health

From: HLTH PPH Planning HLTH:EX <PPHplanning@gov.bc.ca>

Sent: December 20, 2021 11:15 AM

Subject: PHEC Agenda - December 20

Hi everyone,

There was an issue with the first email that went out moments ago, so I am resending the agenda and materials. Please find the attached agenda for today's meeting. I will send the meeting materials in a separate email to follow.

My apologies for the error. Thank you,

Justine

Justine Wardle

Senior Policy Analyst | Population and Public Health Division | Ministry of Health | PO BOX 9646 STN PROV GOVT Victoria, BC V8W 9P1 | Phone (236) 478-3425 | Mail to: Justine.Wardle@gov.bc.ca

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Update on Vaccination for the Federally Regulated Transportation Sector and Remote Communities

Purpose

Transport Canada is seeking input on how to better align interim accommodations for remote communities with the national mandate.

Background

To protect the health and safety of Canadians, as of November 30, 2021, travellers over the age of 12 years 4 months or older need to provide proof of COVID-19 vaccination to board a train or a plane in Canada. There are very limited exemptions (e.g., for medical or religious reasons) where a valid COVID-19 test taken within 72 hours of travel will be accepted as an alternative.

In recognition of the unique needs of remote communities, interim accommodations were put in place to allow all unvaccinated travellers continued access to essential services in support of medical, health, or social well-being, and to return safely to the traveller's home community:

- Unvaccinated travellers from remote airports are currently exempt from the mandatory vaccine requirement at point of departure.
 - The mandatory requirement applies to travellers for onward or return travel upon reaching specified 'gateway' airports that connect to remote airports (See airports marked "G" in Annex A).
 - Testing is available as an alternative to vaccination for unvaccinated remote travellers, and high-quality molecular self-tests are provided free of charge at 'gateway' airports. This includes recognition of evidence of positive test results taken 14-180 days prior to travel.
- Unvaccinated travellers completing quarantine under public health authority requirements prior to travel (e.g., as required by Nunavut) are exempt from providing proof of vaccination.

These accommodations will temporarily remain in place as the federal government engages with industry, provinces and territories, Indigenous organizations, and local authorities on how to align these interim accommodations for unvaccinated travellers from remote communities with the national mandate while maintaining access to essential air travel.

Experience to date

At this time, tests have been delivered to 54 gateway airports. Data collection is ongoing, however early results indicate a lower use of Lucira Check It self-tests, as vaccine and testing rates have been higher than anticipated. A representative sample of one week of data for three carriers, covering approximately 10,000 remote passengers, identified that approximately 0.45% of passengers required tests. This is significantly lower than initial projections. It is noted that data submission from industry has been somewhat inconsistent, and efforts are underway to improve reporting rates.

There have been few reports of travellers encountering issues, and where reported, Transport Canada have been able to work with operators and Indigenous Services Canada to resolve issues and facilitate onward travel. Transport Canada has encouraged operators to exercise

maximum flexibility regarding remote travellers, and exemptions and industry guidelines developed by Transport Canada support this flexibility.

Working collaboratively, Transport Canada, Health Canada, Public Health Agency of Canada, and Indigenous Services Canada, have produced or updated: detailed guidance on test usage for industry: infographics with test instructions for remote travellers, in English, French and 11 Indigenous languages; and the remote traveller page hosted by Indigenous Services Canada.

There have been some additional concerns raised with the current tests, including the cost and complexity of shipping and storage requirements. However, test distribution has gone smoothly overall. Tests are not yet approved for use in Saskatchewan, where molecular self-tests are not permitted. There were some initial delays in getting tests to one or two locations, but tests have now been delivered to airports for distribution to air operators, and operators have been provided with options to facilitate remote travel for when tests are not readily available.

Transport Canada, Indigenous Services and Health Canada remain responsive to requests from partners to evaluate the gateway list to identify potential additions or removals and ensure that tests are provided where they are needed. In addition, some public health representatives have expressed concerns regarding the ability to provide supports for in-transit passengers who test positive at 'gateway' airports. Transport Canada will continue to work with Public Health Agency of Canada, Health Canada and Indigenous Services Canada to address concerns raised regarding support for individuals that test positive away from their home communities

For rail, Health Canada has supplied VIA Rail with approximately 1000 test kits for use between now and April. VIA is working to distribute these test kits to nursing stations and its own stations in Winnipeg and between the Pas and Churchill, Manitoba.

Next steps

The broad nature of the current interim accommodations (in which the exemption may be applied to anyone flying to or from broadly defined remote communities) is inconsistent with the national mandate, which is intended to encourage vaccination.. Therefore, Transport Canada, Indigenous Services Canada, Health Canada and the Public Health Agency of Canada are engaging with industry, provinces and territories, Indigenous organizations, and local authorities to seek input on how to bring the remote accommodations into better alignment with the national mandate by reducing those eligible for the accommodation, while not compromising the essential travel needs of remote and isolated communities..

To that end, Transport Canada, Indigenous Services Canada, Health Canada, and the Public Health Agency of Canada are interested in input on:

- How to better align the interim accommodations with the national public health approach without restricting a wide variety of essential / necessary travel
- How to promote vaccination as the best means of protection against COVID-19
- How should the gateway airport list be modified
- How to increase testing capacity in remote communities where feasible to do so

With respect to better alignment, Transport Canada is particularly seeking the input of stakeholders to identify options to refine the current approach. In addition to options that may be identified through engagement, the following have been identified as potential approaches for consideration:

1. Accommodation based on residency in a remote community.
 - Maintains access to essential services for remote community residents by facilitating the movement of remote travellers to those services.
 - Denies accommodation to those that are not residents of those communities.
 - Determining how to define remote community requires the input of provinces and territories as well as Indigenous organizations and remote communities
2. Accommodation based on rationale for travel
 - Maintains access to essential services for remote community residents
 - May support travel of those providing essential services in a community, where warranted
 - Determining what would qualify as essential travel requires the input of provinces and territories as well as Indigenous organizations and remote communities
 - Consideration would be needed for how this would be administered in practice.
3. Accommodation based on direction of travel
 - Maintains access to essential services for remote community residents by facilitating the movement of remote travellers to those services.
 - Limits exemptions for non-remote residents e.g., worker traveling to remote communities.
 - May impact return travel (i.e., If duration does not allow for vaccination or test results) for unvaccinated travellers able to leave the community, but unable to return without vaccination.

Considering the urgency of the national mandate, continued engagement efforts will take place in December and January, with implementation expected in early 2022.

ANNEX A

LIST OF DESIGNATED AIRPORTS:

Abbotsford	Goose Bay - G	Nanaimo – G	Sept-Îles – G
Alma	Grande Prairie - G	North Bay – G	Smithers – G
Bagotville	Greater Moncton International	Ottawa (Macdonald-Cartier International) – G	Stephenville
Baie-Comeau	Halifax (Robert L. Stanfield International) – G	Penticton	Sudbury – G
Bathurst	Hamilton - G	Prince Albert – G	Sydney
Brandon - G	Îles-de-la-Madeleine	Prince George – G	Terrace – G
Calgary International - G	Iqaluit – G	Prince Rupert – G	Thompson - G
Campbell River - G	Kamloops	Québec (Jean Lesage International) - G	Thunder Bay - G
Castlegar	Kelowna - G	Quesnel - G	Timmins – G
Charlo	Kingston - G	Red Deer Regional - G	Toronto/Buttonville Municipal
Charlottetown	Kitchener/Waterloo Regional	Regina - G	Toronto (City Centre) - G
Chibougamau/Chapais - G		Rivière-Rouge (Mont-Tremblant International)	Toronto (Lester B. Pearson International) - G
Churchill Falls			Val-d'Or – G
Comox - G	La Grande Rivière	Rouyn-Noranda - G	Vancouver International – G
Cranbrook	Lethbridge - G	St. Anthony - G	Victoria International - G
Dawson Creek - G	Lloydminster	Saint John	Wabush – G
Deer Lake - G	London - G	St. John's International – G	Whitehorse International – G
Edmonton International - G	Lourdes-de-Blanc-Sablon		Williams Lake - G
Fort McMurray - G	Medicine Hat - G		Windsor
Fort St. John - G	Mont-Joli - G	Sarnia (Chris Hadfield)	Winnipeg (James Armstrong Richardson International) - G
Fredericton International	Montréal (Montréal — Pierre Elliott Trudeau International) - G	Saskatoon (John G. Diefenbaker International) - G	
Gander International - G	Montréal International (Mirabel)	Sault Ste. Marie	Yellowknife - G
Gaspé			

RE: Medical Exemptions

From: Reedijk, Jill [BCCDC] <Jill.Reedijk@bccdc.ca>
To: Henry, Bonnie [EXT] <bonnie.henry@gov.bc.ca>, Henry, Bonnie HLTH:EX <Bonnie.Henry@gov.bc.ca>
Cc: Penny Ballem <pballem@telus.net>, Flatt, Alexandra [PHSA] <AFlatt@phsa.ca>, Byres, David [PHSA] <David.Byres@phsa.ca>, Emerson, Brian [EXT] <Brian.Emerson@gov.bc.ca>, XT:Flatt, Alexandra HLTH:IN <aflatt@phsa.ca>, Emerson, Brian P HLTH:EX <Brian.Emerson@gov.bc.ca>, XT:byres, david HLTH:IN <david.byres@phsa.ca>, XT:Ballem, Penny HLTH:IN <pballem@telus.net>
Sent: January 4, 2022 at 11:22:13 AM Pacific Standard Time
Attachments: image001.jpg

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

Hi Bonnie,

Happy New Year and I hope you are well. Penny and Lexie have advised escalation to your office.

Please see highlighted in yellow, far below at the beginning of this thread an issue raised by our colleagues in Ontario and a quick summary I added here:

Quick Summary:

- It has been brought to my attention via our contact in Ontario, (as part of my role managing interprovincial collaboration related to fraudulent records) that a BC family physician is providing BC COVID vaccine medical exemptions, apparently to Ontario individuals. The physician's name was an immediate red flag for me.
- In short, Ontario are raising their concern about a large group of people, including what sounds like a youth hockey team, and an arena rental, where most of the large group all have medical exemptions to COVID vaccines (proof of vax or an exemption is required by the arenas)
- These "exemptions" have been mostly provided by a Dr Stephen Malthouse and one other physician whose name they are chasing down.
- The physician in question, issuing BC exemptions, is not following the BC policy for exemptions.
- The next hockey game is January 5th.

As an immediate mitigation I have asked my lead to provide the details related to the BC process for issuance of medical exemptions for COVID vaccines to our contacts across the country that we have been working with related to fraudulent records.

It is obviously quite distressing that this physician is seemingly active in subverting public health, including in other provinces, and the involved people seem to be active in large groups and traveling and playing sports without vaccine protection.

Regards,
Jill

be kind, be calm, be safe

Jill Reedijk

Director, Public Health Informatics and Information Solutions
604.707.2483

From: Penny Ballem <pballem@telus.net>

Sent: Tuesday, January 04, 2022 10:31 AM

To: Reedijk, Jill [BCCDC] <Jill.Reedijk@bccdc.ca>; Flatt, Alexandra [PHSA] <AFlatt@phsa.ca>; Byres, David [PHSA] <David.Byres@phsa.ca>; Emerson, Brian [EXT] <Brian.Emerson@gov.bc.ca>

Subject: Re: Medical Exemptions

EXTERNAL SENDER. If you suspect this message is malicious, please forward to spam@phsa.ca and **do not** open attachments or click on links.

This needs to go to Bonnie's office for action - it is a contravention of her authority and college and PHO need to deal with it pb

Penny Ballem MD FRCP FCAHS

Mobile 604-551-1477

From: Reedijk, Jill [BCCDC] <Jill.Reedijk@bccdc.ca>

Sent: Tuesday, January 4, 2022 10:20 AM

To: Flatt, Alexandra [PHSA]; Penny Ballem

Subject: FW: Medical Exemptions

Hi Lexie and Penny,

Raising the below to both of you as there is some urgency. Please see highlighted far below at the beginning of this thread an issue raised by our colleagues in Ontario.

It has been brought to my attention, via our contact in Ontario, that a BC family physician is providing BC COVID vaccine medical exemptions, apparently to Ontario individuals. The physician's name was an immediate red flag for me. <https://www.cbc.ca/news/canada/british-columbia/bc-stephen-malthouse-doctors-petition-college-1.6092437>

In short Ontario are raising their concern about a large group of people, including what sounds like a youth hockey team, and an arena rental where most of the large group all have medical exemptions to COVID vaccine (proof of vax is required by the arenas)

These "exemptions" have been mostly provided by Dr Stephen Malthouse and one other physician whose name they are chasing down.

The physician in question, issuing BC exemptions, is not following the BC policy for exemptions and is known for being problematic WRT COVID vaccines (see attached article)

As an immediate mitigation I have asked my lead to provide the details related to the BC process for issuance of medical exemptions for COVID vaccines to our contacts across the country that we have been working with related to fraudulent records.

Next steps: I look to you for guidance on best next steps related to this concerning situation- I am assuming this is an escalation to authorities or the college but would wait for your guidance.

I note that the next hockey game seems to be tomorrow, the 5th.

Regards,

Jill

Jill Reedijk

Director, Public Health Informatics and Information Solutions
604.707.2483

From: Mosher, Ryan (MOH) <Ryan.Mosher@ontario.ca>
Sent: Monday, January 03, 2022 10:49 AM
To: Yuen, Vania [PHSA] <Vania.Yuen@phsa.ca>
Cc: Persaud, Mala (MOH) <Mala.Persaud@ontario.ca>
Subject: FW: Medical Exemptions

EXTERNAL SENDER. If you suspect this message is malicious, please forward to spam@phsa.ca and **do not** open attachments or click on links.

Hi Vania,

Happy new year! I hope you are well and enjoyed your time off. I have a quick question for you, and you may not be the right person for this, but we have been informed of a BC doctor who has been providing a large number of medical exemptions. Has there been anything flagged on BC's end about Dr. Stephen Malthouse? Should exemptions that come from him be handled like any others?

Thanks!

Ryan Mosher
437-224-8364
Pandemic Response and Recovery
Ministry of Health

From: Whiting, Carolyn <Carolyn.Whiting@niagararegion.ca>
Sent: January 3, 2022 10:35 AM
To: Mosher, Ryan (MOH) <Ryan.Mosher@ontario.ca>; Persaud, Mala (MOH) <Mala.Persaud@ontario.ca>
Subject: RE: Medical Exemptions

CAUTION -- EXTERNAL E-MAIL - Do not click links or open attachments unless you recognize the sender.

Hi Ryan,

Happy New Year!

It seems that he has no red flags. Maybe BC is more familiar with him?

Thanks

Carolyn Whiting, RN, BscN, CIC
Manager of Analytics and Planning
Pandemic Response Division, Public Health & Emergency Services
Niagara Region
Phone: ext. 7210 Toll-free: 1-800-263-7215
www.niagararegion.ca

***Please Note:** due to the high volume of communication related to COVID-19, if your email is urgent, please contact me directly by phone at 905-688-8248 ext. 7210.



From: Mosher, Ryan (MOH) <Ryan.Mosher@ontario.ca>
Sent: Wednesday, December 29, 2021 11:28 AM
To: Whiting, Carolyn <Carolyn.Whiting@niagararegion.ca>; Persaud, Mala (MOH) <Mala.Persaud@ontario.ca>
Subject: RE: Medical Exemptions

CAUTION EXTERNAL EMAIL: This email originated from outside of the Niagara Region email system. Use caution when clicking links or opening attachments unless you recognize the sender and know the content is safe.

Hi Carolyn,

To follow up on this – can you double check to see if the physician in question is still in good standing with their College? Let us know if you'd need us to check in on that...

Ryan Mosher
437-224-8364
Pandemic Response and Recovery
Ministry of Health

Page 13 of 39 to/à Page 14 of 39

Withheld pursuant to/removed as

s.16

RE: Medical Exemptions

From: Henry, Bonnie HLTH:EX <Bonnie.Henry@gov.bc.ca>
To: XT:Reedijk, Jill HLTH:IN <Jill.Reedijk@bccdc.ca>
Cc: XT:Ballem, Penny HLTH:IN <pballem@telus.net>, XT:byres, david HLTH:IN <david.byres@phsa.ca>, Emerson, Brian P HLTH:EX <Brian.Emerson@gov.bc.ca>, XT:Flatt, Alexandra HLTH:IN <aflatt@phsa.ca>
Sent: January 4, 2022 at 1:06:14 PM Pacific Standard Time
Attachments: image001.jpg

There are no medical exemptions in BC that come from Dr Malthouse. He has been I understand charging a lot for these and they are fraudulent.

This has been reported to the College here as well.

Bonnie

*Dr Bonnie Henry
Provincial Health Officer
Office of the PHO
Ministry of Health*

s.15; s.19

*Mailing address: PO Box 9648, STN PROV GOVT
Victoria, BC
V8W 9P4
Bonnie.henry@gov.bc.ca*

Phone: s.17; s.19

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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To: Henry, Bonnie HLTH:EX <Bonnie.Henry@gov.bc.ca>
Cc: XT:Ballem, Penny HLTH:IN <pballem@telus.net>; XT:Flatt, Alexandra HLTH:IN <aflatt@phsa.ca>; XT:byres, david HLTH:IN <david.byres@phsa.ca>; Emerson, Brian P HLTH:EX <Brian.Emerson@gov.bc.ca>
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Importance: High

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Pandemic Response and Recovery
Ministry of Health

From: Whiting, Carolyn <Carolyn.Whiting@niagararegion.ca>
Sent: January 3, 2022 10:35 AM
To: Mosher, Ryan (MOH) <Ryan.Mosher@ontario.ca>; Persaud, Mala (MOH) <Mala.Persaud@ontario.ca>
Subject: RE: Medical Exemptions

CAUTION -- EXTERNAL E-MAIL - Do not click links or open attachments unless you recognize the sender.

Hi Ryan,

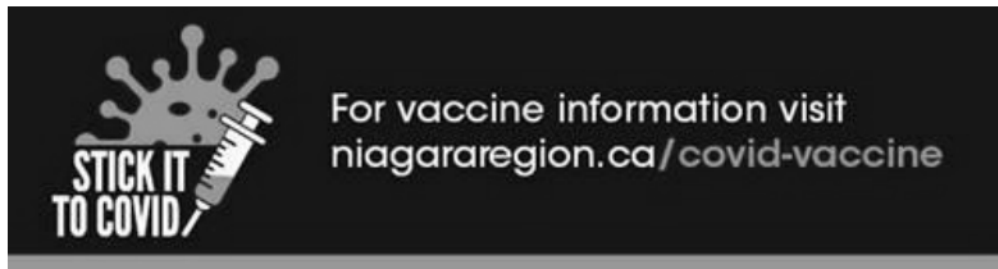
Happy New Year!

It seems that he has no red flags. Maybe BC is more familiar with him?

Thanks

Carolyn Whiting, RN, BscN, CIC
Manager of Analytics and Planning
Pandemic Response Division, Public Health & Emergency Services
Niagara Region
Phone: ext. 7210 Toll-free: 1-800-263-7215
www.niagararegion.ca

***Please Note:** due to the high volume of communication related to COVID-19, if your email is urgent, please contact me directly by phone at 905-688-8248 ext. 7210.



From: Mosher, Ryan (MOH) <Ryan.Mosher@ontario.ca>
Sent: Wednesday, December 29, 2021 11:28 AM
To: Whiting, Carolyn <Carolyn.Whiting@niagararegion.ca>; Persaud, Mala (MOH) <Mala.Persaud@ontario.ca>
Subject: RE: Medical Exemptions

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Hi Carolyn,

To follow up on this – can you double check to see if the physician in question is still in good standing with their College? Let us know if you'd need us to check in on that...

Ryan Mosher
437-224-8364
Pandemic Response and Recovery
Ministry of Health

Page 19 of 39 to/à Page 20 of 39

Withheld pursuant to/removed as

s.16

RE: Medical Exemptions

From: Henry, Bonnie HLTH:EX <Bonnie.Henry@gov.bc.ca>
To: XT:BalleM, Penny HLTH:IN <pballeM@telus.net>, XT:Reedijk, Jill HLTH:IN <Jill.Reedijk@bccdc.ca>
Cc: XT:Flatt, Alexandra HLTH:IN <aflatt@phsa.ca>, XT:byres, david HLTH:IN <david.byres@phsa.ca>, Emerson, Brian P HLTH:EX <Brian.Emerson@gov.bc.ca>
Sent: January 4, 2022 at 1:12:32 PM Pacific Standard Time
Attachments: image001.jpg

I didn't have to, many others did.

I did confirm that the forms he was using were not official.

*Dr Bonnie Henry
Provincial Health Officer
Office of the PHO
Ministry of Health*
s.15; s.19

*Mailing address: PO Box 9648, STN PROV GOVT
Victoria, BC
V8W 9P4
Bonnie.henry@gov.bc.ca*

s.17; s.19
Phone:

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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Sent: January 4, 2022 1:09 PM
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Cc: XT:Flatt, Alexandra HLTH:IN <aflatt@phsa.ca>; XT:byres, david HLTH:IN <david.byres@phsa.ca>; Emerson, Brian P HLTH:EX <Brian.Emerson@gov.bc.ca>
Subject: Re: Medical Exemptions

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So Bonnie did your office report him to the college?

