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Chair

Mr. Ron McKinnon

Standing Committee on Health

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• (1530)

[English]

The Chair (Mr. Ron McKinnon (Coquitlam—Port Coquitlam, Lib.)): Hello, everyone. This is the second meeting of the Standing Committee on Health, HESA.

We have a very short bit of committee business. For the moment we have a request for the budget. I believe you all have a copy of it. We are asking for the committee to approve the budget.

Mr. Jeneroux.

Mr. Matt Jeneroux (Edmonton Riverbend, CPC): I have a quick question, Mr. Chair.

Essentially it looks like it's the cost for three meetings. We did make a motion last time in favour of having the health officials back. If that were the case, I'd hope this wouldn't limit us just to the three meetings.

The Chair: For the record, there is no cost for officials. If we need to allocate further funds for additional meetings, we can submit an amended budget.

Is there any further discussion on the budget?

(Motion agreed to [*See Minutes of Proceedings*])

The Chair: Welcome, Mr. Davies.

We are just in committee business. We just finished up our budget. If you have some motions, as you indicated, now would be a good time.

Mr. Don Davies (Vancouver Kingsway, NDP): Thank you, Chair.

I thank the committee members here. We distributed copies of motions to all committee members.

What I noticed, Mr. Chair and committee colleagues, is that there were two items from the previous health committee's routine motions that had not been replicated. I think they are pretty standard, so I thought I would move both of those. Then the third one has to do with in camera meetings.

The very first one I will move is an item from the previous routine motions. It was on requests to appear before the committee. It was an order that read:

That all requests to appear before the Committee be distributed to the Committee members.

Basically, when we have a study that's going on and people are writing to the clerk and requesting to appear, it's that the clerk be authorized to distribute those requests to all committee members so that we have an idea of who is requesting to appear. That helps us when we're putting our names in, because we know who has indicated a concern.

I would move that motion, Mr. Chair.

The Chair: Is there any further discussion on the motion?

(Motion agreed to)

Mr. Don Davies: Thank you, Mr. Chair.

The second one is similar to that, and it's a bit of a housekeeping matter. It's regarding televised meetings when a minister appears. The order would read:

That whenever the Minister appears before the Committee, every effort be made to ensure that the meeting is televised.

Again, I think it speaks for itself. It doesn't require that to happen, but it authorizes the clerk to try to arrange televised proceedings when the minister comes before our committee.

The Chair: Is there any discussion on the motion?

(Motion agreed to)

Mr. Don Davies: Thank you.

I am conscious of the fact that the committee wants to talk to witnesses about the coronavirus, so if the next motion does require there to be more debate, I'm happy to defer it to another meeting. However, I'll introduce it now.

It has to do with in camera proceedings. The basic thought behind the motion is that the business of the committee should presumptively be done in public. We are a standing committee answerable to not only the House of Commons but also the people of Canada, and whenever possible we should be doing our business for the public to see. However, the motion also recognizes that there are occasions when committees do and ought to go in camera.

This is a motion that I moved four years ago to the previous committee. We didn't pass it because we came to an understanding, as a matter of committee practice, that we would follow that general concept, but I thought I would introduce it again this year. This is how the motion would read:

That the committee may meet in camera only for the following purposes:

- a) to consider a draft report;
- b) to attend briefings concerning national security;
- c) for any other reason, with the unanimous consent of the committee;

That all votes taken in camera, with the exception of votes regarding the consideration of draft reports, be recorded in the Minutes of Proceedings, including how each member voted when recorded votes are requested;

That any motion to sit in camera is debatable and amendable.

I would also add a friendly amendment to my own motion. I thought another reason to go in camera should be added to this. It is when witnesses are being discussed or considered. That's to ensure everybody has the ability to have a free flow of exchanges and ideas, but besides that, those are the main reasons why a committee ought to go in camera. However, it also leaves open a possibility, if we haven't described every conceivable situation, where we could go in camera with the unanimous consent of committee members.

If I can add a friendly amendment to my own motion, it is to add a (d) to include the consideration of witnesses.

• (1535)

The Chair: Mr. Fisher.

Mr. Darren Fisher (Dartmouth—Cole Harbour, Lib.): That was going to be my friendly amendment. He took the words right out of my mouth, Mr. Chair.

I'm happy to support that, Mr. Davies.

The Chair: Is there any further discussion?

(Motion agreed to [*See Minutes of Proceedings*])

Mr. Don Davies: Thanks, Mr. Chair, and thanks to my colleagues for their consideration.

The Chair: We'll suspend for a few minutes and ask the witnesses to come forward.

• (1535)

(Pause)

• (1535)

The Chair: Welcome to our witnesses before us today.

We have, from the Canada Border Services Agency, Mr. Paul MacKinnon, executive vice-president; and Mr. Denis Vinette, vice-president, travellers branch. From the Department of Foreign Affairs, Trade and Development, we have Ms. Heather Jeffrey. From the Department of Public Safety and Emergency Preparedness, we have Mr. Patrick Tanguy, who is not present at the moment. From the Department of Transport, we have Mr. Aaron McCrorie.

Each organization will have 10 minutes to make a presentation, following which there will be a couple of rounds of questions.

Let us start with the Canada Border Services Agency, please.

Mr. Paul MacKinnon (Executive Vice-President, Canada Border Services Agency): Good afternoon, Mr. Chair and members of the committee. Thank you very much for the invitation to be here with you today. I'm pleased to have my colleague Mr. Denis Vinette, the agency's vice-president of our travellers branch, here with me.

As this committee is aware, the CBSA is the first point of contact for inbound international travellers and therefore plays an important front-line role in preliminary health screening at the border. Under the Quarantine Act, border services officers are designated as screening officers, and as part of its normal day-to-day operations

the CBSA has standard border measures in place to screen travellers for signs of communicable diseases subject to quarantine.

From the outset of reports of the 2019 novel coronavirus, Health Canada and the Public Health Agency of Canada have worked closely with the CBSA to provide advice and guidance on additional border measures to prevent its spread, including specific instructions on the processing of travellers suspected of being ill and on ensuring the health and safety of our front-line officers.

I'll just take a few moments, Mr. Chair, to walk through those enhanced border measures.

First, I would emphasize that specific signage has been placed in the Vancouver, Montreal and Toronto international airports to advise travellers that if they were in the province of Hubei, China, they may have come in contact with the novel coronavirus. The signs outline the symptoms of the virus and instruct travellers that if they feel sick upon their arrival they are to advise a CBSA officer, who will refer them at the airport to a Public Health Agency of Canada officer. In addition, the signage states that if they become ill after leaving the airport, they should contact a local health care provider. The signs are posted in English, French and simplified Chinese.

Another measure, implemented on January 22, was that international travellers arriving at the Montreal, Vancouver and Toronto international airports were asked an additional health screening question to identify individuals who had travelled from Wuhan, China. On January 29, this screening question was expanded to identify any travellers who may have been in the province of Hubei, China.

Between January 22 and February 2, a total of 791 travellers responded that they had been to Hubei province, and they were subject to additional questioning and screening by the CBSA. Out of those 791 travellers, the CBSA has referred 18 individuals, who indicated that they felt ill or who were visibly ill, to a PHAC officer for further screening.

When an officer identifies an ill traveller, the individual will be provided with a mask to wear and will be asked to use an alcohol-based hand sanitizer. The health referral to a PHAC quarantine officer takes precedence over immigration, customs, or food, plant and animal processing. It is only once that traveller is cleared by PHAC that the individual would be processed for immigration and customs concerns, in accordance with existing procedures.

Just last Saturday, two days ago, the CBSA expanded these enhanced screening procedures and is in the process of ensuring that all the signs are posted to the following airports: Edmonton; Winnipeg; Calgary; Ottawa; Billy Bishop in Toronto; Quebec City; and Halifax. Over the weekend, at the additional locations, 37 individuals responded positively to the health screening question, that they had come from Hubei province. All travellers who have been in the province of Hubei but do not feel ill are being provided an information sheet advising them what to do if they become ill following their arrival in Canada.

In addition to being focused on processing all arriving passengers, we are also focused, Mr. Chair, on the health and safety of our officers on the front lines. The CBSA is working with Health Canada and PHAC, as well as the Customs and Immigration Union and airport authorities, to provide the latest information to our officers.

At this time, Health Canada has recommended that CBSA officers handling documents and baggage of potentially ill persons wear gloves, as is already part of CBSA's best practices. Should a situation arise where an officer must be in close proximity to a potentially infected traveller for a prolonged period of time, such as escorting the traveller or remaining with them, the officer is to wear gloves, a mask, and eye and face protection.

• (1540)

Various airport authorities have added their own additional measures to ensure that the airport environment and equipment remain clean. They are increasing the frequency of disinfecting the electronic kiosks and common spaces and surfaces, in addition to increasing the installation of hand sanitizers. The CBSA is also using a specialized cleaning solution to sanitize frequently touched areas in the CBSA hall and the arrival areas.

We continue to work closely with Health Canada experts to apply the appropriate measures, including the examination of standard operating procedures for dealing with travellers who may exhibit symptoms of illness. Health screening on entry to Canada is an important public health tool and a key component of this multi-layered government response strategy.

For these reasons, Mr. Chair, as you can expect, the CBSA is working closely with PHAC, Global Affairs Canada and others on the assisted departure of Canadians from Wuhan, China. Our role will be to have officers on the ground to verify the identities and documents of those eligible to depart. Once cleared, they will be logged onto a flight manifest. Upon their arrival in Canada, health screening by PHAC will take precedence, prior to CBSA examination and clearance.

Our officers, Mr. Chair and members of the committee, stand ready, equipped with the tools they need to assist the government in this overall approach to the novel coronavirus.

Thank you for your time. I look forward to the discussion and questions.

• (1545)

The Chair: Thank you.

We'll hear now from the Department of Foreign Affairs, with Ms. Jeffrey, for 10 minutes.

Ms. Heather Jeffrey (Assistant Deputy Minister, Consular, Security and Emergency Management, Department of Foreign Affairs, Trade and Development): Good afternoon, Mr. Chair.

My name is Heather Jeffrey. I am the assistant deputy minister for consular, security and emergency management at Global Affairs Canada. I want to thank you for the opportunity to appear in front of the committee, alongside my colleagues from the CBSA, Public Safety and Transport Canada, in order to discuss the work we do together as part of Canada's response to the recent outbreak of coronavirus.

The Government of Canada's preparedness and response are being led by the Public Health Agency of Canada, in close co-operation with Health Canada and the government operations centre of Public Safety.

Global Affairs Canada has a specific mandate in regard to the international dimensions of the response under the federal emergency response plan, in particular in regard to the provision of consular services to Canadians overseas and the provision of travel advice. Global Affairs also works with international partners to ensure that we fulfill our duty of care for Canadian diplomatic personnel, their dependants and our locally engaged staff abroad.

Timely and effective interdepartmental co-operation and coordination are critical to delivering an effective whole-of-government response in emergencies. This is particularly true in health emergencies, which engage an extremely wide range of actors in responses that cross traditional lines.

In the case of the coronavirus outbreak, Global Affairs Canada has established a task force to facilitate and direct consular service for Canadians and their families and timely communication and coordination with Canadian diplomatic missions across greater China and the region, as part of an effective whole-of-government response.

