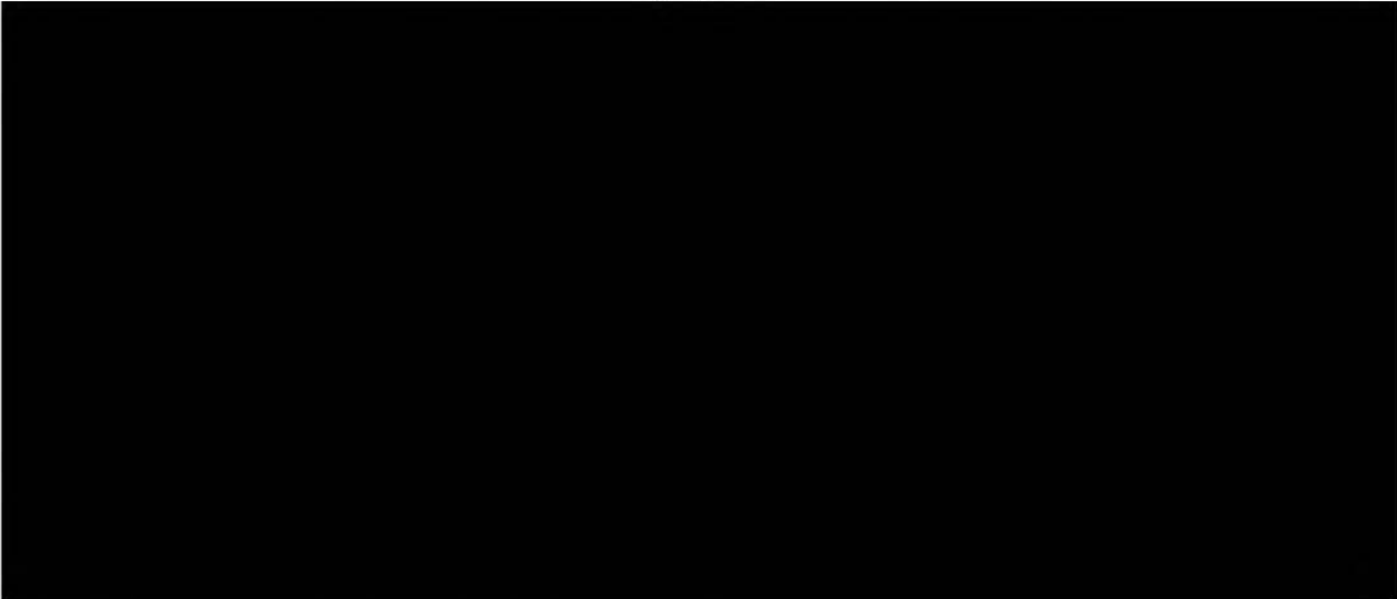


Media Lines

Wildfire Evacuations – Fort McMurray, Wood Buffalo

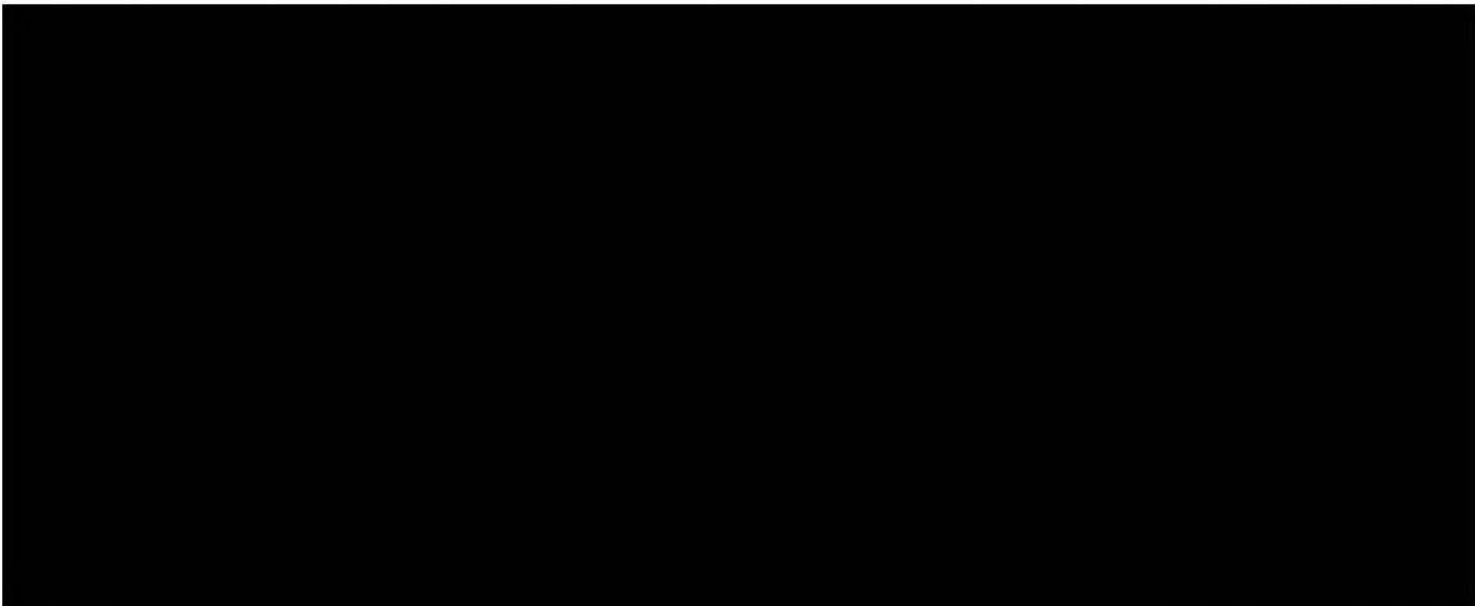
May 4, 2016



Key Messages (General - Public Health Agency Canada):

- The Public Health Agency of Canada is providing reception centres with over 5000 beds and blankets from its National Emergency Strategic Stockpile.
- The Agency is also currently assessing what else the province may need, such as the requirement for portable medical care clinics.


(Note for reader: The NESS is used to respond to a variety of emergencies with health impacts, including influenza pandemics, terrorism events, and natural disasters by providing emergency supplies to supplement municipal, provincial and territorial capacity.)

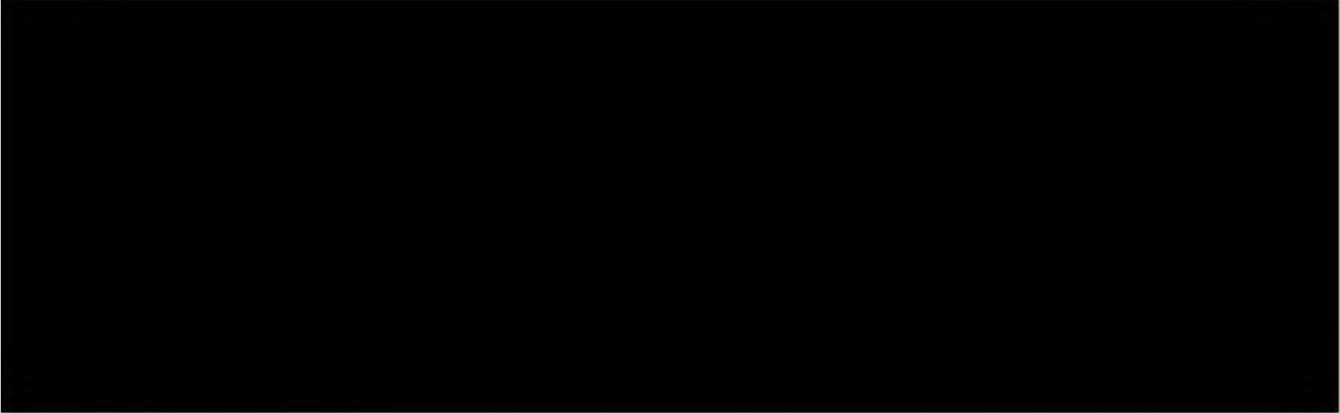




Supplementary Messages:

On the National Emergency Strategic Stockpile

- The National Emergency Stockpile System (NESS) is used to respond to a variety of emergencies with health impacts, including influenza pandemics, terrorism events, and natural disasters by providing emergency supplies to supplement municipal, provincial and territorial capacity.
 - NESS assets are held in warehouses across Canada. NESS assets fall into four categories:
 - o Medical equipment and supplies (e.g. mini-clinics, X-ray machines)
 - o Pandemic supplies (e.g. antivirals and personal protective equipment)
 - o Pharmaceuticals (e.g. antibiotics, chemical, biological and radio-nuclear countermeasures);
and
 - o Social service supplies (e.g. beds and blankets, pillows, towels).
 - The Agency also has mechanisms in place with its provincial and territorial and counterparts, in order that jurisdictions can seek and share additional capacity for health professionals in times of emergencies.
- 



Questions and Answers

Q: What else is the Health Portfolio doing to support the Government of Canada overall response?

The Health Portfolio Operations Centre (HPOC) has been activated at Level 2 (Increased Vigilance to support regional operations and facilitate communications).

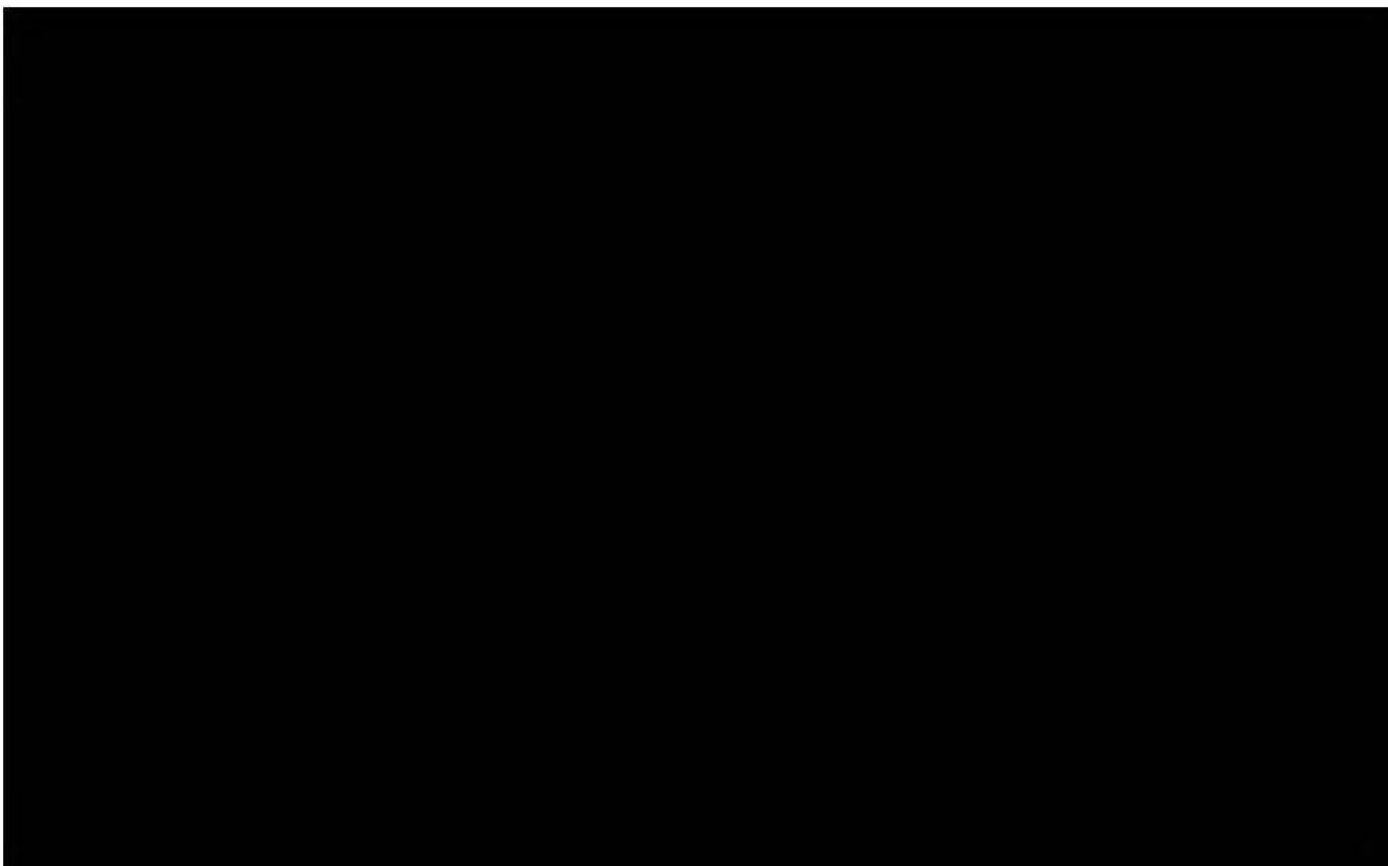
A number of Health Portfolio program areas are currently involved in the response: Alberta Regional Office, Centre for Emergency Preparedness and Response (CEPR), the National Emergency Strategic Stockpile (NESS), Chemical Emergency Preparedness and Response Unit (CEPRU), First Nations and Inuit Health Branch, Communications, and the Employee Assistance Program.