Penny Ballem MD FRCP FCAHS
Mobile 604-551-1477

From: Henry, Bonnie HLTH:EX <Bonnie.Henry@gov.bc.ca>
Sent: Tuesday, January 4, 2022 1:06:14 PM
To: XT:Reedijk, Jill HLTH:IN <Jill.Reedijk@bccdc.ca>
Cc: XT:BalleM, Penny HLTH:IN <pballeM@telus.net>; XT:Flatt, Alexandra HLTH:IN <aflatt@phsa.ca>; XT:byres, david HLTH:IN <david.byres@phsa.ca>; Emerson, Brian P HLTH:EX <Brian.Emerson@gov.bc.ca>
Subject: RE: Medical Exemptions

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This has been reported to the College here as well.

Bonnie

Dr Bonnie Henry
Provincial Health Officer
Office of the PHO
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s.15; s.19

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From: Reedijk, Jill [BCCDC] <Jill.Reedijk@bccdc.ca>
Sent: January 4, 2022 11:22 AM
To: Henry, Bonnie HLTH:EX <Bonnie.Henry@gov.bc.ca>
Cc: XT:Ballem, Penny HLTH:IN <pballem@telus.net>; XT:Flatt, Alexandra HLTH:IN <aflatt@phsa.ca>; XT:byres, david HLTH:IN <david.byres@phsa.ca>; Emerson, Brian P HLTH:EX <Brian.Emerson@gov.bc.ca>
Subject: RE: Medical Exemptions
Importance: High

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Hi Bonnie,

Happy New Year and I hope you are well. Penny and Lexie have advised escalation to your office.

Please see highlighted in yellow, far below at the beginning of this thread an issue raised by our colleagues in Ontario and a quick summary I added here:

Quick Summary:

- It has been brought to my attention via our contact in Ontario, (as part of my role managing interprovincial collaboration related to fraudulent records) that a BC family physician is providing BC COVID vaccine medical exemptions, apparently to Ontario individuals. The physician's name was an immediate red flag for me.
- In short, Ontario are raising their concern about a large group of people, including what sounds like a youth hockey team, and an arena rental, where most of the large group all have medical exemptions to COVID vaccines (proof of vax or an exemption is required by the arenas)
- These "exemptions" have been mostly provided by a Dr Stephen Malthouse and one other physician whose name they are chasing down.
- The physician in question, issuing BC exemptions, is not following the BC policy for exemptions.
- The next hockey game is January 5th.

As an immediate mitigation I have asked my lead to provide the details related to the BC process for issuance of medical exemptions for COVID vaccines to our contacts across the country that we have been working with related to fraudulent records.

It is obviously quite distressing that this physician is seemingly active in subverting public health, including in other provinces, and the involved people seem to be active in large groups and traveling and playing sports without vaccine protection.

Regards,
Jill

be kind, be calm, be safe

Jill Reedijk

Director, Public Health Informatics and Information Solutions
604.707.2483

From: Penny Ballem <pballem@telus.net>**Sent:** Tuesday, January 04, 2022 10:31 AM**To:** Reedijk, Jill [BCCDC] <Jill.Reedijk@bccdc.ca>; Flatt, Alexandra [PHSA] <AFlatt@phsa.ca>; Byres, David [PHSA] <David.Byres@phsa.ca>; Emerson, Brian [EXT] <Brian.Emerson@gov.bc.ca>**Subject:** Re: Medical Exemptions

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This needs to go to Bonnie's office for action - it is a contravention of her authority and college and PHO need to deal with it pb

Penny Ballem MD FRCP FCAHS
Mobile 604-551-1477

From: Reedijk, Jill [BCCDC] <Jill.Reedijk@bccdc.ca>**Sent:** Tuesday, January 4, 2022 10:20 AM**To:** Flatt, Alexandra [PHSA]; Penny Ballem**Subject:** FW: Medical Exemptions

Hi Lexie and Penny,

Raising the below to both of you as there is some urgency. Please see highlighted far below at the beginning of this thread an issue raised by our colleagues in Ontario.

It has been brought to my attention, via our contact in Ontario, that a BC family physician is providing BC COVID vaccine medical exemptions, apparently to Ontario individuals. The physician's name was an immediate red flag for me. <https://www.cbc.ca/news/canada/british-columbia/bc-stephen-malthouse-doctors-petition-college-1.6092437>

In short Ontario are raising their concern about a large group of people, including what sounds like a youth hockey team, and an arena rental where most of the large group all have medical exemptions to COVID vaccine (proof of vax is required by the arenas)

These "exemptions" have been mostly provided by Dr Stephen Malthouse and one other physician whose name they are chasing down.

The physician in question, issuing BC exemptions, is not following the BC policy for exemptions and is known for being problematic WRT COVID vaccines (see attached article)

As an immediate mitigation I have asked my lead to provide the details related to the BC process for issuance of medical exemptions for COVID vaccines to our contacts across the country that we have been working with related to fraudulent records.

Next steps: I look to you for guidance on best next steps related to this concerning situation- I am assuming this is an escalation to authorities or the college but would wait for your guidance.

I note that the next hockey game seems to be tomorrow, the 5th.

Regards,
Jill

be kind, be calm, be safe

Jill Reedijk

Director, Public Health Informatics and Information Solutions
604.707.2483

From: Mosher, Ryan (MOH) <Ryan.Mosher@ontario.ca>
Sent: Monday, January 03, 2022 10:49 AM
To: Yuen, Vania [PHSA] <Vania.Yuen@phsa.ca>
Cc: Persaud, Mala (MOH) <Mala.Persaud@ontario.ca>
Subject: FW: Medical Exemptions

EXTERNAL SENDER. If you suspect this message is malicious, please forward to spam@phsa.ca and **do not** open attachments or click on links.

Hi Vania,

Happy new year! I hope you are well and enjoyed your time off. I have a quick question for you, and you may not be the right person for this, but we have been informed of a BC doctor who has been providing a large number of medical exemptions. Has there been anything flagged on BC's end about Dr. Stephen Malthouse? Should exemptions that come from him be handled like any others?

Thanks!

Ryan Mosher
437-224-8364
Pandemic Response and Recovery
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Hi Ryan,

Happy New Year!

It seems that he has no red flags. Maybe BC is more familiar with him?

Thanks

Carolyn Whiting, RN, BscN, CIC
Manager of Analytics and Planning
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Ryan Mosher
437-224-8364
Pandemic Response and Recovery
Ministry of Health

Page 26 of 39 to/à Page 27 of 39

Withheld pursuant to/removed as

s.16



For vaccine information visit
niagararegion.ca/covid-vaccine

RE: Medical Exemptions

From: Penny Ballem <pballe@telus.net>
To: Henry, Bonnie HLTH:EX <Bonnie.Henry@gov.bc.ca>
Sent: January 4, 2022 at 1:29:06 PM Pacific Standard Time
Attachments: image001.jpg

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

Ok I will make sure that we report in as well pb

Penny Ballem MD FRCP FCAHS
Mobile 604-551-1477

From: Henry, Bonnie HLTH:EX <Bonnie.Henry@gov.bc.ca>
Sent: January 4, 2022 1:13 PM
To: XT:Ballem, Penny HLTH:IN <pballe@telus.net>; XT:Reedijk, Jill HLTH:IN <Jill.Reedijk@bccdc.ca>
Cc: XT:Flatt, Alexandra HLTH:IN <aflatt@phsa.ca>; XT:byres, david HLTH:IN <david.byres@phsa.ca>; Emerson, Brian P HLTH:EX <Brian.Emerson@gov.bc.ca>
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Office of the PHO
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s.15; s.19

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Victoria, BC
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Phone:s.17; s.19

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604.707.2483

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Thanks!

Ryan Mosher

437-224-8364

Pandemic Response and Recovery

Ministry of Health

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Hi Ryan,

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Thanks

Carolyn Whiting, RN, BscN, CIC
Manager of Analytics and Planning
Pandemic Response Division, Public Health & Emergency Services
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Phone: ext. 7210 Toll-free: 1-800-263-7215

www.niagararegion.ca

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Hi Carolyn,

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Ryan Mosher
437-224-8364
Pandemic Response and Recovery
Ministry of Health

Page 34 of 39 to/à Page 35 of 39

Withheld pursuant to/removed as

s.16

RE: Looking for BCCDC name and phone number

From: Reedijk, Jill [BCCDC] <Jill.Reedijk@bccdc.ca>
To: Heidi M. Oetter <hoetter@cpsbc.ca>, Emerson, Brian [EXT] <Brian.Emerson@gov.bc.ca>, Emerson, Brian P HLTH:EX <Brian.Emerson@gov.bc.ca>
Cc: Henry, Bonnie [EXT] <bonnie.henry@gov.bc.ca>, Henry, Bonnie HLTH:EX <Bonnie.Henry@gov.bc.ca>
Sent: January 8, 2022 at 11:05:51 AM Pacific Standard Time

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

Hi Heidi,

Understood.

I'm adding my cell number as well^{s.22}. I'm uncertain if Brian has this contact number and I'm working from home frequently at the moment.

For awareness, our colleagues in Ontario mentioned there were exemptions from a second physician as well. I have not received that name yet however will pass it on if I receive it.

Regards,

Jill

be kind, be calm, be safe

Jill Reedijk

Director, Public Health Informatics and Information Solutions

Provincial Health Services Authority

1770 West 7th

Vancouver, BC V6Z2H3

604.707.2483

Jill.reedijk@bccdc.ca

www.BCCDC.ca

From: Heidi M. Oetter <hoetter@cpsbc.ca>

Sent: Saturday, January 08, 2022 8:02 AM

To: Emerson, Brian [EXT] <Brian.Emerson@gov.bc.ca>

Cc: Henry, Bonnie [EXT] <bonnie.henry@gov.bc.ca>; Reedijk, Jill [BCCDC] <Jill.Reedijk@bccdc.ca>

Subject: Re: Looking for BCCDC name and phone number

EXTERNAL SENDER. If you suspect this message is malicious, please forward to spam@phsa.ca and **do not** open attachments or click on links.

Thanks Brian,

Jill, I have passed on your coordinates to Constable McLaughlin.

Heidi

Sent from my iPad

Heidi M. Oetter, MD

Registrar and CEO

hoetter@cpsbc.ca

Pronouns: she, her, hers

College of Physicians and Surgeons of BC

300-669 Howe Street
Vancouver, BC V6C 0B4
604-733-7758
www.cpsbc.ca
[Twitter](#) | [Facebook](#) | [LinkedIn](#)

Serving the public by regulating physicians and surgeons

The College is located on the unceded territory of the Coast Salish peoples, including the territories of the xʷməθkʷəy̓əm, Skwxwú7mesh, and Səlilwətaʔ/Selilwiltulh Nations.

The content of this email communication, including any attachments, is considered confidential, privileged or otherwise exempt from disclosure. It is intended only for the person(s) to whom it is addressed, and further distribution is strictly prohibited without the consent of the original sender. If you have received this message in error, please immediately notify the sender by telephone at 604-733-7758 or by return email, and delete this communication. Thank you.

> On Jan 7, 2022, at 10:04 PM, Emerson, Brian P HLTH:EX <Brian.Emerson@gov.bc.ca> wrote:

>

> Hi Heidi

>

> I just sent you contact information for Jill Reedijk at BCCDC who should be able to help.

>

> Thanks.

>

> Brian

> Dr. Brian P. Emerson, Deputy Provincial Health Officer

> BC Ministry of Health, PO Box 9648 Stn Prov Govt, Victoria<x-apple-data-detectors://17/0>, BC V8W 9P1

> T 250.952.1701<<tel:250.952.1701>> C s.17

F. 250.952. 1713<<tel:250.952.%201713>>

> brian.emerson@gov.bc.ca<<mailto:brian.emerson@gov.bc.ca>>

>

>

> On Jan 7, 2022, at 6:30 PM, Heidi M. Oetter <hoetter@cpsbc.ca> wrote:

>

>

>

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

>

>

> For a police investigation regarding bogus vaccine exemptions.

> I can verify the “exemption” is not legit but BCCDC needs to give the evidence.

> Who and what phone number?

> Thanks

> Sorry to bother you with this.

> Heidi

>

> Sent from my iPhone

>

> Heidi M. Oetter, MD

> Registrar and CEO

> hoetter@cpsbc.ca

> Pronouns: she, her, hers

>

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FW: Fraudulent exemptions

From: Hume, David CITZ:EX <David.Hume@gov.bc.ca>
To: Greer, David TRAN:EX <David.Greer@gov.bc.ca>, Rathbone, Chris JERI:EX <Chris.Rathbone@gov.bc.ca>
Cc: Emerson, Brian P HLTH:EX <Brian.Emerson@gov.bc.ca>
Sent: January 12, 2022 at 10:59:16 AM Pacific Standard Time

Hey both—further to the discussions on exemptions for the BC Vaccine Card, see the note below for some information on what is running around out there.

Kim pointed out to me that if you check out the Vax Control Group site, the QR they put on their cards actually points web browsers to the Wikipedia article on QR Codes. Very meta.

Best,

David

From: Reedijk, Jill [BCCDC] <Jill.Reedijk@bccdc.ca>

Sent: January 12, 2022 9:39 AM

To: Hume, David CITZ:EX <David.Hume@gov.bc.ca>; Strong, Sonya A HLTH:EX <Sonya.A.Strong@gov.bc.ca>; Rush, Brian HLTH:EX <Brian.Rush@gov.bc.ca>

Subject: Fraudulent exemptions

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

Pertinent info:

To date there have not been any legitimate exemptions issued in BC. As Sonja mentioned the process in being finalized with MOH and HCW requests will be addressed first.

There is a BC physician who has been providing fraudulent “BC” exemptions to Ontarians. This issue is with the authorities and the BC College.

There is a UK group : <https://vaxcontrolgroup.com/> who are advertising in Canada and provisioning an “exemption card” to people who join there vaccine control group. Also fraudulent and also reported to the authorities.

Happy to chat – when Brian mentioned there are meetings this week I thought best to make you aware of these exemption specific items.

Regards,

Jill

be kind, be calm, be safe

Jill Reedijk

Director, Public Health Informatics and Information Solutions

Provincial Health Services Authority

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BC Immunization Committee: COVID-19 immunization program
Wednesday, December 15, 2021, 10-11:30 am
RECORD OF DECISIONS

ITEM	DISCUSSION	ACTION	PERSON
1. Review of Agenda/Additional items			
2.	<p>ROD from December 8, 2021. Please send corrections to monika.naus@bccdc.ca</p> <p>Action item review:</p> <ul style="list-style-type: none"> Action item review <p>Mature minor immunization records and parental access: Monika had a discussion with the privacy officer, Keren Aitken, reviewing the process for sensitive records for youth who provided MMC for COVID-19 immunization at the provincial privacy group. An alternative would be to develop a standard process with agreement from the RHAs and bring it to BCIC.</p> <p>It would also be important to have feasibility considerations with the PPHIS team regarding how the process can be supported with a provision of a record. Stephanie to follow up with CD nurses regarding reasonable options for this process.</p>	<p>Monika to follow up on the query to Ontario on lessons learned from the rollout of COVID-19 vaccines through physician offices.</p> <p>Discussion regarding mature minor immunization records and parental access to be tabled at the regular BCIC January 10th meeting.</p>	<p>Monika Naus</p> <p>Monika Naus</p>
3.	<p>Information items</p> <ul style="list-style-type: none"> a. NACI <ul style="list-style-type: none"> i. Advice for further vaccination of those with perimyocarditis to appear in mid-January Canadian Immunization Guide chapter on COVID-19 vaccines. First version of the CIG chapter to appear January 12; briefing to Chief MHOs on the myocarditis vaccination on January 14th and then into CIG b. PHAC updates <ul style="list-style-type: none"> i. COVID-19 vaccine booster report (enclosed) c. BC <ul style="list-style-type: none"> i. Government launch of pharmacists for boosters https://news.gov.bc.ca/releases/2021HLTH0226-002396 ii. Record accuracy and fraud https://news.gov.bc.ca/releases/2021HLTH0225-002394 d. CoComm <ul style="list-style-type: none"> i. HCW boosters (enclosed) 		
4.	<p>Business Arising:</p> <ul style="list-style-type: none"> a. Pediatric or booster program: roundtable on any issues arising 	<p>Monika to clarify details regarding</p>	<p>Monika Naus</p>

Work underway to assess resource capacity to set up additional clinical services in addition to pharmacies to support booster administration. Pharmacy technicians will be added to the PHO Order to the group who can immunize with appropriate training.

Ingrid flagged that FH is starting to receive requests from parents to vaccinate children 5-11 yos before 8 weeks.

s.13; s.16

s.13; s.16

France will be requiring 3 doses for those aged 12 and up. US does not have restrictions for those aged 12 and under at this time. Recognition that the CEV pediatrics will be a separate subset and a different group will come up with a process for this population if appropriate. The federal government is tightening up travel restrictions to advise Canadians to avoid non-essential travel outside the country. s.13; s.16 VIHA has mostly received requests related to travel-related concerns. Monika shared that the interval to subsequent doses is important to the maturation of the immune response. It is beneficial to wait 8 weeks to ensure a good immune response to subsequent doses. s.13; s.16

s.13; s.16

the consideration of cross-jurisdictional firefighters with Penny Ballem/CoComm.

Monika to request a discussion on the feasibility of COVID-19 immunizations in physician offices at the CoComm Dec 16 meeting.

Monika Naus

s.13

Monika Naus

s.13; s.16

VIHA permits walk-ins for primary series with minimum interval; VIHA currently does not permit walk-ins for 5-11 yos and boosters. Kim Bartel raised that upon return, children have to stay home from school/daycare for 14 days if they are not fully immunized. There are considerable societal restrictions on those under/unimmunized. Stephanie raised that it will be important to accommodate some requests due to parent convenience to prevent missed opportunities for vaccination. s.13; s.16

s.13; s.16

b. 8-week interval to invitation for 2nd dose change in ImmsBC effective this Thursday

The change will take place Thursday night, Dec 16, and will update the records for Friday, Dec 17. The due date for dose 2 prior to Dec 18 will remain unchanged (these appointments will be honoured). The change will impact invites for individuals who have dose 2 due on the 19th and beyond.

HAs are honouring early drop-ins (before 8 weeks) for dose 2, as long as the minimum interval is met while acknowledging that the better efficacy from the longer interval and societal implications of not being fully immunized.

Mike/VIHA inquired in the chat if the regions are experiencing long wait times for people in line for appointments: VIHA, FH and VCH are; and, IHA is only experiencing long wait times in 2-3 urban community sites.

c. Eligibility table synchronization to CoComm directions

Immunization Manual will be updated to state that individuals presenting to a clinic for booster dose, 6 months after completion of primary series will receive an invitation from the Get Vaccinated system. If notifications are sent out prior to these recommendations being included in the Immunization Manual, such individuals should not be turned away at the clinics. If an individual has a booked appointment, these should be honoured at the clinics.

VCH raised that the age for boosters drops by 3-year increments at this time which is challenging in terms of public communications. VCH recommends age decrease by increments of 5 years.

d. Medical exemption notifications - will be sent early January

Medical exemption notifications and letters will be sent after the holiday season, early January for the HCW cohort. Some who have submitted invalid requests have already been informed that the basis for their request is invalid. Some concerns expressed that fraudulent records might have been submitted to employers. More information will go out in terms of the exemption process for BC Vaccine Card. This is feasible through the PIR to create exemptions and feed into BC Vaccine Card.

5. New Items:

- a. Viral vector vaccines for boosters (briefing note to PHEC enclosed); 2300 doses of AstraZeneca received in BC; will track numbers or recipients of 3rd dose

PHEC supports the inclusion of the following guideline and a permissible statement regarding the use of AstraZeneca for people for refuse mRNA: A booster dose with a viral vector COVID-19 vaccine (AstraZeneca) should only be considered when mRNA COVID-19 vaccines are contraindicated or inaccessible, or if the client refuses an mRNA vaccine. A 0.5 mL dose of AstraZeneca vaccine may be offered as the booster dose. Such clients should be informed that the AstraZeneca vaccine provides lower protection against infection with COVID-19, and that it is associated with rare but serious adverse effects (e.g., Thrombosis with Thrombocytopenia Syndrome [TTS], thrombocytopenia and Guillain-Barré syndrome) which have not been seen with the mRNA vaccines.

http://www.bccdc.ca/resource-gallery/Documents/Guidelines%20and%20Forms/Guidelines%20and%20Manuals/Epid/CD%20Manual/Chapter%20%20-%20Imms/Part4/COVID-19_Vaccine_ChAdOx1-S_AstraZeneca_Verity.pdf

BCCDC will produce an analysis to track the population who received AstraZeneca as primary series and assess the proportion that receives mRNA versus AstraZeneca for dose 3 or boosters.

- b. TOR for this group; chairing (enclosed earlier delineation of BCIC and PHEC)

For 2022 January, Monika will draft special terms of reference for this group and consider how BCIC should relate to other tables at which decisions impact both immunization policy and rollout of the program.

