

# PUBLIC HEALTH AGENCY OF CANADA (PHAC) MANAGEMENT RESPONSE AND ACTION PLAN (MRAP)

In response to the recommendations of the Report 8 - Pandemic Preparedness, Surveillance, and Border Control Measures  
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Para 37	The Public Health Agency of Canada should work with its partners to evaluate all plans to assess whether emergency response activities during the COVID-19 pandemic were carried out as intended and met objectives. This evaluation and other lessons learned from the pandemic should inform updates to plans. The agency should further test its readiness for a future pandemic or other public health event.	Agreed. The experience of COVID-19 has provided a lived experience of a global pandemic, the nature of which Canada has not seen in over 100 years. Recognizing that existing plans provided a framework to guide the current response but that improvements are always possible, the Public Health Agency of Canada will incorporate learnings from the pandemic into its plans and test them as appropriate. In updating and testing these plans, the agency will work with provincial and territorial partners to reflect shared responsibilities for public health emergencies. This work will be completed within 2 years after the end of the pandemic.	<p>The Health Portfolio has in place an updated and tested Health Portfolio Strategic Emergency Management Plan and Health Portfolio Emergency Response Plan that enhance the portfolio's preparedness to respond to future public health threats and emergencies.</p> <p>The Public Health Network Council is engaged with a view to updating the Federal/ Provincial/Territorial Public Health Response Plan for Biological Events.</p>	<p>Health Portfolio plans will be updated and tested within 2 years after the end of the pandemic.</p> <p>As the Public Health Network Council is responsible for the Federal/Provincial/Territorial Public Health Response Plan for Biological Events, key activities and timelines associated with this plan will be established by Council members.</p>	<p><b><u>Health Portfolio Plans:</u></b></p> <p><b><u>Phase 1:</u></b> Collate lessons learned from COVID-19 and engage with partners to evaluate how plans were used during the pandemic, and identify gaps, should they exist. (Ongoing)</p> <p><b><u>Phase 2:</u></b> Drawing from Phase 1, conduct an analysis of the plans to identify areas requiring modifications should they exist; initiate revision of the plans in priority areas, as and if appropriate. (Within 12 months after the end of the pandemic)</p> <p><b><u>Phase 3:</u></b> As part of consultations with partners and the results from Phase 2, test the plans through a series of workshops and exercises. (Within 18 months after the end of the pandemic)</p> <p><b><u>Phase 4:</u></b> Based on observations from workshops and exercises, finalize plans and seek necessary approvals, if and as required. (Within 24 months after the end of the pandemic)</p> <p><b><u>Federal/Provincial/ Territorial Public Health Response Plan for Biological Events:</u></b></p> <p>Within six months of the end of the pandemic, the Agency will engage the Public Health Network Council to discuss the findings, analysis and observations made in</p>	Cindy Evans, A/VP, Emergency Management, PHAC  <a href="mailto:phac.emergencymanagement@ncces.aspc.canada.ca">phac.emergencymanagement@ncces.aspc@canada.ca</a>	

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					the previous four phases, and apply them to the plan (should the plan require refinements), and will work with Council members to identify a work plan and key deliverables, and timelines (if necessary).		
Para 51	The Public Health Agency of Canada should, in collaboration with its provincial and territorial partners, finalize the annexes to the multi-lateral agreement to help ensure that it receives timely, complete, and accurate surveillance information from its partners. In addition, in collaboration with provinces and territories, the agency should set timelines for completing this agreement. This exercise should be informed by lessons learned from data sharing between the agency and its partners during the COVID-19 pandemic	<p>Agreed. The Public Health Agency of Canada will continue to work with its provincial and territorial partners to develop a new work plan for the multi-lateral agreement. The new work plan will be developed with provincial and territorial partners on the basis of lessons learned from the COVID-19 pandemic and the forthcoming recommendations from the pan-Canadian health data strategy (pCHDS).</p> <p>The agency will use lessons learned to evolve the existing federal-provincial-territorial governance, through which a joint critical path for delivery on the multi-lateral agreement will be outlined. The necessary agreements to support receiving timely and accurate surveillance information from its provincial and territorial partners will also be articulated. Both the work plan and governance recommendations will be addressed within 2 years of the end of the pandemic.</p>	The Public Health Agency of Canada has in place a finalized multi-lateral agreement annexes with the provinces and territories outlining requirements for the submission of timely, complete and accurate surveillance information to the Agency.	<p>Within two years of the end of the pandemic.</p> <p>Success is dependent on collaboration with and commitment from provincial and territorial partners.</p>	<p>Recommendations related to public health data sharing in Canada from the pCHDS - January 2022</p> <p>Multi-lateral information sharing agreement governance structure finalized outlining how PHAC will work with the provinces and territories- August 2022</p> <p>In collaboration with provincial and territorial partners, develop a workplan and critical path for addressing the multi-lateral information sharing agreement annexes that reflect lessons learned from COVID-19 – November 2022</p> <p>In collaboration with provincial and territorial partners, draft annexes to the multi-lateral information sharing agreement – based on the workplan and critical path (within two years of the end of the pandemic)</p> <p>Final approved annexes to the multi-lateral information sharing agreement – based on workplan and critical path (within two years of the end of the pandemic)</p>	<p>Rhonda Kropp, VP, Corporate Data and Surveillance Branch, PHAC</p> <p><a href="mailto:phac.cdsb-dgdsi.aspc@canada.ca">phac.cdsb-dgdsi.aspc@canada.ca</a></p>	