The Water and Air Quality Bureau within the Healthy Environment and Consumer Safety Branch is providing advice to the Operations Centre.

MEDIA LINES: OPIOID CRISIS

KEY MESSAGES

- The opioid crisis is a complex public health event of national concern.
- The Public Health Agency of Canada is actively engaged, working closely with federal partners such as Health Canada, and public health counterparts in provinces and territories.
- In responding to any national public health event, the Public Health Agency of Canada has a number of tools and levers at its disposal. All federal public health tools that could be helpful to the opioid crisis are being used and offered.
 - The Agency has also reached out to P/T counterparts across the country to remind jurisdictions of supplies that are available from the national emergency stockpile, such as mini-clinics.
 - PHAC has also responded to requests for support from BC and Yukon for field epidemiologists to assist with local data collection and surveillance needs.
- Canada's Chief Public Health Officer has focussed on this as a top priority.
 - The Chief Public Health Officer is co-chairing a Special Advisory Committee on Illicit Opioids with provincial and territorial public health counterparts.
 - A primary focus of the group is to address immediate surveillance and data needs



National Emergency Strategic Stockpile

- PHAC has offered the use of supplies in its national emergency stockpile, should they be required in supporting the response on the ground.
 - This includes portable mini-clinics that could be used in the critical care response. There have been no requests for them to be deployed to date, but P/Ts are aware that they are available and can be quickly deployed.

Approvals:

[REDACTED] HECS (Approved Jan. 26)
[REDACTED] PHSCD (approved Feb. 1)
[REDACTED], HSIB (Approved Jan. 30)
[REDACTED], CPAB (approved)
[REDACTED] (approved)
[REDACTED] (approved)

Media Lines Smallpox and Anthrax Preparedness

Issue:

Anticipatory media lines have been developed to address potential questions about a decrease in funding for medical countermeasures (MCM) against Smallpox and Anthrax. Funding was committed for this time limited project in Budget 2015.

Key Messages:

- In Budget 2015, funding was allocated for the acquisition of Anthrax and Smallpox medical countermeasures for the National Emergency Strategic Stockpile (NESS).
- The Public Health Agency of Canada maintains the NESS. The Agency continuously assesses the stockpile to ensure that it contains assets, including medications, vaccines and other supplies, to respond to an evolving risk environment and makes acquisitions accordingly. This includes the type and quantity of supplies to be acquired, as well as funding for their acquisition.

- In the event of an emergency, other mechanisms are also available for rapid procurement.
- The Government of Canada does not disclose specifics related to NESS holdings for security reasons.

Prepared by:

[REDACTED], Emergency and Risk Communications

Approvals:

[REDACTED], Office of Emergency and Response Services (22/02/2017)
[REDACTED], Office of Situational Awareness (FYI)
[REDACTED] Health Security Infrastructure Branch (23/02/2017)
[REDACTED], Public Health Communications (23/02/2017)
[REDACTED] Public Health Strategic Communications (24/02/2017)
[REDACTED], Communications and Public Affairs Branch (27/02/2017)
[REDACTED], [REDACTED], Public Health Agency of Canada (01/03/2017)

Media Lines Procurement of Naloxone – NESS

Issue:

These anticipatory media lines will address potential questions about the procurement of naloxone (nasal spray and injection formulations) for the National Emergency Strategic Stockpile. The below key messages will be included in the evergreen media lines on opioids.

Key Messages:

- The Public Health Agency of Canada maintains the National Emergency Strategic Stockpile (NESS), which contains emergency supplies that may be needed to respond to a variety of emergencies and natural disasters.
- The NESS holds medical equipment, pharmaceuticals and other supplies to supplement provincial and territorial response efforts, when needed.
- As part of the federal government's response to the opioid crisis, the NESS has purchased naloxone that can be made available to support provincial and territorial response efforts, if required.



If pressed

- The NESS purchase does not affect domestic market availability of the naloxone.

Prepared by:

[redacted] Risk and Emergency Communications

Approvals:

[redacted] National Emergency Strategic Stockpile (approved)
[redacted], Office of Emergency and Response Services (approved 31/03/2017)
[redacted], Centre for Emergency Preparedness and Response (approved 31/03/2017)
[redacted], Risk and Emergency Communications (approved 31/03/2017)
[redacted], Public Health Communications (approved 04/04/2017)
[redacted] Public Health Strategic Communications (approved

07/04/2017)

[REDACTED], Health Security Infrastructure Branch (approved 11/04/2017)
[REDACTED] Communications and Public Affairs Branch (approved 13/04/2017)
[REDACTED], Public Health Agency of Canada (April 20, 2017)

Media Lines

National Emergency Strategic Stockpile Support to Wildfires in BC and NWT

Issue:

As a result of ongoing fires threatening numerous communities in BC and the Northwest Territories, the Health Portfolio Operations Centre at the Public Health Agency of Canada (PHAC) received requests to deploy emergency social services equipment to support evacuation operations in northern BC and evacuation preparedness efforts in the Northwest Territories. In response to these requests, PHAC is providing emergency social services (beds and blankets) via its National Emergency Strategic Stockpile (NESS) and has deployed NESS employees to depots to support further requests for assistance. The First Nations Inuit & Health Branch (FNIHB) has also provided respiratory masks to the BC First Nations Health Authority (BC FNHA) from FNIHB's personal protective equipment stockpile at the Drug Distribution Centre in Alberta. In addition, the Chemical Emergency Preparedness and Response Unit (CEPRU) has coordinated readiness for air monitoring equipment and expertise in the past with the Air Health Sciences Division. CEPRU is currently monitoring the situation, and is maintaining daily contact with the HP Regional Emergency Preparedness and Response Coordinator for BC and AB, but no official request for support has been made.

PHAC will continue to provide support if additional requests for assistance are made.

Key messages:

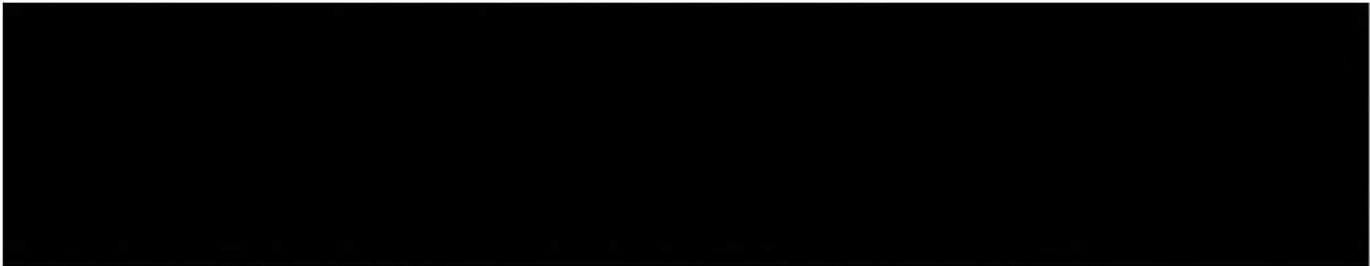
- The Government of Canada is providing emergency social services and equipment to assist the Government of British Columbia and the Northwest Territories in their responses to the ongoing wildfires.
- The Public Health Agency of Canada (PHAC), as part of the overall Government of Canada response, is providing support to BC and the Northwest Territories via the National Emergency Strategic Stockpile (NESS). More than 9000 beds and 9000 blankets have been sent to Prince George, Kamloops, Surrey, Kelowna, and Penticton, BC, for use in various reception areas, and more than 900 blankets and 300 beds have been sent to the Northwest Territories in anticipation of evacuation preparedness efforts.
- The NESS has also deployed four employees to depots in Langley, BC and Edmonton, AB to provide further assistance as needed.
- On July 17, Health Canada sent 2,500 N95 masks to the BC First Nations Health Authority. The masks are for use by healthcare workers and people living in impacted First Nations communities to provide protection from the wildfire smoke and poor air quality. (FNIHB approved)
- PHAC and Health Canada will continue to monitor the wildfires and is prepared to assist further, if requested.

Supplementary Messages: (previously approved for Fort McMurray Wildfires)

On the National Emergency Strategic Stockpile

- The National Emergency Strategic Stockpile (NESS) has supplies and assets available to respond to a variety of emergencies with health impacts.
- NESS assets include:

- Medical equipment and supplies (e.g., mini-clinics and biomedical equipment)
 - Pandemic supplies (e.g., antivirals and personal protective equipment)
 - Pharmaceuticals (e.g., antibiotics, chemical, biological and radio-nuclear countermeasures); and
 - Social service supplies (e.g., beds, blankets, pillows and towels).
- PHAC also has mechanisms that allow its provincial and territorial counterparts to seek and share additional capacity for health professionals in times of emergencies.



This is a modified version of lines approved by the [REDACTED] 9 July and 14 July 2017.

Approved by:

[REDACTED], NESS (July 17)
 [REDACTED], CEPR (July 17)
 [REDACTED], PHSCD, CPAB (*Approved original July 14 / Approved revision 17 July*)
 [REDACTED], HSIB (*[REDACTED] HSIB approved July 8 and received updated For INFO July 14*) - FYI
 [REDACTED], CPAB - FYI
 [REDACTED] - FYI
 MO - FYI

Line on N95 masks approved by:

[REDACTED] (July 19)
 [REDACTED] FNIHB (July 20)
 [REDACTED] Comm Exec (July 20)
 [REDACTED] HSCD (July 20)
 [REDACTED] HSCD (FYI)
 [REDACTED] CPAB (July 21)
 [REDACTED] (July 21) **Media Lines**

National Emergency Strategic Stockpile Support to Wildfires in BC and NWT

Issue:

As a result of ongoing fires threatening numerous communities in BC and the Northwest Territories, the Health Portfolio Operations Centre at the Public Health Agency of Canada (PHAC) received requests to deploy emergency social services equipment to support evacuation operations in northern BC and evacuation preparedness efforts in the Northwest Territories. In response to these requests, PHAC is providing emergency social services (beds and blankets) via its National Emergency Strategic Stockpile (NESS) and has deployed NESS employees to depots to support further requests for assistance. The First Nations Inuit & Health Branch (FNIHB) has also provided respiratory masks to the BC First Nations Health Authority (BC FNHA) from FNIHB's personal protective equipment stockpile at the Drug Distribution Centre in Alberta. In addition, the Chemical Emergency Preparedness and Response Unit (CEPRU) has coordinated readiness for air monitoring equipment and expertise in the past with the Air Health Sciences Division. CEPRU is currently monitoring the situation, and is maintaining daily contact with the HP Regional Emergency Preparedness and Response Coordinator for BC and AB, but no official request for support has been made.