Monika to draft a
revised TOR for the
BCIC. Monika
Naus

Monika shared that a formal post-pandemic review will be undertaken to discuss alignment with committee structures. Members also support discussion on how existing committee structures can support the response, particularly BCIC and CD Policy. Recognition that ongoing intensified response to COVID-19 surges is unsustainable. It will be important to discuss a long-term strategy for COVID-19 immunization. Members support systematizing the response to COVID-19, including case and contact management and immunization. Members reiterated their

support for the transition of the delivery of the COVID-19 vaccine through community providers, including pharmacists and physicians. the delivery of COVID-19 vaccine through community providers, including pharmacists and physicians.

c. Debrief: A/H1N1 enclosed, for consideration of future state

6. Standing items:

- a. Roundtable on new issues arising
- b. Information systems/ registry update (Amrita Nijjar)
- c. Clinical issues and materials (Stephanie Meier)

Expanded storage and handing to Pfizer. The new buffer in the pediatric formulation.

- d. Vaccine supply/ logistics update (Zaahira Lalani)

There is expected to be sufficient Pfizer to offer to those under 30, but will require judicious use of the product.

- e. Communications update (Ian Roe)

Social media posts on boosters are forthcoming.

- f. Update on immunization by pharmacists (Ministry/ BC Pharmacy Association (Bryce Wong)

331 pharmacies are taking appointments, there are a total of 500 pharmacies in the system. 220 additional pharmacies are coming online on the ImmsBC system, this would lead to a total of 726 pharmacies. Additional 100 pharmacies are scheduled to come on board in mid-January. The appointment capacity is at 40k as of Monday, Dec 13 (it was at 24k the previous week). Pharmacies in VCH and FH have both Moderna and Pfizer vaccines. Pharmacies elsewhere have Moderna only.

7. **Next Meeting:** Wednesday, January 5th at 3 pm; communication by email.

8. Reference items/ web pages:

COVID-19 coverage and safety reports online:

Coverage:

BCCDC internal to public health dashboard with CHSA vaccine coverage information for those with Tableau Viewer access:

BCCDC public facing dashboards:

<https://public.tableau.com/app/profile/bccdc/viz/BCCDCCOVID-19SurveillanceDashboard/Introduction>

Other dashboard:

with daily doses administered data: see lower left corner for total doses administered and bottom tab 'vaccine information' for first/ second doses cumulative, and 'supply' for doses distributed

<https://experience.arcgis.com/experience/a6f23959a8b14bfa989e3cda29297ded>

Additional coverage information from BC program: LTC and Assisted Living by facility

<http://www.bccdc.ca/health-info/diseases-conditions/covid-19/data#vaccine-coverage>

PHAC online reporting of:

Doses administered daily/ weekly: <https://health-infobase.canada.ca/covid-19/vaccine-administration/>

Safety:

Safety publications are being filed into the SharePoint folder by event type e.g., on myocarditis

BC TTS guidelines https://www.doctorsofbc.ca/sites/default/files/vitt_guidance_for_bc.pdf

BCCDC myocarditis notice to health care professionals: in COVID-19 vaccine health professionals 'toolkit' AEFI section

AEFI surveillance report BC: daily updated surveillance report based on AEFI reported through Panorama in BC is filed Monday-Friday in the SharePoint site at this [link](#); public facing report posted every two weeks on Thursday at [this page](#).

PHAC online reporting of AEFI from CAEFISS system:

<https://health-infobase.canada.ca/covid-19/vaccine-safety/>

BC Immunization Committee: COVID-19 Immunization Program
 Wednesday, January 12, 2022, 3-4:30 pm
 RECORD OF DECISIONS
 RECORDER: Sukhmani Billing (MOH)

ITEM	DISCUSSION	ACTION	PERSON
1.	<p>Review of Agenda/Additional items:</p> <ul style="list-style-type: none"> Discussion on vaccine safety for 5-11 yos is on the agenda for today. Monika circulated information on Pfizer expiry date. The expiry date for February Pfizer doses TBC. The regions will need to set aside Pfizer doses for those under 30s yos at the local level depending on the size of the population and available Pfizer supply at the local level. The <u>Immunization Manual</u> was updated today with information about timing of a booster dose for individuals who received a single dose Janssen vaccine for their primary series. A COVID-19 mRNA vaccine is the preferred product for the booster dose; a booster dose with a viral vector COVID-19 vaccine (i.e., AstraZeneca or Janssen) should only be considered when mRNA COVID-19 vaccines are contraindicated, or if the client refuses an mRNA vaccine. Individuals will have to call the call centre if they would like to receive Janssen booster: <u>Summary of changes: Admin circular; COVID-19 Vaccine Eligibility; COVID-19 Vaccine Vaxzevria™/COVISHIELD (AstraZeneca/Verity Pharmaceuticals); and, COVID-19 Vaccine Janssen</u>. BCCDC is also developing a supporting Q/A document. This information will also be available at the BCCDC and ImmunizeBC website. Monika shared BCIC feedback on clinic efficiencies and patient centered care from the previous January 5 meeting with Dr. Ballem/CoComm. s.13; s.16 	<p>Discussion on shortened observation period to continue at the next meeting, once further analysis is ready.</p> <p>Monika to share BCIC feedback on the practice of immunizers having to get up to go pick up the vaccine with Dr. Penny Ballem.</p>	<p>Monika Naus</p> <p>Monika Naus</p>

	<p>s.13; s.16</p> <ul style="list-style-type: none"> ○ ○ VCH: VCH has pediatric stations with pediatric vaccines only. Immunizers get up to pick up the vaccine as an intentional safety and quality check. • Letter samples for the OPHO the exemptions process were circulated with today's materials. These materials were requested as people might present with fraudulent records. Elizabeth Lee and the team is working on paper certificates to support e-certificates for those who might not be able to access digital vaccine card. OPHO to soon share the decision on exemptions with Elizabeth Lee and the team to inform vaccine cards; approved exemptions will be indicated as 'exempted' on the vaccine card. 		
2.	<p>ROD from January 5, 2022. Please send corrections to monika.naus@bccdc.ca</p> <ul style="list-style-type: none"> • Action Item Review <ul style="list-style-type: none"> a. Information items: <ul style="list-style-type: none"> a. ACIP meeting January 5th <u>slide sets</u> (also sent out Monday); topics update on vaccine safety with focus on pediatrics; adolescent booster doses. <u>CDC guidelines</u> have been accordingly updated to state: "All people ages 12 years and older should receive a booster dose of COVID-19 vaccine, even if they were age 11 years or younger at the time of the primary series." b. Health Canada updates: <ul style="list-style-type: none"> • Novavax decision expected early February • Medicago and Moderna pediatric (6-11 yo) decisions expected mid-February • Waiting for information on Omicron specificity and booster • Janssen and AstraZeneca submitted for boosters - no timeline on these decisions so NACI will 'play it by ear' <p>Janssen is considered as complete after dose 1. Dose 2 (either with mRNA or Janssen/other viral vector vaccine) is considered a booster.</p> <ul style="list-style-type: none"> • No regulatory submissions expected for adolescent boosters from either Pfizer or Moderna, so this would be an off-label recommendation and decision will be up to public health; ditto for 4th dose and special populations NACI will issue recommendations this month. • Pfizer under 5 did not demonstrate non inferiority with two doses so have added a 3rd dose and data may be available in March • Sanofi Pasteur submission expected in March • Omicron boosters - Moderna indicates monovalent and Pfizer unclear. Data expected in March. 	Monika to ask the question related to	Monika Naus

	<p>c. NACI forward agenda (enclosed); this week NACI discussed strength of recommendation for 5-11 yo; whether 5-11 yo CEV should receive a 3 dose primary series; booster doses for 12-17 yo</p> <p>Additional doses/4th doses for LTC: Regulatory submission for additional boosters is not expected in Canada in the near future. NACI attends CMHOs/SAC meetings; NACI will discuss if chiefs request guidance on the 4th dose. The decision on the 4th dose will need to be based on public health priorities. Vaccine effectiveness in older people appears to be maintained. There are no specific studies done in Canada based on congregate settings. The decision regarding the prioritization of booster doses for older people in congregate settings was based on the occurrence of outbreaks in congregate settings.</p> <p>VIHA inquired about current case fatality rates in terms of COVID-19 cases in LTC: BCCDC data shows that illness appears to be mild in these settings and mortality is low. RSV outbreaks seem to be more severe. FH is seeing a low number of deaths; less impact in LTC. FH emphasized that it is important to know how much can be attributed to vaccination versus characteristics of Omicron in general. IHA suggested mortality analysis in LTC of dying with versus from COVID-19. IHA raised that is 4th doses are provided in March then would be approximately 3- 4 months after the previous booster, less than 6-month interval. Members also raised concerns related to global equity. Recognition of system pressures and the need to develop an endemic approach. Members questioned the effectiveness of providing potential additional boosters before summer (the risk is expected to naturally reduce during the summer). It is more appropriate to time boosters during the period when COVID activity is expected to increase.</p> <p>d. CoComm slide deck from January 6th (enclosed)</p>	<p>Pfizer new formulation for 12+ at the CIC.</p> <p>Monika to inquire whether the discussion on 4th dose for LTC can progress at the next PHEC.</p>	Monika Naus
3.	<p>Business Arising:</p> <p>a. Janssen onward vaccination -concluded through PHEC/PHO/CoComm/PPHIS, will be tracking this cohort (also recipient under 30 for receipt of Pfizer vs Moderna)</p> <p>This cohort will be tracked to see which pathway they take. There are approximately 7k people who received Janssen dose 1, some of whom have been immunized out of country. This is mostly mRNA resistant group.</p> <p>b. Non-traditional immunizers - <u>PHO order</u> immunization to drawing up vaccine for pharmacy technicians; veterinarians on hold because of legislative issues; <u>PHO order</u> re emergency medical assistant training requirement for 5-11 yo immunization and 12-17 yo immunization</p> <p>Pharmacy technicians: Before they could only draw up vaccines. The PHO Order now allows them to also immunize. Veterinary College volunteered interest in becoming immunizers. The <i>Veterinarians Act</i> will need to be amended to allow veterinarians to immunize.</p> <p>Now any member of the public can request exemptions through the PHO Office, provisions for that are in the PHO Order below; the form is similar to the HCW form.</p> <ul style="list-style-type: none"> • Public Guidelines for Request for Reconsideration (Exemption) Process - December 23, 2021 (PDF, 447KB) • Medical Deferral Form - October 28, 2021 (PDF, 258KB) 		

	<p>c. Exemptions by PHO for HCWs - template letters (enclosed) PHO Officer letters are being issued. Immunization records for those that are accepted will be modified to allow vaccine cards to indicate that they have approved exemptions. Elizabeth Lee's team will receive the early batch of approved exemptions by January 13, 2022. The exemption decisions will also be shared with the HAs.</p> <p>d. Vania Yuen (vania.yuen@phsa.ca) on Jill Reedijk's team, and the pphis_records_review@phsa.ca account should be the contacts on any suspected COVID-19 vaccine documentation fraud. HAs to also send fraudulent records to the specified email. Members inquired about the process for notifying clients if their immunization records have changed to a 'non-immunized state': Records flagged as potentially fraudulent are not entered into the system, so these individuals are not able to receive their vaccine card and they are notified that they are due for their vaccine. There are some fraudulent records that are in the system, the team is working on a process for these clients to notify them.</p>		
4.	<p>New Items:</p> <p>a) Improving uptake in 5-11 year olds - discussion Monika shared that the province is lagging in terms of 5-11 yos vaccine coverage, compared to survey results (David Humes public's opinions survey); survey expectations were favorable. Jane/BC Paediatric Society raised that parents are interested in understanding the safety profile for pediatric vaccines. Jane also inquired about the potential for a vaccine passport for this age group. Monika shared that the NACI has advised that vaccine passports should not be required for this age group. NACI's rationale is that vulnerable populations and children who might be disadvantaged, whose parents might be making certain decisions, might face barriers to vaccine access depending on their home situation. Manish/Vaccine Evaluation Centre shared that the burden of disease and severity of disease is lower among this age group. Recognition that the communication to promote vaccine uptake was not as aggressive as for adults. The low severity of Omicron cases might discourage people to get their children vaccinated. Ian/ImmunizeBC shared that the BCCDC and ImmunizeBC intend to continue to disseminate information on the good safety profile of the pediatric vaccine. IHA raised that parents might not be as receptive to messaging related to NACI recommendations. Messaging could focus on the safety of the vaccine and the outcome of having COVID-19 infection (comparable risk of the likelihood of severe COVID infection versus AEFI from vaccines).</p> <p>Monika shared the following publication: US data on reduction of MISC in covid vaccinated 12-17 yo: https://www.cdc.gov/mmwr/volumes/71/wr/mm7102e1.htm?s_cid=mm7102e1_w</p> <p>s.13; s.16</p>	<p>BCCDC to update BC Immunization Manual - mRNA vaccine pages to reflect that 8 weeks for boosters can be used as an interval for minority individuals, including pregnant people, but not to be used as a routine interval.</p> <p>BCCDC to update Health Care Professional Toolkit and public facing information with recommendations on boosters for pregnant people.</p> <p>Monika to connect with VIHA to</p>	<p>Monika Naus</p> <p>Monika Naus</p> <p>Monika Naus</p>

	<p>b) Pregnant people - boosters Monika circulated CoComm update on pregnant people. Monika flagged that it is important to ensure that anyone with a high-risk factor is not brought forward to 8 weeks for their booster dose.</p> <ul style="list-style-type: none"> Effective Jan 12, pregnant people that self-identify via the call centre can be booked in if they are at or over 8 weeks from dose 2 Of the 1,800 people that have already self-identified as being pregnant who have not yet reached 182 days, they will be reforecasted to 8 weeks so we can invite them Call centre agents should use the early dose 3 reason field so that people are not turned away at clinics/pharmacies People are not required to show any proof of pregnancy at clinics/pharmacies when they come in for their appointment HAs/BCPhA - please ensure clinic staff and pharmacists are aware of this update - clinicians can refer to the early D3 reasons field to confirm eligibility <p>c) Pfizer request for AEFI records (requested by VIHA) VIHA has received a request from the Pfizer drug safety unit for information on a client with AEFI. VIHA inquired if other HAs have received similar requests directly from manufacturers for safety reports. Sometimes, manufacturers request information on cases that have been in the news. The province reports AEFI cases at the record level to the Public Health Agency of Canada (PHAC) as part of Canadian Adverse Events Following Immunization Surveillance (CAEFISS). PHAC further communicates with Health Canada on post-marketing safety surveillance.</p>	further discuss Pfizer request for AEFI records, and raise it at the Vaccine Vigilance call on January 13, 2022.	
5.	<p>Standing items:</p> <p>a. Roundtable on new issues arising IHA inquired about the criteria for shorter interval for dose 2 for 5-11 yos: A few of these requests are related to travel, timing with immunosuppressive scenarios, and if a client presents at less than 8 weeks and the immunizer is uncertain whether the client will ever return (vulnerable population and to avoid missed opportunities for vaccination). Stephanie/BCCDC shared that there is no pre-established list of criteria for shorter interval for dose 2 for 5-11 yos; this is meant to occur on a case-by-case basis. FH has indicated (on another call) that they have a list of pre-approved scenarios for which shorter interval could be used.</p> <p>b. Information systems/ registry update (Elizabeth Lee) c. Clinical issues and materials (Stephanie Meier) d. Vaccine supply/ logistics update (Zaahira Lalani) e. Communications update (Ian Roe) f. Update on immunization by pharmacists (Ministry/ BC Pharmacy Association (Bryce Wong)</p>	<p>Monika to connect with Penny Ballem regarding criteria for which shorter interval for dose 2 can be used for 5-11 yos.</p> <p>Monika to follow-up on whether the issue of two physicians involved in anti-vaccine town halls and other activities should be raised at the PHEC.</p>	<p>Monika Naus</p> <p>Monika Naus</p>

6.	Next Meeting: Wednesday January 19 th at 3 pm; first w/o March rescheduling to accommodate Immunization Forum	Monika to switch Wednesday March 1 st 3pm BCIC COVID meeting to March 4 th 10am.	Monika Naus
7.	<p>Reference items/ web pages: <u>COVID-19 coverage and safety reports online:</u> Coverage: <u>BCCDC internal to public health dashboard</u> with CHSA vaccine coverage information for those with Tableau Viewer access: <u>BCCDC public facing dashboards:</u> https://public.tableau.com/app/profile/bccdc/viz/BCCDCCOVID-19SurveillanceDashboard/Introduction <u>Other dashboard:</u> with daily doses administered data: see lower left corner for total doses administered and bottom tab ‘vaccine information’ for first/ second doses cumulative, and ‘supply’ for doses distributed https://experience.arcgis.com/experience/a6f23959a8b14bfa989e3cda29297ded Additional coverage information from BC program: LTC and Assisted Living by facility http://www.bccdc.ca/health-info/diseases-conditions/covid-19/data#vaccine-coverage <u>PHAC online reporting of:</u> Doses administered daily/ weekly: https://health-infobase.canada.ca/covid-19/vaccine-administration/</p> <p>Safety: Safety publications are being filed into the SharePoint folder by event type e.g., on myocarditis BC TTS guidelines https://www.doctorsofbc.ca/sites/default/files/vitt_guidance_for_bc.pdf BCCDC myocarditis notice to health care professionals: in COVID-19 vaccine health professionals ‘toolkit’ AEFI section</p> <p><u>AEFI surveillance report BC:</u> daily updated surveillance report based on AEFI reported through Panorama in BC is filed Monday-Friday in the SharePoint site at this link; public facing report posted every two weeks on Thursday at this page.</p> <p>PHAC online reporting of AEFI from CAEFISS system: https://health-infobase.canada.ca/covid-19/vaccine-safety/</p>		

BC Immunization Committee: COVID-19 Immunization Program
 Wednesday, January 19, 2022, 3-4:30 pm
 RECORD OF DECISIONS
 RECORDER: Kirsty Jack (MoH)

ITEM	DISCUSSION	ACTION	PERSON
1.	Additional items to add to today's agenda: <ol style="list-style-type: none"> a. Booster (4th) dose for CEV population b. Exemption process for PIR 		
2.	<p>ROD from January 12 enclosed. Please send corrections to monika.naus@bccdc.ca</p> <ul style="list-style-type: none"> • Action item review <ol style="list-style-type: none"> a. Information items: <ol style="list-style-type: none"> a. Pfizer vaccine 30 µg formulation (for 12+) with 'gray cap' and TRIS buffer will not require dilution. Storage conditions will be very similar (may be the same) as the current pediatric vaccine i.e., ability for long-term storage at ULT with up to 10-week storage at 2 to 8C. It will be available in Canada possibly in late March. See https://www.factcheck.org/2021/11/scicheck-pfizer-biontechs-covid-19-vaccine-formulation-tweaked-to-improve-stability/ b. Health Canada updates: <ul style="list-style-type: none"> • Medicago approval ETA mid-February • Novavax approval ETA 3rd wk. February • Moderna pediatric for age 6-11 expected March • Under age 5 Pfizer: plans to file with US FDA soon, then in Canada. ACIP will meet early February. Meeting with Pfizer later this week to find out whether this application will involve three dose primary series, per new reports. • Boosters under review for Janssen and AstraZeneca - no timelines c. <u>NACI myocarditis recommendations</u> issued. Not actively looking for evidence of recurrence, but so far, no evidence of reoccurrence. Individuals who experience myocarditis after 1st dose, can seek vaccine exemption. d. NACI forward agenda re recommendations for ongoing vaccination following COVID-19 infection. Expect NACI will make recommendations about COVID infections after dose one for pediatric population, and whether they require a second dose. Manish offered that current guidance is for children to wait 90 days after infection but also keep treatment into consideration. This discussion can be flagged to NACI. e. Supply expectations for 'new vaccines': federal government agreements are that supply will be available within 2 weeks of Health Canada approval. PHAC is discussing supply with Novavax. Millions (not tens of millions) of doses are anticipated for Canada. Early March there could be supply in Canada, question remains will there be a demand for this product and roughly how many people will request it. Martin 	<p>Monika will connect with Manish about ongoing vaccination following COVID-19 infection for</p>	

	<p>Lavoie said it could be a good option to offer, there will probably be some demand. Preference for these products will likely come from misinformation and perceptions of other vaccines.</p> <p>f. Moderna 14 dose vials with 20 puncture limit and wastage implications. 1.6M left in stock for 14 doses, the last week BC will be receiving 14 dose files will be next week, though could be subject to change. Moderna was concerned about the integrity of the stopper past a 20-puncture limit and possibility of getting bits from the stopper into the vaccine. There is currently no concern about the supply of Moderna so keep the 20-puncture limit.</p>	pediatric population.	
3.	<p>Business Arising:</p> <p>a. s.13; s.16</p> <p>b. Criteria for early 2nd dose for 5-11-year-olds (enclosed) Members reviewed. These guidelines have come from previous guidelines for twelve and over and these came from Penny Ballum's team. Fraser Health suggested the removal of school or camp as a reason for early second dose, as this could encompass a wide range of activities and MHOs could be inundated with requests. Interior Health agreed. This criterion could be added at a later date when the majority of second doses have been administered. This document will be finalized and sent to PHEC for recommendation.</p> <p>c. Elizabeth Lee requested to get contact information of the designated people at the Health Authorities who overlook the exemption letters for health care workers (HCW). This requested contact information is for regional information systems reps and also given to Hayley Miller. Medical exemptions will be going into PIR, but these don't flow into PARIS. It was noted that a request to forward representatives</p>	Monika and Marion to discuss offline shortened observation period with regards to the FNHA clinics.	Monika Naus