Our officials continue to work with our Chinese counterparts to address the situation and support the interests of Canadians. We also work in close contact and coordination with our international partners, including the United States, the United Kingdom, Australia, Germany, France and Japan.

The primary responsibility of Global Affairs in this response is the provision of consular services. On January 29, Global Affairs Canada updated the travel advice for China to "avoid all non-essential travel" to China, with a regional advisory to "avoid all travel" to Hubei province due to the imposition of heavy travel restrictions by the Government of China in order to limit the spread of the coronavirus.

In addition to a high volume of requests for information, particularly in regard to our travel advice, the quarantine and transportation restrictions imposed by the Government of China in an effort to control the spread of the coronavirus outbreak have created specific challenges for Canadians who are seeking to depart Hubei province in particular.

We currently have requests for consular assistance related to the outbreak from 312 Canadians in Hubei province. All of these Canadians are requesting assistance to depart the quarantine zone. At the current time, we have not received any reports of confirmed cases of coronavirus-related illness amongst Canadians in China.

Given the lack of commercial departure options in Hubei province, Canada has secured a chartered flight to transport Canadians from Wuhan, China, to Canada. We have been reaching out to the registered Canadians over the last several days to provide updates and information to them on this process, to gather the information we require to assist in their departure, and to confirm their specific needs in order to inform the logistical planning for this operation.

It's important to note the complexity inherent in any assisted departure, which in this case is compounded by the particular challenges faced in accessing a quarantine zone, including airspace closures and the need for special authorizations, visas, flight clearances and other special permits.

In conducting this operation, the health and safety of all Canadians is our top priority. Canadian passengers will have their health assessed by Chinese medical officers before boarding the flight, and those with symptoms of illness will not be permitted to access the airport. This is part of the efforts of the Government of China to halt the spread of this outbreak. On arrival at the aircraft, they will also be checked by a Department of National Defence medical team, and their health will be reassessed during the flight and at the final destination in Canada.

[*Translation*]

We are also working with our health partners in the Government of Canada to confirm that all the necessary procedures and protocols are in place to ensure the safety of our consular staff deployed to Wuhan so they can provide assistance to the on-board medical team and the whole-of-government arrival and reception team.

Since the situation began, our consular officers in Ottawa have been working around the clock to answer questions and provide services and information to Canadians looking for assistance. Our call centre and emergency response team in Ottawa are working non-stop. They receive and answer a high number of calls and emails, communicating directly with those Canadians seeking assistance.

• (1550)

[*English*]

Finally, I would like to add that the safety and security of our own Government of Canada staff abroad, their dependants and our locally engaged staff are our top priority. Staff in China are receiving specific guidance and briefings from health experts at Global Affairs Canada, the Public Health Agency of Canada and Health

Canada partners, which outline recommended health precautions. In addition, screening measures based on guidance from the Canada Border Services Agency for airports and hospitals have been developed for implementation in the public-facing areas of Canada's diplomatic missions in China.

As part of China's public safety measures, heavy domestic travel restrictions were implemented in China during the holiday period. These have had a direct impact on the ability of some staff in affected areas to return to the embassy and consulate offices after the holiday period was over. As a result, some of our missions in China have been operating with reduced staff.

On January 29, due to extended school closures, a lack of access to English-speaking medical services and disruptions to local transportation, Global Affairs Canada authorized the temporary departure from China of dependants and staff with particular vulnerabilities, including school-aged and preschool children, the elderly and individuals with pre-existing medical conditions.

On February 3, this authorization was extended to include all dependants and non-essential diplomatic staff. This is consistent with our travel advice to all Canadians, which is to avoid non-essential travel to China. These departures are all taking place via commercial means.

Despite this situation, all essential services continue to be offered at our missions, including in particular full consular and emergency services on the ground to support Canadians. We have also deployed additional staff.

In closing, I'd like to add that Global Affairs Canada officials will continue to work closely with health experts and our like-minded partners, and that we will continue to pursue all avenues that might be required to assist Canadians in Hubei province, China. Taking into account the need to respect the privacy of the individual Canadians who are at the heart of every consular case, we will also work hard to keep all Canadians apprised of our work and our services during this critical event.

Thank you, Mr. Chair.

The Chair: Thank you, Ms. Jeffrey.

We'll now go to the Department of Public Safety and Emergency Preparedness, with Mr. Tanguy, please, for 10 minutes.

Mr. Patrick Tanguy (Assistant Deputy Minister, Emergency Management and Programs, Department of Public Safety and Emergency Preparedness): Thank you, Mr. Chair and members of the committee, for inviting me to brief you on Public Safety Canada's role in the federal response to the novel coronavirus event.

[*Translation*]

My name is Patrick Tanguy, and I am the assistant deputy minister of the emergency management and programs branch at Public Safety Canada. Before I speak specifically about the response to the coronavirus, I will take a few moments to situate the role of the Department of Public Safety and Emergency Preparedness when it comes to emergency management.

[English]

Enacted in 2007, the Emergency Management Act provides federal ministers with the responsibility to be prepared for emergencies in their respective departments and agencies. It also provides a coordination role for the Minister of Public Safety.

As you have probably heard, the Public Health Agency of Canada is leading the Government of Canada's response and working with federal, provincial and territorial governments to detect and respond to the spread of infectious diseases in Canada. My colleague in Global Affairs has set out the current situation in China; how GAC is helping Canadians on the ground, such as with consular services and call centres; and GAC's lead for the assisted return of Canadians.

Public Safety Canada has been engaged with these partners in other departments and agencies since the outbreak was first reported. Under the federal emergency response plan, the government operations centre, which is a Government of Canada asset housed in Public Safety Canada, supports response capacity and coordination during events of national interest.

• (1555)

[Translation]

On a day-to-day basis, the Government Operations Centre maintains an event team on standby 24-7. The centre also coordinates interdepartmental and multijurisdictional planning efforts to support coordination of the government response.

[English]

It also reinforces the principles of emergency management through planning, exercising and continuous improvement.

The government operations centre also facilitates the coordination of official requests for assistance that could come from federal departments and agencies and also from provinces and territories.

[Translation]

More recently, the Government Operations Centre coordinated the response to a request for assistance from the Province of Newfoundland and Labrador to deal with the snowstorm that hit the city of St. John's and surrounding areas.

[English]

How do we fulfill this support and coordination function? The government operations centre brings all partners into a common environment to harmonize collective actions and ensure consistent analysis and information fusion and sharing.

[Translation]

However, the Government Operations Centre does not make decisions for federal departments and agencies that are involved in responding to an event such as the one we are talking about.

Each ministry is responsible for emergency management in its area of competence.

[English]

In the case of the response to the coronavirus, a group of ADMs and those at other levels get together on a daily basis to ensure co-

ordination in terms of planning and responses. The government operations centre is constantly receiving information, vetting it, determining its credibility and deciding if further reporting is required. The government operations centre will immediately report on an event that has the potential to require an integrated response by the federal government, as we've done in the past in the case of hurricane Dorian in Nova Scotia, last year's floods and other events.

[Translation]

Quite quickly, in the span of a few days, in fact, the Government Operations Centre elevated its response level significantly.

[English]

We have moved from level one, enhanced monitoring and reporting, to level two, risk assessment and planning, and now are at level three, which means that the government operations centre is leading the coordination of the federal response while working with the lead departments in the event: in this case, the Public Health Agency for the national response, and Global Affairs Canada in the case of the assisted return of Canadians from Wuhan.

We work with partners to ensure that plans are escalated and resources are readied for an interdepartmental response, including the use of the contact network with the various departmental operation centres and subject matter experts. Material is also prepared by the government operations centre to allow for informed decision-making by senior and elected officials.

Currently, the government operations centre is fully engaged in both planning and executing aspects of the assisted return of Canadians. This includes mapping out the repatriation process to ensure a cohesive response from all partners; confirming each organization's roles, authorities and responsibilities in the repatriation and addressing any gray areas of overlap; hosting all planning and senior-level calls and facilitating when appropriate the conversations between the relevant provinces and NGOs; coordinating federal activities consistent with the agreed-upon plan while ensuring that departmental policy, accountabilities and authorities are maintained by hosting the integrated interdepartmental response team at the GOC, as was done during Operation Syrian Refugees; and maintaining event updates on a regular basis on federal posture activities, providing consolidated situation awareness and senior-level briefing products, and disseminating them to key decision-makers and partners.

In addition to the role of the government operations centre, Public Safety communications has the leadership in the whole-of-government communications on the event, coordinating with our partners, the Public Health Agency, Global Affairs Canada, the Privy Council Office and other federal departments, to develop key effective messages from the Government of Canada to ensure calm and instill confidence in Canadians.

Again, Mr. Chair, thank you for the opportunity to provide some initial remarks. My colleague and I look forward to answering your questions to the best of our ability.

The Chair: Thank you, Mr. Tanguy.

We will go now to the Department of Transport, with Mr. McCrorie for 10 minutes.

• (1600)

Mr. Aaron McCrorie (Associate Assistant Deputy Minister, Safety and Security, Department of Transport): Thank you, Mr. Chair, for the invitation to speak with the committee today.

I'm Aaron McCrorie. I'm the associate assistant deputy minister for safety and security at Transport Canada.

[*Translation*]

I can assure you that everybody at Transport Canada is committed to Canadians' safety and well-being. Transport Canada has been heavily involved in the response to the coronavirus situation. We have officials across Canada who are working to respond, as well as to support our partners and stakeholders in both the public and private sectors. In this situation, our primary objective is to protect the health and safety of Canadians, domestically and abroad.

[*English*]

For example, the Government of Canada is working collaboratively with domestic and Chinese-based airlines to raise awareness of the novel coronavirus outbreak that was first identified in Wuhan, China. As already mentioned, enhanced entry screening measures have been implemented at a number of Canadian airports.

On Tuesday, January 28, the president of the Public Health Agency of Canada and the deputy minister of Transport Canada communicated with air carriers to inform them of measures the Government of Canada was implementing as part of the government's efforts to identify and control the spread of novel coronavirus.

In our communication with the airlines, we reminded them that they play a key role in efforts to prevent the introduction and spread of communicable disease in Canada. We provided them with a script for an in-flight message that should be delivered to passengers when landing in Canada. The message is intended to help passengers understand what to expect upon their arrival in Canada, as enhanced measures are now in place to help identify and control the spread of the novel coronavirus. In short, the message tells travellers that they must provide information about their travel history and about their health to border officials.

[*Translation*]

We are indeed in a period of heightened monitoring. In accordance with the International Civil Aviation Organization's standards

and recommended practices, we requested that pilots promptly report to air traffic control any travellers who may have an illness, especially travellers from a high-risk area who are experiencing a fever, coughing or having difficulty breathing.

[*English*]

Just for your awareness, the International Civil Aviation Organization, or ICAO, is a specialized UN agency established to manage the administration, safety and governance of international civil aviation.

I can tell you there are no direct flights from Wuhan to Canada.

Of course, air travel is not the only mode of transportation that arrives in Canada from abroad.

[*Translation*]

With respect to maritime activity, Transport Canada continues to be aware of all vessels that intend to arrive at a Canadian port, and continues to work with marine safety and security partners—both domestic and international—to ensure that we are maintaining a strong awareness of all vessels.