PHAC will continue to provide support if additional requests for assistance are made.

Key messages:

- The Government of Canada is providing emergency social services and equipment to assist the Government of British Columbia and the Northwest Territories in their responses to the ongoing wildfires.
- The Public Health Agency of Canada (PHAC), as part of the overall Government of Canada response, is providing support to BC and the Northwest Territories via the National Emergency Strategic Stockpile (NESS). More than 9000 beds and 9000 blankets have been sent to Prince George, Kamloops, Surrey, Kelowna, and Penticton, BC, for use in various reception areas, and more than 900 blankets and 300 beds have been sent to the Northwest Territories in anticipation of evacuation preparedness efforts.
- The NESS has also deployed four employees to depots in Langley, BC and Edmonton, AB to provide further assistance as needed.
- On July 17, Health Canada sent 2,500 N95 masks to the BC First Nations Health Authority. The masks are for use by healthcare workers and people living in impacted First Nations communities to provide protection from the wildfire smoke and poor air quality. (FNIHB approved)
- PHAC and Health Canada will continue to monitor the wildfires and is prepared to assist further, if requested.

Supplementary Messages: (previously approved for Fort McMurray Wildfires)

On the National Emergency Strategic Stockpile

- The National Emergency Strategic Stockpile (NESS) has supplies and assets available to respond to a variety of emergencies with health impacts.
- NESS assets include:
 - Medical equipment and supplies (e.g., mini-clinics and biomedical equipment)
 - Pandemic supplies (e.g., antivirals and personal protective equipment)
 - Pharmaceuticals (e.g., antibiotics, chemical, biological and radio-nuclear countermeasures); and
 - Social service supplies (e.g., beds, blankets, pillows and towels).
- PHAC also has mechanisms that allow its provincial and territorial counterparts to seek and share additional capacity for health professionals in times of emergencies.

This is a modified version of lines approved by the [REDACTED] 9 July and 14 July 2017.

Approved by:

[REDACTED], NESS (July 17)
[REDACTED], CEPR (July 17)
[REDACTED], PHSCD, CPAB (*Approved original July 14 / Approved revision 17 July*)
[REDACTED] HSIB ([REDACTED] *HSIB approved July 8 and received updated For INFO July 14*) - FYI
[REDACTED] CPAB - FYI
[REDACTED] - FYI
MO - FYI

Line on N95 masks approved by:

[REDACTED] (July 19)
[REDACTED] FNIHB (July 20)
[REDACTED] Comm Exec (July 20)
[REDACTED] HSCD (July 20)
[REDACTED] HSCD (FYI)
[REDACTED] CPAB (July 21)
[REDACTED] (July 21)

UPDATE – August 18, 2017

Media Lines

Health Portfolio Support – Influx of Asylum Seekers

Issue:

The Public Health Agency of Canada (PHAC) is providing support via its National Emergency Strategic Stockpile to assist the Royal Canadian Mounted Police and the Canada Border Services Agency in their response to the influx of asylum seekers at the Canadian border in Quebec. PHAC's Quarantine Officer and Environmental Health Officer also conducted an on-site visit in Saint-Bernard-de-Lacolle on August 11, 2017, and returned for a follow-up visit on August 16, 2017.

The following media lines are to be used on a responsive basis.

Key messages:

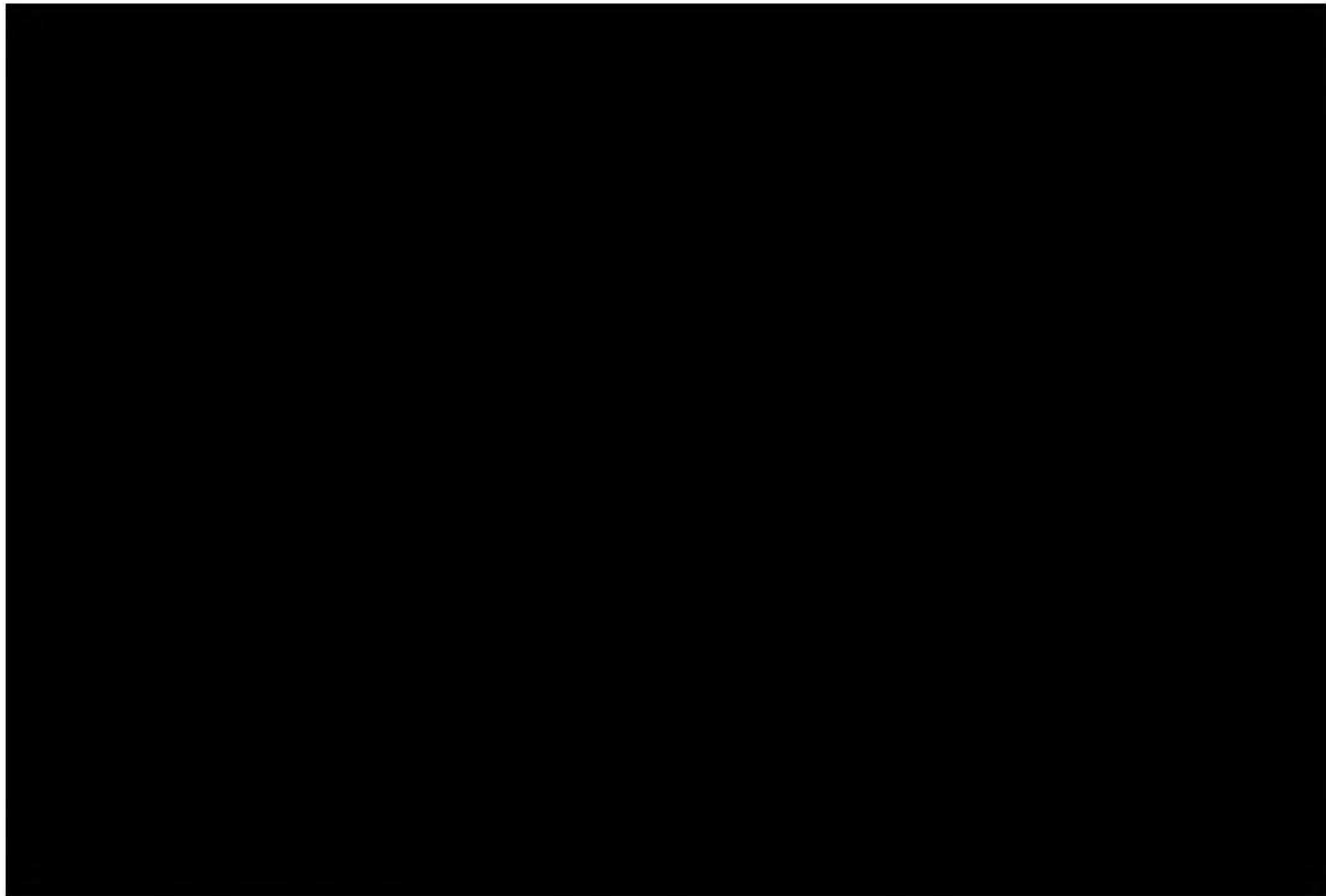
- The Public Health Agency of Canada (PHAC) sent, as of August 17, 1404 beds, 8420 blankets, 15 cribs, 2 defibrillators, 5 electronic thermometers with 2000 probes and one mini-clinic to Saint-Bernard-de-Lacolle to help respond to the influx of migrants arriving in Quebec. PHAC also sent one mini-clinic and 15 cribs to the NAV Centre in Cornwall, Ontario.
- PHAC provides health and social service supplies to federal, provincial and territorial partners in emergency situations through its National Emergency Strategic Stockpile (NESS).
- The NESS has supplies and assets available to respond to a variety of health and public health situations.
- PHAC will continue to monitor the situation and is prepared to assist further, if requested.

Supplementary:

- NESS assets in support of this operation include:
 - Medical equipment and supplies (e.g., mini-clinics and biomedical equipment such as portable X-ray machines and Automated External Defibrillators); and
 - Emergency social service supplies (e.g., beds, blankets, pillows and towels).
- Mini-clinics provide extra support to triage and provide basic treatment during a health emergency. A mini-clinic contains medical equipment and supplies generally found in a

walk-in clinic, such as assessment and basic treatment areas (e.g., Intravenous administration set, Automated External Defibrillators, basic trauma first aid) and modular portable X-ray capability.

•



Approvals – QO and EHO

[redacted], Quarantine Program (approved 10/08/17)
[redacted], Travelling Public Program (approved 10/08/17)
[redacted], OBTH (approved 10/08/17)
[redacted], CEPR (approved 11/08/17)
[redacted] (approved 11/08/17)
[redacted], Strategic Communications (away)
[redacted], Strategic Communications (approved 11/08/17)
[redacted], Health Security Infrastructure Branch (approved 11/08/17)
[redacted], Communications and Public Affairs Branch
(approved 14/08/17)
[redacted], Public Health Agency of Canada (approved 15/08/17)

Approvals – NESS Key Messages

[redacted], National Emergency Strategic Stockpile (approved 08/08/2017)

[REDACTED], Office of Emergency Response Services (approved 08/08/2017) – UPDATE approved 18/08/2017
[REDACTED], Centre for Emergency Preparedness and Response (approved 08/08/2017)
[REDACTED], Emergency and Risk Communications (away)
[REDACTED], Strategic Communications (away)
[REDACTED], Strategic Communications (approved 08/08/2017)
[REDACTED], Health Security Infrastructure Branch (approved 08/08/2017)
[REDACTED], Communications and Public Affairs Branch (approved 08/08/2017)
[REDACTED], Public Health Agency of Canada (approved 08/08/2017)

September 1, 2017

Media Lines

Health Portfolio Support to the United States

Issue:

The Public Health Agency of Canada (PHAC) is providing emergency social services supplies through the Government Operations Centre to assist the United States Federal Emergency Management Agency in dealing with the aftermath of Hurricane Harvey.

The following media lines are to be used on a responsive basis.

Key messages:

- Canada and the United States have a long history of cooperation that includes providing support and resources in emergency situations.
- The Government of Canada is making arrangements to deliver emergency social services supplies, from the Public Health Agency of Canada (PHAC) and other partners, to assist the U.S. as it responds to the aftermath of Hurricane Harvey.
- PHAC is working closely with the Government Operations Centre to coordinate the shipment of some of the emergency social services supplies, including pillows, pillow cases, bath towels and cribs, from its National Emergency Strategic Stockpile (NESS).
- The NESS has supplies available to respond to a variety of health and public health situations.
- PHAC will continue to monitor the situation and is prepared to assist further, if requested.
- Please contact Public Safety Canada for more information on the full range of assistance being provided.

Approvals

[REDACTED], National Emergency Strategic Stockpile (approved 01/09/2017)

[REDACTED], Centre for Emergency Preparedness and Response (approved 01/09/2017)

[REDACTED], Risk and Emergency Communications (approved 01/09/2017)

[REDACTED], Strategic Communications (approved 01/09/2017)

[REDACTED], Health Security Infrastructure Branch (approved by [REDACTED] 01/09/2017)

[REDACTED], Communications and Public Affairs Branch (approved 01/09/2017)

[REDACTED], Public Health Agency of Canada (01/09/2017)

Media Lines
Tuberculosis outbreak in Nunavut

Issue statement:

Tuberculosis (TB) has been a growing concern in northern and Inuit communities, and in December 2017, the Government of Nunavut declared an outbreak of TB. The issue has received media attention. CBC reported on December 29, 2017, that 10% of residents in Qikiqtarjuaq (community of 600), Nunavut, had either latent TB infection or active TB disease. A subsequent article by CBC on January 29, 2018 discussed the mini-clinic that will be setup in the community.