	<p>was already made in Nov/Dec for PHL or PHEC. Interior Health not they have started receiving exemption decisions. Martin (PHO) confirmed that most denial letters have been sent at this time. Approval letters will be sent out later this week, more complex letters will be another week or two. PHO has sent these letters to HR, but not sure about whether they have been sent to the CMHOs.</p>		
4.	<p>New items:</p> <ol style="list-style-type: none"> It is expected that there will be a recommendation from NACI on adolescent boosters. It is expected that the recommendation will be for adolescents with risk factors for severity of disease and at risk for transmission to others at risk. Members discussed the complication of this recommendation for implementation. This recommendation might mean it would require outreach and letters of attestation. Bonnie Henry is willing to wait for NACI guidance on for adolescent boosters. The recommendation is expected sometime in January. Members discussed how there are 16/17-year-olds that were CEV that have had 2 dose some time ago and were prioritized and are now requesting a booster. Also, in consideration is that there may be an omicron specific booster being produced. A risk vs benefits ratio needs to be considered, in some contexts there is a higher risk for adolescents and then the booster makes sense. However, members discussed how age is still the single highest risk factor. The list of risk factors for youth is being discussed at length (obesity, neurological considerations, Downs Syndrome, etc.). Members also voiced concern that if a physician attestation letter is required, this will burden physicians and would also miss anyone who does not have a family physician. Interior Health requested clarity on who is recommended, but also requested that policing this recommendation not be a burden to the system. Members agreed that there would be challenges to operationalize this recommendation if the criteria from NACI is vague. Stephanie Meier inquired with members to verify that all communities are receiving pediatric Pfizer. If so, she can remove 11-year-old use for 100 µg Moderna product from guidelines. Members except FNHA could verify that Pfizer is on hand. Stephanie Meier also inquired with members if they are still pooling residual doses, as this is still the current addendum to guidelines. Vancouver coastal and Interior health confirmed they still use this. This guidance will remain in the immunization manual. Concern of wastage of Moderna has been flagged to CIC. Booster doses (which would be a 4th dose) for CEV populations who received the 3 dose primary series in September/October. March 14th the group targeting will become eligible for booster, and invitations will go out from ImmsBC. This invitation will be based on CEV flag of individuals who have a flag on their records. There is a potential for no documentation in ImmsBC if an attestation letter was used and not documented at the time of the third dose. 	<p>Marion will connect with Stephanie regarding whether there is Pediatric Pfizer in FNHA.</p>	<p>Stephanie Meier / Marion Guenther</p>
5.	<p>Standing items:</p> <ol style="list-style-type: none"> Vaccine supply/ logistics update: The current low dead volume syringes and needles will slowly become unavailable and there will be a transition to a different type of syringe and needle. 	<p>The Ministry to follow up on whether there is a</p>	<p>MOH/Zaahira Lalani</p>

	There is no exact date set yet. In addition, mask quality at immunization clinics was flagged to Penny Ballum and her team. A question was posed to members about whether there is a hard line on mask type at clinics. Health Authorities confirmed that there has not been a hard line on this.	supply issue for masks at immunization clinics.	
6.	Next meeting: Wednesday January 26 th at 3 pm; first w/o March rescheduling to accommodate Immunization Forum		
7.	Forward agenda: <ul style="list-style-type: none"> • Booster doses for 12-17-year-olds: high risk • 4th doses e.g., for seniors in congregate living • Immunization of under 5-year-olds • Additional vaccines - indications for use for Medicago and Novavax, whether to wait for 'Omicron' modified vaccines 		
	<p>Reference items/ web pages: COVID-19 coverage and safety reports online: Coverage: BCCDC internal to public health dashboard with CHSA vaccine coverage information for those with Tableau Viewer access: BCCDC public facing dashboards: https://public.tableau.com/app/profile/bccdc/viz/BCCDCCOVID-19SurveillanceDashboard/Introduction Other dashboard: with daily doses administered data: see lower left corner for total doses administered and bottom tab 'vaccine information' for first/ second doses cumulative, and 'supply' for doses distributed https://experience.arcgis.com/experience/a6f23959a8b14bfa989e3cda29297ded Additional coverage information from BC program: LTC and Assisted Living by facility http://www.bccdc.ca/health-info/diseases-conditions/covid-19/data#vaccine-coverage PHAC online reporting of: Doses administered daily/ weekly: https://health-infobase.canada.ca/covid-19/vaccine-administration/</p> <p>Safety: Safety publications are being filed into the SharePoint folder by event type e.g., on myocarditis BC TTS guidelines https://www.doctorsofbc.ca/sites/default/files/vitt_guidance_for_bc.pdf BCCDC myocarditis notice to health care professionals: in COVID-19 vaccine health professionals 'toolkit' AEFI section</p> <p>AEFI surveillance report BC: daily updated surveillance report based on AEFI reported through Panorama in BC is filed Monday-Friday in the SharePoint site at this link; public facing report posted every two weeks on Thursday at this page.</p> <p>PHAC online reporting of AEFI from CAEFISS system:</p>		

	https://health-infobase.canada.ca/covid-19/vaccine-safety/		
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MINISTRY OF HEALTH | PROVINCIAL VACCINE MANAGEMENT

ImmsBC Historical Dose Functionality & Fraud Update

January 12, 2022



Agenda

Discussion Topics

Key Discussion Topics

- Confirm acceptable use of ImmsBC historical dose functionality
- Update on fraud management
- Next steps

ImmsBC Historical Dose Functionality – Acceptable Use

- ImmsBC historical dose functionality supports the ability to enter historical/past COVID doses
- s.13

-

- Audit reports of use of historical dose functionality are available

Reminder: All requests for entry of historical COVID doses should be submitted through the citizen portal

Next Steps

- Reinforce appropriate use of historical dose
- Complete record reviews provided in December

s.13

s.13

Update – Fraud Management

- Records are flagged for fraud review based on:
 - Two doses administered in BC, neither dose recorded in PIR
 - s.13
 -
- s.13
- 2,552 letters have been sent to citizens, with messaging that their immunizations could not be validated and will not be processed into PIR (as of Jan 12, 2022)
- ~300 records sent to call centre to gather additional information
- ~350 records sent to HAs for follow up (192 responses received; 4/192 assessed as valid)



Date

Cliff #1218258

Ref:

Name:

Dear [NAME OF APPLICANT]

I am writing in response to your request for a medical exemption under the Provincial Health Officer (“PHO”) *Residential Care COVID-19 Preventive Measures Order* or the *Hospital and Community (Health Care and Other Services) COVID-19 Vaccination Status Information and Preventive Measures* (the “Orders”).

[SET OUT THE BACKGROUND OF THE CORRESPONDENCE WITH EACH INDIVIDUAL:

- Date of initial email
- Date of OPHO acknowledgement
- Date of any OPHO requests for further information. INCLUDING START DATE OF TWO WEEK NOTICE PERIOD
- Note that no further correspondence received from requestor]

The Orders both require that:

- a request from a person seeking an exemption must be made on the basis that the health of the person would be seriously jeopardized if the person were to comply with the Order.
- the request follow the Guidelines posted on the PHO website. The Guidelines require a requestor to have a physician attest, on the form included with the Guidelines, that proceeding with COVID-19 immunization would seriously jeopardize the health of the requestor.

Despite the attempts noted above to request the necessary information from you, a **COVID-19 Vaccine Medical Deferral Form (the “Medical Deferral Form”) was not received from you.**

By failing to provide the Medical Deferral Form you have not complied with the Order and Guidelines and furthermore you have not satisfied me that proceeding with COVID-19 immunization would seriously jeopardize your health. Accordingly, your request for an exemption from the requirements of the Orders is rejected.

This decision is final, and I will not accept further information, documentation or requests for reconsideration respecting this matter from you.

This rejection of your request for an exemption is effective 14 days from the date of this letter.

Your employer will receive a letter from our Office advising that your request for a medical exemption was rejected.

Your employer will contact you about how your employer manages employees who have had their request for an exemption rejected.

You should be aware that, by not having had a full course of vaccination, you are at higher risk of contracting COVID-19 and of serious outcomes if infected. As such you should be particularly aware of the preventive measures that you can take to reduce your risk which are published at the:

- BC Centre for Disease Control website (<http://www.bccdc.ca/health-info/diseases-conditions/covid-19>) and
- Government of Canada website (<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks.html>)

Sincerely,

[Signature block of decision maker]



Date

Cliff #1218260

Ref:
Name:

Dear [NAME OF APPLICANT]

I am writing in response to your request for a medical exemption under the Provincial Health Officer (“PHO”) *Residential Care COVID-19 Preventive Measures Order* or the *Hospital and Community (Health Care and Other Services) COVID-19 Vaccination Status Information and Preventive Measures* (“the Orders”).

[SET OUT THE BACKGROUND OF THE CORRESPONDENCE WITH EACH INDIVIDUAL:

- Date of initial email
- Date of OPHO acknowledgement
- Date of any OPHO requests for further information
- Note that no further information received from requestor]

The Orders both require that:

- a request from a person seeking an exemption must be made on the basis that the health of the person would be seriously jeopardized if the person were to comply with the Order.
- that the request follow the Guidelines posted on the PHO website. The Guidelines require a requestor to have a physician attest, on the form included with the Guidelines, that proceeding with COVID-19 immunization would seriously jeopardize the health of the requestor.

Despite the attempts noted above to obtain the necessary information from you, a **COVID-19 Vaccine Medical Deferral Form (the “Medical Deferral Form”) was not received from you.**

By failing to provide the Medical Deferral Form you have not complied with the Order and Guidelines and furthermore you have not satisfied me that proceeding with COVID-19 immunization would seriously jeopardize your health. Accordingly, your request for an exemption from the requirements of the Orders is rejected.

This decision is final, and I will not accept further information, documentation or requests for reconsideration respecting this matter from you.

This rejection of your request for an exemption is effective 14 days from the date of this letter.

Your employer will receive a letter from our Office advising that your request for a medical exemption was rejected.

Your employer will contact you about how your employer manages employees who have had their request for an exemption rejected.

You should be aware that, by not having had a full course of vaccination, you are at higher risk of contracting COVID-19 and of serious outcomes if infected. As such you should be particularly aware of the preventive measures that you can take to reduce your risk which are published at the:

- BC Centre for Disease Control website (<http://www.bccdc.ca/health-info/diseases-conditions/covid-19>) and
- Government of Canada website (<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks.html>)

Sincerely,

[Signature block of decision maker]



Date

Cliff #1218263

Ref:

Name:

Dear [NAME OF APPLICANT]

I am writing in response to your request for a medical exemption under the Provincial Health Officer (“PHO”) *Residential Care COVID-19 Preventive Measures Order* or the *Hospital and Community (Health Care and Other Services) COVID-19 Vaccination Status Information and Preventive Measures* (the “Orders”).

[SET OUT THE BACKGROUND OF THE CORRESPONDENCE WITH EACH INDIVIDUAL:

- Date of initial email
- Date of OPHO acknowledgement
- Date of any OPHO requests for further information
- Note that no further information received from requestor.]

Your request for a medical exemption is not complete and will not be considered until you comply with the requirements of the Orders relating to such requests.

Pursuant to both Orders, a request for reconsideration from a person seeking an exemption from the requirement to be vaccinated or to provide proof of vaccination must be made on the basis that the health of the person would be seriously jeopardized if the person were to comply with the Order and the request 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>).

The Guidelines require the request to be “accompanied by the medical deferral form” supporting the request. A copy of the COVID-19 Medical Deferral Form (the “Medical Deferral Form”) is available at [this link](#).

You must submit Medical Deferral Form signed by a nurse practitioner or medical practitioner in order for your request to be considered. Please note that since your request does not comply with the requirements of the Orders, you are required to comply with all applicable requirements of the order respecting proof of vaccines and related prohibitions.

Sincerely,

Ministry of Health

Office of the
Provincial Health Officer

4th Floor, 1515 Blanshard Street
PO Box 9648 STN PROV GOVT
Victoria BC V8W 9P4
Tel: (250) 952-1330
Fax: (250) 952-1570
<http://www.health.gov.bc.ca/pho/>

[Signature block of decision maker]



Date

Cliff #1218270

Ref:

Name:

Dear [NAME OF APPLICANT]

I am writing in response to your request for a medical exemption under the Provincial Health Officer (“PHO”) *Residential Care COVID-19 Preventive Measures Order or the Hospital and Community (Health Care and Other Services) COVID-19 Vaccination Status Information and Preventive Measures* (“the Orders”).

[SET OUT THE BACKGROUND OF THE CORRESPONDENCE WITH EACH INDIVIDUAL:

- Date of initial email
- Date of OPHO acknowledgement
- Date of any OPHO requests for further information
- Note that no further information received from requestor]

The Orders both require that a request for reconsideration with respect to vaccination, or 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.

The submitted information provided on or with the COVID-19 Vaccine Medical Deferral Form did not meet the criteria for a temporary medical deferral.

The reason that the information provided does not meet the criteria for a temporary deferral is that [*Whatever has been reported Describe the situation, if only briefly. The reasons for the refusal need to be specific to the person making the request and their situation.*] As such, the rationale provided is not a reason for a temporary medical deferral.

Please note that the National Advisory Committee on Immunization (NACI) recommends [*enter relevant recommendation to receive full vaccine series here, and point to the specific page in the NACI document.*]

The full NACI document is at:

Ministry of Health

Office of the
Provincial Health Officer

4th Floor, 1515 Blanshard Street
PO Box 9648 STN PROV GOVT
Victoria BC V8W 9P4
Tel: (250) 952-1330
Fax: (250) 952-1570
<http://www.health.gov.bc.ca/pho/>

<https://www.canada.ca/en/public-health/services/immunization/national-advisory-committee-on-immunization-naci/recommendations-use-covid-19-vaccines.html#a8>.

This decision is final, and I will not accept further information, documentation or requests for reconsideration respecting this matter from you.

This rejection of your request for an exemption is effective 14 days from the date of this letter.

Your employer will receive a letter from our Office advising that your request for a medical exemption was rejected.

Your employer will contact you about how your employer manages employees who have had their request for an exemption rejected.

Sincerely,

[Signature block of decision maker]



Date [Same date as date of letter to employee]

Cliff #1218294

Employer name and contact information

Ref:

Name:

This is to inform you of the outcome of the request of the above worker for a medical exemption to be vaccinated under the Provincial Health Officer (PHO) *Residential Care COVID-19 Preventive Measures Order* or the *Hospital and Community (Health Care and Other Services) COVID-19 Vaccination Status Information and Preventive Measures*.

This letter confirms that the worker's exemption request has been rejected.

The employee has been informed that this rejection of a request for an exemption is effective 14 days from the date of this letter.

Further to the requirements of the relevant Provincial Health Officer order the worker must be vaccinated or have an exemption to work and an employer must not permit an unvaccinated staff member who is not vaccinated or who does not have an exemption to work once this rejection is in effect.

Sincerely,

[Signature block of decision maker]



Date

Cliff #1218298

Ref:

Name:

Information deadline: *[2 weeks after date of letter]*

Dear [NAME OF APPLICANT]

I am writing in response to your request for a medical exemption under the Provincial Health Officer (PHO) *Residential Care COVID-19 Preventive Measures Order* or the *Hospital and Community (Health Care and Other Services) COVID-19 Vaccination Status Information and Preventive Measures*.

This letter confirms that your exemption request has been **temporarily approved under the following conditions:**

Within 2 weeks of this letter *[instructions vary depending on medical deferral criteria]*

For anaphylaxis to both vaccine types

- Contact a health care provider and request a referral to an allergist to determine if/how vaccination can proceed
- Submit your confirmed appointment date with the *allergist / immunologist* to PHOExemptions@gov.bc.ca

After your allergist appointment:

- Please submit written results / recommendations to PHOExemptions@gov.bc.ca (you or the *allergist / immunologist* can send this information) within 5 days of your appointment

For receipt of anti-SARS-CoV-2 monoclonal antibodies or convalescent plasma

- Please submit your confirmed appointment date to be reassessed by your physician or nurse practitioner to determine when vaccination can be administered

For diagnosis of MIS

- Please submit your confirmed appointment date to be reassessed by your physician or nurse practitioner to determine when vaccination can be administered

For myocarditis/pericarditis or reported AEFI, case-by-case requirements or instructions

- As of January 5, 2022, the National Advisory Committee on Immunization continues to recommend that in most circumstances, and as a precautionary measure until more information is available, further doses of mRNA COVID-19 vaccines should be deferred among people who experienced myocarditis and/or pericarditis within 6 weeks of receiving a previous dose of an mRNA COVID-19 vaccine. This includes any person who had an abnormal cardiac investigation including ECG, elevated troponins, echocardiogram or cardiac MRI after a dose of mRNA vaccine.
- Those with a history compatible with pericarditis and who either had no cardiac workup or had normal cardiac investigations, can be revaccinated once they are symptom free and at least 90 days has passed since vaccination.

Preventive measures

- You must undertake the following preventive measures while at work:
 - wear a medical mask at all times except when consuming food or beverage or for personal hygiene
 - follow preventive measures at work if further prescribed by the medical health officer

Reassessment

- Your temporary deferral will be reassessed upon receipt of *[choose relevant documentation above]*

Vaccination status

- Please inform my Office at PHOExemptions@gov.bc.ca if you receive a dose of COVID-19 vaccine subsequent to this decision.

Please note that we will be regularly re-assessing exemptions that have been granted considering the evolving COVID-19 epidemiologic situation. As such the requirements for you to take preventive measures as part of this exemption may change, including the possibility of withdrawing exemptions.

Your employer will receive a letter from our Office confirming your temporary exemption status and the requirement to continue to undertake preventive measures at work. No medical information will be shared with your employer.

You should be aware that, by not having had a full course of vaccination, you are at higher risk of contracting COVID-19 and of serious outcomes if infected. As such you should be particularly aware of the preventive measures that you can take to reduce your risk which are published at the:

- BC Centre for Disease Control website (<http://www.bccdc.ca/health-info/diseases-conditions/covid-19>) and

- Government of Canada website (<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks.html>)

Sincerely,

[Signature block of decision maker]



Date

Cliff #1218299

Ref:

Name:

Dear [NAME OF EMPLOYER]

I am writing to inform you of the outcome of the request of the above worker for a medical exemption to be vaccinated under the Provincial Health Officer (PHO) *Residential Care COVID-19 Preventive Measures Order* or the *Hospital and Community (Health Care and Other Services) COVID-19 Vaccination Status Information and Preventive Measures*.

This letter confirms that the worker's exemption request has been **temporarily approved**.

Preventive measures

- The worker must continue to undertake the following preventive measures while at work:
 - wear a medical mask at all times except when consuming food or beverage or for personal hygiene
 - follow preventive measures at work if further prescribed by the medical health officer

As this is a temporary exemption, we will be following up with the worker to reassess the exemption status and will inform the worker and you if the exemption status changes.

Please note that we will be regularly re-assessing the granting of exemptions and considering the evolving COVID-19 epidemiologic situation. As such the requirements for preventive measures to be undertaken by exempted people may change, including the possibility of withdrawing exemptions.

Sincerely,

[Signature block of decision maker]

Cc: [Regional medical health officer contact name]

Public Health Executive Committee
Monday January 24, 2022 - 11:30am-12:30pm

Join the Zoom meeting: s.15; s.17

Meeting ID: s.15; s.17

Password: s.15; s.17

If unable to join by Zoom, please dial in by your location s.15; s.17

Committee Members:

MoH – Trish Sterloff (co-chair)	VIHA – Dr. Richard Stanwick	<u>Committee Support:</u> MoH – Sarah Amyot MoH – Robyn Mackenzie (secretariat)
VCH – Dr. Patty Daly (co-chair)	FNHA – Dr. Shannon McDonald	
FHA – Dr. Elizabeth Brodtkin	BCCDC – Dr. Reka Gustafson	
IHA – Dr. Sue Pollock/Karen Bloemink	PHO – Dr. Bonnie Henry	
NHA – Dr. Jong Kim/Tanis Hampe		

Mandate of the Committee: PHEC provides advice to the Ministry of Health to guide the strategic direction for public health in British Columbia. PHEC is a collaborative forum to discuss and set priorities, problem-solve implementation issues, oversee monitoring and reporting, and support the overall health system priorities by integrating public health into the continuum of care.

