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Chair: Mr. Sean Casey



Standing Committee on Health

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• (1635)

[English]

The Chair (Mr. Sean Casey (Charlottetown, Lib.)): I call the meeting back to order. The health committee is now meeting in public and in a hybrid format pursuant to the House order of November 25, 2021.

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Colleagues, we are in committee business. There are three things that I hope we will be able to accomplish aside from anything else you may wish to raise. Perhaps I could just tell you what they are. If we could dispense with them right away, that's fine, if that's the will of the committee.

First, we need to set a deadline for witness lists for both the COVID and the health workforce studies. The clerk has suggested five o'clock this Thursday. That way invites can go out on Friday for witnesses to appear after the constituency week.

Second, around three o'clock eastern time, you would have all received some study budgets. It mostly hits at some shipping for the two studies. If we could dispense with the study budgets, that would be appreciated.

Third, perhaps we could also basically agree on the order of studies after the constituency week in terms of which day is COVID, which day is the health study.

Those are three housekeeping matters. As we are in committee business, now is the time to raise anything else you wish.

I recognize Dr. Powlowski.

Mr. Marcus Powlowski (Thunder Bay—Rainy River, Lib.): Thank you.

I had my hand up before, as I wanted to be the first in before the rancour starts and the mud starts getting thrown. I have a big pile of mud waiting to be thrown, too.

In continuation of our previous conversation as to where we're going with the committee, I agree with Don. I think at least for the first little while we ought to be keeping an eye on what the issues are with COVID. I agree with Don that it is constantly changing. I think that's why it's important that the health committee spends half its time still looking at COVID, given that this has been the biggest health issue of the last, what, 100 years or something. No, I can't

say that. I'm forgetting HIV/AIDS, which I think was probably as big if not better.

The other thing I think we want to do initially is to have—

[Translation]

Mr. Luc Thériault (Montcalm, BQ): Sorry to interrupt, but the interpretation can't be carried out because the sound isn't sufficient.

The Chair: Thank you, Mr. Thériault.

• (1640)

[English]

I'm not sure, Dr. Powlowski, whether it may be a problem with your mike placement.

[Translation]

Can the interpreters provide any advice?

[English]

Mr. Marcus Powlowski: How is it now with my mike at my nose?

The Chair: Are we able to get interpretation?

The Clerk of the Committee (Mr. Naaman Sugrue): Mr. Chair, I suggest that Mr. Powlowski unplug his mike and plug it back in. There's just some static interference that's not normal.

Mr. Marcus Powlowski: How's that? Is it any better?

The Clerk: We'll just have him raise it a bit and continue.

Mr. Marcus Powlowski: Okay.

Now where was I in my soliloquy here?

I think this is a good opportunity maybe—oh, and Arnold Viersen's here.

Welcome, Arnold, to the big leagues. You finally made it to the health committee.

Mr. Arnold Viersen (Peace River—Westlock, CPC): Yes. I was wondering when I'd get my bucket of mud.

Mr. Marcus Powlowski: To continue, though, I think now it is a good opportunity to review where we are with COVID. Omicron really changed the equation. It changed the equation in terms of a couple of things. It certainly is more contagious, although somewhat less virulent, and certainly a lot of people have had it.

I think where we are right now is very different from where we were two years ago. In the initial first or second day, I would like to hear from the experts, both the epidemiologists and infectious disease people, as to how they see omicron changing the equation and where we are both nationally and internationally with respect to the virus.

Also, if I can get a little politics in here, I'd like to say that personally I think this is the time where we should, as a nation, be starting to feel a little bit of joy. We're coming out of omicron. Things were already getting better before omicron, and a lot of the health measures were being dropped. Omicron, obviously, set us back somewhat. It was a bump in the road, but now with omicron numbers coming down....

If you look at other countries, they had a sharp spike, and it's coming down. The virus has mostly mutated to a less virulent form. I think we should be happy. It really bothers me that there's all this rancour right now and that we are at each other's throats when things look pretty good in terms of dropping a lot of the mandates and getting back on our way to normalcy.

Let's talk initially about where we are, and then afterwards—I do agree quite a bit with Stephen Ellis—about where we go and talk about omicron preparedness. I think that is a useful approach to start with.

This is my last little political shot. We've gotten here. We've done pretty well so far. The fact that we've had one-third the death rate per capita of the United States means that, rather than having 90,000 dead Canadians, there are 30,000. It is far too many, but we have done well so far. It's not over yet, but so far, compared to most countries, I think we've done exceedingly well, and that's because of all Canadians.