The Public Health Agency of Canada has been supporting Nunavut in addressing this issue:

- On January 10, 2018, the Government of Nunavut requested that the Public Health Agency of Canada deploy a mini-clinic from the National Emergency Strategic Stockpile. It will be set up by February 5, 2018.
- In October 2017, and again on January 17, 2018, an epidemiologist (public health officer) was sent to Nunavut to support screening activities and the set-up of the mini-clinic.
- The National Microbiology Laboratory will send lab experts for six weeks, beginning their work on February 5, to conduct active TB disease diagnostic tests, rapid respiratory virus testing and latent TB infection diagnostic testing.

The Minister or CPHO may be asked to comment on the TB outbreak in Nunavut and the Government of Canada's support.

Q5. When are the mini-clinics deployed to communities?

The Public Health Agency of Canada provides health and social service supplies to federal, provincial and territorial partners by request in emergency situations through the National Emergency Strategic Stockpile.

The National Emergency Strategic Stockpile mini-clinics can be deployed within 24 hours to most locations in Canada. The mini-clinics can be set up in existing buildings such as schools and community centres.

The Public Health Agency of Canada also supports the deployment of epidemiologists and laboratory experts to communities during outbreaks to support laboratory testing and disease investigations.

In this case, the Government of Canada worked with the Government of Nunavut on the timing of the deployment of the mini-clinic to ensure the mini-clinic was established and operational in time for the start of the testing on February 5, 2018.

The Government of Nunavut worked with the community to ensure that an appropriate site was identified and ready to receive the mini-clinic deployment.

Media Lines

National Emergency Strategic Stockpile Mini-clinic Training Halifax May 2018

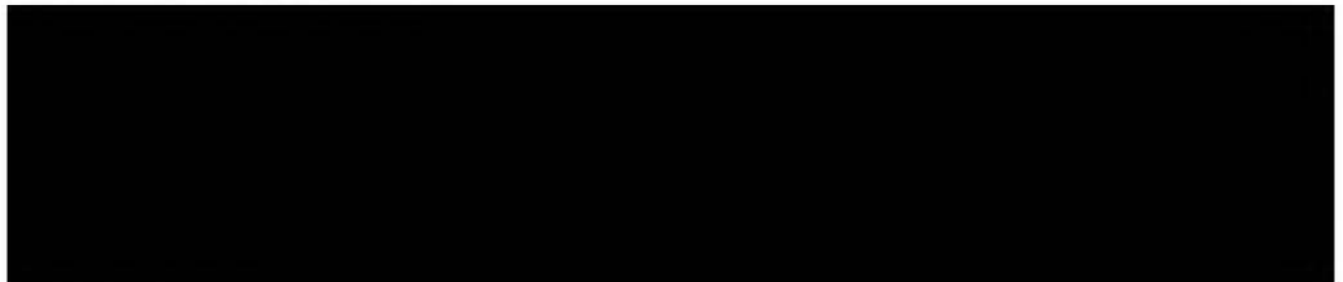
Issue Statement

On May 8 and 9, 2018, the Public Health Agency of Canada will be conducting National Emergency Strategic Stockpile (NESS) mini-clinic training to local health emergency managers and health professionals in Halifax, Nova Scotia. Media are expected to attend. A regional Communications Advisor will be onsite for media relations support and to respond to any media queries. These media lines have been prepared to assist in this response.

Any media queries beyond the scope of the lines below or any media queries received by any means other than onsite at the event should be referred to:

Public Health Agency of Canada
Media Relations
613-957-2983
hc.media.sc@canada.ca

Minister's Speaking Points



Key Messages

Federal assets for emergency response:

- The Government of Canada invests in health assets such as medical equipment and pharmaceutical products to help support Canada's response during emergencies.
- While local, provincial and territorial governments carry primary responsibility for front-line response to potential public health emergencies, the Public Health Agency of Canada and Health Canada can be called upon to provide assistance if the need exceeds the resources of those jurisdictions.
- The Public Health Agency of Canada provides health and social service supplies from the National Emergency Strategic Stockpile to federal, provincial and territorial partners by request in emergencies.

National Emergency Strategic Stockpile:

- The National Emergency Strategic Stockpile (NESS) is housed within the Public Health Agency of Canada.
- The NESS has supplies and assets available to respond to a variety of emergencies with health impacts, including influenza pandemics, bioterrorism events, and natural disasters.
- The Government of Canada continuously monitors for potential risks to the health and safety of Canadians and ensures it has the capacity to respond to emergency events.

NESS mini-clinics:

- One of the key resources from the NESS is the mini-clinic.
- A mini-clinic is a scalable medical unit that can be deployed on short notice (usually within 24 hours) to be set up in existing buildings, such as schools and community centres.
- Mini-clinics provide extra support to triage and provide basic treatment during a health emergency.
- A mini-clinic contains medical equipment and supplies generally found in a walk-in clinic, such as assessment and basic treatment areas (e.g., intravenous administration set, automated external defibrillators, basic trauma first aid). It can be enhanced with additional pieces of equipment, such as ventilators or modular portable X-ray machines, as required.

Mini-clinic training:

- The Public Health Agency of Canada offers mini-clinic training upon request to provincial and territorial health emergency management staff and local health care professionals.
- The mini-clinic training consists of theory on mini-clinic use, set-up and logistic requirements, and a hands-on set-up demonstration.
- Mini-clinic training is typically provided by a NESS supervisor or employee to small groups of 10 to 12 participants.
- Mini-clinic training promotes awareness of the contents and allows local emergency management staff and health care professionals to practice setting up and working with the contents of a mini-clinic.
- Typically, the NESS program completes one or two training events per year. Another training session, in French, is planned later this month and will be held at Isles de la Madeleine, Quebec.

Questions and Responses:

Q1. What does the Stockpile have?

NESS assets include:

- o Medical equipment and supplies (e.g., mini-clinics and X-ray machines)
- o Pandemic supplies (e.g., antivirals and personal protective equipment)
- o Pharmaceutical and biological assets (e.g., antibiotics, vaccines, chemical, biological and radio-nuclear countermeasures)
- o Social service supplies (e.g., beds, blankets, pillows and towels)
- o Mini-clinics for triage and minor treatment

Q2. Where is the NESS?

The Government of Canada does not disclose specifics related to NESS locations for security reasons; however, NESS supplies are strategically located to enable a response window of less than 24 hours to most areas in Canada.

Q3. How are NESS assets requested? Who can request them?

A request for NESS activation can be initiated by all federal, provincial, or territorial partners requiring surge capacity resources during an emergency public health event.

Federal assistance represents the third tier of response and should be considered once local (primary), provincial or territorial (secondary) capacity is in need of further support to respond to crises.

Q4. How long does it take NESS assets to arrive once requested?

NESS resources and support staff can typically be deployed within 24 hours to most areas in the country.

Once a request for a mini-clinic has been made, the Public Health Agency of Canada will work with provincial, territorial and/or local authorities to ensure that an appropriate set-up site has been chosen and is ready to receive the supplies.

Q5. What is in a mini-clinic? How big is it?

A mini-clinic requires a space of approximately 1,250 square feet to operate; however, it is also flexible and dynamic and can be set up in less open facilities, such as classrooms, office spaces, exam rooms, etc.

Q6. Can you give examples of recent NESS or mini-clinic activations?

PHAC routinely deploys NESS assets in response to health crises and a variety of emergencies that impact Canadians. Examples of high-profile activations include the ice storm in Eastern Canada in 1998, the Canadian H1N1 response in 2009, the Syrian Refugee response in 2015, and the Fort McMurray wildfires in 2016.

In early 2018, a NESS mini-clinic was set up in Nunavut to assist in the response to the Tuberculosis outbreak.

PHAC also routinely works closely with federal, provincial and territorial partners in the pre-positioning of key health response assets for preplanned events, such as the 2010 Olympics in

Vancouver and the G8-G20 Summits in the Greater Toronto Area (GTA).

We are currently working with partners on G7 preparedness and pre-positioning of NESS resources for the upcoming G7 meetings in Quebec in June.

Q7. How long has the NESS been around?

The NESS was established in 1952 in response to threats of the Cold War, and has since evolved to adapt to the changing risk environment of public health in our society.

Today, threats include climate change, emerging and re-emerging diseases, and synthetic biology and terrorism threat agents.

To adapt to these current threats, PHAC continues to assess its supplies and acquire new ones as appropriate.

Q8. How is the NESS kept up-to-date? What does the future look like for the NESS?

As the risks we face are ever-changing, the Public Health Agency of Canada continuously monitors and adjusts the contents of the stockpile in order to respond to and mitigate emerging hazards and threats. This will be achieved by acquiring and renewing equipment and supplies required to ensure the health and safety of Canadians.

Prepared by: [REDACTED] *Risk and Emergency Communications*

Approvals:

[REDACTED], National Emergency Stockpile Operations (Approved April 27, 2018)
[REDACTED] Stockpile Review and Investment Planning, NESS
(Approved April 27, 2018)

[REDACTED], Office of Emergency Response Services, CEPR (Approved April 27, 2018)

[REDACTED] CEPR (May 3, 2018)

[REDACTED], REC (May 3, 2018)

[REDACTED] Public Health Strategic Communications Directorate, CPAB (May 3)

[REDACTED] Public Health strategic Communications Directorate (FYI)

[REDACTED], CPAB (May 7, 2018)

[REDACTED], HSIB (May 7, 2018)

[REDACTED] (May 7, 2018)

From: [REDACTED] (HC/SC) on behalf of [REDACTED] (HC/SC)
To: [REDACTED] (HC/SC)
Subject: FW: antiviral issue
Date: July 27, 2020 11:01:01 AM

From: [REDACTED] >
Sent: 2019-12-06 4:10 PM
To: [REDACTED] >
Cc: [REDACTED] [REDACTED]
[REDACTED]
Subject: FW: antiviral issue

Hi [REDACTED],

Further to the update provided last month, [REDACTED] and I participated along with TPD on a follow-up call organized by PHAC this past Wednesday, December 4th. [REDACTED] also on the line. As a next step, [REDACTED]

[REDACTED]

We will assess the information once received (i.e. list of products, transport conditions/licence status of the alternative wholesaler) to determine whether there are any concerns with agreeing to the continued storage. We don't anticipate any major concerns, as storage of expired products would generally not be considered a non-compliant activity, but we would be more comfortable putting something in writing in response to a proposal, with full information provided, rather than give the impression of blanket approval to store/distribute expired product. We will reiterate that, should the product need to be distributed prior to the arrival of new stock, evidence of stability/quality of the expired product would need to be demonstrated.

I was made aware yesterday that [REDACTED] so wanted you to be aware. Let me know if you have any questions.

Thanks,

[REDACTED]

From: [REDACTED]
Sent: 2019-11-14 6:09 PM
To: [REDACTED] >
Cc: [REDACTED] [REDACTED]
[REDACTED]

Subject: RE: antiviral issue

Hi [REDACTED],

Hope the [REDACTED] went well and that you haven't had any travel delays getting in or out of Montreal due to the snow. The call [REDACTED] went well. Here is a summary for your info:

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

[REDACTED]

Thanks,

[REDACTED]

From: [REDACTED] >

Sent: 2019-11-14 3:22 PM

To: [REDACTED] >

Cc: [REDACTED] [REDACTED]

[REDACTED]

Subject: Re: antiviral issue

Thanks for the heads up [REDACTED]

[REDACTED] and we just wrapped up so she'll probably be in transit back to [REDACTED] when the call is on.