1.0 Call to Order/Administrative Items			Purpose	Lead	Attachments
11:30-11:35 (5 mins)	1.1	Welcome and Review of the Agenda	Information	Dr. Patty Daly	1.1 PHEC ROD – January 17
2.0 Agenda Items			Purpose	Lead	Attachments
11:35-11:40 (5 mins)	2.1	Updates: <ul style="list-style-type: none"> Leadership Council (LC) Operations Planning Coordination Committee (CoComm) 	Information	Dr. Bonnie Henry Dr. Reka Gustafson	
11:40-11:50 (10 mins)	2.2	Post Secondary Symptomatic Testing Guidance	Information	Dr. Reka Gustafson	2.2 Final Guidance
11:50-12:00 (10 mins)	2.3	Approved Medical Exemptions	Discussion	Dr. Martin Lavoie Dr. Patty Daly	
12:00 -12:25 (25 mins)	2.4	Standing Item: All members brief update on vaccine implementation and COVID-19 management – Roundtable	Discussion	All Members	
3.0 Wrap Up			Purpose	Lead	Attachments
12:25-12:30 (5 mins)	3.1	Wrap Up/Next Meeting <ul style="list-style-type: none"> Next Meeting: January 31, 2022 – 11:30am-12:30pm Future agenda item: Mature Minor Consent; Immunization Services on School Grounds 	Information	Dr. Patty Daly	

Public Health Executive Committee
Monday, January 24, 2022 - 11:30am-12:30pm

Attendees: Dr. Patty Daly, Dr. Bonnie Henry, Dr. Richard Stanwick, Dr. Jong Kim, Dr. Reka Gustafson, Dr. Shannon McDonald Dr. Elizabeth Brodtkin, Dr. Sue Pollock, Tanis Hampe, Karen Bloemink, Bernard Achampong (for Trish Sterloff)

Regrets: Trish Sterloff

Staff & Guests: Dr. Brian Emerson, Dr. Martin Lavoie, Dr. Monika Naus, Dr. Mark Lysyshyn, Dr. Ingrid Tyler, Dr. Murray Fyfe, Dr. Kamran Golmohammadi, Charuka Maheswaran, Jonathan Robinson, Brian Sagar, Bethany McMullen, Donna Jepsen, Sukhmani Billing, Haley Miller, Sarah Amyot, Robyn Mackenzie (secretariat)

Agenda Item	Discussion	Action or Decision
Updates: <ul style="list-style-type: none"> Leadership Council CoComm 	<u>Leadership Council update:</u> <ul style="list-style-type: none"> The COVID-19 5-11 year-old vaccine and increasing uptake an area of focus, as well as continued promotion of dose 1 in adults. Medicago and Novavax vaccines are in the approval process with Health Canada. If approved by Health Canada they should be available for distribution within two weeks. These vaccines will be another tool in our toolkit. <u>CoComm update:</u> <ul style="list-style-type: none"> Co Comm was cancelled last week. No update. 	
Post Secondary Symptomatic Testing Guidance	<ul style="list-style-type: none"> The BC Centre for Disease Control has developed guidance specifically for post-secondary institutions regarding the availability and use of rapid antigen tests. The Ministry of Advanced Education will be distributing this guidance to post-secondary institutions later today. 	
Approved Medical Exemptions	<ul style="list-style-type: none"> Updates and letters will continue to be issued regularly to the Regional Health Authorities (RHAs) from the Office of the Provincial Health Officer (OPHO) on the status of health care worker exemption requests once they've been accepted or denied. The OPHO confirmed that RHAs will receive information about health care staff <u>working</u> in their regions (currently excluding private practitioners); an Order is being drafted specifically for private practitioners. The Committee agreed that for every approved exemption, the OPHO should confirm whether an Adverse Event Following Immunization (AEFI) form has been completed. For those individuals waiting for specific consultations with specialists (e.g. allergists), they are being issued 90 day exemptions once they confirm their appointment date, then they have five business days to provide the recommendation from their specialist to the OPHO. There had previously been Provincial interest to create clinics for sought-after specialists right now (allergists being one of them); Dr. Emerson will follow up and see if there is still interest in doing this. 	

Agenda Item	Discussion	Action or Decision
Standing Item - Roundtable	<ul style="list-style-type: none"> Health Authorities, the Ministry of Health and the BC Centre for Disease Control participated in a roundtable on vaccine implementation and COVID-19 vaccine management. 	
Wrap-Up/Next Meeting	<p>Next Meeting</p> <ul style="list-style-type: none"> January 31, 2022 – 11:30am to 12:30pm 	<p>Action: Members to send agenda items for the next PHEC meeting to Robyn Mackenzie at PPHPlanning@gov.bc.ca</p>



Date

Cliff #1218304

Ref:

Name:

Dear [NAME OF APPLICANT]:

I am writing in response to your request for a medical exemption under the Provincial Health Officer ("PHO") *Gatherings and Events* Order and the *Food and Liquor Service Premises* Order which was received on [DATE].

[IF FURTHER CORRESPONDENCE SET OUT THE BACKGROUND OF THE CORRESPONDENCE WITH EACH INDIVIDUAL IF RELEVANT]

Your request for a medical exemption is not complete and will not be considered until you comply with the requirements of the Orders relating to such requests.

The Orders both require that:

- a request from a person seeking an exemption must be made on the basis that the health of the person would be seriously jeopardized if the person were to comply with the Order.
- that the request follow the Guidelines posted on the PHO 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>).

The Guidelines require a requestor to have a physician or nurse practitioner attest that proceeding with COVID-19 immunization would seriously jeopardize the health of the requestor. The Guidelines further require a request to be "accompanied by the medical deferral form" supporting the request. A copy of the medical deferral form is available at [this link](#). You must submit this form signed by a nurse practitioner or medical practitioner in order for your request to be considered.

Please note that since your request does not comply with the requirements of the Orders, you are required to comply with all applicable requirements of the order respecting proof of vaccination and related prohibitions.

Sincerely,

A handwritten signature in black ink, appearing to read 'BPE', with a long horizontal flourish extending to the right.

Dr. Brian P. Emerson, MD, MHSc
Deputy Provincial Health Officer



Date

Cliff #1218306

Ref:

Name:

Dear [NAME OF APPLICANT]:

I am writing in response to your request for a medical exemption under the Provincial Health Officer ("PHO") *Gatherings and Events* Order and the *Food and Liquor Service Premises* Order which was received on [DATE].

[IF FURTHER CORRESPONDENCE SET OUT THE BACKGROUND OF THE CORRESPONDENCE WITH EACH INDIVIDUAL IF RELEVANT]

The Orders both require that a request for reconsideration with respect to vaccination, or 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.

The submitted information provided on or with the COVID-19 Vaccine Medical Deferral Form did not meet the criteria for a temporary medical deferral.

The reason that the information provided does not meet the criteria for a temporary deferral is that [*Whatever has been reported Describe the situation, if only briefly. The reasons for the refusal need to be specific to the person making the request and their situation.*] As such, the rationale provided is not a reason for a temporary medical deferral.

Please note that the National Advisory Committee on Immunization (NACI) recommends [*enter relevant recommendation to receive full vaccine series here, and point to the specific page in the NACI document.*]

The full NACI document is at:

<https://www.canada.ca/en/public-health/services/immunization/national-advisory-committee-on-immunization-naci/recommendations-use-covid-19-vaccines.html#a8>.

This decision is final, and I will not accept further information, documentation or requests for reconsideration respecting this matter from you.

Sincerely,

Ministry of Health

Office of the
Provincial Health Officer

4th Floor, 1515 Blanshard Street
PO Box 9648 STN PROV GOVT
Victoria BC V8W 9P4
Tel: (250) 952-1330
Fax: (250) 952-1570
<http://www.health.gov.bc.ca/pho/>

Page 41 of 47 HTH-2022-20507

[Signature block of decision maker]



Date

Cliff #1218307

Ref:

Name:

Dear [NAME OF APPLICANT]:

I am writing in response to your request for an exemption from the requirements of the Orders of the Provincial Health Officer of British Columbia (“PHO”), respecting *Gatherings and Events* and/or the *Food and Liquor Service Premises* (the “Proof of Vaccination Orders”).

[Set out the date and form of the request. For example, email dated December 7th, 2021 or letter dated X and received in this office on DATE].

On November 12, 2021, the PHO exercised her discretion under section 54 (1) (h) of the *Public Health Act* to not reconsider any orders pursuant to section 43 unless that exemption is being sought for medical reasons (the “Variance Order”). The Variance Order is posted on the PHO website at <https://www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/covid-19/covid-19-variance-of-gatherings-events-food-liquor-orders-suspend-reconsideration-proof-of-vaccination.pdf>. The PHO’s Variance Order is final and binding.

I have reviewed your request for an exemption, the details of which are set out above. You have not sought an exemption on medical grounds. Therefore, pursuant to the Variance Order, I decline to reconsider the Proof of Vaccination Orders, and your request is dismissed.

If you have a medical basis for an exemption, you may submit a new request for reconsideration on that basis. Requests for reconsideration for medical reasons must follow the guidelines posted on the Provincial Health Officer’s website found at:

<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>.

The purpose of the Proof of Vaccination Orders is to mitigate public health risks associated with transmission and outbreaks of COVID-19 by preventing and reducing the risk of infection in community settings. The Proof of Vaccination Orders are intended to reduce COVID-19 case rates, outbreaks, hospitalizations, critical care admissions and deaths, protect people who cannot be vaccinated and those whose level of protection may be lowered due to age or immunocompromise, and protect our healthcare system.

Furthermore, highly transmissible variants of SARS-CoV-2, including the Delta and now Omicron variants, underline the importance of vaccination in protection of public health in British Columbia.

For these reasons it is important that people who do not have a medical deferral be vaccinated. For information about vaccination and where to be vaccinated please visit the BC Centre for Disease Control website at <http://www.bccdc.ca/health-info/diseases-conditions/covid-19/covid-19-vaccine>.

For those who are not yet vaccinated, alternatives to the activities or events that are subject to the vaccination requirements of the Proof of Vaccination Orders are available, including take-out food from restaurants, exercising outdoors, or participating in an event virtually.

Sincerely,

A handwritten signature in black ink, appearing to read 'BPE', with a long horizontal flourish extending to the right.

Dr. Brian P. Emerson, MD, MHSc
Deputy Provincial Health Officer



Date

Cliff #1218302

Ref:

Name:

Dear [NAME OF APPLICANT]:

I am writing in response to your request for a medical exemption under the Provincial Health Officer ("PHO") *Gatherings and Events Order* and the *Food and Liquor Service Premises Order* which was received on [DATE].

The correspondence of [DATE] included a copy of the COVID-19 Vaccine Medical Deferral Form (the "Form") signed by Dr. [NAME] on which Dr. [NAME] has attested that proceeding with COVID-19 immunization for you would seriously jeopardize your health.

This letter confirms that your exemption request has been **temporarily approved** on the basis that Dr. [NAME] attested you [reasons for medical deferral].

Please note that the attached variance certificate refers to specific provisions of the *Food and Liquor Service Premises Order*, dated [date of order at time of submission] and the *Gatherings and Events Order*, dated [date of order at time of submission], which were the versions of these orders in effect at the time of your request. These orders were subsequently amended, and the relevant numbered paragraphs were changed. This exemption applies to the equivalent requirements and prohibitions of the subsequent versions of both of these orders, notwithstanding that the numbering in future versions of these Orders may change.

Your approval is subject to the following mandatory conditions. Failure to comply with these conditions may result in the revocation by me of this exemption.

Preventive measures

You must undertake the following preventive measures:

- Wear a medical mask when attending a gathering or event as prescribed in the *Gatherings and Events Order*, or "premises" as defined in the *Food and Liquor Serving Premises Order* except when consuming food or beverage or for personal hygiene;

No reproduction or publication

- You may make one physical/paper copy of the enclosed variance certificate to present as official proof of your medical exemption from the proof of vaccination requirements in the *Food and Liquor Service Premises Order* and the *Gatherings and Events Order*.
- You must not otherwise copy, scan, or reproduce the enclosed variance certificate in any way, nor are you permitted to share, transmit, disseminate, broadcast or publish it in any way, including without limitation by posting it on a website or social media, whether publicly or at all.

Temporary Exemption

- This temporary exemption has been approved by me, as a precautionary measure until your health care practitioner advises that you are able to receive COVID-19 vaccination.
- In this regard I have considered the current recommendations of the National Advisory Committee on Immunization (NACI). NACI is monitoring the evidence respecting reasons for medical deferral of COVID-19 vaccination and this exemption may be revised or rescinded in the event that the NACI recommendations change in the future.

Vaccination status

- You must inform my Office at PHOExemptions@gov.bc.ca if you receive a dose of COVID-19 vaccine subsequent to your initial request.

This exemption may be cancelled or amended by me if I have reason to believe that due to the changing circumstances involving the transmission of SARS-CoV-2 in British Columbia, it is in the public interest to amend the Orders such that persons with medical deferrals who are not vaccinated should be required to undertake additional preventative measures or not be exempted from proof of vaccination requirements.

We are working with officials at the Ministry of Health to ensure that the electronic BC Vaccine Card and accompanying QR code reflect any medical exemptions which have been granted. In the meantime, you may present the attached Vaccination Exemption Certificate as official confirmation of your medical exemption from the proof of vaccination requirements in the *Food and Liquor Service Premises Order* and the *Gatherings and Events Order*. Please take note that you must provide photo identification when you provide proof of your medical exemption.

You should be aware that, by not having had a full course of vaccination, you are at higher risk of contracting COVID-19 and of serious outcomes if infected. As such you should be particularly aware of the preventive measures that you can take to reduce your risk which are published at the:

- BC Centre for Disease Control website (<http://www.bccdc.ca/health-info/diseases-conditions/covid-19>) and
- Government of Canada website (<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks.html>)

Sincerely,

[Signature block of decision maker]

Nyulaszi, Magdolna HLTH:EX

From: Younker, Katherine E HLTH:EX
Sent: February 10, 2022 11:50 AM
To: Younker, Katherine E HLTH:EX
Subject: FW: notice of liability letters to colleges

From: Westgate, Brian A HLTH:EX <Brian.Westgate@gov.bc.ca>
Sent: December 15, 2021 1:26 PM
To: MacKinnon, Mark HLTH:EX <Mark.MacKinnon@gov.bc.ca>; Younker, Katherine E HLTH:EX <Katherine.Younker@gov.bc.ca>; Bennett, Christopher HLTH:EX <Christopher.Bennett@gov.bc.ca>
Subject: notice of liability letters to colleges

'Notices of liability' used by anti-vaccine, anti-mandate groups are 'not a thing,' law professor says | CBC News

Brian Westgate
Director Strategic Priorities, Professional Regulation and Oversight
Ministry of Health | 1515 Blanshard Street | PO Box 9650 STN PROV GOVT
Victoria BC V8W 9P4

Phone: 250-952-3145
Mobile: 250-507-7423
Brian.westgate@gov.bc.ca

Nyulaszi, Magdolna HLTH:EX

From: Younker, Katherine E HLTH:EX
Sent: February 10, 2022 11:50 AM
To: Younker, Katherine E HLTH:EX
Subject: FW: COVID-19: 3 doctors speak out against child vaccinations at Kelowna gathering

From: Younker, Katherine E HLTH:EX
Sent: December 17, 2021 10:23 AM
To: Blythe, Nancy HLTH:EX <Nancy.Blythe@gov.bc.ca>; Ramsey, Jennifer HLTH:EX <Jennifer.Ramsey@gov.bc.ca>; Gregg, Andrea HLTH:EX <andrea.gregg@gov.bc.ca>; Smillie, Jenny HLTH:EX <Jenny.Smillie@gov.bc.ca>; Graves, Eric HLTH:EX <Eric.Graves@gov.bc.ca>
Subject: RE: COVID-19: 3 doctors speak out against child vaccinations at Kelowna gathering

Sad to see that a physician was going to pay her children not to take the vaccine.

Thanks,

Kathy

From: Blythe, Nancy HLTH:EX <Nancy.Blythe@gov.bc.ca>
Sent: December 17, 2021 10:02 AM
To: Ramsey, Jennifer HLTH:EX <Jennifer.Ramsey@gov.bc.ca>; Younker, Katherine E HLTH:EX <Katherine.Younker@gov.bc.ca>; Gregg, Andrea HLTH:EX <andrea.gregg@gov.bc.ca>; Smillie, Jenny HLTH:EX <Jenny.Smillie@gov.bc.ca>; Graves, Eric HLTH:EX <Eric.Graves@gov.bc.ca>
Subject: RE: COVID-19: 3 doctors speak out against child vaccinations at Kelowna gathering

I saw that – it continues

Nancy Blythe
Manager, Policy and Projects
Professional Regulation and Oversight
Health Sector Workforce and Beneficiary Services Division
Ministry of Health | Ph: 250 952-1529 | Email: nancy.blythe@gov.bc.ca
3rd floor, 1515 Blanshard Street, Victoria, BC | PO Box 9638 Stn Prov Govt V8W 9P1

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From: Ramsey, Jennifer HLTH:EX <Jennifer.Ramsey@gov.bc.ca>
Sent: December 17, 2021 9:57 AM
To: Younker, Katherine E HLTH:EX <Katherine.Younker@gov.bc.ca>; Blythe, Nancy HLTH:EX <Nancy.Blythe@gov.bc.ca>; Gregg, Andrea HLTH:EX <andrea.gregg@gov.bc.ca>; Smillie, Jenny HLTH:EX <Jenny.Smillie@gov.bc.ca>; Graves, Eric HLTH:EX <Eric.Graves@gov.bc.ca>
Subject: COVID-19: 3 doctors speak out against child vaccinations at Kelowna gathering

[COVID-19: 3 doctors speak out against child vaccinations at Kelowna gathering \(msn.com\)](#)

Thanks,

Jennifer Ramsey, MLIS (she/her)

Senior Policy Analyst, Clinical Practice Team

Professional Regulation and Oversight Branch

Health Sector Workforce and Beneficiary Services Division

Ministry of Health | Ph: 236-455-4594 | Email: jennifer.ramsey@gov.bc.ca

4th floor, 700 West Pender Street, Vancouver, BC

Government of British Columbia

Nyulaszi, Magdolna HLTH:EX

From: Younker, Katherine E HLTH:EX
Sent: February 10, 2022 11:48 AM
To: Younker, Katherine E HLTH:EX
Subject: FW: Dr. Stephen Malthouse/ anti-vaccine campaign

From: Younker, Katherine E HLTH:EX
Sent: January 20, 2022 12:01 PM
To: 'Westgate, Brian A HLTH:EX' <Brian.Westgate@gov.bc.ca>; 'Bennett, Christopher HLTH:EX' <Christopher.Bennett@gov.bc.ca>
Subject: FW: Dr. Stephen Malthouse/ anti-vaccine campaign

From: s.22
Sent: December 20, 2020 10:48 AM
To: Minister, HLTH HLTH:EX <HLTH.Minister@gov.bc.ca>; Henry, Bonnie HLTH:EX <Bonnie.Henry@gov.bc.ca>
Subject: Dr. Stephen Malthouse/ anti-vaccine campaign

HLTH MO to HSWBS as Assign – jp – Pls send eApp to CRHEM

Dear Minister and Dr. Henry - I have filed a complaint with the College of Physicians and Surgeons of B.C. re this “Dr. “ and his continued campaign of propaganda re anti-mask and now anti-vaccine issues in our local community newspaper. This particular insert was published on Dec. 17th in the Grapevine Newspaper on Denman and Hornby Islands. It is sad that it has been published and has been delivered to every home on both Islands.

It is past time to deal with this person who is using his credentials to propagate false and misleading information. Early on he published articles that stated that we all had “herd immunity” on Denman and Hornby when clearly this was not possible.

I would like to see the ministry and public health take action to silence this individual and to make him stop using his physicians credentials to spread lies and misinformation at a time when real information is so crucial.

Yours truly,
s.22

**COVID-19 VACCINES:
IMPORTANT POINTS YOU NEED TO KNOW**
Submitted by Dr. Stephen Mathias

MINOR IMPACT: Vaccine manufacturers claim that Covid-19 vaccines are 95 percent "effective," but the FDA is allowing companies to define effectiveness as "prevention of mild symptoms." The studies are not designed to detect a reduction in outcomes such as severe illness, hospitalization or death.¹ For individuals who develop severe symptoms, the vaccine is not a remedy. Instead, emotional and financial support can help keep the illness from going into "overdrive."²

EXPECT ADVERSE REACTIONS: Participants in every Covid-19 vaccine trial have reported adverse reactions including high fever, chills, muscle pain and headaches.³ Some have even reported severe reactions that required hospitalization and intensive treatment. According to the FDA, potential long-term effects may include Guillain-Barre syndrome, brain swelling, muscle weakness and paralysis, convulsions and seizures, stroke, narcolepsy, shock, heart attack, autoimmune disease, arthritis and joint pain, multi-system inflammatory syndrome in children, and death.⁴ Some UK health workers have experienced anaphylactic shock after receiving one dose of the approved vaccine.⁵

WOULDN'T PREVENT COVID-19: An FDA Phase briefing paper published December 10, 2020 revealed 43 percent more reported cases of Covid-19 in the vaccinated group than in the placebo group within seven days of vaccination.⁶

NO LIABILITY: Covid-19 vaccine manufacturers will be protected from all liability—if you are injured, you cannot sue.⁷ Manufacturers will have complete immunity even though all previous attempts at creating coronavirus vaccines caused harm and never advanced to regulatory approval.⁸

WILL NOT END RESTRICTIVE MEASURES: Dr. Anthony Fauci of the National Institutes of Health acknowledges that the vaccines may prevent symptoms but will not block spread of the virus, so vaccine recipients will still need to wear masks, practice social distancing and avoid crowds.^{9,10}

NOT NECESSARY: According to the CDC's current best estimate, the "infection fatality rate" (IFR) for Covid-19 is less than 1 percent for people age 69 and younger, including a .003 percent IFR for children and adolescents.¹¹

COULD MAKE YOU STERILE: Two prominent doctors, including the co-head of Pfizer's respiratory research, warn that Covid-19 vaccines contain a spike protein called spike protein 1, vital for the formation of the placenta.¹² If the vaccine triggers an immune response to this protein, then female infertility, miscarriage or birth defects could result.

