

44th PARLIAMENT, 1st SESSION

Standing Committee on Health

EVIDENCE

NUMBER 002

Friday, January 14, 2022

Chair: Mr. Sean Casey

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(1300)

[English]

The Chair (Mr. Sean Casey (Charlottetown, Lib.)): I call this meeting to order.

Welcome, everyone, to meeting number 2 of the House of Commons Standing Committee on Health. Pursuant to Standing Order 106(4), the committee is meeting at the request of four members—and in this case, six members—of the committee to discuss recent COVID-19 developments.

Today's meeting is taking place in a hybrid format pursuant to the House order of November 25. As some members are attending remotely using the Zoom application, I would ask with regard to the speaking list that you to please use the "raise hand" function, which will make things run much more smoothly.

I would like to take this opportunity to remind all participants in this meeting that screenshots or taking photos of your screen is not permitted. The proceedings will be made available via the House of Commons website.

Without further ado, I recognize Monsieur Berthold.

[Translation]

Go ahead, Mr. Berthold.

Mr. Luc Berthold (Mégantic—L'Érable, CPC): Thank you very much, Mr. Chair.

I want to start by wishing everyone a happy new year. This is our first meeting of 2022, a year in which health care could be top of mind for many Canadians.

I also want to acknowledge the clerk, the analysts, the interpreters and everyone who works in this committee. I thank them for being here. This will be a good year together.

As you mentioned, six members chose to request this emergency meeting because Canadians are worried about everything going on with this pandemic. I think that everyone, regardless of political stripe, has observed these concerns. This is a never-before-seen situation that is getting out of control. Just a few weeks ago, people would know someone who knew someone who had had COVID-19. Now, people have gotten it themselves, along with their own families. That's what is happening. The impact we're seeing from the omicron variant is on a scale we've never seen before. The health care system and health care workers are stretched to the limit.

Furthermore, Canadians are experiencing a huge impact on their cost of living as a result of the lockdowns and restrictions. As a member of Parliament for a small region, I can say that many small businesses are struggling. I think we could all agree on that. Some of these businesses have given up, some will not survive and some are considering whether to shut down. Store shelves are empty and the cost of living gets higher by the day. Canadians want to know why they didn't have access to rapid tests when they needed them the most. It was very difficult to get a test during the holidays. Canadians also want to know when they will have access to treatments, which would help lessen the pressure on our health care system.

That's why we requested this emergency meeting. We think it's important to look at how prepared we were for the pandemic and at Canada's response to the omicron variant. I'm therefore urging the committee to adopt a motion today. I want to inform the members of the committee that this is the exact same motion that was sent in the letter, other than the date of the meeting. As you know, the meeting won't be held before 5 p.m. today, as stated in the first motion. This motion proposes that the meeting be held next Wednesday by the end of the day. The motion is as follows:

That the Committee hold a meeting to invite the Minister of Health, the Deputy Minister of Health Canada, the Deputy Minister of Public Services and Procurement, the President of the Public Health Agency of Canada, the Chief Public Health Officer of Canada, the Vice President of Logistics and Operations for the Public Health Agency of Canada, and the head of the National Advisory Committee on Immunization, to discuss recent COVID-19 developments including, but not limited to

Status of support for the provinces to address surge healthcare resources

Current advice regarding quarantine length

Availability of mRNA vaccine boosters, including procurement strategies for potential variant specific vaccines

Availability of rapid tests and status of public education on the same

Status of review and procurements of promising new therapeutics such as Pfizer's Paxlovid

Access to n95 masks and other PPE

Status of domestic manufacturing capacity for mRNA vaccines

That the meeting be at least three hours in length, that the relevant departments for which officials have been requested be invited and asked to prioritize their attendance but that the meeting not be delayed if they are unable to prioritize attendance at the meeting, that the total time allotted for opening statements be limited to 5 minutes by witnesses for no more than 20 minutes total to ensure adequate time for questions to be posed by committee members, and that this meeting be held on or before the end of day on Wednesday, January 19, 2022.

I hope that my colleagues will support this motion, especially because this topic is important to Canadians and affects our day-today lives. Thank you very much.