[REDACTED]

On Nov 14, 2019, at 3:05 PM, [REDACTED] > wrote:

Hi [REDACTED]

Wanted to give you a quick heads up that [REDACTED] and I will be participating on a call later this afternoon regarding this issue [REDACTED]

[REDACTED] We will provide you with an update following the call.

Thanks,

[REDACTED]

Begin forwarded message:

From: [REDACTED] >

Date: November 2, 2019 at 7:47:09 AM EDT

To: [REDACTED]

Cc: [REDACTED] >

Subject: Re: antiviral issue

Sorry I missed this last night. [REDACTED]

I believe we have been in discussions with PHAC potentially on a similar topic [REDACTED] although I would need my DELU Manager on the call as well likely, as he knows the process in terms

of exactly how rapidly anything can happen. We might need an expedited inspection.

Thanks.

[REDACTED]

Sent from my iPhone

On Nov 1, 2019, at 9:10 PM, [REDACTED]
[REDACTED] wrote:

Hi [REDACTED]

I am copying [REDACTED] who would be best placed to see what is in the art of the possible on this.

[REDACTED]

S

Sent from my iPhone

On Nov 1, 2019, at 7:25 PM, [REDACTED] (HC/SC)
[REDACTED] wrote:

Hi [REDACTED]

I received the message below from [REDACTED]
[REDACTED]. I'm not sure if those involved have spoken to people in ROEB in Ottawa or only in the regions to date.

Wanted to ask who would be best to refer [REDACTED] at ROEB - wasn't sure what level you thought would be most appropriate to connect her with

[REDACTED]

Begin forwarded message:

From: [REDACTED]

Date: November 1, 2019 at 7:05:54 PM EDT

To: [REDACTED]

[REDACTED]

Cc: [REDACTED]

[REDACTED]

Subject: antiviral issue

Hello [REDACTED]

I have run into an issue here with the warehouse that has been storing our supply of antivirals (primarily [REDACTED] for pandemic influenza preparedness. As you are aware this was a stockpile purchased in the mid-2000s as a collaborative between the NESS and P/Ts. We have had repeated letters from the manufacturer confirming the activity of the meds after the original expiration dates of the meds but they stopped providing this service two years ago when the generic version of [REDACTED] became available.

We did a review of AV effectiveness and refreshed the pan Canadian strategy in 2018 as part of the CPIP renewal. There is an ongoing process to purchase new stock currently but this is not yet complete. In the meantime, the stockpile we have in [REDACTED]

[REDACTED]
[REDACTED] The agreement we have with the warehouse is that we would use it only in a pandemic [REDACTED] if one happened in the time

before we have purchased new
stock [REDACTED]
[REDACTED]

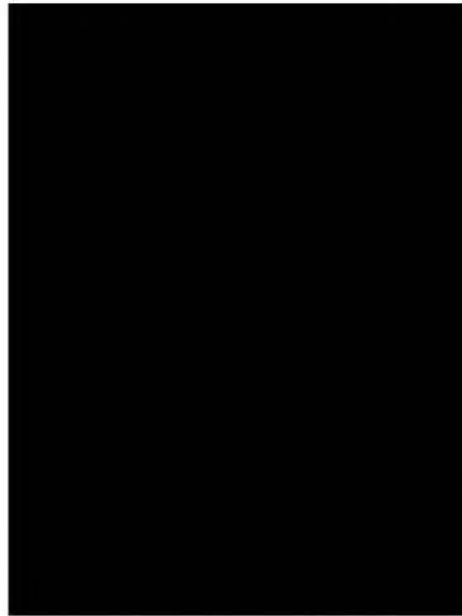
The issue that has come up today is that the warehouse has been told that their Drug Establishment Licence from Health Canada is in jeopardy because it does not allow them to store or distribute expired meds. I have discussed with them that this is an exceptional circumstance and that this stockpile is owned by the Ministry [REDACTED]

[REDACTED] and have offered to indemnify them for any issues around effectiveness of the medications in the event we had an emergency and needed to use it. Is there any way you can help me connect with the DEL folk to see what we need to do to cover this unusual circumstance? Or can we get a letter assuring the activity of the stockpile from Health Canada [REDACTED]
[REDACTED].

I would appreciate your help on this matter!

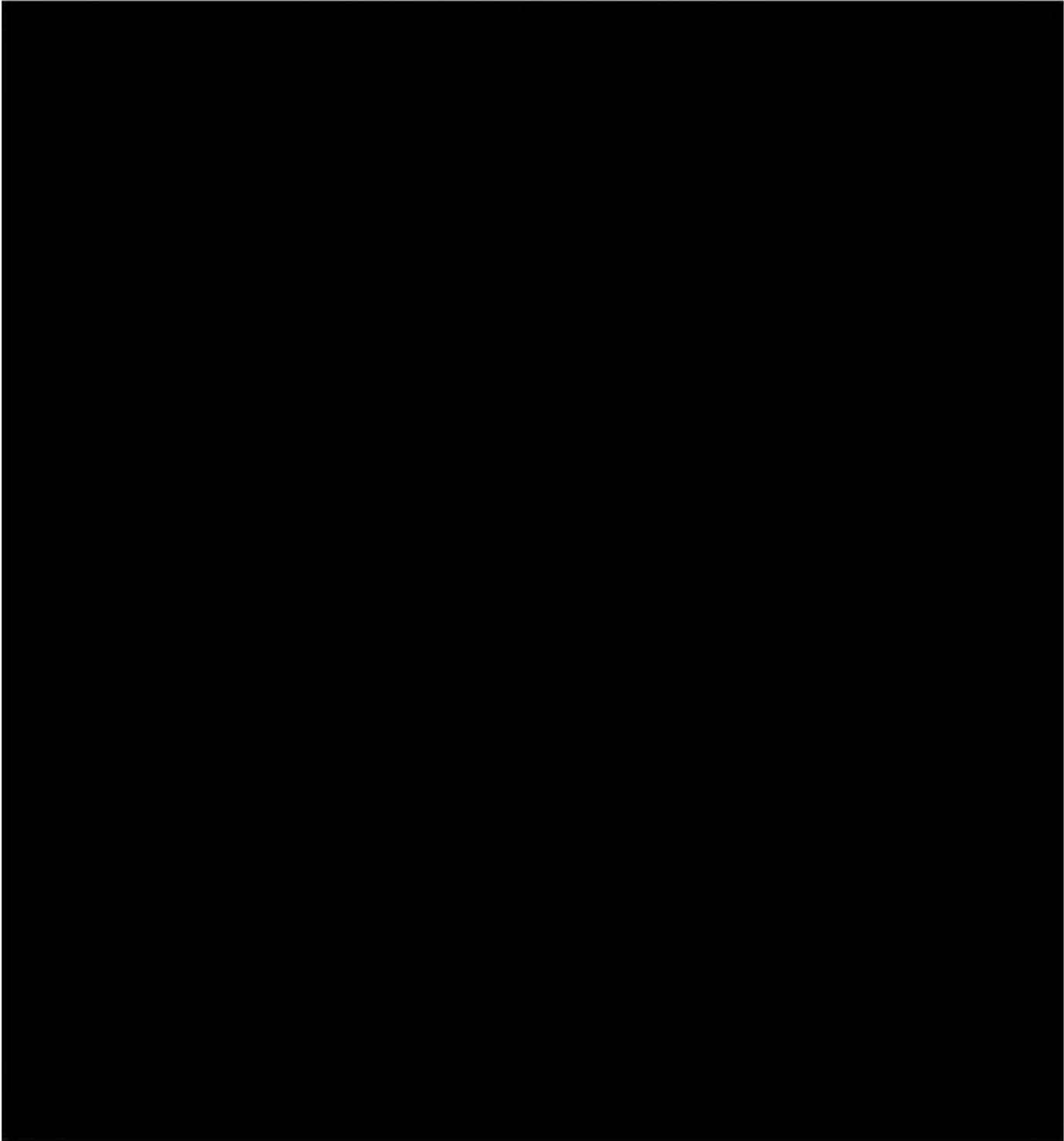
[REDACTED]

[REDACTED]



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Questions and Answers





Personal Protective Equipment

[Responsive, if asked what is being done regarding Personal Protective Equipment (PPE) supplies]

- Attempts to secure high-demand assets, such as N95 and surgical masks, by the National Emergency Strategic Stockpile (NESS) are ongoing.
- The National Emergency Strategic Stockpile is able to secure modest supplies of surgical masks and N95 masks with deliveries staggered by industry due to mounting market pressures.
- The SAC and one of its sub-committees are examining this issue. PHAC is conducting a PPE survey of provincial and territorial partners to identify PPE areas of vulnerability and options to ensure sufficient domestic supply.

- 





3. Federal Funding

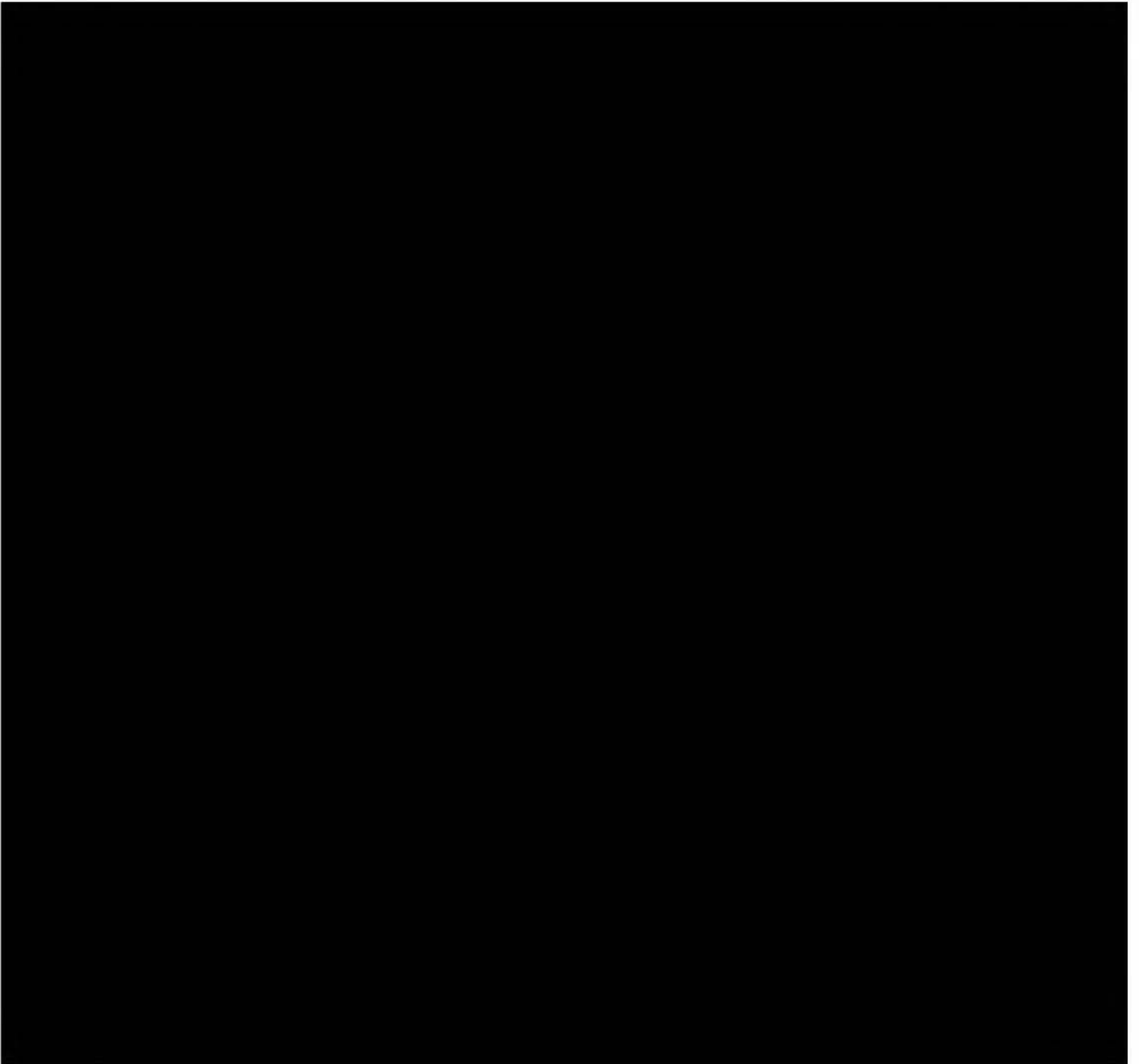
FEDERAL OBJECTIVES

- ✓ Inform Ministers of recent federal funding measures announced by the Prime Minister.