FOR FURTHER INFORMATION: www.mathiasgroup.org/coronavirus/

1. Doshi P. Will covid-19 vaccines save lives? Current trials aren't designed to tell us. BMJ. 2020;371:n4037. <https://www.bmj.com/content/371/n4037>

2. Haseltine WA. Covid-19 vaccine protocols reveal that trials are designed to succeed. *Forbes*, September 23, 2020. <https://www.forbes.com/sites/williamhaseltine/2020/09/23/covid-19-vaccine-protocols-reveal-that-trials-are-designed-to-succeed/?sh=5da0663d5247>
3. Brownstein D, Ng R, Rowen R et al. A novel approach to treating COVID-19 using nutritional and oxidative therapies. *Science, Public Health Policy, and the Law*. 2020;2:4-22. <https://ozonewithoutborders.org/wp-content/uploads/2020/07/Novel-Approach-to-Covid-19.pdf>
4. Jackson LA, Anderson EJ, Roupael NG et al. An mRNA vaccine against SARS-CoV-2 – preliminary report. *New England Journal of Medicine*. 2020;383(20):1920-1931. <https://www.nejm.org/doi/full/10.1056/NEJMoa2022483>
5. Allen A, Szabo L. NIH "very concerned" about serious side effect in coronavirus vaccine trial. *Scientific American*, September 15, 2020. <https://www.scientificamerican.com/article/nih-very-concerned-about-serious-side-effect-in-coronavirus-vaccine-trial/>
6. Mayer A. Leading COVID vaccine candidates plagued by safety concerns. *The Defender*, November 13, 2020. https://childrenshealthdefense.org/defender/covid-vaccine-candidates-safety-concerns/?utm_term=home
7. U.S. Food and Drug Administration. Vaccines and Related Biological Products Advisory Committee, October 22, 2020 Meeting Presentation, slide #16. <https://www.greenmedinfo.com/blog/covid-19-vaccine-bombshell-fda-documents-reveal-death-21-serious-conditions-possible>
8. Reals T. U.K. warns against giving Pfizer vaccine to people prone to severe allergic reactions. CBS News, December 9, 2020. <https://www.cbsnews.com/amp/news/covid-vaccine-pfizer-shot-uk-warns-people-with-history-of-significant-allergic-reactions/?app>
9. <https://www.fda.gov/media/144245/download>, page 42.
10. Public Readiness and Emergency Preparedness Act. COVID-19 PREP Act Declarations. <https://www.fda.gov/preparedness/legal/prepact/Pages/default.aspx>
11. Lyons-Weiler J. Pathogenic priming likely contributes to serious and critical illness and mortality in COVID-19 via autoimmunity. *Journal of Translational Autoimmunity*. 2020;3:100051. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7142689/>
12. Khemlani A. Fauci: Early COVID-19 vaccines will only prevent symptoms, not block the virus. Yahoo! Finance, October 26, 2020. <https://finance.yahoo.com/news/fauci-vaccines-will-only-prevent-symptoms-not-block-the-virus-195051548.html>
13. Scipioni J. Dr. Fauci says masks, social distancing will still be needed after a Covid-19 vaccine—here's why. CNBC, November 16, 2020. <https://www.cnbc.com/2020/11/16/fauci-why-still-need-masks-social-distancing-after-covid-19-vaccine.html>
14. Centers for Disease Control and Prevention. COVID-19 pandemic planning scenarios. Updated September 10, 2020. <https://www.cdc.gov/coronavirus/2019-ncov/hcp/planning-scenarios.html>
15. Petition/motion for administrative/regulatory action regarding confirmation of efficacy end points and use of data in connection with the following clinical trials. Dr. Wolfgang Wodarg and Dr. Michael Yeadon, petitioners. Filed with European Medicines Agency, December 1, 2020. https://healthimpactsnews.com/wp-content/uploads/sites/2/2020/12/Wodarg_Yeadon_EMA_Petition_Pfizer_Trial_FINAL_01DEC2020_EN_unsigned_with_Exhibits.pdf

From: Westgate, Brian A HLTH:EX <Brian.Westgate@gov.bc.ca>
Sent: January 6, 2022 1:33 PM
To: MacKinnon, Mark HLTH:EX
Subject: FW: Health Professional and Assistants Order V.9
Attachments: Health Professional and Assistants Order V.9.docx

FYI

Brian Westgate
Director Strategic Priorities, Professional Regulation and Oversight
Ministry of Health | 1515 Blanshard Street | PO Box 9650 STN PROV GOVT
Victoria BC V8W 9P4

Phone: 250-952-3145
Mobile: 250-507-7423
Brian.westgate@gov.bc.ca

From: Westgate, Brian A HLTH:EX
Sent: January 6, 2022 1:31 PM
To: Bennett, Christopher HLTH:EX <Christopher.Bennett@gov.bc.ca>
Subject: Health Professional and Assistants Order V.9

My comments embedded.

I may be a bit behind so feel free to add your comments and change or remove mine if they are incorrect, then send to Mary and Brian.

Brian

Page 07 of 91 to/à Page 19 of 91

Withheld pursuant to/removed as

s.13

Page 20 of 91

Withheld pursuant to/removed as

s.13 ; s.15 ; s.19

Page 21 of 91 to/à Page 27 of 91

Withheld pursuant to/removed as

s.13

From: Westgate, Brian A HLTH:EX <Brian.Westgate@gov.bc.ca>
Sent: January 18, 2022 12:05 PM
To: Blythe, Nancy HLTH:EX
Cc: Bennett, Christopher HLTH:EX; Younker, Katherine E HLTH:EX
Subject: Re: COVID/HLTH Media Request: COVID-19 Misinformation from Doctors - due by 3:00pm
Attachments: image001.png

Prior content or thoughts would be great. Looking for ideas to answer these over reviews. Due to tight timelines and also tough questions to answer.

Thanks a lot.

Brian Westgate

On Jan 18, 2022, at 12:03 PM, Blythe, Nancy HLTH:EX <Nancy.Blythe@gov.bc.ca> wrote:

Also happy to review anything and looking to see if any prior content that would be helpful

Nancy Blythe
Manager, Policy and Projects
Professional Regulation and Oversight
Health Sector Workforce and Beneficiary Services Division
Ministry of Health | Ph: 250 952-1529 | Email: nancy.blythe@gov.bc.ca
3rd floor, 1515 Blanshard Street, Victoria, BC | PO Box 9638 Stn Prov Govt V8W 9P1

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Sent: January 18, 2022 11:59 AM
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Subject: RE: COVID/HLTH Media Request: COVID-19 Misinformation from Doctors - due by 3:00pm

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Ashleigh Stewart, Reporter
Global News
ashleigh.stewart@globalnews.ca
416-575-0748

Deadline ASAP

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Jania Marsh | Executive Coordinator |

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Ministry of Health | PO Box 9649 STN PROV GOVT | Victoria, BC | V8W 9P4

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<image001.png>

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Just going through—will send over more as I find it. Some general wording on privacy for Matthew's

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These are tough so any suggestions would be great.
This is due at 3 but we are asked to send something sooner.
Thanks!!

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Thanks Chris this is very helpful.

I have also reached out to CPSBC to understand how they are responding to enquiries about physicians promoting misinformation...

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Too long, but here are some rough bullets for this question.

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Background

Thank you,

Jania Marsh | Executive Coordinator |

Assistant Deputy Minister's Office | Health Sector Workforce & Beneficiary Services Division

Ministry of Health | PO Box 9649 STN PROV GOVT | Victoria, BC | V8W 9P4

P: 250-952-2402 | C: 778-679-6410 | E: Jania.Marsh@gov.bc.ca

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Deadline ASAP

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From: Westgate, Brian A HLTH:EX <Brian.Westgate@gov.bc.ca>
Sent: January 18, 2022 12:25 PM
To: Blythe, Nancy HLTH:EX; Bennett, Christopher HLTH:EX; Younker, Katherine E HLTH:EX
Subject: RE: COVID/HLTH Media Request: COVID-19 Misinformation from Doctors - due by 3:00pm

Very helpful!

Brian Westgate
Director Strategic Priorities, Professional Regulation and Oversight
Ministry of Health | 1515 Blanshard Street | PO Box 9650 STN PROV GOVT
Victoria BC V8W 9P4

Phone: 250-952-3145
Mobile: 250-507-7423
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From: Blythe, Nancy HLTH:EX <Nancy.Blythe@gov.bc.ca>
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Sent: January 18, 2022 11:50 AM
To: Walker, Jonathan C HLTH:EX <Jonathan.C.Walker@gov.bc.ca>; Robinson, Matthew J HLTH:EX <Matthew.Robinson@gov.bc.ca>; Smith, Adam K HLTH:EX <Adam.K.Smith@gov.bc.ca>
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From: Blythe, Nancy HLTH:EX
Sent: January 18, 2022 1:22 PM
To: Westgate, Brian A HLTH:EX; Bennett, Christopher HLTH:EX; Younker, Katherine E HLTH:EX
Subject: RE: COVID/HLTH Media Request: COVID-19 Misinformation from Doctors - due by 3:00pm
Attachments: 1188370 -Pope - Outgoing Draft sent to CHREM and Mark A.docx

Just found this PRO response (earlier 2021) to someone complaining about one of the anti vax physicians. There's a couple of good additional sentences including:

When an issue of public interest or safety is brought to the attention of the Minister of Health, regarding any regulated health profession, the Minister will look to the regulatory college to address the concern(s) as delegated under the HPA.

The CPSBC helped develop the position statement of the Federation of Medical Regulatory Authorities of Canada - which clarifies the expectations of physicians who speak publicly. Though this statement is not a legal requirement it does indicate the CPSBCs support for public health orders and recommendations.

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Thanks Chris! This is very helpful!

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From: Bennett, Christopher HLTH:EX <Christopher.Bennett@gov.bc.ca>
Sent: January 18, 2022 1:03 PM
To: Blythe, Nancy HLTH:EX <Nancy.Blythe@gov.bc.ca>; Westgate, Brian A HLTH:EX <Brian.Westgate@gov.bc.ca>;

Younker, Katherine E HLTH:EX <Katherine.Younker@gov.bc.ca>

Subject: RE: COVID/HLTH Media Request: COVID-19 Misinformation from Doctors - due by 3:00pm

Pretty general—but some wording on the following:

- Experts and the public are now concerned that the College is not doing its job in holding these doctors to account. Is BC considering extending powers to regulate physicians and surgeons to any other regulatory bodies?

In BC, The College of Physicians and Surgeons of BC regulates the practice of physicians and surgeons, under the authority of the Health Professions Act (HPA). The CPBC has been delegated the authority under the HPA to oversee the practice of medicine in the public interest. No other regulatory bodies, in BC, regulate Physicians and Surgeons and Government is not considering any other bodies to provide this regulation.

The role of the Ministry of Health (the Ministry) is to monitor the general functioning of the regulatory colleges to ensure they are complying with all applicable legislative requirements and have mechanisms in place to carry out their mandate to protect the public from incompetent, impaired or unethical practice. The Ministry does not, however, have the authority to initiate or intervene in the **investigation or resolution of complaints about the conduct of individual practitioners**.

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Sent: January 18, 2022 11:50 AM

To: Walker, Jonathan C HLTH:EX <Jonathan.C.Walker@gov.bc.ca>; Robinson, Matthew J HLTH:EX

<Matthew.Robinson@gov.bc.ca>; Smith, Adam K HLTH:EX <Adam.K.Smith@gov.bc.ca>

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Cc: Wigmore, Matthew GCPE:EX <Matthew.Wigmore@gov.bc.ca>; Armitage, Mark W HLTH:EX

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- Charles Hoffe, in particular, is apparently now only set to appear at a hearing for an email he sent to colleagues about the Covid vaccine last March. In the intervening nine months he has gone on to spread disinformation on a much larger scale. Why is the CPSO, or the Ministry of Health, not better equipped to deal with investigations on a faster scale? Why does this need to take almost a year to solve?
- Will the Ministry of Health be looking into the Doctors on Tour events currently touring the BC countryside telling crowds that "vaccines kill children" and allowing packed rooms to congregate unmasked?

Thanks for this. Please note that my deadline is tomorrow at midday ET.

Recommendation

Background

EMAIL RESPONSE

1188370

s.22

Dear s.22

The Honourable Adrian Dix, Minister of Health, and Dr. Bonnie Henry, Provincial Health Officer, have asked me to thank you and respond to your email of December 20, 2020 which indicates you have filed a complaint with the College of Physicians and Surgeons of BC (the CPSBC) regarding your concern that a physician on Denman Island is inappropriately using his credentials to propagate false and misleading information in relation to the COVID-19 pandemic. Your email also requests that the Ministry of Health (the Ministry) and public health take action regarding this individual.

The role of the Ministry is to monitor the general functioning of the regulatory colleges to ensure they are complying with all applicable legislative requirements and have mechanisms in place to carry out their mandate to protect the public from incompetent, impaired or unethical practice. The Ministry does not, however, have the authority to initiate or intervene in the investigation or resolution of complaints about the conduct of individual practitioners.

The CPSBC has been delegated the authority under the *Health Professions Act* (the HPA) to oversee the practice of physicians and surgeons in the public interest. The CPSBC operates at arm's length from government and is responsible for governing its' registrants in accordance with the HPA, the Medical Practitioners Regulation, and the CPSBC bylaws. The responsibilities of the CPSBC include establishing, monitoring and enforcing standards of practice for the profession, and having a process in place for responding appropriately to complaints from the public about the conduct of individual practitioners.

When an issue of public interest or safety is brought to the attention of the Minister of Health, regarding any regulated health profession, the Minister will look to the regulatory college to address the concern(s) as delegated under the HPA.

If there is a complaint filed, regulatory colleges have an obligation to protect the privacy of all parties during the complaint and investigative process. As you have indicated, you have filed a complaint with the CPSBC. As the Complainant you will receive feedback on the outcome of your complaint in due course.

When the college takes an action against a registrant public notification is required as specified in Section 39.3 of the HPA. Until that time, the complaint and investigation remains confidential to ensure fairness of the process.

The CPSBC helped develop the position statement of the Federation of Medical Regulatory Authorities of Canada - which clarifies the expectations of physicians who speak publicly.

Though this statement is not a legal requirement it does indicate the CPSBCs support for public health orders and recommendations.

I trust you will find this information helpful. Thank you for bringing your concerns to our attention.

Sincerely,

Brian Westgate
A/Executive Director
Professional Regulation & Oversight
Ministry of Health

cc: Honourable Adrian Dix, Minister of Health
Dr. Bonnie Henry, Provincial Health Officer

bcc: Professional Regulation and Oversight inbox (PROREGADMIN@gov.bc.ca)

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From: Younker, Katherine E HLTH:EX <Katherine.Younker@gov.bc.ca>
Sent: January 18, 2022 1:22 PM
To: Blythe, Nancy HLTH:EX; Westgate, Brian A HLTH:EX; Bennett, Christopher HLTH:EX
Cc: Robinson, Matthew J HLTH:EX; Smith, Adam K HLTH:EX; Walker, Jonathan C HLTH:EX
Subject: RE: COVID/HLTH Media Request: COVID-19 Misinformation from Doctors - due by 3:00pm

Hi,

I took a stab at putting some of it together below, but don't have all the info. Happy to help further.

Kathy

A number of BC doctors (Stephen Malthouse, Daniel Nagase, Gwyllyn Goddard, Charles Hoffe and more outlined in this story: <https://globalnews.ca/news/8517353/canada-doctors-covid-vaccine-disinformation/>) are openly spreading disinformation about the Covid vaccines. Each of them (aside from Goddard who resigned) still have active medical licences. The CPSBC refuses to comment on whether or not they are being investigated or not. Do you think enough is being done to monitor the professional conduct of BC doctors who are knowingly sharing unverified medical information?

The CPSBC has not suspended, restricted or revoked any medical licences in regards to the above spreading of disinformation. Why not and do the laws need to be tightened to allow this to become an easier or shorter process?

In BC, health profession regulatory colleges, including the College of Physicians and Surgeons of BC (CPSBC), have been delegated the authority under provincial legislation to govern the practice of their registrants in the public interest. This includes the ability to suspend, restrict or revoke the registration of registrant. As a part of the complaints process. If a complaint is filed, regulatory colleges have an obligation to protect the privacy of all parties during the complaint and investigative process. When the college takes an action against a registrant public notification is required as specified in Section 39.3 of the HPA. Until that time, the complaint and investigation remains confidential to ensure fairness of the process.

Adam can you try this one?

- Ontario changed its laws in recent years to give the CPSO the power to restrict/ suspend a health professional's licence while they are being officially investigated. Has BC looked into this too? Will it consider doing so in the future?

The CPSBC has issued a joint statements about relating to registrants promoting misleading or inaccurate information related to COVID-19.

These include the following

October 1, 2021	Joint message with PHO, CPBC, and BCCNM about ivermectin in the prevention and treatment of COVID-19	Regulatory update
May 6, 2021	Joint statement with FNHA on misleading COVID-19 information	Regulatory update

- Experts and the public are now concerned that the College is not doing its job in holding these doctors to account. Is BC considering extending powers to regulate physicians and surgeons to any other regulatory bodies?

Your words Brian.

Charles Hoffe, in particular, is apparently now only set to appear at a hearing for an email he sent to colleagues about the Covid vaccine last March. In the intervening nine months he has gone on to spread disinformation on a much larger scale. Why is the CPSO, or the Ministry of Health, not better equipped to deal with investigations on a faster scale? Why does this need to take almost a year to solve?

When the CPSBC becomes aware of registrant behaviour which is outside of expected conduct or behaviour as the result public complaint, the CPSBC will investigate and respond as per established process to public complaint. However, the CPSBC is not aware of all the activities of registrants and relies on the public to file a complaint.

BTW- here is a link to a recent Kelowna video: <https://www.youtube.com/watch?v=UG4P69xTjpM> Very interesting talk from the Drs.

Will the Ministry of Health be looking into the Doctors on Tour events currently touring the BC countryside telling crowds that “vaccines kill children” and allowing packed rooms to congregate unmasked?

The Ministry of Health needs to be notified of events which are violating existing public health orders to take action.

From: Blythe, Nancy HLTH:EX <Nancy.Blythe@gov.bc.ca>

Sent: January 18, 2022 12:23 PM

To: Westgate, Brian A HLTH:EX <Brian.Westgate@gov.bc.ca>; Bennett, Christopher HLTH:EX <Christopher.Bennett@gov.bc.ca>; Younker, Katherine E HLTH:EX <Katherine.Younker@gov.bc.ca>

Subject: RE: COVID/HLTH Media Request: COVID-19 Misinformation from Doctors - due by 3:00pm

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As early as March 2020 the 3 colleges (physicians, nurses, pharmacists) issued a joint statement on unproven therapies for covid, and there's a May 6 2021 Joint statement with FNHA against some physicians spreading misleading COVID-19 info.

Nancy Blythe

Manager, Policy and Projects

Professional Regulation and Oversight

Health Sector Workforce and Beneficiary Services Division

Ministry of Health | Ph: 250 952-1529 | Email: nancy.blythe@gov.bc.ca

3rd floor, 1515 Blanshard Street, Victoria, BC | PO Box 9638 Stn Prov Govt V8W 9P1

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Sent: January 18, 2022 11:53 AM

To: Bennett, Christopher HLTH:EX <Christopher.Bennett@gov.bc.ca>; Younker, Katherine E HLTH:EX <Katherine.Younker@gov.bc.ca>; Blythe, Nancy HLTH:EX <Nancy.Blythe@gov.bc.ca>

Subject: FW: COVID/HLTH Media Request: COVID-19 Misinformation from Doctors - due by 3:00pm

Importance: High

Hi guys. I am getting inundated with media requests today.

I have got all my staff helping me work through this latest one.
If any of you has any suggested wording to help my staff through these questions it would be greatly appreciated.
Thanks a lot.

Brian Westgate
Director Strategic Priorities, Professional Regulation and Oversight
Ministry of Health | 1515 Blanshard Street | PO Box 9650 STN PROV GOVT
Victoria BC V8W 9P4

Phone: 250-952-3145
Mobile: 250-507-7423
Brian.westgate@gov.bc.ca

From: Westgate, Brian A HLTH:EX
Sent: January 18, 2022 11:50 AM
To: Walker, Jonathan C HLTH:EX <Jonathan.C.Walker@gov.bc.ca>; Robinson, Matthew J HLTH:EX <Matthew.Robinson@gov.bc.ca>; Smith, Adam K HLTH:EX <Adam.K.Smith@gov.bc.ca>
Subject: FW: COVID/HLTH Media Request: COVID-19 Misinformation from Doctors - due by 3:00pm
Importance: High

Another media request. Need answers by 3 pm.
See below. I have put names beside those questions I am hoping each of you can help with...