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Para 65	The Public Health Agency of Canada should finalize the improvements to its information technology infrastructure to facilitate the collection of timely, accurate, and complete surveillance information from provinces and territories, both during and after the COVID-19 pandemic. The agency should establish timelines for the completion of these improvements.	Agreed. The Public Health Agency of Canada will work with provincial and territorial partners through established governance mechanisms, including the Technical Advisory Committee, the Special Advisory Committee, and the Canadian Health Information Forum, to build on the information management and information technology improvements already underway and articulate the additional functionality at the federal level to facilitate the collection of surveillance information from provinces and territories. The agency will use this intelligence to finalize improvements to its information technology infrastructure, in order to facilitate the sharing of timely, accurate, and complete surveillance information provided by provinces and territories both during and after the COVID-19 pandemic. This work will also address any relevant forthcoming recommendations from the pan-Canadian health data strategy. A critical path with clear milestones will be developed with provincial and territorial partners to guide this work. This recommendation will be addressed within 2 years of the end of the pandemic.	The Public Health Agency of Canada has in place information management and information technology systems which facilitate the sharing of timely, accurate, and complete surveillance information from the provinces and territories.	Within two years of the end of the pandemic.  Success is dependent on collaboration with and commitment from provincial and territorial partners.	Launch of data portal as data collection and sharing solution – October 2020 (complete)  Complete consultations with partners on additional functionality required for a longer-term data sharing solution – September 2021  Based on input from consultations, evaluate options, including existing systems, for functionality and compatibility – January 2022  Develop and implement critical path with clear milestones and workplan, which will include addressing funding needs as necessary and will address findings from the pCHDS - March 2022  Full Implementation of selected data sharing solution(s) - Within two years of the end of the pandemic.	Sheriff Abdou, Chief Data Officer, Corporate Data and Surveillance Branch, PHAC  <a href="mailto:phac.cdsb-dgdsi.aspc@canada.ca">phac.cdsb-dgdsi.aspc@canada.ca</a>	

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Para 66	The Public Health Agency of Canada should develop and implement a long-term, pan-Canadian health data strategy with provinces and territories that will address both the long-standing and more recently identified shortcomings affecting its health surveillance activities. This strategy should support the agency's responsibility to collect, analyze, and share relevant and timely information.	<p>Agreed. The Public Health Agency of Canada signalled its commitment to continue improving health data collection, sharing, and use by creating the Corporate Data and Surveillance Branch in October 2020. Under the leadership of the new branch, the agency launched collaborative work with its federal, provincial, and territorial partners, as well as diverse data stakeholders, toward articulating a pan-Canadian health data strategy. The strategy will identify and address COVID-19 data issues and provide recommendations for addressing the long-standing issues that have a negative impact on Canada's ability to collect, share, and use health data. Success is dependent on collaboration with and commitment from provincial and territorial partners.</p> <p>Significant progress has been made to support federal, provincial, and territorial partnership and on the overall deliverable itself. The federal-provincial-territorial governance for the strategy was established and approved by the Conference of Deputy Ministers of Health. An expert advisory group was launched to provide strategic policy advice related to the strategy. Short- and medium-term priorities to improve</p>	A long-term health pan-Canadian health data strategy, co-developed with the provinces and territories, in place to address systemic issues affecting the collection, sharing and use of health data in Canada.	<p>May 2022</p> <p>Success is dependent on collaboration with and commitment from provincial and territorial partners.</p>	<p>Creation of the Corporate Data and Surveillance Branch - October 2020 (complete)</p> <p>Establishment of federal, provincial, and territorial governance for the long-term, pan-Canadian health data strategy – October 2020 (complete)</p> <p>Launch of an Expert Advisory Group to provide strategic advice re: development of a long-term, pan-Canadian health data strategy – December 2020 (complete)</p> <p>1<sup>st</sup> Draft of the long-term, pan-Canadian health data strategy – August 2021</p> <p>2<sup>nd</sup> Draft of the long-term, pan-Canadian health data strategy – November 2021</p> <p>Long-term, pan-Canadian health data strategy developed – December 2021</p> <p>Completion of all deliverables for the short and medium-term priorities under the pan-Canadian Health Data Strategy –March 2022</p> <p>Long-term, pan-Canadian health data strategy, approval by the Conference of Deputy Ministers of Health – May 2022</p>	<p>Rhonda Kropp, VP, Corporate Data and Surveillance Branch, PHAC</p> <p><a href="mailto:phac.cdsb-dgdsi.aspc@canada.ca">phac.cdsb-dgdsi.aspc@canada.ca</a></p>	