Points to Register

- Reiterate that as they would have seen yesterday, the PM announced more than \$1 billion for the creation of a COVID-19 Response Fund.
- Details from the press release include:
 - ✓ **\$500 million to PTs** for critical health care system needs and to support mitigation efforts as needed including:
 - testing;
 - acquisition of equipment, including PPE; and
 - enhanced surveillance and monitoring.
 - ✓ **\$50 million to support the Public Health Agency of Canada's** COVID-19 communications and public education efforts;
 - ✓ **\$100 million to support federal public health measures** such as enhanced surveillance, increased testing at the National

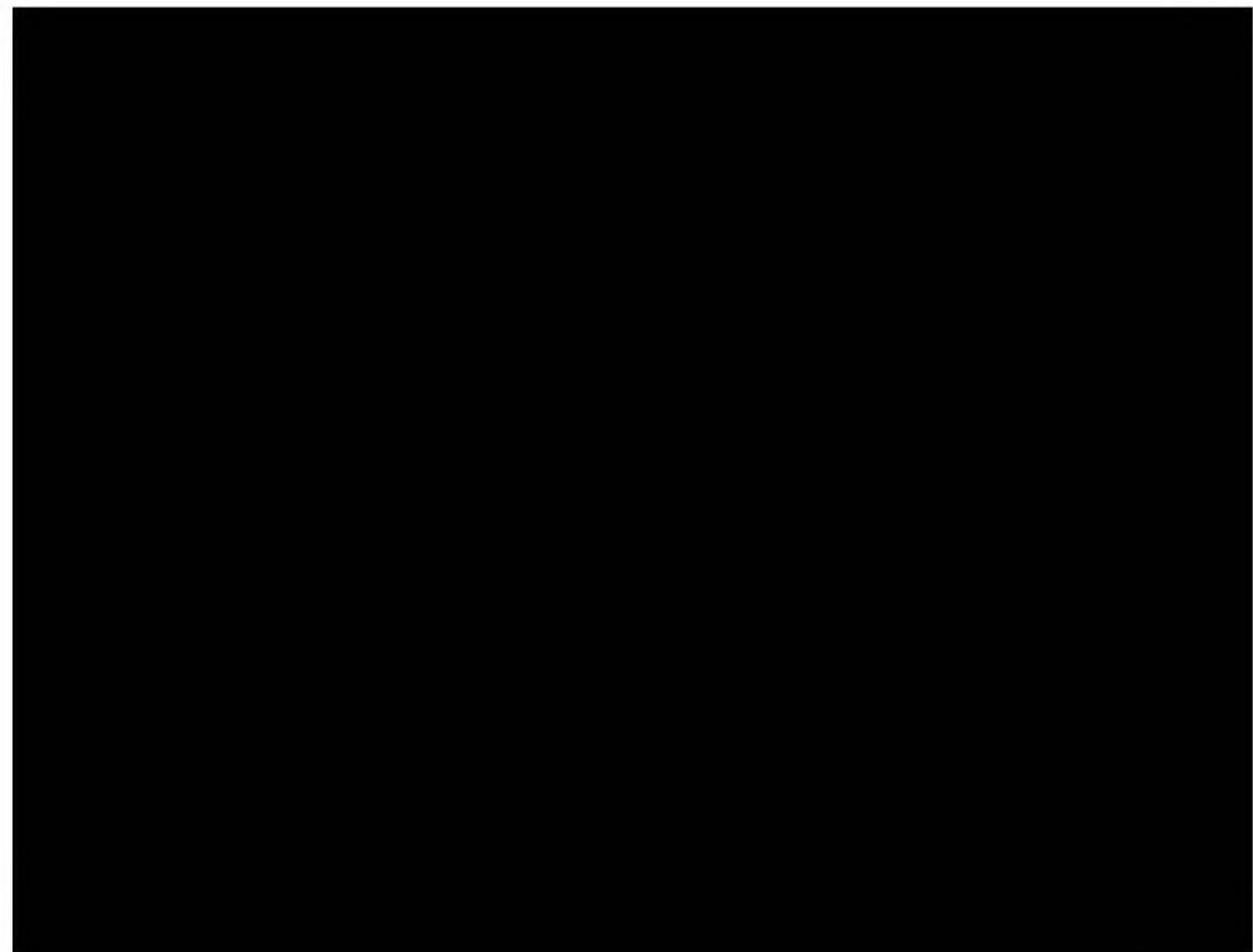
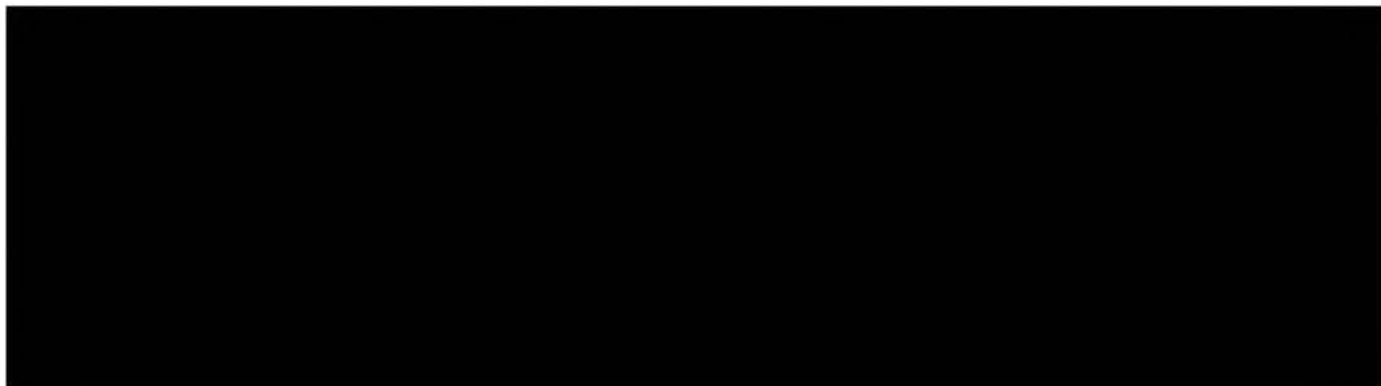
- Microbiology Laboratory, and ongoing support for preparedness in First Nations and Inuit communities.
- This is in addition to an initial \$50 million that was provided to support the immediate public health response.
 - ✓ **\$275 million in additional funding for coronavirus research building on top of the \$27 million already announced** to enhance Canada's capacity in research and development, including research on medical countermeasures (such as antivirals, vaccine development and support for clinical trials).
 - ✓ **\$50 million for purchase of personal protective equipment (PPE)** for federal government, including the National Emergency Strategic Stockpile, through bulk purchases with PT orders as well.
 - ✓ **An additional \$50 million to support the efforts of the WHO** and other partners to help more vulnerable countries prepare for and respond to the virus.



PPE

- In terms of bulk purchases of personal protective equipment (PPE) – we are making progress with suppliers on securing deliveries. Six jurisdictions submitted requirements in the first bulk order, and we have topped that up to procure additional supplies for the National Emergency Stockpile.

- We are putting through an even larger order on behalf of all FPT jurisdictions, and the Special Advisory Committee is developing an allocation formula to support equitable distribution of supplies.



[REDACTED]
From: [REDACTED] (PHAC/ASPC)
Sent: 2020-03-26 9:59 AM
To: [REDACTED] (HC/SC)
Subject: Fwd: Need some data from you. Please see below. Any other suggestions on response to PM? Thanks.

Here you go from us

Sent from my iPhone

Begin forwarded message:

From: [REDACTED]
Date: March 26, 2020 at 9:57:19 AM EDT
To: [REDACTED]
Cc: [REDACTED]
Subject: RE: Need some data from you. Please see below. Any other suggestions on response to PM? Thanks.

- As of March 25th, the federal government has the following supplies as part of the National Emergency Strategic Stockpile:

Product	Quantity
N95 Masks	[REDACTED]
Surgical Masks	[REDACTED]
Face Shields	[REDACTED]
Gowns	[REDACTED]
Nitrile Gloves	[REDACTED]
Ventilators	[REDACTED]

- Work continues at an aggressive pace to procure more personal protective equipment and ventilators. Supplies started to arrive and we are expecting more deliveries in the coming days and weeks.
- In addition, Canada continues to receive offers for donations. The Chinese Ambassador has offered to help facilitate supplies from China.
 - To date, we have just received yesterday approximately 500,000 face masks of various types. We need to assess the types of masks received so that we can determine if they are medical grade.
- Work continues with the provinces to assess national supply and develop a transparent inventory.

Background on PPE sent to China

- The Government of Canada sent personal protective equipment to China in February 2020 in response to the World Health Organization's call for donations in support of global efforts to contain the outbreak of COVID-19 in that country. The equipment consisted of protective clothing, face shields and gloves. It was provided in collaboration with the Canadian Red Cross and the Red Cross Society of China. Given the dire situation China found itself in Canada felt it important to offer support. Not only was this important for China but it was extremely important for Canada given our commitment to helping to contain the global spread of the virus. While small, Canada's donation assisted China in helping address the situation locally and prevent further exportation of cases to the rest of the world.
- We donated 200,000 pairs of gloves, 50,000 face shields and approximately 28,000 expiring coveralls.
- This donation did not impact Canada's domestic response. Canada continues to work with international partners, such as China, to secure additional supplies as needed.