That includes a lot of the people who are out there in Ottawa. I know quite a few of them have been vaccinated, and a lot of them have been involved in the shutdowns. Thanks to all Canadians, we are where we are, and we've saved so many people. I'd just like to acknowledge that at the beginning because I wish we'd get over our arguing and get on with life. Thanks.

The Chair: Thank you, Dr. Powlowski

Dr. Ellis, please.

Mr. Stephen Ellis (Cumberland—Colchester, CPC): Thank you, Mr. Chair.

Certainly, as we've come to this planning meeting, there are two things that come to the forefront. One is the business that you brought forward, sir. I would at some point like to dispense with that so that we can again get to the business of the committee. Second, for the first meeting that we're back after constituency week, I would think it's important to have PHAC and the AG here to talk about some very specific things, such as the prevalence of COVID worldwide, vaccine rates worldwide, vaccine mandates, restrictions worldwide, vaccine passports worldwide and what we are doing with respect to the future here in Canada. I think that's important for Canadians. The information we would glean from having PHAC and the AG here would be essential to help us understand that and answer those questions.

With respect to the time here in the committee, from this side of the room, I would suggest that we dispense with those things the chair had recommended and continue to move forward as we've been able to in the last couple of meetings.

• (1645)

The Chair: Thanks, Dr. Ellis. It's greatly appreciated.

The first item of housekeeping is a deadline for finalized witness lists for the COVID and health workforce studies. As I indicated, the clerk recommends five o'clock eastern this Thursday so that invites can be sent out Friday.

Is it the consensus of the committee that the deadline for finalized witness lists for both the COVID and health workforce studies be Thursday at 5 p.m.?

Mr. Don Davies (Vancouver Kingsway, NDP): Mr. Chair, I just have a point of clarification.

The Chair: Absolutely. If there isn't consensus then we should talk about it. Go ahead, Don.

Mr. Don Davies: Thank you.

I'm just confused about the question.

You're asking for a final list of witnesses for the health care human resources study. Are you also asking for a final list of witnesses for the COVID component of our work?

The Chair: Yes.

Mr. Don Davies: Okay.

The Chair: Is it too premature?

Mr. Don Davies: I might just say that I think we're all a lot more developed on the human resources part of it. At least I am, so I wouldn't have any difficulty doing that. Of course, there are six meetings.

The thing about the COVID study is that it could go until June. I guess I have a little bit of difficulty with the final part of it. I think what we can do is ask every party to throw in a healthy dose or crop of witnesses so that the clerk can schedule for the first couple of months. I don't think that should be final at this point.

The Chair: I think that makes eminent sense. Let's take out the word "final" and ask for witness lists to be submitted on the understanding that supplementary witness lists could be warranted at a later date. Thanks for that.

Is there any other discussion on the deadline for witness lists?

The Clerk: It seems everyone in the room agrees with your suggestion of removing the word "final", Mr. Chair.

The Chair: Great. Is everyone okay with the non-final witness lists being submitted on Thursday?

Some hon. members: Agreed.

The Chair: Okay.

Are we good on the screen? Are there any other interventions on the topic?

We have a deadline for witness lists. Okay, good.

Now, at about 3:00 p.m. eastern, you received proposed budgets for the upcoming studies for headsets and shipping. Let me get mine in front of me. It was at 3:03 p.m.

Is there any discussion with respect to the proposed budgets for the health workforce study? We'll take that one first. Can we then adopt, by consensus, the budget as presented?

(Motion agreed to)

The Chair: We have consensus. Thank you.

For the proposed budget for the emergency situation of the COVID-19 pandemic study, can we adopt that budget as presented? Is that the will of the committee?

(Motion agreed to)

The Chair: We have consensus. That budget is adopted.

Once we reconvene after the constituency week, is it the will of the committee to have one day allocated to the COVID study and one to the workforce study? Should that be Mondays for COVID and Wednesdays for the workforce study? Unless there are circumstances that require us to deviate from that, we'd take that as the general rule. We'd proceed on a consensus basis to plan that work that way.

Some hon. members: Agreed.

The Chair: We have consensus in the room, as we do on the screen.

The housekeeping is done. The floor is open.

Mr. Lake.

Hon. Mike Lake (Edmonton—Wetaskiwin, CPC): I wasn't sure if my colleague Mr. Ellis actually....