[*English*]

We have communicated with ports regarding this public health event. On January 29, Transport Canada issued a special marine security notification. This notification was distributed broadly to the Canadian marine community, including, among others, port authorities, the Canadian Association of Port Authorities, company ship officers, regional pilotage authorities, port terminals, and employee associations or unions. Ports have been directed to implement protocols that were created during the SARS outbreak of 2003.

Similar to the message conveyed to airlines for their passengers, the message to vessel owners and operators is to communicate with Transport Canada. If the vessel is from a high-risk area, they will be asked if they have crew members on board who are ill. If there are any, they will be asked if the crew members are exhibiting symptoms such as fever, shortness of breath, dry cough, or breathing difficulties.

As per the marine transportation security regulations, all foreign vessels visiting Canada must report to Transport Canada 96 hours prior to arriving in Canadian waters. Communication is paramount as we work to protect Canadians from the dangers of this public health event.

At Transport Canada, we are working to support our key government departments. To this end, we have activated our national emergency coordination centre, a focal point to coordinate our efforts in working with our colleagues in the GOC.

We have a civil aviation contingency plan, which addresses pandemics and communicable disease events. This plan provides a framework and procedures for monitoring and maintaining the safety of the national civil aviation transport system, as well as our support for other departments during a pandemic or communicable disease event.

• (1605)

We are working with our colleagues at Global Affairs Canada, the Public Health Agency of Canada, Canada Border Services Agency, Public Safety Canada, the Canadian Air Transport Security Authority and others. In the federal emergency response plan, which is the Government of Canada's all-hazards response plan that outlines processes for an integrated Government of Canada response to an emergency, Transport Canada is responsible for providing federal transportation support to provinces, territories or other federal government departments and institutions during an emergency.

[Translation]

We will also continue to collaborate with all industry partners and stakeholders. I will reiterate—Canadians' safety and well-being is our top priority at Transport Canada. We are taking this public health emergency very seriously, and we are focused on taking measured and appropriate action based on risk.

Again, Mr. Chair, I thank you for the opportunity to provide this update to this committee, along with my colleagues.

[English]

I look forward to any questions you may have.

The Chair: I'd like to thank you all for your excellent remarks.

We go now to questions, starting with Monsieur Paul-Hus.

[Translation]

You have the floor for six minutes.

Mr. Pierre Paul-Hus (Charlesbourg—Haute-Saint-Charles, CPC): Thank you, Mr. Chair.

Good afternoon to all of you.

My first question is for you, Mr. Tanguy. What we'd like to know is why it took the government so long—at least, that's how it appeared—to take action. You told us that the agencies have excellent measures in place, but what about the time it took for Canada to respond? In your presentation, you said that elected officials were the ones making the decisions and setting the priorities.

Could you talk more about that?

Mr. Patrick Tanguy: Thank you very much for your question.

To your point, I would say that the work was done in as short of a time frame as possible. Various departments have addressed the question, including today, as to whether we took action quickly enough. If my counterparts have a different view, I urge them to share it, but responding to a phenomenon such as this is an extremely complex endeavour.

That said, when it comes to our role, we move as quickly as possible to coordinate efforts when a number of departments and agen-

cies are involved. Therefore, it's hard to see how, given the complexity of the situation, we could have moved even faster, whether to coordinate government planning or bring Canadians home from China. It requires a lot of coordination, planning and authorization.

[English]

Ms. Heather Jeffrey: From the perspective of the Canadians located in Hubei province, of course these are very difficult situations, especially when you're not able to leave your home under these kinds of restrictions. We can understand completely the anxiety and the difficult situation in which they find themselves. Given the context in that region, it's very important that we have a very well-developed plan with all the proper authorizations so that they are not put at risk in their travels and we can ensure their safe passage out. We did not have a consulate or a presence in Wuhan, so it's very important for us to deploy our consular staff standing rapid deployment team, which is now present on the ground in Wuhan, so that they can work with local authorities to facilitate departures.

We also need to ensure that we have the right permissions and authorizations. Given the airspace closures, visa requirements and the context of going into a quarantine zone, that had to be worked out. We've done so, I think, in the shortest possible time. As well, as you can see with the coordination across our agencies, the reception plan in Canada to make sure that Canadians are well supported and have appropriate health care is really of top priority.

[Translation]

Mr. Pierre Paul-Hus: Thank you.

Mr. Tanguy, can you tell us how long the Government Operations Centre has been in place and operating 24-7?

Mr. Patrick Tanguy: I don't have that exact information at this time, but I can get back to you on that.

Mr. Pierre Paul-Hus: Very well.

Mr. MacKinnon, you said that, from January 22 to February 2, a total of 791 travellers answered yes when asked whether they were coming from Hubei province, and that 18 of them indicated that they felt ill.

Where did those people end up?

[English]

Mr. Paul MacKinnon: With regard to the 791 people, we don't know exactly their end destinations, but they're released—

Mr. Pierre Paul-Hus: I mean the 18 who said they had some illness. Where are they?

Mr. Paul MacKinnon: Those 18 went to PHAC for further examination. At that point, it's up to PHAC to decide. If they are ill enough to go to a local public health provider, they would do that, but—

• (1610)

[*Translation*]

Mr. Pierre Paul-Hus: I see, but when those people arrive and report feeling ill, does the current protocol dictate that they be referred to a doctor, that they be examined or that they be placed in quarantine? Are they simply told to go see a doctor in their area?

[*English*]

Mr. Paul MacKinnon: No, they do not at all.

From our perspective at the border, if somebody comes in, the first question we ask is, “Have you been to Hubei province?” That's really the first tranche that's important to us. If they say yes to that, with our front-line border officers there is more questioning. What we're really focused on at that point is, are they ill or do we see signs of their being physically ill? If the answer to that is yes, we will refer them to a PHAC quarantine officer at that point. They make the determination whether or not the person should go for a medical examination, or if the person is so ill, from their perspective, they should immediately go to a health care provider.

I should say also, Mr. Chair, that if our officers notice, upon arrival, that someone is so ill that it's obvious and there's no need for extra questioning, they too will send that person immediately to the local health care provider.

[*Translation*]

Mr. Pierre Paul-Hus: All right.

Can you tell us which sections of the Quarantine Act are currently applicable? Sections 12 to 33, for instance, pertain to arriving travellers. Are those sections of the act being enforced?

Mr. Denis Vinette (Vice-President, Travellers Branch, Canada Border Services Agency): Thank you for your question.

The Quarantine Act authorizes us to perform our role as screening officers.

Mr. Pierre Paul-Hus: Do you know exactly which sections of the act are currently applicable? As you know, the act gives additional powers to officers on the ground. Are those powers officially being used?

Mr. Denis Vinette: The measures we are applying at this time are the same ones we apply all the time.

Mr. Pierre Paul-Hus: It's voluntary.

Mr. Denis Vinette: Under the act, people have an obligation to inform us. Our officers are trained to observe people and question them.

Mr. Pierre Paul-Hus: The act includes provisions allowing officers to force an individual to submit to an examination in situations where a person isn't willing to co-operate. Are those provisions being enforced?

Mr. Denis Vinette: It's a medical examination. I'm not sure which section of the act that falls under. Our role would be to refer

the individual to the Public Health Agency of Canada, which would then make the appropriate decisions.

[*English*]

The Chair: Thank you, Monsieur Paul-Hus.

We go now to Ms. Sidhu for six minutes.

Ms. Sonia Sidhu (Brampton South, Lib.): Thank you all for coming here today, and for all the hard work you do for all Canadians.

My first question is for Global Affairs. The evacuation of Canadians from China impacts Canadians in many ridings across the country. I have been contacted by a number of residents from my riding of Brampton South who are presently in China seeking evacuation and return home. Can you describe the consular services and supports that are available to Canadians who remain in China?

My second question is, what services are in place to ensure the safekeeping and well-being of Canadian minors with non-citizen parents?

Ms. Heather Jeffrey: We have a network of consulates, along with our embassy in China, that provide consular service. They have teams of consular experts who are available to solve problems, work with local authorities, refer to medical services and deal with the issues that come up, in this case related to the quarantine and the health crisis. We also have, on a 24-7 basis, an emergency watch and response centre based here in Ottawa, with consular officers responding to requests at night. It's open to our missions around the world. Since the beginning of this outbreak, it has been staffed by a very large number of officers who are there to respond to questions, exchange information, and determine what the needs of Canadians are.

Our response to consular cases is really done on an individual basis. Every family has a different structure, a different need, different concerns, and so we try to address those.

You referenced the case of Canadian minors. Obviously, any vulnerable population, in particular young children, is a top priority for us. In any prioritization, they're at the top of our list. We understand that those children need and require their guardians and caregivers to be with them. We understand that, in China, there are a number of families with very complex structures—Canadian citizens, Chinese citizens, permanent residents.

The Government of China has a particular approach to dual nationality. It does not recognize dual nationality. However, in this case we have been working very hard, in our interactions with the Government of China, to emphasize that in difficult humanitarian contexts like this one, it's very important to not separate family units and to keep people together. The Government of China has indicated, as our minister indicated earlier today, that where there are direct family linkages with Chinese citizens who are permanent residents of Canada—who are parents, for example, of a Canadian citizen child—they will work with us in our efforts to keep those families together.

• (1615)

Ms. Sonia Sidhu: My understanding is that for the first contact, they can contact Global Affairs. I heard there are 1-800 lines already set up. Do they have to consult with the consulate over there?

Ms. Heather Jeffrey: Our recommendation is that they call our 1-800 number, which is 24-7, and/or contact our email mailbox, which gets you into direct contact with consular staff here in Ottawa. Due to the high volume of calls, the staff will be receiving and providing advice to everyone who calls. They are working with the local consular officers on the ground where direct intervention is required with local authorities for a particular context.

We use our capacity here in the call centre to really supplement the local resources overseas and to cover during hours when those missions are closed and so on, but we are in contact with them 24 hours a day.

Ms. Sonia Sidhu: My next question is for Public Safety. Can you describe what steps your organization is taking to ensure that border measures implemented in response to the novel coronavirus outbreak do not promote stigma or discrimination?

Mr. Patrick Tanguy: I missed part of the question.

Ms. Sonia Sidhu: To ensure that the coronavirus does not promote stigma or discrimination, any kind of discrimination, what kind of measures are in place?

Mr. Patrick Tanguy: I thought I heard the border angle of the question, so I would invite my colleagues from CBSA to comment.

Mr. Denis Vinette: Thank you for the question. This one has been in the media more recently.

First and foremost, our officers, from the time they're hired through their training in Rigaud, go through extensive sensitivity training with regard to cultures and how they will come into contact with people from all over the world.

This particular situation, notwithstanding all the training they undertake, is really a public health situation, so all individuals entering the country now at 10 airports are questioned. It is not discriminatory in terms of nationality. It is for all travellers arriving from abroad.

Our officers are very well trained. We have strong supervision. We have training that reinforces that at all times. In practice now, we are trying to determine whether someone has perhaps been in a zone that has had some exposure. Right now we are concentrating on Wuhan in Hubei province and identifying those individuals so we can do the health assessment that's expected of us at the border,

and if it is deemed necessary, we can refer to the Public Health Agency of Canada.