[Redacted]

[Redacted]

Agriculture and Agri-Food Canada / Government of Canada

[Redacted]

[Redacted]

Agriculture et Agroalimentaire Canada / Gouvernement du Canada

[Redacted]

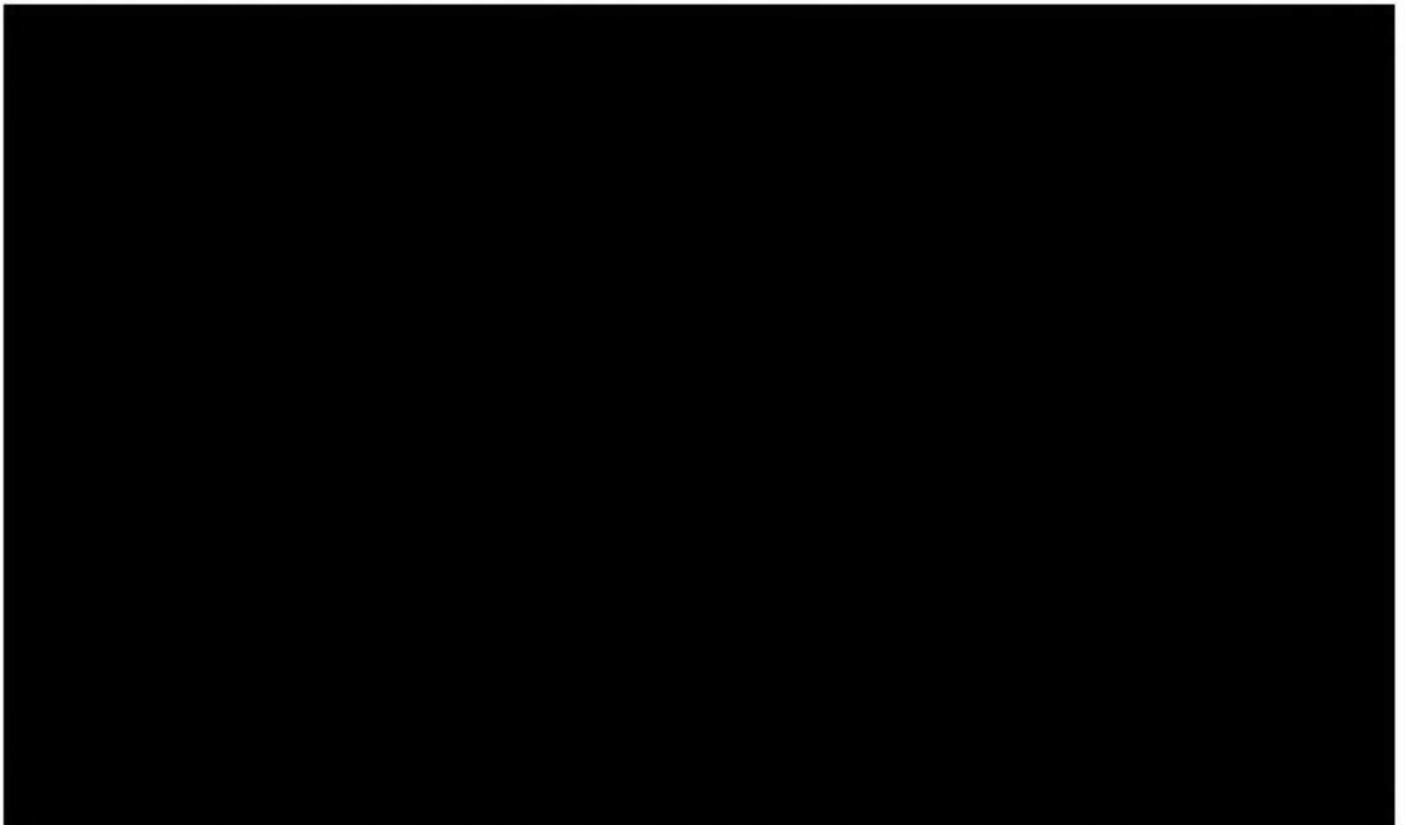
If pressed on supplies

- The Government of Canada (PHAC, PSPC, ISED, and Health Canada) is **undertaking technical assessments of promising products**, and making recommendations about products that are suitable for the Canadian health system.
- This is important, as given the limited supply of products, **alternative products** may need to be considered within jurisdictions – **such as different types of N95 respirators**.
- The next step for the Logistics Advisory Committee that supports SAC is to **focus on the finalization of a resource allocation strategy**. Building on established F/P/T plans, this strategy will include ethical considerations and principles for allocation of scarce resources
- Given the international shortfall and interruptions to supply chains, we anticipate delays or staggered delivery of products. **In light of the expected demands, the National Emergency Supply Stockpile (NESS) will enact a scarce resource allocation plan.**
- PHAC has responded to 5 P/T requests for assistance from the NESS. Requests are prioritized based on the urgency of need and individual RFAs are being triaged and filled based on availability of supplies within the NESS.

-END-

Following PHAC Remarks ...

2. Allocation Framework for PPE (CAN)



Allocation Framework for PPE, [REDACTED], PHAC [REDACTED]

- Thank you all for the continued productive conversations around PPE allocation and your suggestions to help us get this right. Last night, we brought the revised *Scarce Resource Allocation Strategy* to the Deputies' table.
- Generally, Deputies were supportive of the principles and concept of operations outlined in the allocation strategy, including allocation on a per capita basis.
- With respect to the 80/20% distribution, the intention is to ensure that all jurisdictions' needs are addressed upfront. There is no intention to withhold PPE supply from jurisdictions who may be behind from an epi perspective.
- In instances where you have urgent need from the NESS, the Request for Assistance framework under the MoU for Mutual Aid remains the best option to address those needs.

- The MoU on Mutual Aid does not obligate jurisdictions to support one another, but rather, it is there to facilitate the transfer of equipment and supplies between jurisdictions. It is up to individual jurisdictions to determine whether they have the ability to say yes to support a request.

Donations

- The Government of Canada has received donation offers from a number of sources for a variety of products including masks, gowns, disinfectant, testing kits, and other equipment.
- PHAC is accepting donations that will assist governments in addressing acute shortages, while working with Health Canada to undertake due diligence in regards to the safety of the products.
- We will include these on the daily tracker for full transparency.
- We are working with your Logistics Advisory Committee members to enable viable donations to be distributed efficiently to jurisdictions.

For reference, changes made this week:

- ✓ Addition to the section on optimal use of PPE and medical supplies to reference the full range of protective measures governments should take to minimize risks associated with COVID-19 exposure and transmission;
- ✓ Reference to the MOU on Mutual Aid as the guiding document for providing assistance between jurisdictions, clarification that provision of assistance via OFMAR will not endanger or severely limit public health capacity in any Jurisdiction providing assistance; and
- ✓ Language that provides Territorial governments with an explicit ability to seek additional support from the NESS via a “per capita plus” model based on jurisdictional needs.

END

...Following ██████ remarks, open the floor for comments before seeking agreement on the proposed framework.

Media Lines

Hydroxychloroquine and azithromycin for the treatment of COVID-19

Issue Statement: Media articles are claiming that hydroxychloroquine and azithromycin used in combination may be an effective treatment for COVID-19. Some evidence suggests that hydroxychloroquine alone, or in combination with azithromycin, may be effective in reducing the SARS-CoV-2 virus (i.e., the virus that causes COVID-19), and in treating respiratory tract infections associated with COVID-19.

There is currently a shortage of hydroxychloroquine. The Public Health Agency of Canada will be adding hydroxychloroquine to Canada's National Emergency Strategic Stockpile (NESS).

- All clinical trials related to the treatment of COVID-19 are being reviewed on a priority basis. Companies, clinicians, or researchers seeking to initiate a clinical trial should contact Health Canada.

If pressed on the National Emergency Strategic Stockpile

- The Government of Canada is adding hydroxychloroquine to Canada's National Emergency Strategic Stockpile (NESS). Supplies will be used first for approved indications, and then for clinical trials related to COVID-19.
- The addition of hydroxychloroquine to the NESS will be made over a period of several months, to minimize the impact on supply for approved indications.
- The NESS contains supplies that provinces and territories can request in emergencies, such as infectious disease outbreaks, natural disasters, and other public health events, when their own resources are not enough.
- The stockpile includes a variety of items such as medical equipment, pharmaceuticals, and beds and blankets.
- The purpose of the NESS is to help supplement provincial and territorial resources during a rare or high-impact public health event.
- The NESS is not intended to replace supplies that provinces and territories hold or procure. Provinces and territories are responsible for preparing and maintaining their own supply capacities.
- In January, the Public Health Agency of Canada began monitoring the coronavirus outbreak in China and started assessing its NESS inventories and procuring supplies needed to respond to a possible outbreak in Canada.
- Globally, we have seen a tightening of supply. The federal government is continuing to work aggressively to secure necessary supplies in real time, in direct collaboration with all provinces and territories.



Media Lines

PPE Quality and NESS

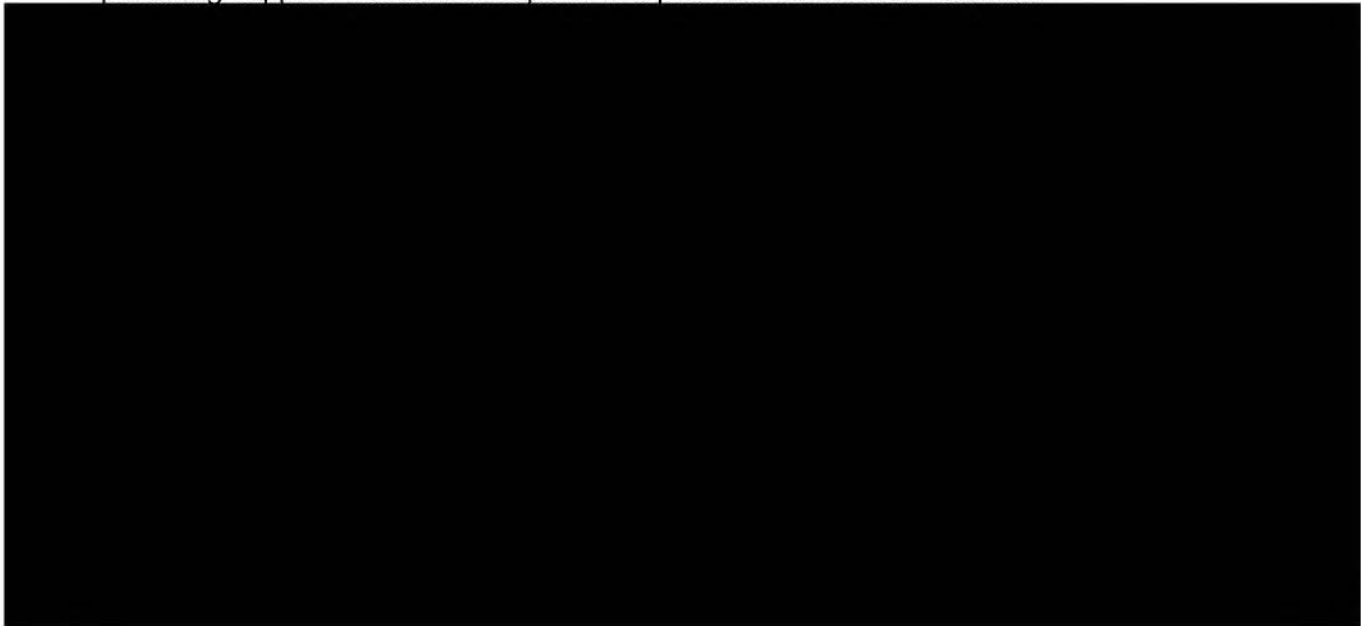
- 1. Can you explain why the number of warehouses stocking supplies from the National Emergency Strategic Stockpile was reduced, and whether that led to a reduction in the amount of PPE that was stockpiled by the federal government?**

Canada's National Emergency Strategic Stockpile (NESS) contains supplies that provinces and territories can request in emergencies when their own resources are insufficient, such as during infectious disease outbreaks, natural disasters and other public health events. The purpose of the NESS is to provide surge support to provinces and territories; it is not intended to replace supplies that provinces and territories hold or procure. Provinces and territories are responsible for preparing and maintaining their own supply capacities.

Over the past decade, we have reduced some of the materials included in the NESS. For example, blankets were previously part of the stockpile but are now available through other channels and no longer needed in large supplies through the NESS. As the NESS has modernized, the stockpile has focused on stockpiling strategic medical supplies that are typically not held by provinces and territories. This includes items such as medication and vaccines that require controlled environmental conditions.