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		Canada's COVID-19 data use have been identified, with summer 2021 targeted for completion. A long-term strategy is under development and is on track for completion by December 2021.					
Para 80	The Public Health Agency of Canada should appropriately utilize its Global Public Health Intelligence Network monitoring capabilities to detect and provide early warning of potential public health threats and, in particular, clarify decision making for issuing alerts.	<p>Agreed. The Global Public Health Intelligence Network (GPHIN) performed its key function of providing early warning within Canada. Early warning of an emerging public health threat on 31 December 2019 was communicated within Canada through a daily report issued by the system on that day. The Public Health Agency of Canada took immediate action on becoming aware of this emerging public health threat following this report, including enhanced surveillance and reporting.</p> <p>The agency will continue to use the GPHIN as Canada's global event-based surveillance system, relying on the full scope of its capabilities to provide early detection and warning of potential public health threats. In recognition of the need for clear decision-making processes, a standard operating procedure was put in place in fall 2020 regarding the issuance of GPHIN alerts. The agency will work to make further improvements to GPHIN and to one of the program components,</p>	GPHIN will perform its key function to detect and provide early warning notifications of emerging public health threats to Canadians.	June 2022	<p>GPHIN products and operations will be reviewed and improved in two phases:</p> <p><u>Phase 1</u></p> <p>The Agency will work to improve and streamline the decision-making process for the issuance of GPHIN alerts and other GPHIN products and processes. This will include reviewing the Standard Operating procedure for GPHIN Alerts, which was implemented October 2020, to determine if further improvements are required, while also putting in place an annual review of GPHIN processes and products.</p> <p><u>Phase 2</u></p> <p>The Agency will assess the recommendations of the GPHIN External Review Panel and develop a Management Response and Action Plan to address them, within 4 months of receiving the report.</p>	<p>Cindy Evans, A/VP Emergency Management, PHAC</p> <p><a href="mailto:phac.emergencymanagement@canada.ca">phac.emergencymanagement@canada.ca</a></p>	

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		the alert process, taking into account both this recommendation as well as the final recommendations of the independent review of GPHIN, expected to be issued in spring 2021.					
Para 85	The Public Health Agency of Canada should strengthen its process to promote credible and timely risk assessments to guide public health responses to limit the spread of infectious diseases that can cause a pandemic, as set out in its pandemic response plans and guidance.	<p>Agreed. The Public Health Agency of Canada conducts risk assessments as a means to assess the severity of emerging public health threats and recognizes the importance of having a robust risk assessment process in response to public health events, including pandemics such as COVID-19.</p> <p>The agency will conduct a review of its risk assessment process and incorporate lessons learned from the COVID-19 pandemic to support timely decision making by senior officials. In addition, the agency will engage domestic and international partners and other stakeholders to inform the review process. This review will also be consistent with and informed by other international risk assessment process reviews in response to the COVID-19 pandemic.</p> <p>This review will be completed by December 2022, recognizing that timelines for this review are dependent</p>	The Public Health Agency of Canada has reviewed and enhanced its processes and tools to support credible and timely risk assessments for infectious diseases including those with pandemic potential.	<p>December 2022</p> <p>Timelines for this review are dependent on the federal government and its partners' available capacity to dedicate to this work, given the ongoing COVID-19 pandemic.</p>	<p><u>PHAC Risk Assessment Tool</u></p> <ol style="list-style-type: none"> <li>1) Incorporate immediate lessons learned from the first wave of the COVID-19 pandemic into the existing risk assessment tool (Completed June 2020)</li> <li>2) Undertake review of the risk assessment tool and methodology (Completed December 2020)</li> <li>3) Develop pilot and implement a new assessment tool (April 2022)</li> <li>4) Engage PTs, key stakeholders and international counterparts to inform the review process (December 2022)</li> </ol> <p><u>PHAC Risk Assessment Process</u></p> <ol style="list-style-type: none"> <li>1) Incorporate immediate lessons learned from the first wave of the COVID 19 pandemic into the risk assessment process (Completed August 2020)</li> </ol>	<p>Stephen Bent, DG, Centre for Immunization and Respiratory Infectious Diseases, PHAC</p> <p>phac.cirid.dgo-bdg.cimri.aspc@canada.ca</p> <p>Steven Sternthal, DG, Centre for Foodborne, Environmental and Zoonotic Infectious</p>	