It's something that our officers have been attuned to in practice, and it is certainly something that we have been reinforcing in light of the particular events of this day.

Ms. Sonia Sidhu: Okay.

[*Translation*]

The Chair: It is now over to you, Mr. Thériault. You may go ahead for six minutes.

Mr. Luc Thériault (Montcalm, BQ): Thank you, Mr. Chair.

Welcome to you all. Thank you for being here to reassure all members of the public about this epidemic, which is primarily affecting China.

In a crisis like this one, the capacity to coordinate efforts to the utmost and facilitate the seamless flow of information among stakeholders is paramount. During a press briefing this morning, Quebec's health and social services minister, Ms. McCann, indicated that she wanted to bring home Quebeckers who were in China but that she didn't know exactly how many were there. Are you able to tell us how many Quebeckers are in China?

Why isn't there better communication between the Quebec government and your organization, when only Wednesday, everyone was telling us that the level of co-operation and coordination in response to the crisis was unprecedented? I'd like to hear your comments on that.

• (1620)

[*English*]

Ms. Heather Jeffrey: There are several different levels of coordination with the provinces and with provincial representatives. With regard to Global Affairs Canada, our mission, our embassy in Beijing, is in close contact with its counterparts from the Government of Quebec. Our efforts in assisting Canadians are really focused around those, in terms of the coronavirus, who are experiencing difficulties in leaving areas due to quarantine.

Currently, no Canadians have sought consular assistance because they are ill, so we've really been focused on providing assistance with transport to leave areas into or out of which the Chinese government has decreed there can be no transit.

We are working closely with the provinces on that. All Canadians are receiving consular service, and we're working closely with them as well in terms of the duty of care to our staff who work together in China on different issues.

[*Translation*]

Mr. Luc Thériault: You aren't able to tell me, then, how many Quebeckers want to return to the country.

Mr. MacKinnon, you said that, as of February 2, a total of 791 travellers had answered yes or had been questioned, shall we say. That means the measures you've been taking since the beginning have helped you to identify 791 individuals, 18 of whom were experiencing symptoms or felt unwell.

What do you do next? Of course, you check the source of the illness, but since we are talking about contact tracing, I'd like to know whether you're able to track down the people who may have been in contact with those 18 individuals. Practically speaking, what steps do you take?

Mr. Paul MacKinnon: Thank you very much for your question. It's quite a good one.

That's something we discuss frequently with our colleagues and other agencies.

[English]

If we get word from the province or a health care provider that somebody has been diagnosed positive for the coronavirus, if they provide us that information, we can go into our databases. Working with our colleagues at Immigration, Refugees and Citizenship Canada, we can look at databases to see, for instance, whether you applied for a visa or whether you have a Canadian passport. We can find those individuals who were sitting within proximity of that individual on the plane; I think it's within two metres that we're concerned about on a plane.

The quick answer to your question is that, if we get the name of the positive individual, we can take that information through our databases. We can identify who was within close proximity on the plane when they arrived in Canada.

[Translation]

Mr. Luc Thériault: I gather, then, that you haven't had to do that yet, since there haven't been any infection-related symptoms.

If there were, how long would it take to do that?

Mr. Paul MacKinnon: On our end, we can move very quickly.

[English]

Denis, I think you told me that within about a couple of hours, if we had information, if we had the name of the positive person, we could retrace those steps through our databases.

It would be very quick, Mr. Chair.

[Translation]

Mr. Luc Thériault: How much time do I have left, Mr. Chair?

[English]

The Chair: You have 40 seconds, Mr. Thériault.

[Translation]

Mr. Luc Thériault: I have a question I'm going to keep for later, because it can't be answered in 40 seconds.

Recently, we've seen that some employees are worried. At least that's the case among unionized employees. What additional steps have you taken to reassure your staff?

[English]

Mr. Paul MacKinnon: We're working really closely with the union. We speak to them practically on a daily basis. From my side, I ask questions daily: How are things going with the employees? Are we giving them all the briefings they require? Do they know what's happening? Do they have the latest information?

[Translation]

Thus far, we've been doing everything possible to make sure all our employees fully understand the situation as it relates to their health.

• (1625)

[English]

I would say that, for us, the union is a really important player in this, to ensure that we're in close communication with our employees.

[Translation]

The Chair: Thank you, Mr. Thériault.

[English]

Mr. Davies, you have six minutes.

Mr. Don Davies: Thank you, Mr. Chair.

Thank you to the witnesses for being here.

What is the government's current position on asymptomatic transmission?

Mr. Paul MacKinnon: Mr. Chair, this is not to frustrate you and your members, but without medical people here, I don't think any of us are in a position to answer that question.

Mr. Don Davies: Let me put it into some context. I would take it that across your departments, you're trying to coordinate bringing Canadians back. It seems to me that there is a very important question. When people get on that plane—you've already talked about them being pre-cleared as not exhibiting signs of illness—we need to know whether or not those people who are asymptomatic...

Are we assuming that they're capable of spreading the coronavirus or not? Do you not have any particular position on that, at this point?

Mr. Paul MacKinnon: Again, Mr. Chair, I just don't think we should tread into areas that are clearly health-related, so we'll stay within our area of expertise, if we can.

Mr. Don Davies: Fair enough.

Now, in a Global Affairs Canada media release that went out yesterday, I think, this was stated:

The Government of Canada has chartered a plane that is standing by. It will land in Hanoi...and deploy to Wuhan, where the airspace is currently closed, once the Government of China has given authorization to land.

The release also said that “[w]ork is...underway to comply with other Chinese requirements, including providing manifest details in advance of the flight departure and further documentation on the Canadians wishing to depart”.

My research, unless I'm mistaken, is that right now, as we speak, the United States, the United Kingdom, Australia, Japan, France, Indonesia and Germany have already begun the process of actually evacuating their citizens. My question would be, why has the Government of Canada failed to secure those necessary requirements? Why is it taking us longer than our allies to comply with these requirements?

Ms. Heather Jeffrey: Thank you, Mr. Chair.

In our case, many of those other countries had missions on the ground in Wuhan and very large resident national populations. We did not have a mission in Wuhan. It requires us to send our standing rapid deployment team into the city in order to stage and prepare for that departure. We also required the visas and overflight clearances, etc., to access that territory, from Beijing and also from outside. Those are the processes that we've put into place.

As airspace closures shift and as countries impose other travel restrictions, we've been addressing those challenges and working with our international partners. We are in constant touch with Canadians on the ground during that process.

Mr. Don Davies: Okay. Thank you.

In your view, has the Government of Canada's strained relationship with the Chinese government negatively impacted our negotiations in any way?

Ms. Heather Jeffrey: In terms of this response, I can say that we've had very good and close co-operation with Chinese authorities as we seek to have exchanges about addressing some of the challenges related to transit, travel, etc. We have to gather a lot of information from Canadians in order to prepare the manifests and arrange for their departures. We've been working with the Government of China. I have no evidence, as of this time, to suggest that there has been any impediment on their part.

Mr. Don Davies: I guess the question on everybody's mind right now is, when will Canadians be evacuated from China? What is your best estimate of when that's going to actually happen?

Ms. Heather Jeffrey: Minister Champagne spoke earlier today. He indicated that in a matter of hours, not days, the flight would be in motion, but given the pending landing and overflight clearances from China, we're not in a position to comment specifically on timelines for that flight at this moment. We are working very hard to make it happen as quickly as possible.

Mr. Don Davies: Okay.

Given the numbers we've talked about, how many flights do you think we'll end up needing? Will the single chartered flight be enough to bring home from China everybody who wants to come?

Ms. Heather Jeffrey: Well, the numbers throughout this process have been very fluid. About a week ago, we had almost no one requesting assistance or registered with us as living in Hubei province. Now we have much larger numbers. We have, as of a few hours ago, 312 seeking departure and 563 Canadians registered with us as being in Hubei province. Our picture is much clearer now than it was even just a couple of days ago.

We're working with that. We have a number of options in play. Minister Champagne spoke earlier today and talked about the dif-

ferent options on the table. We're working with our allies for cases—

• (1630)

Mr. Don Davies: The question was, how many planes? Is there going to be more than one?

Ms. Heather Jeffrey: I think it will depend as we continue to reach out for Canadians. Every day—and every night, given the time zones—we're in contact with them as we explain the process, the timelines, the procedures on arrival in Canada and the 14-day period of observation. Canadians are making their own decisions, so the numbers will fluctuate.

Mr. Don Davies: Thank you.

We all know that the World Health Organization just recently declared a “public health emergency of international concern”. They were pretty explicit that one chief reason for that declaration was that they are not confident that other nations have the necessary resources to adequately deal with the coronavirus.

I'm wondering how Canada has responded to that. So far, we've been focused on people coming from Hubei province. Now, with the possibility that this virus is going to other countries that may not have the same vigilance—and I think there's been quite a consensus that China has done a very good job of containing this—how do we respond to passengers who are perhaps coming from countries that may not have the same rigorous standards to deal with this? How has that affected our border entry controls and how we might be dealing with that?

Mr. Paul MacKinnon: I can jump in, Mr. Chair.

To my colleague's point, our officers are trained from the moment they join Rigaud to do this very work on a daily basis, so in some sense, they rely on their standard operating procedure to always be checking for individuals who may be arriving at Canadian airports showing signs of illness. Certainly we are more focused on the questioning we have about whether they are coming from Hubei province. That questioning is working well for us at this point.

Then more broadly to the question, Mr. Chair, we rely upon the skill set that our officers have for the way they work on a daily basis.

The Chair: Thank you, Mr. Davies.

Mr. Kitchen, go ahead for five minutes.

Mr. Robert Kitchen (Souris—Moose Mountain, CPC): Thank you, Mr. Chair.

Thank you all for being here. I greatly appreciate that.

I'll actually follow a little bit more on what Mr. Davies was asking you, because the reality we were presented with was that initially you put policies in place for Vancouver, Toronto and Montreal. Now we hear that they are in Edmonton, Winnipeg, Calgary, Ottawa, Billy Bishop, Quebec City and Halifax. One assumes that's because people are travelling from other countries and coming in.

That leads me to other airports that have international flights. For example, Regina and Saskatoon have international flights. Is there a process in place?

Then I'd like to take that even a step further. What about our land-based CBSA officers? What are you doing to train them, to educate them, to put up signs to show as people enter Canada in land-based areas?

Mr. Paul MacKinnon: I'll try to go quickly to save your time, Mr. Chair.

We have daily calls with our regional directors general right across the country. Denis is part of that with me, as are all the other ADMs at the agency. We keep them up to date in their shift briefings that happen right across the country in terms of what's important for the officers to know vis-à-vis the health and safety of those officers. That's something that's done right across the country.

Just a general point I would make, Mr. Chair, is that as my colleague Heather said, this situation remains fluid. At the present time, our assessment is that we're confident with the measures we have in place at the airports, in addition to the airports we added on Saturday, but we're on this 24-7 and we depend upon the best advice from our health care professionals to determine how we might want to either ramp up or ramp down our activities at the border.

Mr. Robert Kitchen: Are our land-based officers trained in this way, and are you updating them daily?

Mr. Denis Vinette: I can take that one.