Following an independent assessment of the federal warehouse network, the NESS moved from nine warehouse locations across Canada to six to offer the most efficient distribution system without sacrificing response capacity. For example, since the creation of the NESS, Canada's transportation infrastructure has improved, making it easier to maintain the same 24-hour delivery target with fewer warehouses.

The supplies in the NESS are regularly reviewed and supplies are purchased on a regular basis. In January, the Public Health Agency of Canada (PHAC) began monitoring the coronavirus outbreak in China and started assessing its NESS inventories and procuring supplies needed to respond to a possible outbreak in Canada.



PHAC COVID-19 Media Lines and QAs

Response to Toronto Sun [Redacted] column on [Redacted] NESS budget

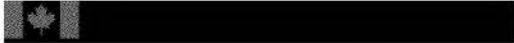
Issue Statement: On May 7, 2020, the Toronto Sun published a column by [Redacted] criticizing PHAC [Redacted] failing to provide adequate financial support for the NESS [Redacted] and erroneously reported that the NESS budget has been reduced by \$22M since 2013-14.

Key Messages: (previously approved CFOB messaging)



If pressed on budget reductions for NESS/health security measures:

- There have been no budget reductions for the National Emergency Strategic Stockpile in recent years.
- The core operating budget associated with our health security response, including the NESS, has been relatively consistent, but the way in which it is reported has changed. In 2013-14, \$9.8M for Pandemic Readiness Fees was paid out of the Health Security envelope; that has since been moved to the Disease Prevention and Control program. So there has been no net budget reduction, just a change in how it is reported.



- On top of the NESS core operational budget, PHAC has made additional investments for particular initiatives and stocks of supplies and medical countermeasures. For example, in 2013-14, PHAC made a one-time investment of \$19.7M in the NESS.
- Over the last 10 years, these investments have varied year over year. They have amounted to close to \$80M, nearly \$60M of this in the last five years ended March 31, 2020.

COVID-19 Media Lines

National Emergency Strategic Stockpile Preparedness and Stock
(response to the May 2020 House of Commons appearance)

Issue Statement: During Minister Hajdu and [REDACTED] appearance at the House of Commons on May 22, 2020, concerns were raised as to whether the Public Health Agency of Canada had warned Cabinet in the last decade that the National Emergency Strategic Stockpile (NESS) was not properly funded. There were additional criticisms related to preparedness, supplies and closure of NESS warehouses, which resulted in the disposal of expired personal protective equipment. These media lines have been developed using previously approved messaging to respond to potential questions from media.

Key Messages:

- Since 2012-2013, the National Emergency Strategic Stockpile (NESS) budget, including salaries and operating, has consistently been around \$3 million annually.
- In addition, there have been investments made for particular initiatives and medical countermeasures, such as a four-year investment in medical countermeasures against smallpox and anthrax that began in 2015-16. Over the last 10 years, these investments have varied year over year, and have amounted to over \$79 million.
- The NESS was built on the assumption that provincial, territorial and local governments would be prepared for the most common emergencies. Consequently, it was designed to provide health emergency assets when local and provincial and territorial resources were exhausted, and to be the sole provider of certain niche assets required for rare public health emergencies, for example, costly and rarely used vaccines or antidotes.
- Jurisdictions have traditionally sourced personal protective equipment (PPE) directly from known suppliers, and the NESS has historically only carried relatively small amounts.
- The supplies in the NESS are regularly reviewed and purchased on a regular basis.
- The Canadian Pandemic Influenza Plan is a federal, provincial, and territorial guidance document for the healthcare sector to assist jurisdictions with their emergency planning. The most recent guidance from 2011 recommends that availability of PPE supply should be addressed during pandemic planning, and that stockpiling should be considered. However, it does not specify a certain quantity of supply.
- In January 2020, the Public Health Agency of Canada began monitoring the coronavirus outbreak in China and started assessing its NESS inventories and procuring supplies

needed to respond to a possible outbreak in Canada.

- With the unprecedented nature of the current pandemic, the government is providing significant funding as the NESS steps into a much more active and expanded role in procurement.

If pressed on whether advice related to the NESS was ever provided to Cabinet:

- Departments and all public servants are bound to uphold Cabinet Confidentiality.

Question and Answers:

Q1. Has the Public Health Agency of Canada ever advised government that the National Emergency Strategic Stockpile was under funded or asked for additional funding?

PHAC has requested additional funding when required. Over the last 10 years, the additional investments in the National Emergency Strategic Stockpile have varied year over year, and have amounted to more than \$79 million. This includes, for example, incremental investments in antivirals, medical countermeasures against smallpox, anthrax and Ebola, and additional resources, such as pharmaceuticals, to ensure sufficient quantities for mass gatherings, such as for the 2015 Pan American Games and the 2018 G7 Summit.

Q2. Can you explain why the number of warehouses stocking supplies from the National Emergency Strategic Stockpile was reduced, and whether that led to a reduction in the amount of personal protective equipment (PPE) that was stockpiled by the federal government?

Canada's NESS contains supplies that provinces and territories can request in emergencies when their own resources are insufficient, such as during infectious disease outbreaks, natural disasters and other public health events. The purpose of the NESS is to provide surge support to provinces and territories; it is not intended to replace supplies that provinces and territories hold or procure. Provinces and territories are responsible for preparing and maintaining their own supply capacities.

Over the past decade, as the NESS has modernized, the stockpile has focused on strategic medical supplies that are typically not held by provinces and territories. This includes items such as medication and vaccines that require controlled environmental conditions.

Following an independent assessment in 2013 of the federal warehouse network, the NESS moved from nine warehouse locations across Canada to six to offer the most efficient distribution system without sacrificing response capacity. For example, since the creation of the NESS, Canada's transportation infrastructure has improved, making it easier to maintain the same 24-hour delivery target with fewer warehouses.

The supplies in the NESS are regularly reviewed and purchased on a regular basis. In January, PHAC began monitoring the coronavirus outbreak in China and started assessing its NESS inventories and procuring supplies needed to respond to a possible outbreak in Canada.

Q3. How much PPE was discarded in the closure of the three NESS storage facilities?

The NESS reviews its stock of equipment regularly. When closing a warehouse, material that is of use is transferred to other warehouses and expired material is disposed of in accordance with the Treasury Board *Directive on Disposal of Surplus Materiel*. For example, in 2018 expired items such as gloves, face shields, bandages and survival biscuits were disposed. In 2019, approximately 2 million expired masks and 440,000 expired gloves were disposed of during the closure of the warehouse in Regina. The masks and gloves had been purchased in 2009 and had passed the limit of five years for their use, as recommended by the manufacturer.

While the World Health Organization allows for the donation of PPE, it requires that any equipment be supported by the manufacturer for a minimum of two years. What this means is that equipment must be donated two years before its expiration.

PHAC follows strict guidelines when deploying materials. If PHAC cannot account for the quality of material, it will not deploy it. Even under the current circumstances of the COVID-19 pandemic, where Health Canada guidance allows for the deployment of certain expired PPE, PHAC would examine very closely any equipment that has expired and gone beyond with manufacturers' guidelines.

Q4. Does the NESS stockpile follow the Canadian Pandemic Influenza Plan PPE Guidance?

The Canadian Pandemic Influenza Plan is a federal, provincial, and territorial guidance document for the healthcare sector. Its purpose is to assist jurisdictions with their emergency planning.

The 2006 CPIP stated that plans are required to allow for a consistent 16-week supply (i.e. two pandemic waves) of both influenza and non-influenza related materials to address sporadic interruptions of supply chains (e.g. resulting from mail and courier disruptions, border closures, supply limitations).

The most recent guidance from 2011 recommends that availability of PPE supply should be addressed during pandemic planning, and that stockpiling should be considered.

Provincial and territorial governments are responsible for ensuring the provision of medications, supplies, and equipment required for provision of pandemic health care services.

The NESS is intended to provide health emergency assets when local and provincial and territorial resources have been exhausted. It has historically carried only relatively small amounts of PPE.

[Redacted]

From: [Redacted]
Sent: 2020-06-05 5:43 PM
To: [Redacted] (PHAC/ASPC); [Redacted] (PHAC/ASPC)
Cc: [Redacted] (PHAC/ASPC); [Redacted] (HC/SC); [Redacted] (HC/SC);
[Redacted] (HC/SC); [Redacted] (HC/SC); [Redacted] (HC/SC);
[Redacted] (HC/SC); [Redacted] (HC/SC); [Redacted] (HC/SC);
[Redacted] (HC/SC)
Subject: June 5 2020 CSB updates



- Two temporary locations are now up and running for NESS Warehouse surge space. RPSD is working to secure PHAC's final requirements for medium to long-term space in this regard and will move forward with securing that space.



PHAC



FOR INFORMATION

Your file / Votre référence

20-106892-602

Our file / Notre référence

PROTECTED B

**MEMORANDUM TO THE PRESIDENT OF THE
PUBLIC HEALTH AGENCY OF CANADA**

Security / La Sécurité

SUMMARY

- The purpose of this memorandum is to provide an update on the security measures in place for all the Public Health Agency of Canada's (PHAC) warehouses nationally.
- [Redacted]
- [Redacted]
- CSB has recently completed all Threat Risk Assessments (TRAs) for the warehouses and will share the recommendations with PHAC once the reports are finalized. CSB will work with PHAC's Health Security Infrastructure Branch (HSIB) on a plan and costing on those measures. Once approved, recommended security measures will be implemented.

BACKGROUND:

Canada's National Emergency Strategic Stockpile (NESS) contains supplies that provinces and territories can request in emergencies, such as infectious disease

outbreaks, natural disasters and other public health events, when their own resources are insufficient.

Warehouses are strategically located across Canada in order to deliver supplies in a timely manner. Currently, the existence and purpose of the stockpile is at an all-time high given the media, the international community and the public's perceptions around the sensitivity of personal protective equipment supplies.

CSB has historically worked closely with PHAC to implement robust physical security measures and response within the NCR.

CURRENT STATUS:

[REDACTED]

CSB has recently completed TRAs on all NESS locations across the country, and is in the process of finalizing all of the written reports, which will be completed by June 30, 2020 and will be shared with the applicable PHAC authorities.

CONSIDERATIONS:

[REDACTED]

[REDACTED]

The inventory stored within [REDACTED] warehouses is of a higher value than that stored in [REDACTED] warehouses.

[REDACTED]

[REDACTED]

- [REDACTED]

By June 30, 2020, updated Threat Risk Assessments (TRAs) will be completed for all warehouses. CSB will continue to work with PHAC officials to implement any interim and long-term safeguards identified through these assessments and that are deemed appropriate to mitigate risk and provide an update on the actions.

PORTFOLIO CONSIDERATIONS: I

In the NCR, the Corps of Commissionaires (guard force) contract was amended to include a physical presence when there are no PHAC employees onsite, such as after hours and on weekends.

[REDACTED]

[REDACTED]

NEXT STEPS:

CSB will complete all Threat Risk Assessments (TRAs) reports and share recommendations with PHAC. CSB will work with PHAC's Health Security Infrastructure Branch (HSIB) on a plan and costing on those measures. Once approved, recommended security measures will be implemented.

[REDACTED] Date: 2020-06-18
17:08:50
[REDACTED] CSB

Contact: [REDACTED]
Telephone: [REDACTED]

WITHHELD / RETENUE

Is(Are) exempted and/or excluded pursuant to section(s)
est(sont) exemptée(s) et/ou exclus en vertu de(s)(l')article(s)

WITHHELD / RETENUE

Is(Are) exempted and/or excluded pursuant to section(s)
est(sont) exemptée(s) et/ou exclus en vertu de(s)(l')article(s)