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Director Strategic Priorities, Professional Regulation and Oversight
Ministry of Health | 1515 Blanshard Street | PO Box 9650 STN PROV GOVT
Victoria BC V8W 9P4

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To: MacKinnon, Mark HLTH:EX <Mark.MacKinnon@gov.bc.ca>; Westgate, Brian A HLTH:EX <Brian.Westgate@gov.bc.ca>; Brown, Kevin HLTH:EX <Kevin.Brown@gov.bc.ca>
Cc: Wigmore, Matthew GCPE:EX <Matthew.Wigmore@gov.bc.ca>; Armitage, Mark W HLTH:EX <Mark.Armitage@gov.bc.ca>
Subject: COVID/HLTH Media Request: COVID-19 Misinformation from Doctors - due by 3:00pm
Importance: High

Hi Mark/Brian (PRO) and Kevin (PSB):

Please see below for a media request on COVID-19 Misinformation from Doctors - **this is due back to GCPE by 3:00pm today if possible.**

As per Matthew's email below, it is a lengthy request on the reporter's end^{s.13}
s.13 . Matthew is flexible as to wherever and whatever the division feels necessary to provide.

In terms of the reporter's last question about events, GCPE will be referring the reporter to the orders currently in place and Dr Henry's comments on gatherings.

Subject: COVID Media Request: COVID-19 Misinformation from Doctors

Reporter

Ashleigh Stewart, Reporter

Global News

ashleigh.stewart@globalnews.ca

416-575-0748

Deadline ASAP

Request

Just wondering if I can get some questions in to Mr Dix on a rise in misinformation being spread by doctors in BC and whether or not the CPSBC is doing enough about this.

Please find my questions below.

- A number of BC doctors (Stephen Malthouse, Daniel Nagase, Gwyllyn Goddard, Charles Hoffe and more outlined in this story: <https://globalnews.ca/news/8517353/canada-doctors-covid-vaccine-disinformation/>) are openly spreading disinformation about the Covid vaccines. Each of them (aside from Goddard who resigned) still have active medical licences. The CPSBC refuses to comment on whether or not they are being investigated or not. Do you think enough is being done to monitor the professional conduct of BC doctors who are knowingly sharing unverified medical information?

Matthew can you speak to privacy requirements here?

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Adam can you try this one?

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I will do this one (using section 35)

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Jonathan? Not sure what they are asking here. But law only gives CPSBC authority to do this?

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Matthew? I would speak to the complexities of some investigations and the number as well as that this is within CPSBC jurisdiction by law. Not the role of the Ministry

- Will the Ministry of Health be looking into the Doctors on Tour events currently touring the BC countryside telling crowds that "vaccines kill children" and allowing packed rooms to congregate unmasked?

This is something CPSBC should be made aware of and it is up to them to take action – Adam?

Thanks for this. Please note that my deadline is tomorrow at midday ET.

Recommendation

Background

Thank you,

Jania Marsh | Executive Coordinator |

Assistant Deputy Minister's Office | Health Sector Workforce & Beneficiary Services Division

Ministry of Health | PO Box 9649 STN PROV GOVT | Victoria, BC | V8W 9P4

P: 250-952-2402 | C: 778-679-6410 | E: Jania.Marsh@gov.bc.ca

Grateful to live, work, and play within the traditional territories of the Lekwungen speaking people – also known as the Esquimalt and Songhees First Nations.



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From: Wigmore, Matthew GCPE:EX <Matthew.Wigmore@gov.bc.ca>

Sent: January 18, 2022 11:29 AM

To: Marsh, Jania HLTH:EX <Jania.Marsh@gov.bc.ca>

Subject: FW: COVID/HLTH Media Request: COVID-19 Misinformation from Doctors

Importance: High

Hi Jania

Can I get a response for 3pm?

It's a pretty lengthy request on the reporter's end,^{s.13}
s.13 m flexible as to wherever and whatever the division feels necessary to provide.

In terms of the reporter's last question about events, I'll simply be referring her to the orders currently in place and Dr Henry's comments on gatherings.

Thanks!

Matthew

Subject: COVID Media Request: COVID-19 Misinformation from Doctors

Reporter

Ashleigh Stewart, Reporter

Global News

ashleigh.stewart@globalnews.ca

416-575-0748

Deadline ASAP

Request

Just wondering if I can get some questions in to Mr Dix on a rise in misinformation being spread by doctors in BC and whether or not the CPSBC is doing enough about this.

Please find my questions below.

- A number of BC doctors (Stephen Malthouse, Daniel Nagase, Gwyllyn Goddard, Charles Hoffe and more outlined in this story: <https://globalnews.ca/news/8517353/canada-doctors-covid-vaccine-disinformation/>) are openly spreading disinformation about the Covid vaccines. Each of them (aside from Goddard who resigned) still have active medical licences. The CPSBC refuses to comment on whether or not they are being investigated or not. Do you think enough is being done to monitor the professional conduct of BC doctors who are knowingly sharing unverified medical information?
- The CPSBC has not suspended, restricted or revoked any medical licences in regards to the above spreading of disinformation. Why not and do the laws need to be tightened to allow this to become an easier or shorter process?
- Ontario changed its laws in recent years to give the CPSO the power to restrict/ suspend a health professional's licence while they are being officially investigated. Has BC looked into this too? Will it consider doing so in the future?
- Experts and the public are now concerned that the College is not doing its job in holding these doctors to account. Is BC considering extending powers to regulate physicians and surgeons to any other regulatory bodies?
- Charles Hoffe, in particular, is apparently now only set to appear at a hearing for an email he sent to colleagues about the Covid vaccine last March. In the intervening nine months he has gone on to spread disinformation on a much larger scale. Why is the CPSO, or the Ministry of Health, not better equipped to deal with investigations on a faster scale? Why does this need to take almost a year to solve?
- Will the Ministry of Health be looking into the Doctors on Tour events currently touring the BC countryside telling crowds that "vaccines kill children" and allowing packed rooms to congregate unmasked?

Thanks for this. Please note that my deadline is tomorrow at midday ET.

Recommendation

Background

From: Younker, Katherine E HLTH:EX <Katherine.Younker@gov.bc.ca>
Sent: January 18, 2022 1:24 PM
To: Blythe, Nancy HLTH:EX; Westgate, Brian A HLTH:EX; Bennett, Christopher HLTH:EX
Subject: RE: COVID/HLTH Media Request: COVID-19 Misinformation from Doctors - due by 3:00pm

That is useful information to add.

BTW – the video I inserted in the last email- they were at a church – possibly one of those defying PHO orders before Christmas.

K

From: Blythe, Nancy HLTH:EX <Nancy.Blythe@gov.bc.ca>
Sent: January 18, 2022 1:22 PM
To: Westgate, Brian A HLTH:EX <Brian.Westgate@gov.bc.ca>; Bennett, Christopher HLTH:EX <Christopher.Bennett@gov.bc.ca>; Younker, Katherine E HLTH:EX <Katherine.Younker@gov.bc.ca>
Subject: RE: COVID/HLTH Media Request: COVID-19 Misinformation from Doctors - due by 3:00pm

Just found this PRO response (earlier 2021) to someone complaining about one of the anti vax physicians. There's a couple of good additional sentences including:

When an issue of public interest or safety is brought to the attention of the Minister of Health, regarding any regulated health profession, the Minister will look to the regulatory college to address the concern(s) as delegated under the HPA.

The CPSBC helped develop the position statement of the Federation of Medical Regulatory Authorities of Canada - which clarifies the expectations of physicians who speak publicly. Though this statement is not a legal requirement it does indicate the CPSBCs support for public health orders and recommendations.

Nancy Blythe
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Health Sector Workforce and Beneficiary Services Division
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From: Westgate, Brian A HLTH:EX <Brian.Westgate@gov.bc.ca>
Sent: January 18, 2022 1:14 PM
To: Bennett, Christopher HLTH:EX <Christopher.Bennett@gov.bc.ca>; Blythe, Nancy HLTH:EX <Nancy.Blythe@gov.bc.ca>; Younker, Katherine E HLTH:EX <Katherine.Younker@gov.bc.ca>
Subject: RE: COVID/HLTH Media Request: COVID-19 Misinformation from Doctors - due by 3:00pm

Thanks Chris! This is very helpful!

Brian Westgate

Director Strategic Priorities, Professional Regulation and Oversight
Ministry of Health | 1515 Blanshard Street | PO Box 9650 STN PROV GOVT
Victoria BC V8W 9P4

Phone: 250-952-3145
Mobile: 250-507-7423
Brian.westgate@gov.bc.ca

From: Bennett, Christopher HLTH:EX <Christopher.Bennett@gov.bc.ca>
Sent: January 18, 2022 1:03 PM
To: Blythe, Nancy HLTH:EX <Nancy.Blythe@gov.bc.ca>; Westgate, Brian A HLTH:EX <Brian.Westgate@gov.bc.ca>;
Yunker, Katherine E HLTH:EX <Katherine.Yunker@gov.bc.ca>
Subject: RE: COVID/HLTH Media Request: COVID-19 Misinformation from Doctors - due by 3:00pm

Pretty general—but some wording on the following:

- Experts and the public are now concerned that the College is not doing its job in holding these doctors to account. Is BC considering extending powers to regulate physicians and surgeons to any other regulatory bodies?

In BC, The College of Physicians and Surgeons of BC regulates the practice of physicians and surgeons, under the authority of the *Health Professions Act* (HPA). The CPBC has been delegated the authority under the HPA to oversee the practice of medicine in the public interest. No other regulatory bodies, in BC, regulate Physicians and Surgeons and Government is not considering any other bodies to provide this regulation.

The role of the Ministry of Health (the Ministry) is to monitor the general functioning of the regulatory colleges to ensure they are complying with all applicable legislative requirements and have mechanisms in place to carry out their mandate to protect the public from incompetent, impaired or unethical practice. The Ministry does not, however, have the authority to initiate or intervene in the **investigation or resolution of complaints about the conduct of individual practitioners**.

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Cc: Wigmore, Matthew GCPE:EX <Matthew.Wigmore@gov.bc.ca>; Armitage, Mark W HLTH:EX

<Mark.Armitage@gov.bc.ca>

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Global News

ashleigh.stewart@globalnews.ca

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P: 250-952-2402 | C: 778-679-6410 | E: Jania.Marsh@gov.bc.ca

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From: Wigmore, Matthew GCPE:EX <Matthew.Wigmore@gov.bc.ca>

Sent: January 18, 2022 11:29 AM

To: Marsh, Jania HLTH:EX <Jania.Marsh@gov.bc.ca>

Subject: FW: COVID/HLTH Media Request: COVID-19 Misinformation from Doctors

Importance: High

Hi Jania

Can I get a response for 3pm?

It's a pretty lengthy request on the reporter's end,^{s.13}

s.13 I'm flexible as to wherever and whatever the division feels necessary to provide.

In terms of the reporter's last question about events, I'll simply be referring her to the orders currently in place and Dr Henry's comments on gatherings.

Thanks!

Matthew

Subject: COVID Media Request: COVID-19 Misinformation from Doctors

Reporter

Ashleigh Stewart, Reporter
Global News
ashleigh.stewart@globalnews.ca
416-575-0748

Deadline ASAP

Request

Just wondering if I can get some questions in to Mr Dix on a rise in misinformation being spread by doctors in BC and whether or not the CPSBC is doing enough about this.

Please find my questions below.

- A number of BC doctors (Stephen Malthouse, Daniel Nagase, Gwyllyn Goddard, Charles Hoffe and more outlined in this story: <https://globalnews.ca/news/8517353/canada-doctors-covid-vaccine-disinformation/>) are openly spreading disinformation about the Covid vaccines. Each of them (aside from Goddard who resigned) still have active medical licences. The CPSBC refuses to comment on whether or not they are being investigated or not. Do you think enough is being done to monitor the professional conduct of BC doctors who are knowingly sharing unverified medical information?
- The CPSBC has not suspended, restricted or revoked any medical licences in regards to the above spreading of disinformation. Why not and do the laws need to be tightened to allow this to become an easier or shorter process?
- Ontario changed its laws in recent years to give the CPSO the power to restrict/ suspend a health professional's licence while they are being officially investigated. Has BC looked into this too? Will it consider doing so in the future?
- Experts and the public are now concerned that the College is not doing its job in holding these doctors to account. Is BC considering extending powers to regulate physicians and surgeons to any other regulatory bodies?
- Charles Hoffe, in particular, is apparently now only set to appear at a hearing for an email he sent to colleagues about the Covid vaccine last March. In the intervening nine months he has gone on to spread disinformation on a much larger scale. Why is the CPSO, or the Ministry of Health, not better equipped to deal with investigations on a faster scale? Why does this need to take almost a year to solve?
- Will the Ministry of Health be looking into the Doctors on Tour events currently touring the BC countryside telling crowds that "vaccines kill children" and allowing packed rooms to congregate unmasked?

Thanks for this. Please note that my deadline is tomorrow at midday ET.

Recommendation

Background

From: Westgate, Brian A HLTH:EX <Brian.Westgate@gov.bc.ca>
Sent: January 18, 2022 2:32 PM
To: Marsh, Jania HLTH:EX; MacKinnon, Mark HLTH:EX; Brown, Kevin HLTH:EX
Cc: Wigmore, Matthew GCPE:EX; Armitage, Mark W HLTH:EX
Subject: RE: COVID/HLTH Media Request: COVID-19 Misinformation from Doctors - due by 3:00pm

Hi Jania. Please see our response below. I do believe this is something Mark A should review prior to sending out. Happy to answer any questions or make any changes.
I don't believe this is the first time we have responded to these questions and it likely won't be the last.

- A number of BC doctors (Stephen Malthouse, Daniel Nagase, Gwyllyn Goddard, Charles Hoffe and more outlined in this story: <https://globalnews.ca/news/8517353/canada-doctors-covid-vaccine-disinformation/>) are openly spreading disinformation about the Covid vaccines. Each of them (aside from Goddard who resigned) still have active medical licences. The CPSBC refuses to comment on whether or not they are being investigated or not. Do you think enough is being done to monitor the professional conduct of BC doctors who are knowingly sharing unverified medical information?

- If a complaint is filed against a registrant, as per the *Health Profession's Act*(HPA), regulatory colleges have an obligation to protect the privacy of all parties during the complaint and investigative process, and this includes the registrant for which the complaint is made against. When the college takes an action against a registrant, public notification is required as specified in Section 39.3 of the HPA. Until that time, the complaint and investigation remain confidential to ensure fairness of the process.

- The CPSBC has not suspended, restricted or revoked any medical licences in regards to the above spreading of disinformation. Why not and do the laws need to be tightened to allow this to become an easier or shorter process?

- In BC, health profession regulatory colleges, including the College of Physicians and Surgeons, have been delegated the authority under provincial legislation to govern the practice of their registrants in the public interest. This includes the ability to suspend, restrict or revoke the registration of registrant.
- In August 2020 the Steering Committee on Modernization of Health Professional Regulation published a paper of recommendations to modernize the health professions regulatory framework. Among other recommendations, the Steering Committee recommended that the framework be modernized to increase transparency about complaints outcomes and recommends that information about all agreements between regulatory colleges and registrants in complaints matters be made public, and done so in a consistent manner. Government is currently working to modernize the *Health Professions Act* based on the Steering Committee's recommendations.
- The College of Physicians and Surgeons of British Columbia bylaws already require that: "A registrant who makes public statements on medical matters must conform to the relevant provisions of the standards of professional ethics and standards of practice."
- The College of Physicians and Surgeons of BC helped develop the position statement of the Federation of Medical Regulatory Authorities of Canada - which clarifies the expectations of physicians who speak publicly. Though this statement is not a legal requirement it does indicate the CPSBC's support for public health orders and recommendations.

- Ontario changed its laws in recent years to give the CPSO the power to restrict/ suspend a health professional's licence while they are being officially investigated. Has BC looked into this too? Will it consider doing so in the future?

- The HPA already contains such authority for the colleges to act under section 35 see:

Extraordinary action to protect public

35 (1)If the inquiry committee considers the action necessary to protect the public during the investigation of a registrant or pending a hearing of the discipline committee, it may, by order,

- a) impose limits or conditions on the practice of the designated health profession by the registrant, or
- (b) suspend the registration of the registrant.

- A section 35 order is different than Ontario in that it must be done in writing to the registrant and include reasons for the order.

- Experts and the public are now concerned that the College is not doing its job in holding these doctors to account. Is BC considering extending powers to regulate physicians and surgeons to any other regulatory bodies?

- In BC, the CPSBC has been delegated the authority under the HPA to oversee the practice of medicine in the public interest. No other regulatory bodies regulate Physicians and Surgeons in BC.
- The role of the Ministry of Health (the Ministry) is to monitor the general functioning of the regulatory colleges to ensure they are complying with all applicable legislative requirements and have mechanisms in place to carry out their mandate to protect the public from incompetent, impaired or unethical practice. The Ministry does not, however, have the authority to initiate or intervene in the investigation or resolution of complaints about the conduct of individual practitioners.
- Please note that under regulatory modernization of the HPA, one of the recommendations is to establish an oversight body which, among other things, would have the role of ensuring the colleges are, and continue to act, in the public interest.

- Charles Hoffe, in particular, is apparently now only set to appear at a hearing for an email he sent to colleagues about the Covid vaccine last March. In the intervening nine months he has gone on to spread disinformation on a much larger scale. Why is the CPSO, or the Ministry of Health, not better equipped to deal with investigations on a faster scale? Why does this need to take almost a year to solve?

- The ability to investigate a registrant of CPSBC and to suspend, restrict or revoke the registration of registrant lies solely with CPSBC. The Ministry of Health is unable to become involved in investigations of specific registrants, and if it is informed of an issue of public interest or safety, the regulatory college are there to address the concern(s) as delegated under the HPA.
- The length of time between an action that warrants a complaint and discipline is dependent on when the complaint was filed and the complexity of the resultant investigation.
- Once CPSBC is made aware of any registrant behaviour that is outside of expected conduct it will determine the investigative approach, as specified under the HPA.
- This process must be fair and can take some time to conclude.

- Will the Ministry of Health be looking into the Doctors on Tour events currently touring the BC countryside telling crowds that “vaccines kill children” and allowing packed rooms to congregate unmasked?

- When an issue of public interest or safety is brought to the attention of the Minister of Health, regarding any regulated health profession, the Minister will look to the regulatory college to address the concern(s) as delegated under the *Health Professions Act*.
- The College of Physicians and Surgeons of British Columbia and First Nations Health Authority released a Joint Statement on Misleading COVID-19 Information that states:
 - Physicians need to be aware that when they identify themselves as a physician, the public tends to place great weight on their opinion even if that physician has no expertise in a medical specialty, such as population health or infectious diseases. The confidence entrusted by the public places even greater responsibility on physicians when making pronouncements about the COVID-19 pandemic. Misinformation breaches public trust and is contrary to the ethical obligations set out in the Canadian Medical Association’s Code of Ethics and Professionalism.
 - Physicians must be guided by the laws that govern them, regulatory practice standards and guidelines, the Code of Ethics and Professionalism, and scientific evidence when giving their opinions about COVID-19.

- “Public statements from physicians that contradict public health orders and guidance are confusing and potentially harmful to patients,” said Dr. Heidi Oetter, registrar and CEO of the College. “Those who put the public at risk with misinformation may face an investigation by the College, and if warranted, regulatory action.”

Brian Westgate
Director Strategic Priorities, Professional Regulation and Oversight
Ministry of Health | 1515 Blanshard Street | PO Box 9650 STN PROV GOVT
Victoria BC V8W 9P4

Phone: 250-952-3145
Mobile: 250-507-7423
Brian.westgate@gov.bc.ca

From: Marsh, Jania HLTH:EX <Jania.Marsh@gov.bc.ca>
Sent: January 18, 2022 11:38 AM
To: MacKinnon, Mark HLTH:EX <Mark.MacKinnon@gov.bc.ca>; Westgate, Brian A HLTH:EX <Brian.Westgate@gov.bc.ca>; Brown, Kevin HLTH:EX <Kevin.Brown@gov.bc.ca>
Cc: Wigmore, Matthew GCPE:EX <Matthew.Wigmore@gov.bc.ca>; Armitage, Mark W HLTH:EX <Mark.Armitage@gov.bc.ca>
Subject: COVID/HLTH Media Request: COVID-19 Misinformation from Doctors - due by 3:00pm
Importance: High

Hi Mark/Brian (PRO) and Kevin (PSB):

Please see below for a media request on COVID-19 Misinformation from Doctors - **this is due back to GCPE by 3:00pm today if possible.**

As per Matthew's email below, it is a lengthy request on the reporter's end,^{s.13}
s.13 Matthew is flexible as to wherever and whatever the division feels necessary to provide.

In terms of the reporter's last question about events, GCPE will be referring the reporter to the orders currently in place and Dr Henry's comments on gatherings.