Absolutely. We have put out a couple of products for our officers that go to all officers at all ports of entry to raise their awareness. One is an occupational health and safety bulletin about how to take the proper precautions in the event you come across someone who is ill, not just for this particular virus but with anyone who is ill. It is a refresher on the operating standards. As well, there is a bulletin on how to deal with individuals who may have travelled and who have declared that they have been in Hubei province. Our land-based officers all have access to and have been briefed on the same information that staff at our airport operations have.

That being said, anyone travelling through the U.S. has gone through a commensurate verification and checking in the U.S. We talk to our U.S. CBP counterparts on a regular basis to make sure we are operating to the same standards, and we therefore rely on each other to ensure that we are not passing on someone who may be symptomatic unbeknownst to the other.

• (1635)

Mr. Robert Kitchen: Thank you.

We know the virus is droplet-based, and the reality is that the droplets get onto things. You indicated that you've increased the disinfecting process for border kiosks. How often are you doing that? Is it once a day, once a week? Define for me what that process is.

Mr. Denis Vinette: There are two components to this. One is that there are the areas for which we are responsible, so we've equipped our officers with the necessary materials to be able to disinfect the surfaces. If you think of a standard PIL booth, the desks,

if you go to immigration or what we call secondary for further processing, we've equipped them with disinfectant for those areas.

Then we work with the airport authorities who own and operate the kiosks that you see in the airports, and they're doing it multiple times a day. I can't give you an exact number, but we confirmed before coming here today that in fact it is occurring multiple times a day at all of the airports.

We've balanced that with making sure they also have access to hand sanitizers and further materials.

Mr. Robert Kitchen: Thank you.

To go further along those lines, let's take that droplet-based virus to the plane that initially came here. Can you tell us what was done with that plane when it came to Canada, once we knew that we had someone here with the virus? Was that plane taken out of commission? Was that plane kept from going? What was done to sanitize that plane?

Mr. Aaron McCrorie: Thank you for the question, Mr. Chair. Unfortunately, I can't speak to whether the plane itself was taken out of commission. What I can note is that all airlines do have existing standard operating procedures for grooming the aircraft between flights and after flights. We've been working with the Public Health Agency of Canada to provide them with more information about what particular—

Mr. Robert Kitchen: Do we know where that plane is right now?

Mr. Aaron McCrorie: No, we don't.

Mr. Robert Kitchen: Okay. Thank you.

How much time do I have left?

The Chair: You're out. Thank you, Mr. Kitchen.

We'll go now to Mr. Kelloway for five minutes.

Mr. Mike Kelloway (Cape Breton—Canso, Lib.): Thank you, Chair.

I want to thank the panel for coming here today.

You've been speaking of the coordinated and connected efforts of all of your departments. I guess that's probably apt for my question. It's a good segue. Can you describe any support that the Canadian government is providing to lower- and middle-income countries to support their response to this virus?

Ms. Heather Jeffrey: Related to your question, obviously one of the important aspects of humanitarian assistance that our department contributes to is responding to requests for assistance from different countries. In some cases, we are providing supplies, first of all to the Government of China in their efforts to combat this outbreak and stop the spread of the illness.

Through global health authorities and international development assistance, we are providing important supports to many developing countries in terms of training, additional assistance and protocols. Canada's expertise in the field of vaccine development and other supports is well known. We contribute as well to global efforts to develop vaccines for new pandemic threats. Indeed, as announced in the G7 two weeks ago, we are contributing to efforts to develop a vaccine to combat this particular coronavirus. There are a number of different avenues, ranging from concrete delivery of supplies all the way through to vaccine development chains.

Mr. Mike Kelloway: Thank you for that.

I have a secondary question, not quite connected to the first one. I guess it may be subjective, or it may be objective. I'm not sure.

Do you expect that we'll get to a level four in terms of travel to China? Is this something that you feel you can address? That's for anyone on the panel.

Ms. Heather Jeffrey: We develop our travel advice in consulting a wide range of sources. Obviously the travel health notices are developed by the Public Health Agency of Canada, with their medical expertise. That is separate from the travel advisories that Global Affairs Canada has published across a wide range of different considerations, ranging from safety and security all the way through to border and other controls and different aspects of a country's context.

Currently we have a level four advisory for Hubei province because of the draconian nature of the quarantine and restrictions. We don't see that yet across all of China. There are still opportunities for commercial travel in and out of airports in China, etc., but we're carefully monitoring it on a day-to-day basis. We upgrade that advice on a 24-7 basis, based on new inputs.

• (1640)

Mr. Mike Kelloway: Wonderful.

Do I have time for another question, Mr. Chair?

The Chair: Yes.

Mr. Mike Kelloway: It's a question from a constituent of mine. I was on the phone chatting with him. Do travellers have the right to refuse health screenings? I think we've touched on it a bit here, but do they have the right to do so?

Mr. Denis Vinette: I can't speak with absolute authority, but I know that our screening officers, under the Quarantine Act, can refer someone to a quarantine officer under PHAC. The individuals must wait until they've been dealt with by that quarantine officer, and only at that time can they depart the CBSA hall. I would have to come back in order to be authoritative on your question.

Mr. Mike Kelloway: Thank you.

The Chair: You have two more minutes. Are you done?

Mr. Mike Kelloway: I'm so efficient with my questions.

Voices: Oh, oh!

Mr. Mike Kelloway: I have many more.

To stay on the wavelength of the health screenings, how effective are entry and exit health screenings in detecting this virus, percent-

age-wise? Again, I know this may be subjective or objective, but how effective are they truly in detecting an abnormality or this virus in particular?

Mr. Paul MacKinnon: My sense, Mr. Chair, similar to the earlier response I gave, is that from our perspective and the perspective of the border, once we determine somebody is ill, either because they tell us or because we see it, and we pass them off to the public health quarantine officer, at that point we get kind of outside of our lane of expertise in terms of how effective the screening is from that perspective. I will leave it to our health professionals to give you a proper answer.

Mr. Mike Kelloway: Thank you very much.

The Chair: We'll go now to Mrs. Jansen.

Go ahead for five minutes, please.

Mrs. Tamara Jansen (Cloverdale—Langley City, CPC): I have a quick question. A fellow named Henry called me this week-end. His wife is in Hubei. He was trying to make sure his wife was on the list and he was having a hard time getting through. Ms. Jeffrey was saying that there is excellent communication. He finally did manage to speak to someone, and when he went to confirm that the visa number they had been provided was correct, it was wrong by one number. I guess the concern is whether there is an exhaustive list that can be double-checked. His suggestion was that perhaps a personal email could be sent that would at least provide information confirmation, for them to double-check. Could you give me a quick answer?

Ms. Heather Jeffrey: I can definitely answer that. Our call centre is staffed, I would say, on a 365-days-per-year basis. We have operation officers, consular officers, responding to calls every day and every night. Now we have a call centre with over 50 additional people responding to emails and telephone inquiries. Each case in our crisis centre has identifiers, absolutely. Once someone makes contact, personal email addresses are put on those files, and we will be reaching out to people every night confirming the details of the flight and the manifest, etc. and double-checking.

Mrs. Tamara Jansen: It seems as though there are still quite a few who haven't been confirmed. I know you also mentioned the idea of ensuring calm. Mr. Tanguy said that was important, and this individual said that if they could get personal calls, that would help.

My next question is whether, when they get to the plane, they will receive haz-mat suits and so forth, as I assume the staff on that plane will receive.

Ms. Heather Jeffrey: We're following the advice of Health Canada and the Public Health Agency of Canada in terms of the protocols and procedures on the aircraft. We will have protective equipment on board the plane for those who wish to use it, and everyone will receive information sheets about what they need.

Mrs. Tamara Jansen: Does that mean passengers will receive a suit? That's what they're concerned about, whether they will receive a suit.

Ms. Heather Jeffrey: I believe the guidance from the Public Health Agency of Canada is not to have a full suit but to have protective masks.

Mrs. Tamara Jansen: Okay.

I had a constituent call me. He's working at the airport and he was wondering about the way things were being funnelled through the airport. When all of these planes are arriving in China, how is everything being funnelled? I don't know if that's a long answer. Is everybody just being combined? What happens?

• (1645)

Ms. Heather Jeffrey: Do you mean on the ground in Hubei?

Mrs. Tamara Jansen: No, I mean in Vancouver or wherever.

Mr. Paul MacKinnon: I can give an answer, Mr. Chair. From our perspective, and I think I mentioned it in my opening comments, if we determine someone is ill, at the earliest opportunity we will have that individual wear a mask.

Mrs. Tamara Jansen: Is everyone being funnelled together, then? Is that what you're saying?

Mr. Paul MacKinnon: People are coming off the plane together. People are walking to the hall together, but from the first moment we determine that a person is potentially ill, we will give them a mask. After that, once they come to us, if we go to a screening area to ask more questions, they will be off in a different area, away from the rest of the public.

Mrs. Tamara Jansen: I have a question with regard to a lot of the returning students. I was just wondering whether there are any plans to suggest that students returning from China perhaps stay home for a bit to make sure we're not spreading it at school.

Mr. Paul MacKinnon: Do you mean students coming in on the evacuation flight, or just generally?

Mrs. Tamara Jansen: I mean generally.

Mr. Paul MacKinnon: Mr. Chair, from our perspective at the border, again we would not have a special process for students returning. We would follow that same procedure of asking whether they had come from Hubei and whether they were sick, or if we could see they were sick, and then we would follow the standard procedure that I explained earlier.

Mrs. Tamara Jansen: Are we thinking about whether or not schools should actually be suggesting that some of the students just stay home for a bit to make sure there's an abundance of caution?

Mr. Paul MacKinnon: Again, from our perspective, it depends on what we see from that individual in the border context if we think they're ill. But we don't have any special procedures for students. What the schools are doing themselves I don't have data on.

Mrs. Tamara Jansen: Would that not necessarily be part of the equation?

Mr. Paul MacKinnon: Do you mean what individual schools say to their students?

Mrs. Tamara Jansen: Yes. Especially since they're coming back from China, and we know that this thing is pretty intense, would it not be wise, just out of an abundance of caution, to have students...?

Mr. Paul MacKinnon: Again, I have no view on that. I don't know if other colleagues do.

Ms. Heather Jeffrey: I think that's part of the guidance that the Public Health Agency of Canada and the chief medical officer provide in Canada. It's outside our expertise, unfortunately.

Mrs. Tamara Jansen: A lot of people, I'm assuming, a lot of students, have been returning and getting back to university. It's a concern.

I think somebody else had a question....

Oh, my time is over.

The Chair: Thank you.

Mr. Van Bynen, you have five minutes.

Mr. Tony Van Bynen (Newmarket—Aurora, Lib.): Thank you very much.

I was a municipal mayor for over 12 years. We went through exercises in getting ready for emergency situations. I'm sure that applies to your group. How often do you go through an emergency exercise so that the readiness is there and you're not looking around wondering what to do next? Can you tell me what you do on an ongoing basis to make sure the readiness is available?

I would invite each of you to make comments.