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		on the federal government and its partners' available capacity to dedicate to this work, given the ongoing COVID-19 pandemic.			<ul style="list-style-type: none"> <li>2) Review PHAC's risk assessment process considering other domestic and international approaches (December 2021);</li> <li>3) Engage PTs, key stakeholders and international counterparts to inform the review process (May 2022)</li> <li>4) Identify additional risk assessment process improvements, including how intelligence connects to governance and informs decision-making (June 2022).</li> <li>5) Implement changes (December 2022).</li> </ul>	Diseases, PHAC  <a href="mailto:phac.CFEZID-CMIOAEZ.aspc@canada.ca">phac.CFEZID-CMIOAEZ.aspc@canada.ca</a>	
Para 118	The Public Health Agency of Canada should improve its systems and processes for administering the nationwide mandatory quarantine during the COVID-19 pandemic, including the collection of contact information and follow-up to verify compliance. Lessons learned should be used to develop emergency plans for administering mandatory quarantine orders for future disease outbreaks.	<p>Agreed. The Public Health Agency of Canada has restructured its border and travel health program to better respond to the changing pandemic and increase its focus on compliance. The agency has improved the systems and processes to promote, monitor, and enforce traveller compliance with quarantine since the program was launched in March 2020.</p> <p>The accuracy and timely collection of traveller contact information has significantly improved since the agency transitioned to mandatory electronic</p>	Up to date emergency plans for administering and enforcing mandatory quarantine orders in response to disease outbreaks or pandemics are in place.	Approved emergency plans for the administration and enforcement of mandatory quarantine orders are available 18 months after the end of the COVID-19 pandemic	<p>Lessons learned and areas for improvement, such as in systems and processes, are clearly articulated and documented. (Fiscal years 2021/22 &amp; 2022/23)</p> <p>Emergency plans for the administration and enforcement of mandatory quarantine orders are developed based on lessons learned (1<sup>st</sup> draft) (April 2022)</p> <p>Emergency plans for the administration and enforcement of mandatory quarantine orders are updated based on most recent lessons learned and consultations with partners (2<sup>nd</sup> draft) (April 2023)</p>	Marie-Helene Levesque, DG, Compliance and Enforcement, Health Security and Infrastructure Branch, PHAC  <a href="mailto:phac.hsib.ce-ce.dgiss.aspc@canada.ca">phac.hsib.ce-ce.dgiss.aspc@canada.ca</a>	

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		<p>submission of contact information and quarantine plans in November 2020 through the ArriveCAN phone app and website. This, in turn, has enhanced the agency's ability to verify compliance and gather evidence to estimate compliance rates.</p> <p>Consistent with the federal government's approach to regulatory enforcement, the agency continues to use a risk-based approach to verify compliance. As part of this, the agency now uses more diverse methods, including</p> <ul style="list-style-type: none"> <li>• the ArriveCAN app, which now allows travellers to demonstrate compliance</li> <li>• phone calls (automated and live agents)</li> <li>• on-site compliance visits at a traveller's quarantine location</li> <li>• follow-up by law enforcement when non-compliance is suspected</li> </ul> <p>Plans for administering and enforcing emergency orders in future outbreaks will be updated 18 months after the current pandemic to incorporate lessons learned.</p>			<p>Emergency plans for the administration and enforcement of mandatory quarantine orders are finalized and approved based on most recent lessons learned and consultations with partners (final draft). (18 months after the end of the COVID-19 pandemic)</p>		