Oh, you just proposed disposing of the other ones. Okay.

Going back to the conversation we were having, it's tricky, because we were in camera. I can't refer to what we talked about in camera. I can't say whether I agree or disagree with anybody on what we said previously. Thankfully, we moved to public.

We as a health committee have an opportunity. I agree with Mr. Ellis's suggestion that we start on the Monday when we come back with the Public Health Agency and the Auditor General. Then we're gone for two more weeks before we have a meeting on COVID. We have lots of time to call witnesses. The situation four weeks from now will have evolved. It's been evolving and will have evolved, no doubt. We can all see that there is a very wide range of views right now, in our country, around Canada's COVID approach. As a com-

mittee, we're well placed as parliamentarians, representatives of Canadians, to do work that is a little bit different from the work done, for example, when Dr. Tam briefs Canadians and is asked questions by the media, or whatever the case may be. We might ask different questions on behalf of Canadians. That goes for all of the witnesses who would come before this committee. I would suggest that as we think about our work plan, we be nimble, to use a word that's been used, recognizing our unique position as parliamentarians.

I would suggest that we as parliamentarians have an opportunity to represent our constituents, with the witnesses we bring and the spotlight we bring, and to ask the questions that are on the minds of Canadians. The questions might be different depending on where we are in the country and who it is we represent, but if we do the work that I trust the members of this committee, from all parties, want to do and are dedicated to doing, I think we have an opportunity to perhaps bring some clarity at a time when clarity has never been needed more.

We have some people on this committee who have significant expertise in health and significant expertise in lots of other areas as well.

That's my two cents' worth as we consider the avenues moving forward after the first meeting—that we leave ourselves some room to be flexible, since the second meeting is still four weeks away, and we have no idea what the circumstances will be at that point in time.

I've found that in the last couple of weeks members of this committee have had some really good conversations—personal, individual conversations behind the scenes to try to find ways to work together. I've really appreciated that. Hopefully we can come together in that spirit, not only next week as we have that meeting and the other meetings we'll have next week, but also as we move towards coming back after the two-week break period.

● (1650)

The Chair: Thank you, Mr. Lake.

Mr. Davies, go ahead, please.

Mr. Don Davies: I have just a brief point to make. It would probably be helpful, when we're bringing our witnesses, to rank them, or at least put them in the order that we'd prefer them to be called, to give the clerk some helpful guidelines as to which ones.... Sometimes they're not available, so you just go to the next one. It's generally understood, but I thought I'd mention that.

The other thing is that I'm trying to get my head around the schedule. Mike talked about four weeks from now. Of course we have a break week next week, and we come back the week after that. Mr. Chair, can you clarify what is going to happen in that week?

The Chair: I'm going to give you my best guess, Mr. Davies, and then I'll ask the clerk to correct me.

This coming Wednesday, we will kick off our workforce study, for which the notice of meeting has just been published with our witnesses' names.

The week back, if Monday is COVID day, the suggestion that appears to be gaining support is that we have a briefing from PHAC and, of course, the Auditor General. At this stage, we don't have a plan for March 2, except that it will be the workforce study, and witnesses from the list that will be submitted by this Thursday will be invited.

I believe that's the plan, thus the comment that it will be four weeks before we get back to the COVID study, because the only meeting we'll be spending on the COVID study, if the current sentiment of the committee holds up, will be a briefing.

Am I close to being on track, Mr. Clerk?

• (1655)

The Clerk: Yes, that's right, Mr. Chair. After the anticipated meeting with PHAC and the AG on the COVID study on February 28, the next opportunity for a meeting on that study would be March 21.

The Chair: Mr. Lake?

Hon. Mike Lake: A quick point of clarification. It's actually five weeks. My bad.

The Chair: Mr. Davies.

Mr. Don Davies: Given that, I'm just wondering—taking Mike's point—why we're having to get our witnesses by this Thursday for that study. It would seem to me that we should probably get the deadline for that two weeks hence, so that we're closer to when the witnesses are going to testify, to respond to Mike's very accurate comment that we don't know what the issue is going to be four or five weeks from now. Why be in a hurry to get the witnesses by this Thursday if they may not be responsive to the issues of the moment then?

I know we passed a motion on it, but I would suggest we revisit the deadline for the witnesses on the COVID study and maybe do it two Thursdays from this Thursday. That gives the clerk about three weeks, if the five weeks is correct. It still gives the clerk three weeks to line those witnesses up and begin scheduling them.