Ms. Heather Jeffrey: I can speak to that from the Global Affairs Canada side. We have a regular program of exercises, tabletop exercises. We work with other government departments, specifically on exercises related to international pandemic response following on our experience with the SARS and Ebola responses in the past. Abroad, we have regional emergency program managers who travel to missions abroad and do these exercises with each particular embassy to practice how they would react. Our standing rapid deployment team officers go through specialized training at least twice a year. They engage in these kinds of exercises. They actually do scenario-based field exercises about responding to consular emergencies on a large scale.

All of this comes together in these responses to be implemented in the field. The systems that we've had have allowed us the ability, for example, to deploy officers so quickly. We have a team of officers every week on 24-hour notice to move. Like the kind of team that went into Wuhan or that will be accompanying the aircraft, we can deploy them. Whether it be for the plane crash we saw with Ukrainian airlines in Iran a few weeks ago or for a situation like this, that kind of emergency practice and protocol is very important to the response.

Mr. Tony Van Bynen: My next two questions are around assumptions. One of our assumptions is that if an at-risk person is entering the country, it will be by air. What have we done to look at all the other entry points? To what extent are we ready at the other entry points?

• (1650)

Mr. Paul MacKinnon: At this point, the questioning as to whether or not you are coming from Hubei province is, as I said, just at our international airports across the country. Mr. Vinette did speak about the fact that we share all of the information we have with all of our border service officers right across the country, including at the land border. They certainly have situational awareness, as do all the other front-line officers who are working at airports.

As I said earlier, this remains a fluid situation. We're constantly thinking about what it would look like if we were required to ramp up for any reason. We're doing that planning and thinking. At this point, the specific questions are at the airports. All the other crossings certainly have situational awareness and information that we're sharing with them.

Mr. Tony Van Bynen: I would like to explore something a little further. There was a question around checking the airplanes. I think the response was that the airplanes or any of these units were checked after every flight. My concern is about whether that is a cosmetic review or cosmetic cleanup. To what extent are we checking that there might be something in the ventilation systems or those kinds of things? What types of checks and balances do we have in place to avoid that being spread inside a very close area?

Mr. Aaron McCrorie: Similar to some of the other questions around the understanding of the health dimensions of the virus, that's not our area of expertise at Transport Canada. We defer to our colleagues at the Public Health Agency of Canada. We're working with them to provide information to the airlines. Right now, 10 airlines are flying directly from China to Canada. We're working with them to share information on how to properly groom and clean the aircraft for this very reason. It's hard for us to speak to the effectiveness of that, because in terms of the health aspect, we defer to our colleagues at the Public Health Agency of Canada.

If you'll give me licence, I'll add a response to your first question. In the marine mode, we require vessels to report in to Transport Canada—to our marine security operations centres, where we work with CBSA, the Coast Guard and other agencies—96 hours before arrival. For those vessels that are coming from China or that had stops in China, about 22 of which are on their way to Canada now, we've instructed them to provide us with additional information, similar to what's being asked at the land border, so that we can gather that information, share it with our colleagues at the Public Health Agency of Canada, and do an assessment of the crews coming in to address the issue about their coming in on a non-aviation mode.

Mr. Tony Van Bynen: Thank you.

I'm not sure if this panel could address this issue, but—

The Chair: I'm sorry, Mr. Van Bynen. Thank you.

We'll go now to Monsieur Champoux.

[*Translation*]

You have two and a half minutes.

Mr. Martin Champoux (Drummond, BQ): Thank you, Mr. Chair.

Thank you all for being here today.

Earlier, we were talking about other modes of transportation. We learned this week that VIA Rail has no safety or prevention measures or any way to check the health of passengers. From your remarks, I gather that the situation is fairly well in hand right now, but in the event of a broader outbreak, do you have a protocol ready for implementation that can be shared with VIA Rail? Have you already spoken with companies that transport passengers other than airlines?

Mr. Aaron McCrorie: Thank you for your question.

As I said, it's really the Public Health Agency of Canada that is responsible for deciding on the appropriate measures. Transport Canada's role is to work with the agency to convey the information to Canadian companies.

[*English*]

The role we would play is based on the assessment by our colleagues and the Public Health Agency of Canada or Health Canada that there was a need to take additional measures for something like Via Rail. Our role is to help facilitate that information exchange and work with them. We have inspectors on the ground making sure that those measures are taking place. That's what we're doing now in the aviation mode in supporting what our colleagues are doing at the CBSA, for example, and at the Public Health Agency of Canada.

[*Translation*]

Mr. Martin Champoux: The measures can be implemented fairly quickly, isn't that true?

Mr. Aaron McCrorie: Yes.

Mr. Denis Vinette: This isn't new territory for us. It's what we do every day; we were doing it even before the crisis emerged. Our officers are always on the lookout, so that they're ready to respond.

Right now, we are in the midst of planning to determine the steps to take in the event of an outbreak. Our colleagues at the Public Health Agency of Canada and Health Canada provide us with the information on that. We talk to them daily. We are involved in the planning with Mr. Tanguay and his team so that we're ready should we have to take a different approach.

• (1655)

Mr. Martin Champoux: I see.

In terms of airline passengers arriving from China, do you plan to make them use a separate passageway in the airport to keep other travellers safe? That would also make the screening process easier.

Mr. Denis Vinette: We follow the guidelines that the Public Health Agency of Canada gives us. That hasn't been deemed necessary at this time. Transport Canada advised the airlines that they must make sure pilots and cabin crew notify us if someone appears to experience symptoms during the flight. That way, the individual can be screened first, so they aren't waiting with all the other passengers. If no one shows any symptoms, passengers go through the normal process. We ask them questions and determine where they should go next depending upon the answers they give.

Mr. Martin Champoux: Very well, but you don't have any plans to process passengers arriving on flights from China in a separate part of the airport?

Mr. Denis Vinette: Not as of now, no.

[English]

The Chair: Thank you.

We'll go now to Ms. Kwan for two and a half minutes.

Ms. Jenny Kwan (Vancouver East, NDP): Thank you very much.

I'm wondering about this. With respect to people who have permanent resident status here in Canada, as it stands right now, they would not be evacuated. Is that correct?

Ms. Heather Jeffrey: Based on the policy of the Government of China, what they have said is that they are facilitating the departure of foreign nationals, foreign citizens. Citizens of Canada are definitely approved and are able to depart.

We have been working with the Government of China to try to maintain family units being placed together. Where there are direct connections, the Government of China has informed us that they will facilitate that. Where a permanent resident has a direct family member who is a Canadian citizen, they are going to be facilitating departure.

That's the basis on which we're working with them, but it's being done on a case-by-case basis with local authorities.

Ms. Jenny Kwan: I have a situation where a constituent is in China, a husband and wife. The husband is Canadian; the wife is a permanent resident. As far as I understand, he is in the process of being evacuated, but his wife is not. I flag that in those kinds of situations.

I don't think we should be treating permanent residents with status here in Canada differently. I think that's really important and I want to flag that. What I'm understanding from you, then, is that people are able to leave if they have relations here in Canada, from that perspective.

Ms. Heather Jeffrey: What I would say is that the policies we're working with in terms of the differentiation are not the Government of Canada's policies but rather the Government of China's policies. We are working very hard, and Minister Champagne has been engaged directly with his counterpart to underline the fact that we want all Canadian families to be kept together, irrespective of their status, and we're working towards that end.

There are a lot of things that are still in motion, but that would certainly be our intent, to allow that to happen.

Ms. Jenny Kwan: Can you make sure that the committee and the public are actually provided an update? As it stands right now, I know this husband and wife team are separated, so that is a major concern.

Second, in terms of evacuation, right now this is taking place for people who are in Wuhan. In other parts of China where many flights are being cancelled and so on, they may well have difficulty leaving China. Are there any plans for the Canadian government to do that evacuation outside of Wuhan?

Ms. Heather Jeffrey: We currently don't have plans to evacuate areas outside of Wuhan. Hubei province is currently the only location where there is such a comprehensive quarantine that there is absolutely no travel in or out by any citizens.

Ms. Jenny Kwan: If Canadians who are abroad in different parts of China are having a difficult time exiting, what should they do? Should they be contacting GAC for assistance?

Ms. Heather Jeffrey: Yes. Any Canadian who requires assistance or who is experiencing difficulty in travel should contact our consular hotline—we have a 1-800 number and mailbox—or our missions on the ground, and we will work with them to help them facilitate travel outside if, indeed, there are no commercial means that exist. We'll work with them to identify the problem to see what solution might be possible on a case-by-case basis.

For example, in the case of passengers in Hubei province, there are local transport restrictions, so we're working with each individual case to help facilitate their travel. It's a big area, and they need to move through different checkpoints and roadblocks. They require permission to do that, and we're working directly with local authorities to facilitate that kind of travel. That's just an example of the type of thing we can do, but we need to look at it for each individual situation.

• (1700)

The Chair: Thank you, Ms. Kwan.

We go now to our third round. We'll start with Mr. Webber for five minutes.

Mr. Len Webber (Calgary Confederation, CPC): Thank you, Mr. Chair.

I'm going along the same lines as Ms. Kwan on questioning regarding permanent residence individuals who are stuck in Wuhan.

I have four constituents over there. Two are permanent residents, and their children are Canadian citizens. The children have passports, of course, but the parents do not. Will they be able to come home with their children, Ms. Jeffrey?

Ms. Heather Jeffrey: Based on our current conversations with the Government of China, they have committed to facilitating the travel of permanent residents with Canadian citizen children.

Mr. Len Webber: Excellent.

Are permanent residents without children allowed to get on that plane or planes?

Ms. Heather Jeffrey: This is part of the conversations that are still ongoing. If a Chinese citizen with permanent residence status in Canada has direct family links, the Government of China has agreed to help us facilitate that on a humanitarian basis, but we need to look at each family situation and engage with local authorities on each case, so that's part of the work that's ongoing right now.

Mr. Len Webber: Okay. Thank you.

I'll pass it on to Tamara.

Mrs. Tamara Jansen: I have four constituents, including a father, Alex, who has a two-year-old son who travelled out there with his grandmother, who is Chinese. His son is Canadian.

How exactly are we going to get someone like an unaccompanied minor, like Gavin, home? Exactly how do we get them to the airport? Who is going to act as their guardian?

Ms. Heather Jeffrey: We have a complex case unit with officers who work specifically on these family cases. We're aware of a lot of different family configurations for children right now. When I last checked with the team, there were solutions in place for all of them. There are a number of different possibilities. It's obviously very difficult for a very young, unaccompanied child to transit through a province that is under quarantine and to reach an airport, so there needs to be facilitation. We're working on each individual case on a case-by-case basis to find solutions for them.

Mrs. Tamara Jansen: Okay.

I have another quick question. The number of cases is not decreasing but increasing, obviously. It looks as though it went up very sharply between Saturday and Sunday. At what point do we consider this an emergency and step things up?

Ms. Heather Jeffrey: We've been treating this as an emergency since January 26. We stood up our emergency response team. We stood up our call centre, and we've been working on a 24-7 basis in shifts that have been supplemented with extra personnel since that time.

These issues take a long time to work out with local authorities. They are very complex, and there are municipal authorities, provincial authorities and national authorities in China, all of which require different permissions. Each individual family situation is specific and different, so it requires a lot of intensive work.

I would like to assure the committee that our team is working very hard on behalf of Canadians and we want to find solutions for all of these situations.

Mrs. Tamara Jansen: Pierre, go ahead if you have one.