Subject: COVID Media Request: COVID-19 Misinformation from Doctors

Reporter

Ashleigh Stewart, Reporter
Global News
ashleigh.stewart@globalnews.ca
416-575-0748

Deadline ASAP

Request

Just wondering if I can get some questions in to Mr Dix on a rise in misinformation being spread by doctors in BC and whether or not the CPSBC is doing enough about this.

Please find my questions below.

- A number of BC doctors (Stephen Malthouse, Daniel Nagase, Gwyllyn Goddard, Charles Hoffe and more outlined in this story: <https://globalnews.ca/news/8517353/canada-doctors-covid-vaccine-disinformation/>) are openly spreading

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Thanks for this. Please note that my deadline is tomorrow at midday ET.

Recommendation

Background

Thank you,

Jania Marsh | Executive Coordinator |

Assistant Deputy Minister's Office | Health Sector Workforce & Beneficiary Services Division

Ministry of Health | PO Box 9649 STN PROV GOVT | Victoria, BC | V8W 9P4

P: 250-952-2402 | C: 778-679-6410 | E: Janias.Marsh@gov.bc.ca

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From: Wigmore, Matthew GCPE:EX <Matthew.Wigmore@gov.bc.ca>

Sent: January 18, 2022 11:29 AM

To: Marsh, Jania HLTH:EX <Janias.Marsh@gov.bc.ca>

Subject: FW: COVID/HLTH Media Request: COVID-19 Misinformation from Doctors

Importance: High

Hi Jania

Can I get a response for 3pm?

It's a pretty lengthy request on the reporter's end,^{s.13}

^{s.13} I'm flexible as to wherever and whatever the division feels necessary to provide.

In terms of the reporter's last question about events, I'll simply be referring her to the orders currently in place and Dr Henry's comments on gatherings.

Thanks!

Matthew

Subject: COVID Media Request: COVID-19 Misinformation from Doctors

Reporter

Ashleigh Stewart, Reporter
Global News
ashleigh.stewart@globalnews.ca
416-575-0748

Deadline ASAP

Request

Just wondering if I can get some questions in to Mr Dix on a rise in misinformation being spread by doctors in BC and whether or not the CPSBC is doing enough about this.

Please find my questions below.

- A number of BC doctors (Stephen Malthouse, Daniel Nagase, Gwyllyn Goddard, Charles Hoffe and more outlined in this story: <https://globalnews.ca/news/8517353/canada-doctors-covid-vaccine-disinformation/>) are openly spreading disinformation about the Covid vaccines. Each of them (aside from Goddard who resigned) still have active medical licences. The CPSBC refuses to comment on whether or not they are being investigated or not. Do you think enough is being done to monitor the professional conduct of BC doctors who are knowingly sharing unverified medical information?
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- Will the Ministry of Health be looking into the Doctors on Tour events currently touring the BC countryside telling crowds that "vaccines kill children" and allowing packed rooms to congregate unmasked?

Thanks for this. Please note that my deadline is tomorrow at midday ET.

Recommendation

Background

From: Bennett, Christopher HLTH:EX
Sent: January 20, 2022 12:09 PM
To: Younker, Katherine E HLTH:EX; Westgate, Brian A HLTH:EX
Subject: RE: HLTH Follow-up Media Request: COVID-19 Misinformation from Doctors - due today by 3pm

We can indicate that we are looking into these concerns. Could we use some of our current wording around modernization, the Ministry is currently working to modernize the health professions regulatory framework based on recommendations of the steering committee.

With respect to the comments that CPSBC can't do anything about that, I'm not really sure what's going on with that, but still think it's worth indicating that as per the HPA the CPSBC has a complaints process and duty to ensure the competence and safety of those who are practising.

Chris

From: Younker, Katherine E HLTH:EX <Katherine.Younker@gov.bc.ca>
Sent: January 20, 2022 12:04 PM
To: Bennett, Christopher HLTH:EX <Christopher.Bennett@gov.bc.ca>; Westgate, Brian A HLTH:EX <Brian.Westgate@gov.bc.ca>
Subject: RE: HLTH Follow-up Media Request: COVID-19 Misinformation from Doctors - due today by 3pm

We have actually received complaint letters, so please see my earlier email.

From: Bennett, Christopher HLTH:EX <Christopher.Bennett@gov.bc.ca>
Sent: January 20, 2022 11:57 AM
To: Westgate, Brian A HLTH:EX <Brian.Westgate@gov.bc.ca>; Younker, Katherine E HLTH:EX <Katherine.Younker@gov.bc.ca>
Subject: RE: HLTH Follow-up Media Request: COVID-19 Misinformation from Doctors - due today by 3pm

Sorry for the delay getting back to you on this. That makes sense to me. Just trying to understand the below comment, CPSBC made recommendations to the Steering Committee with regard to bolstering their ability limit licence and that they don't feel like they currently have sufficient ability right now for these situations?

Chris

From: Westgate, Brian A HLTH:EX <Brian.Westgate@gov.bc.ca>
Sent: January 20, 2022 11:29 AM
To: Bennett, Christopher HLTH:EX <Christopher.Bennett@gov.bc.ca>; Younker, Katherine E HLTH:EX <Katherine.Younker@gov.bc.ca>
Subject: RE: HLTH Follow-up Media Request: COVID-19 Misinformation from Doctors - due today by 3pm

I am thinking we just indicate that the incoming we have received from them was the first we were made aware of this specific issue...

Brian Westgate
Director Strategic Priorities, Professional Regulation and Oversight

Ministry of Health | 1515 Blanshard Street | PO Box 9650 STN PROV GOVT
Victoria BC V8W 9P4

Phone: 250-952-3145
Mobile: 250-507-7423
Brian.westgate@gov.bc.ca

From: Westgate, Brian A HLTH:EX
Sent: January 20, 2022 11:20 AM
To: Bennett, Christopher HLTH:EX <Christopher.Bennett@gov.bc.ca>; Younker, Katherine E HLTH:EX <Katherine.Younker@gov.bc.ca>
Subject: FW: HLTH Follow-up Media Request: COVID-19 Misinformation from Doctors - due today by 3pm
Importance: High

Are either of you able to help me with this?

Brian Westgate
Director Strategic Priorities, Professional Regulation and Oversight
Ministry of Health | 1515 Blanshard Street | PO Box 9650 STN PROV GOVT
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Phone: 250-952-3145
Mobile: 250-507-7423
Brian.westgate@gov.bc.ca

From: Marsh, Jania HLTH:EX <Jania.Marsh@gov.bc.ca>
Sent: January 20, 2022 10:05 AM
To: Westgate, Brian A HLTH:EX <Brian.Westgate@gov.bc.ca>
Cc: Thomson, Krystal GCPE:EX <Krystal.Thomson@gov.bc.ca>; MacKinnon, Mark HLTH:EX <Mark.MacKinnon@gov.bc.ca>
Subject: HLTH Follow-up Media Request: COVID-19 Misinformation from Doctors - due today by 3pm

Hi Brian,

Can you please help with the follow-up question GCPE rec'd for the media request you had helped prepare a response for on January 18th. Please see below. The question is highlighted in yellow - **This is due back to GCPE by 3:00pm today.**

Reporter

Ashleigh Stewart, Reporter
Global News
ashleigh.stewart@globalnews.ca
416-575-0748
Deadline ASAP

Request

Has the Ministry of Health received any complaints about doctors spreading misinformation or issuing false exemptions or administering ivermectin (basically, anything related to improper conduct re Covid-19 or Covid vaccines) and if so, how many? And what is the process that you would take after receiving – refer to the CPSBC?

I received responses from the CPSBC and they've actually made a comment around the fact that they've attempted to make changes to ensure physician's licenses can be restricted but it's been blocked by the MOH? The College said they have "made several recommendations to the tri-party steering committee tasked with modernizing BC's health

regulatory framework, including amendments to the Health Professions Act. Only the government can update legislation." Could I ask you to potentially just include a response to this? The CPSBC appears to be saying that they have asked for framework to restrict licences but the MoH has not updated the legislation? Is this the case and if so, why hasn't that been brought in?

Recommendation

Background

This is a follow-up to a media request from January 18, 2022.

REQUEST:

Just wondering if I can get some questions in to Mr Dix on a rise in misinformation being spread by doctors in BC and whether or not the CPSBC is doing enough about this.

Please find my questions below.

- A number of BC doctors (Stephen Malthouse, Daniel Nagase, Gwyllyn Goddard, Charles Hoffe and more outlined in this story: <https://globalnews.ca/news/8517353/canada-doctors-covid-vaccine-disinformation/>) are openly spreading disinformation about the Covid vaccines. Each of them (aside from Goddard who resigned) still have active medical licences. The CPSBC refuses to comment on whether or not they are being investigated or not. Do you think enough is being done to monitor the professional conduct of BC doctors who are knowingly sharing unverified medical information?
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- Will the Ministry of Health be looking into the Doctors on Tour events currently touring the BC countryside telling crowds that "vaccines kill children" and allowing packed rooms to congregate unmasked?

Thanks for this. Please note that my deadline is tomorrow at midday ET.

Follow up:

Thanks. Can I also add in one more question, which is asking whether the Ministry of Health has received any complaints about doctors spreading misinformation or issuing false exemptions or administering ivermectin (basically, anything related to improper conduct re Covid-19 or Covid vaccines) and if so, how many? And what is the process that you would take after receiving – refer to the CPSBC?

RESPONSE:

Provided Statement

If a complaint is filed against a registrant, as per the Health Profession's Act (HPA), regulatory colleges have an obligation to protect the privacy of all parties during the complaint and investigative process, and this includes the registrant for which the complaint is made against. When the college takes an action against a registrant, public notification is required as specified in Section 39.3 of the HPA. Until that time, the complaint and investigation remain confidential.

In BC, health profession regulatory colleges, including the College of Physicians and Surgeons, have been delegated the authority under provincial legislation to govern the practice of their registrants in the public interest. This includes the

ability to suspend, restrict or revoke the registration of registrant.

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The College of Physicians and Surgeons of BC helped develop the position statement of the Federation of Medical Regulatory Authorities of Canada - which clarifies the expectations of physicians who speak publicly. Though this statement is not a legal requirement it does indicate the CPSBC's support for public health orders and recommendations.

In terms of your comparison to Ontario around licensure, it's worth noting, The Health Protection Act already contains such authority for the colleges to act under section 35 see:

Extraordinary action to protect public

35 (1) If the inquiry committee considers the action necessary to protect the public during the investigation of a registrant or pending a hearing of the discipline committee, it may, by order,

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A section 35 order is different, however, than Ontario in that it must be done in writing to the registrant and include reasons for the order.

The Ministry does not, however, have the authority to initiate or intervene in the investigation or resolution of complaints about the conduct of individual practitioners.

The College of Physicians and Surgeons of British Columbia and First Nations Health Authority released a Joint Statement on Misleading COVID-19 Information that states:

- Physicians need to be aware that when they identify themselves as a physician, the public tends to place great weight on their opinion even if that physician has no expertise in a medical specialty, such as population health or infectious diseases.
- "Public statements from physicians that contradict public health orders and guidance are confusing and potentially harmful to patients," said Dr. Heidi Oetter, registrar and CEO of the College. "Those who put the public at risk with misinformation may face an investigation by the College, and if warranted, regulatory action."

Thank you,

Jania Marsh | Executive Coordinator |

Assistant Deputy Minister's Office | Health Sector Workforce & Beneficiary Services Division

Ministry of Health | PO Box 9649 STN PROV GOVT | Victoria, BC | V8W 9P4

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From: Thomson, Krystal GCPE:EX <Krystal.Thomson@gov.bc.ca>

Sent: January 20, 2022 9:51 AM

To: Marsh, Jania HLTH:EX <Jania.Marsh@gov.bc.ca>

Subject: FW: HLTH Follow-up Media Request: COVID-19 Misinformation from Doctors

Hi Jania,

Can you please action this for response ASAP? I'm hoping for a response to the first one (highlighted) by this afternoon.

Thanks so much!

Reporter

Ashleigh Stewart, Reporter

Global News

ashleigh.stewart@globalnews.ca

416-575-0748

Deadline ASAP

Request

Has the Ministry of Health received any complaints about doctors spreading misinformation or issuing false exemptions or administering ivermectin (basically, anything related to improper conduct re Covid-19 or Covid vaccines) and if so, how many? And what is the process that you would take after receiving – refer to the CPSBC?

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Recommendation

Background

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Follow up:

Thanks. Can I also add in one more question, which is asking whether the Ministry of Health has received any complaints about doctors spreading misinformation or issuing false exemptions or administering ivermectin (basically, anything related to improper conduct re Covid-19 or Covid vaccines) and if so, how many? And what is the process that you would take after receiving – refer to the CPSBC?

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Sent: January 20, 2022 12:15 PM
To: Westgate, Brian A HLTH:EX
Cc: MacKinnon, Mark HLTH:EX; Marsh, Jania HLTH:EX
Subject: RE: HLTH Follow-up Media Request: COVID-19 Misinformation from Doctors - due today by 3pm

Thanks, Brian. Let's stand down on that if it's too much to quantify. I will say "Complaints are referred to the college" if that works for you.

Can you help me out with a frame to respond to the journalist's second question?

I received responses from the CPSBC and they've actually made a comment around the fact that they've attempted to make changes to ensure physician's licenses can be restricted but it's been blocked by the MOH? The College said they have "made several recommendations to the tri-party steering committee tasked with modernizing BC's health regulatory framework, including amendments to the Health Professions Act. Only the government can update legislation." Could I ask you to potentially just include a response to this? The CPSBC appears to be saying that they have asked for framework to restrict licences but the MoH has not updated the legislation? Is this the case and if so, why hasn't that been brought in?

From: Westgate, Brian A HLTH:EX <Brian.Westgate@gov.bc.ca>
Sent: January 20, 2022 11:33 AM
To: Marsh, Jania HLTH:EX <Jania.Marsh@gov.bc.ca>
Cc: Thomson, Krystal GCPE:EX <Krystal.Thomson@gov.bc.ca>; MacKinnon, Mark HLTH:EX <Mark.MacKinnon@gov.bc.ca>
Subject: RE: HLTH Follow-up Media Request: COVID-19 Misinformation from Doctors - due today by 3pm

Hi Jania I am not sure how to answer this. It would take a significant amount of time to quantify this and a request for this information from throughout the Ministry.

What I can say is that if we received a questions or concern about this we would refer them to the college....

Are you wanting numbers or just a response to what we would do if we received a concern like this...

Thanks

Brian Westgate
Director Strategic Priorities, Professional Regulation and Oversight
Ministry of Health | 1515 Blanshard Street | PO Box 9650 STN PROV GOVT
Victoria BC V8W 9P4

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From: Marsh, Jania HLTH:EX <Jania.Marsh@gov.bc.ca>
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Deadline ASAP

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Jania Marsh | Executive Coordinator |

Assistant Deputy Minister's Office | Health Sector Workforce & Beneficiary Services Division

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To: Westgate, Brian A HLTH:EX; Marsh, Jania HLTH:EX
Cc: MacKinnon, Mark HLTH:EX
Subject: RE: HLTH Follow-up Media Request: COVID-19 Misinformation from Doctors - due today by 3pm

Awesome. Thanks so much!

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Sent: January 20, 2022 2:06 PM
To: Marsh, Jania HLTH:EX <Jania.Marsh@gov.bc.ca>
Cc: Thomson, Krystal GCPE:EX <Krystal.Thomson@gov.bc.ca>; MacKinnon, Mark HLTH:EX <Mark.MacKinnon@gov.bc.ca>
Subject: RE: HLTH Follow-up Media Request: COVID-19 Misinformation from Doctors - due today by 3pm

Please see below:

Thank you for your questions.

The Ministry has been made aware of some medical practitioners who have been making false and misleading statements about COVID-19 and vaccinations.

When incidents like this are brought to the Ministry's attention they are referred to the CPSBC who has been delegated the authority under provincial legislation to govern the practice of their registrants in the public interest.

In regards to legislative changes, as you may be aware the Ministry is currently working to modernize the health professions regulatory framework based on recommendations of the steering committee.

See [recommendations-to-modernize-regulatory-framework.pdf \(gov.bc.ca\)](#) These recommendations look to make changes to 6 areas of the HPA including:

- Improve cultural safety under the HPA.
- Ensuring regulatory colleges are putting the public interest and patient safety ahead of the professional interest.
- Improving effectiveness of regulatory college boards and ensuring boards are composed of members appointed based on merit and competence (governance).
- Reducing the number of regulatory colleges to improve efficiency and effectiveness.
- Strengthen oversight through the creation of a body to oversee regulatory colleges to improve public confidence and patient safety.
- Simplifying and increasing transparency in the complaints and discipline process.

Until this legislation is modernized we encourage the CPSBC and all other health professions colleges to use the tools provide for them in the current HPA.

Please review highlighted yellow to determine whether we want to keep this in...

Brian Westgate

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Phone: 250-952-3145
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This is a follow-up to a media request from January 18, 2022.

REQUEST:

Just wondering if I can get some questions in to Mr Dix on a rise in misinformation being spread by doctors in BC and whether or not the CPSBC is doing enough about this.

Please find my questions below.

- A number of BC doctors (Stephen Malthouse, Daniel Nagase, Gwyllyn Goddard, Charles Hoffe and more outlined in this story: <https://globalnews.ca/news/8517353/canada-doctors-covid-vaccine-disinformation/>) are openly spreading disinformation about the Covid vaccines. Each of them (aside from Goddard who resigned) still have active medical licences. The CPSBC refuses to comment on whether or not they are being investigated or not. Do you think enough is being done to monitor the professional conduct of BC doctors who are knowingly sharing unverified medical information?
- The CPSBC has not suspended, restricted or revoked any medical licences in regards to the above spreading of disinformation. Why not and do the laws need to be tightened to allow this to become an easier or shorter process?
- Ontario changed its laws in recent years to give the CPSO the power to restrict/ suspend a health professional's licence while they are being officially investigated. Has BC looked into this too? Will it consider doing so in the future?
- Experts and the public are now concerned that the College is not doing its job in holding these doctors to account. Is BC considering extending powers to regulate physicians and surgeons to any other regulatory bodies?
- Charles Hoffe, in particular, is apparently now only set to appear at a hearing for an email he sent to colleagues about the Covid vaccine last March. In the intervening nine months he has gone on to spread disinformation on a much larger scale. Why is the CPSO, or the Ministry of Health, not better equipped to deal with investigations on a faster scale? Why does this need to take almost a year to solve?
- Will the Ministry of Health be looking into the Doctors on Tour events currently touring the BC countryside telling crowds that "vaccines kill children" and allowing packed rooms to congregate unmasked?

Thanks for this. Please note that my deadline is tomorrow at midday ET.

Follow up:

Thanks. Can I also add in one more question, which is asking whether the Ministry of Health has received any complaints about doctors spreading misinformation or issuing false exemptions or administering ivermectin (basically, anything related to improper conduct re Covid-19 or Covid vaccines) and if so, how many? And what is the process that you would take after receiving – refer to the CPSBC?

RESPONSE:

Provided Statement

If a complaint is filed against a registrant, as per the Health Profession's Act (HPA), regulatory colleges have an obligation to protect the privacy of all parties during the complaint and investigative process, and this includes the registrant for which the complaint is made against. When the college takes an action against a registrant, public notification is required as specified in Section 39.3 of the HPA. Until that time, the complaint and investigation remain confidential.

In BC, health profession regulatory colleges, including the College of Physicians and Surgeons, have been delegated the authority under provincial legislation to govern the practice of their registrants in the public interest. This includes the ability to suspend, restrict or revoke the registration of registrant.

In August 2020 the Steering Committee on Modernization of Health Professional Regulation published a paper of recommendations to modernize the health professions regulatory framework. Among other recommendations was increasing transparency about complaints outcomes and recommending that information about all agreements between regulatory colleges and registrants in complaints matters be made public, and done so in a consistent manner. Government is currently working to modernize the Health Professions Act based on the Steering Committee's recommendations.

The College of Physicians and Surgeons of BC helped develop the position statement of the Federation of Medical Regulatory Authorities of Canada - which clarifies the expectations of physicians who speak publicly. Though this statement is not a legal requirement it does indicate the CPSBC's support for public health orders and recommendations.

In terms of your comparison to Ontario around licensure, it's worth noting, The Health Protection Act already contains such authority for the colleges to act under section 35 see:

Extraordinary action to protect public

35 (1) If the inquiry committee considers the action necessary to protect the public during the investigation of a registrant or pending a hearing of the discipline committee, it may, by order,

- a) impose limits or conditions on the practice of the designated health profession by the registrant, or
- (b) suspend the registration of the registrant.

A section 35 order is different, however, than Ontario in that it must be done in writing to the registrant and include reasons for the order.

The Ministry does not, however, have the authority to initiate or intervene in the investigation or resolution of complaints about the conduct of individual practitioners.

The College of Physicians and Surgeons of British Columbia and First Nations Health Authority released a Joint Statement on Misleading COVID-19 Information that states:

- Physicians need to be aware that when they identify themselves as a physician, the public tends to place great weight on their opinion even if that physician has no expertise in a medical specialty, such as population health or infectious diseases.

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said Dr. Heidi Oetter, registrar and CEO of the College. Copyright

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