The Chair: Thank you, Mr. Davies. It sounds eminently reasonable to me. Can we, by consensus, agree to proceed in that fashion, or do we need to debate that?

Okay. It appears that the committee is completely on board with you, Mr. Davies, so consider the deadline moved back.

Dr. Hanley, please.

Mr. Brendan Hanley (Yukon, Lib.): Thank you.

I really appreciate all of the wise and sensible comments around the room. There is almost nothing to argue about.

One thing I wanted to throw out there... There certainly are some emerging themes, and I would really encourage that we have witnesses at least roughly aligned to themes rather than call a witness and see what they say. Certainly, having lots of voices as Mr.

Davies suggests makes a lot of sense, as long as they're reasonably channelled into some of the themes.

Just to reiterate some of the themes I'm hearing, again, preparedness is one, and if you don't mind,

[*Translation*]

Mr. Thériault, there's also endemicity.

[*English*]

I think that's a really important theme area that we could address because it really begs the question of not only what it takes to live with endemicity, but what it is. I think we have to move beyond the notion that endemic means mild or that it doesn't really matter very much anymore. I mean, endemic could still mean that it takes a lot of resources to contain almost inevitable surges of activity and new variants, etc., but I do think it's a really interesting theme to explore. I think that's a very wise suggestion from Monsieur Thériault.

I think preparedness, endemicity and that nimbleness are starting to look like a trajectory that we can all agree on, so that we can pivot to whatever comes at us, considering that we're looking months ahead of us.

The Chair: Thank you, Dr. Hanley.

Dr. Ellis, please.

• (1700)

Mr. Stephen Ellis: Thank you, Chair.

The only concern I have is on the development of these ideas here: What's the usefulness thereof? My concern is that because of the way things have been going in this committee, we certainly cannot consider ourselves nimble or as having the ability to answer questions quickly. That would be my main concern, Mr. Chair, with respect to those things.

I really would like to think that we have the ability to influence policy and, for instance, talk about preparedness and to have Canadians be communicated to on what the plan for the future may look like. My concern is that we spend a lot of time back and forth on the kind of mundane things we're doing here in this committee, and really without much action.

In the spirit of co-operation, if that's really what the will of all of us here is—to be nimble and to be able to create plans for Canadians and have them hear from the best experts—then I think we need to do that. However, the greater concern, of course, is that when you look at our schedule, our first meeting on COVID is going to be five weeks from now. That's not really going to be helpful.

Quite honestly, I think everyone here at this meeting knows that we are in the throes of things that have happened in Canada that have never happened in the recent past, whether that be a pandemic, whether that be mass protestations outside our place of business or whether that be someone deciding to use the Emergencies Act. We're not being able to respond to those things in a nimble fashion, and my concern is that calling ourselves "nimble" is a bit of a misnomer, because certainly we haven't proven to be nimble.

Thank you.

The Chair: Thank you very much, Dr. Ellis.

There being no one else on the speakers list, if I could, I'll attempt to summarize where we are and see if we need to continue.

I believe what I'm hearing is that two of the themes that will form part of our study on COVID are preparedness and the question of pandemic/endemic, and we have agreed that we won't be hard and fast on themes because this is a fluid and developing situation and we need to be able to adjust the witness panels and the topics we discuss to allow for that fluidity.

I believe that would be a summary of where we are. Other than that, I believe there is consensus that we will have the Public Health Agency of Canada and the Auditor General at our next meeting on the COVID study.

Is that a fair summary of where we are, colleagues?

I see Mr. van Koeverden.

Mr. Adam van Koeverden (Milton, Lib.): Thank you, Chair.

I think this has been productive, given our unnimble track record. Hopefully, we can be more nimble in the future and, hopefully, this spirit of collaboration can continue. Remarkably, I think we've finished our agenda for today. I think we have a good plan moving forward, although it's a little bit stop-and-start given the schedule over the next couple of weeks.

I remain available as parliamentary secretary to any member of this committee who would like to discuss anything with officials or the minister off-line in the interim period, because things are rapidly evolving.

On that, it's a little early, but it's getting dark out and I don't know what's going on out there, but if my colleagues would indulge me, I'd move to adjourn this meeting.

The Chair: That is not debatable. Is it the will of the committee to adjourn?

We have consensus in the room. Do we have consensus on the screen?

Okay. Thank you, everyone. We'll see each other again on Wednesday on the workforce study.

Happy Valentine's Day. We're adjourned.

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