The Chair: You can have two minutes.

[Translation]

Mr. Pierre Paul-Hus: I see. Thank you.

Mr. Tanguay, have you had time to find the answer to my question about when the Government Operations Centre began operating?

Mr. Patrick Tanguy: Yes, it was on January 23.

Mr. Pierre Paul-Hus: Very good.

I'm trying to get a sense of how efforts are coordinated. Since the beginning, every aspect has involved the coordination of measures among the various agencies. When the issue relates to health, the Minister of Health is in charge, but when it pertains to public safety, you automatically have jurisdiction to oversee efforts in co-operation with the Canada Border Services Agency.

I'd like to know which minister is currently responsible for the Government Operations Centre.

Mr. Patrick Tanguy: It's Minister Blair. There are a few things that are important to understand, and that's why I was explaining how the federal emergency management system works. Each department and agency must have a plan, a system in place and levels of response. When a major event or one of national interest occurs, the Government Operations Centre can respond at different levels, as explained earlier.

Mr. Pierre Paul-Hus: In my notes, I wrote the word "doubt" in big letters. For Canadians, that's the word that comes to mind when we talk about the centre's effectiveness. From what you've told us thus far, I understand that your organization has been brought into service.

Are there any problems within the Government of Canada related to the centre's launch? My sense is that other countries have quicker response protocols and that, in Canada, we tend to work in silos. Are there things that need changing before the next event occurs?

Like Canadians, we felt the response was slow in coming. Is it the way you operate that makes it seem so?

• (1705)

Mr. Patrick Tanguy: I'm not the best person to answer that, but I can tell you that the public won't necessarily know what the response level is. For instance, if the Government Operations Centre response is at a level 1—enhanced monitoring—the public won't necessarily be informed. The Government Operations Centre was brought into service on January 23. However, I don't think I can give you a satisfactory answer to your question.

Mr. Pierre Paul-Hus: When it comes to emergency preparedness, these are questions that will need to be revisited to figure out how best to proceed in situations like these.

[English]

The Chair: Thank you.

We'll go now to Dr. Powlowski for five minutes.

Mr. Marcus Powlowski (Thunder Bay—Rainy River, Lib.): Thank you, Chair. I think I'm going to share the questioning with Darren.

I have one big question. You seem to be gaining all of your identifying of passengers—asking questions, following them up—specifically with people from Wuhan or Hubei province. I would question why you're limiting it to this group rather than all of China.

I know that China has done very well. They're trying to lock the door, but I question whether the horse hasn't already bolted to the rest of China. There are two other provinces that have over 500 confirmed cases of the novel virus. There are a bunch of provinces with over 200 confirmed cases of the virus.

According to the New York Times, between October and November there were two million flights of people from Wuhan to other places in China. Remember, we're two weeks behind because of the incubation period of up to two weeks. If you already have 600 or 700 cases in some other provinces, have you considered the possibility that the horse has bolted and that we ought to be doing the same thing for anyone who is coming from China? If we haven't done that, why aren't we considering extending these same sorts of precautions to anyone coming from China?

Mr. Paul MacKinnon: I appreciate the question, Mr. Chair. Again, I would preface any comments I make with the fact that it's really a Public Health decision to make.

From our perspective at the border, we're constantly looking at different options. As I mentioned earlier, if we were in a position where the health authority were to say that we should have a different line of questioning...and you've suggested one particular line that you think is important.

Mr. Chair, we take note of that comment, and any change in status from our perspective would rest with Public Health to make that decision.

The Chair: Darren, you have two minutes.

Mr. Darren Fisher: Thank you very much, Mr. Chair.

I want to thank you folks for being here with us for a couple of hours today and imparting all this wisdom. I want to thank you for the work you have been doing.

The questions that were asked here today by the committee members were all really good questions. I have to say that I've been on committee for four years, and what I'm hearing from the committee members is concern for Canadians.

Mr. Paul-Hus and Mr. Davies touched on reaction time and preparedness for repatriation.

Ms. Jeffrey, you did an excellent job outlining the complexity of this situation. You made a comment that a week ago next to no one was registered as living in that region. It is fascinating that now we're at over 300 people. Had we sent a plane this time last week, there would have been nobody to get on that plane.

Ms. Jeffrey, could you maybe outline this a little bit? You talked about visas. You talked about the lack of a consulate. You talked about some of these things, and maybe just to get them on the record you could talk about how difficult it is to find those folks and find out if they want to come home.

Ms. Kwan was asking questions about family unification—important stuff that makes this so complicated. Then there is dealing with the Chinese government, which said at the outset that if people didn't come in with a Canadian passport, they were not going home.

I wonder if you could just touch on some of those complexities. We may run out of time, and if we do, I think there is another seg-

ment coming up that is mine, but could you, just for the record, touch on some of those complexities? I think we went from two to 20 to 25.

• (1710)

Ms. Heather Jeffrey: I would say that this is a common feature of a lot of our emergency responses. We have a registry of Canadians abroad. It's voluntary. People can let us know when they travel where they are going to be so that we can reach out to them in the case of a natural disaster or a sudden emergency.

We know that not all Canadians choose that service, for different reasons. They tend to choose to register when they go to places where they expect to have trouble—more difficult, more complex, more hostile environments—and not in places where they are very comfortable and feel safe. That particularly applies to people who are visiting family and relatives, etc. They tend not to think that anything is going to happen.

Part of our consular policy outreach is to encourage that, to bring more awareness to that, to understand where people are so that we can have a better initial picture of exactly what the environment is like when an emergency strikes.

In this particular case, having a presence on the ground is really critical, not just to understanding where Canadians might be but to engaging quickly with local authorities to start unblocking some of the things that get put in place particularly in a health crisis like this, in which there is a lot of anxiety and fear and you have a government that has taken quite extreme, unprecedented measures to lock down particular regions and cities.

That has created a lot of the issues we have, even in terms of the permissions we needed to get from the Government of China to move staff into the area. It's not just that people couldn't get out. Our staff was also not allowed in because the border around the province was sealed and closed. We had to move staff there by road. We had to make sure they had the right protections. We had to have all the right authorities, not just national but also provincial and municipal. That's one example.

It is really this very detailed consular work with families that is so important to determining what people's needs are, and then to figuring out, as the Government of Canada, how we can address them, because each family situation is very different.

In the case of the children, which we have discussed at length here today, there are particularly good examples of that with very different family configurations, including people with grandparents who aren't able to travel, and we're working case by case to figure out the best way for us to assist them.

It isn't a one-size-fits-all solution. Even though it looks like sending a plane is the one-size-fits-all solution, when you unpack everything below that, there is a lot of information that has to go into it to allow us to do the work with local authorities in an environment where we don't control all the elements, to make sure that they are facilitated in getting to the airport. The plane is actually not the most complicated part. The most complicated part is getting Canadians from across this province to the place where we can reach them directly and help them to exit.

All of these are things we've been working on. Each response provides a lot of lessons learned. They are all different, and we'll be unpacking this as well. In this particular environment with a pandemic response of this nature, it's the first time we've had to assist such a large number of Canadians within a quarantine zone. Responses to SARS and Ebola were emergency responses as well, but they were of a very different nature.

We're working with our allies. In particular, I have daily calls with my counterparts from all of our like-minded countries, who are all mounting these operations. We are sharing lessons learned. We are working to facilitate the departure of each other's nationals on our planes, and to make sure that we are advocating jointly where possible to unblock some of the challenges that municipal or local governments have put in place. Those are in place for maybe very good reasons on the China side, but they pose challenges for us as we help our nationals to depart.

That international dimension of the work is very important, and we've had very good, close collaboration with our allies on that.

The Chair: Thank you.

Mr. Darren Fisher: Thank you for your Herculean efforts. We appreciate them.

The Chair: We go now to Mr. Kitchen for five minutes.

Mr. Robert Kitchen: Thank you, Mr. Chair.

My colleague brought up the reality that all of a sudden we're identifying a lot more people now than we were a week or so ago. That's of concern in the sense that perhaps there are more Canadians there. As we are aware, most Canadians don't tell Global Affairs that they're out of the country.

One of the concerns might be the fact that people are saying they're afraid of cost. I'm wondering what you are saying or what will be said to people travelling, on being evacuated out of there, as to what the costs will be. Are they going to be expecting a bill when they get back, so the Visa bill comes in and here it is?

What have you told Canadians in this evacuation?

Ms. Heather Jeffrey: In this case, given the context, the lack of commercial departure options, and the absolute need for the Government of Canada to facilitate and support the exit, a decision has been made that we will not be recovering the costs of this evacuation. It's being offered as a humanitarian measure to support Canadians and their families, so cost will not be an obstacle for Canadians who wish to depart.

• (1715)

Mr. Robert Kitchen: Thank you.

Can you tell us what's in place or what needs to be in place for someone, let's say, who is not a Canadian citizen or a permanent resident if they are found to be inadmissible into Canada?

Ms. Heather Jeffrey: We work very closely with our partner agencies, in particular IRCC and CBSA. CBSA has officers also deployed in Wuhan. We will be working with those agencies to ensure that all passengers are properly documented, that they have the right authorities and that all the appropriate checks have been given. This is standard in any natural disaster or other emergency evacuation.

To make sure that those procedures are done, we do them in a very agile way, very directly, often in situations—for example in earthquake or hurricane responses—where there aren't even the usual systems in place, but they're done thoroughly, effectively and directly with phone calls and connections back here to make sure that people are properly documented and that the right checks have been done, but that they're done at a speed that allows them to use the departure option that's been provided.

Mr. Robert Kitchen: Thank you.

Mr. McCrorie, you indicated that you've communicated with air carriers and you've informed them of measures that the Government of Canada is implementing. Can you tell us what those measures you informed them of are?

Mr. Aaron McCrorie: Again, we're playing more of a facilitative role. The first, as I think Mr. Vinette alluded to, is to require pilots on aircraft, when somebody is identified as potentially having symptoms, to immediately notify the air traffic control system so that when they arrive, the system here in Canada will be ready for anybody who shows up displaying symptoms.

The second part is to ask airlines—there are 10 now, but there were 11—flying directly from China to Canada to make an announcement prior to landing to inform passengers of the new arrival procedures to facilitate and help our colleagues in CBSA process people as they arrive.

Mr. Robert Kitchen: I'm assuming you mean that the flight crew would notify the pilots, who would then notify you. Is that correct?

Mr. Aaron McCrorie: Do you mean if somebody demonstrates symptoms on the aircraft? That's correct. Regardless of how the captain of the aircraft becomes aware, it is their responsibility then to inform air traffic control, who will then notify us, and then we'll notify.... It's about making sure that the right information gets to the Public Health Agency of Canada so they can greet the aircraft upon arrival.

Mr. Robert Kitchen: I'm going to share with my colleague.

The Chair: You have one minute.

[*Translation*]

Mr. Pierre Paul-Hus: In the span of 12 days, January 22 to February 2, a total of 18 people reported feeling ill. I asked this question earlier. This past Saturday alone, 37 individuals reported feeling unwell in secondary airports. We can therefore deduce that, over those 12 days, there were probably many arriving travellers who did not report that they felt ill.

Can you speak to that?

Mr. Denis Vinette: I'm not sure the number is actually 37, but there were 18 individuals nationwide. That includes the new airports added on Saturday, where passengers are being asked the screening question. These are people who were referred to the Public Health Agency of Canada, which made the appropriate decisions regarding next steps. Three of the individuals were referred to medical services.

Mr. Pierre Paul-Hus: In the span of 12 days, 18 cases were reported. In the span of a single day, Saturday, 37 cases were reported. That's what we heard in your opening statement. Thirty-seven cases were reported in Quebec City, Ottawa, Edmonton and other secondary airports.

Mr. Denis Vinette: Those were people who indicated that they were—

Mr. Pierre Paul-Hus: Yes, those who reported feeling ill.

Mr. Denis Vinette: —in Hubei province, not—

Mr. Pierre Paul-Hus: —who had been there.

Mr. Denis Vinette: That's correct. That represents 37 cases, but 18 is the number of cases in which—

Mr. Pierre Paul-Hus: I see.

In those cases, did you have cause to enforce section 18 of the Quarantine Act and arrest anyone?

The Chair: Thank you, sir.

[*English*]

Your time is up.

We go now to Mr. Kelloway for five minutes.

Mr. Mike Kelloway: Thanks so much, Mr. Chair.

Like my colleague next to me, I want to thank you for your efforts. It's an educational moment for me as a committee member but also for Canadians, I think, to see the integrated fashion of how we do what we do. I really appreciate all the efforts.

This question is around human rights. Have Canadians in China reported any human rights concerns regarding the travel restrictions they face in the province of Hubei?

• (1720)

Ms. Heather Jeffrey: In terms of the consular response, we've not received any reports that I'm aware of on human rights concerns. People have informed us that they are subject to general restrictions amongst the population in terms of their ability to leave and depart Hubei province.

The calls we've received on the consular side have been focused on the need for government assistance to help them depart a quarantined zone.

Mr. Mike Kelloway: In terms of numbers, what is the volume of those types of requests, comments or questions?

Ms. Heather Jeffrey: Do you mean in terms of the numbers of calls that we receive?

Mr. Mike Kelloway: Yes, it's calls or comments and things of that nature that may come your way from people there.

Ms. Heather Jeffrey: I don't have the exact numbers here.

Mr. Mike Kelloway: Is it hard to gauge?

Ms. Heather Jeffrey: We receive thousands and thousands of calls. We have 50 people receiving calls on a 24-7 basis, and they're busy.

Mr. Mike Kelloway: I would imagine they are, for sure.

Thank you.

The Chair: You have three and a half minutes.

Mr. Mike Kelloway: Boy, I might be hitting a record here for questions asked in a committee, but that's fine.

For me and for people watching, regarding the consular services and supports that are available for Canadians in China, what are the average services you provide to Canadians in China that we should be aware of?

Ms. Heather Jeffrey: There's a really wide range of consular services provided, ranging from a very routine provision of information all the way through to complex consular case support in cases of detention, illness, death abroad and a whole range of difficult situations in which Canadians can find themselves when they travel.

Our responses are tailored to the individual case. There isn't a one-size-fits-all solution. Our officers have one of the most challenging jobs in our department in terms of dealing with families who are often in great distress. Family members here in Canada often have a high level of anxiety, especially when they're separated from their relatives and loved ones who are in a difficult situation abroad. We work both with families here in Canada and directly with the clients on the ground.

Typically, it's our missions and consulates that engage directly with the clients. From headquarters, we do our best to work with families to facilitate the flow of information. In cases of medical emergencies and illnesses like the ones associated with the coronavirus, we refer them to hospitals, we can help find translation services and we can liaise with insurance companies.

There is a really wide range of assistance. Our officers are trained to look for solutions.

Mr. Mike Kelloway: It's a bit of a one-stop shop for a lot of different requests and services.

Ms. Heather Jeffrey: Yes. Then we can be the connecting point to the other agencies in the Government of Canada that might need to provide support, whether it's on border services, immigration or other aspects. We're the family liaison focal point for Canadians.

Mr. Mike Kelloway: Thank you so much.

How much time do I have, Mr. Chair?

The Chair: You have a minute and a half.

Mr. Mike Kelloway: There you go. If I can, I would like to defer to my colleague next to me.

Mr. Marcus Powlowski: Hopefully this is a quick question. Has there been any consideration of possibly triaging, of separating people on the plane according to their risk? I would think that some people have been in close proximity to people who caught the coronavirus but are as yet asymptomatic, and there are other people with basically no contact.

Given the possibility and the unconfirmed reports out of China that it is contagious during the asymptomatic period, the incubation period, have you considered the possibility of putting those who you think are more likely to end up being infected in a different part of the plane than those who haven't been exposed?

Ms. Heather Jeffrey: We've been working very closely with our colleagues at Health Canada and the Public Health Agency of Canada to develop guidance, procedures, protocols and training for our staff, not just those who are at our embassies and consulates in China, but also those who are going to be on the plane and are on the ground. We will have a full DND medical team of six doctors and nurses who are going to be on board and provide that kind of care, and there is going to be a questionnaire administered as part of their screening.

As I mentioned, even to access the airport there is a three-kilometre perimeter where the Chinese government is maintaining quarantine controls. There will be Chinese medical screening. They will be checked again by Chinese doctors at the airport. There are a number of protocols. Once they are approved through exit controls, they will be rescreened by the DND medical team before boarding, and there will be a questionnaire also applied there that will touch on what contacts they've had, etc. Then we will take the guidance of the DND medical staff about how to arrange things on the plane appropriately.

- (1725)

The Chair: Thank you.

We'll go now to Mr. Thériault for two and a half minutes.

[Translation]

Mr. Luc Thériault: Thank you, Mr. Chair. I'll try to keep it short to have time for a long answer.

From the time that the World Health Organization, or WHO, declared a global health emergency regarding the coronavirus, I would assume that, territorially, border crossings were of the utmost concern. After all, the virus has a 14-day incubation period and carriers of the virus can be asymptomatic.

When the WHO deemed the situation a global crisis, did you take any specific measures vis-à-vis our neighbours to the south or have any relevant communications with them?

[English]

Mr. Paul MacKinnon: We certainly speak with our American colleagues, Mr. Chair, on a regular basis. We spoke to our colleagues at the CBP, the Customs and Border Protection agency, just before coming here this afternoon. We're in constant communication with them, certainly with their decision over the weekend to ban some flights coming in from China and some passengers coming in. We talk to them on an ongoing basis.

[Translation]

Mr. Luc Thériault: In the space of 14 days, a person can return from China and travel to the United States through a Canadian airport. Therefore, did you take any specific measures in Canada to prevent the secondary spread of the virus?

Mr. Denis Vinette: We work very closely with the United States. I'm in contact with my American counterpart. We have very similar screening processes for travellers arriving at the border. When they enter the United States, they are subject to the same screening measures. One of the reasons why we expanded the health screening question to 10 airports is to also screen people who have been to the United States.

Mr. Luc Thériault: Is that the case at land border crossings as well?

Mr. Denis Vinette: No.

Mr. Luc Thériault: Airports aren't the only places these people pass through.

Mr. Denis Vinette: Officers at land border crossings have the same information as those working in airports, but they weren't given a mandate to put the screening question to travellers. Their information comes from the Public Health Agency of Canada.

We work with our American counterparts to ensure our approaches are consistent with one another. If anything happens in the United States, the authorities there will notify us and vice versa. We are in daily contact to stay abreast of what is happening on both sides of the border and to prevent infection on either side.

[English]

The Chair: Thank you.

Mr. Davies, you have two and a half minutes.

Mr. Don Davies: Thank you, Mr. Chair.

By my count, outside of China, there are at least 24 countries that have reported a case of the coronavirus. To pick up on my earlier question about WHO expressing concern about the ability of some countries to handle the virus, does Canada have a list of countries of specific concern?

Mr. Paul MacKinnon: From our perspective, Mr. Chair, at the border we do not have such a list. I don't know if colleagues....

Mr. Don Davies: I'm seeing them nodding no.

Okay. Thank you.

Is the CBSA using thermal scanning to screen higher body temperatures related to coronavirus infection?

Mr. Paul MacKinnon: I believe not, Mr. Chair.

Mr. Don Davies: This was a one-off case, maybe. According to a January 31 article from CBC News, a Canadian physician said he developed a nasty cold with cough and runny nose while on a flight from Hong Kong to Toronto. He is questioning whether there are adequate safeguards to stop the spread of coronavirus in Canada. His name is Massey Beveridge. He is a retired surgeon. He said he was waved through Pearson International Airport even after reporting the symptoms to a border services agent.

Are you aware of this news report, and if so, does it concern you?

Mr. Paul MacKinnon: Mr. Chair, for privacy reasons, I wouldn't want to speak about a specific individual.

Mr. Don Davies: He went public to CBC.

Mr. Paul MacKinnon: Still, Mr. Chair, we would not get into the particulars of an individual's case at an airport. We feel confident that our assessment process, which we described earlier, is working in terms of referrals to PHAC.

• (1730)

Mr. Don Davies: Without getting into that particular case, just hearing the description of the event, does that situation cause you any concern? What would you tell the committee about the effectiveness of the screening process, if that's indeed happening?

Mr. Paul MacKinnon: Generally, Mr. Chair, we discuss all kinds of cases that are happening at the border on an ongoing basis to see, as in my earlier answer to a question, if there are ways we should be working to improve. We are constantly asking ourselves those questions, in a general sense.

Mr. Don Davies: What support will the Government of Canada make available to Canadians in China who cannot be evacuated because they are exhibiting respiratory or other flu-like symptoms?

Ms. Heather Jeffrey: At the moment, we don't have any such cases, but we're alert to them.

The Government of China has a policy of trying to contain this virus through quarantine and through exit controls around provinces and cities. For example, if an individual is found at screening to be symptomatic, they are going to be referred to the Chinese medical system, the health clinics and the hospitals that are being set up to treat this virus.

Our support on the consular side would be to keep in touch with those persons, with their family, to make sure they have access to the necessary things they need and to facilitate. We would deal with it on a case-by-case basis, with linkages to insurance companies, and work with local authorities. It's hypothetical at this stage, because we don't have any such case, but there are a wide range of

tools we have at our disposal to engage. Whether it's directly or even remotely, in cases where we're not able to access that particular area, we have some contingency planning for those things, but we currently don't have a case where we've had to use those supports.

The Chair: Thank you. That brings our third round to a close.

I'd like to thank all the witnesses for being here, for giving us such excellent information and for spending time with us today.

For our next meeting, which is Wednesday, we currently have a couple of confirmed witnesses. I was wondering if we want to ask the clerk to invite Dr. Tam to return for further questions.

Some hon. members: Agreed.

The Chair: Thank you. We will extend that invitation as well.

I would also like the committee to consider, once we're done with these important briefings, what we're going to do as a committee going forward. We need to have a work plan. We need to consider what studies we want to do.

I've asked our analysts to prepare a précis of studies that have been done by this committee over the last two Parliaments. They will share that with the committee when it's available. That will give you some ideas of where we might want to go with our studies.

Mr. Tony Van Bynen: Mr. Chair, when you say next Wednesday, do you mean the break?

The Chair: No, I mean this coming Wednesday, our next meeting.

The meeting is adjourned.

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