• (1305)

The Chair: Thank you very much, Mr. Berthold.

The motion is in order.

[English]

The debate is now on the motion.

I recognize Dr. Ellis.

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

Happy new year to everyone on the call today. I appreciate everyone's taking the time out of their busy schedules to understand the importance of what we're bringing forward to all committee members. We really believe there is a failure of federal leadership and ability to manage this pandemic.

What does that leave? Unfortunately, that leaves the provinces simply with the ability to continue to restrict and lock down Canadians. That is having significant negative impacts on mental health, suicide rates and people's ability to do business, etc.

When we realize that all we've given provinces is the lockdown mandate, all of the things that my great colleague Mr. Berthold mentioned—the potential for therapeutics and the rollout of rapid antigen testing—are going to be really important as we go through this pandemic.

We know we're almost into the third year now. We also understand there has been poor planning since the very beginning and that the acceptance in the early days of mRNA vaccines and the procurement thereof has been sadly lacking. Obviously, in the last several weeks, the use and procurement of rapid antigen tests has been sadly lacking. Finally, the domestic manufacturing of rapid tests, vaccines and PPE has been non-existent.

My dear colleagues, I would say that if we were in a wartime state now, we would be fighting a war without bullets and without guns. That's the type of footing we're on now and we're seeing these disastrous effects.

The other thing that's important to remind people of is the sad underfunding of health care. The poor transfer payments that we continue to see from the federal government to the provinces are unacceptable. We continue to blame lockdowns on the system, when the system has been sadly underfunded for such a terribly long time.

We all know there was a significant backlog in the system even before COVID happened. There is absolutely no way on earth that we're going to be able to catch up on the backlog at the current time, given the stress on the system.

All of those things packaged together, in my mind, point to a clear lack of federal leadership in the health system. They point to the significant need and the responsibility we all have here on the health committee to ensure that we update Canadians on what's going on, so that they can begin to have some hope moving forward. We know that the majority of Canadians have lost hope, and they've lost hope because there hasn't been good federal leadership.

Those are my points, Mr. Chair. Again, I appreciate everyone's taking the time to be here today.

• (1310)

The Chair: Thank you, Dr. Ellis.

Go ahead, Mrs. Kramp-Neuman, please.

Mrs. Shelby Kramp-Neuman (Hastings—Lennox and Addington, CPC): Thank you, Mr. Chair.

I'd like to start by lending my voice to why I think this particular meeting is needed. The way I see it, we are asking the minister to appear for two different, very separate reasons.

The original request was to have the minister deal with the runof-the-mill type of housekeeping that every committee deals with at the commencement of every session and, of course, a new Parliament.

We have the fall economic statement to discuss, as well as mandate letters, and the supplementary estimates, etc. I certainly doubt that our Liberal colleagues would dismiss any of these as being unworthy of committee time. I also doubt that they would dismiss the severity of this ongoing omicron variant that is sweeping across Canada and the world. It's certainly putting pressure on health care systems all over the world.

I am confident that Canadians at home watching this would agree that it deserves a dedicated meeting between us, the members of the Standing Committee on Health, and the minister. As members of this committee, we need to be able to do our jobs. Right now, that requires the minister's undivided attention, which I am certain he'd be more than happy to provide.

There's another unique benefit for our meeting here on a specific matter. This variant, along with massive surges in the number of cases, has also brought on a massive surge in division and rhetoric. Unfortunately, we've grown accustomed to seeing theories targeting those who are vaccinated, or insults and demeaning comments aimed towards those who cannot be or choose not to get vaccinated. Both are unfortunate and both are wrong, but both were expected.

What was not expected was hearing these comments coming out of the mouths of our leaders. Sadly, it's unacceptable, unbecoming and undeserving of anyone in high office, or in any office. For the Prime Minister to bring the character of any of my constituents of Hastings—Lennox and Addington into question over their vaccination status is deplorable.

I am fully vaccinated. I got my booster this week. Vaccines work. However, I do respect the decision of those who chose not to get vaccinated. As parliamentarians in an institution that's been created to represent all Canadians from coast to coast to coast, it is incumbent upon us to approach this issue as a committee with the goal of finding the solution to both the question of omicron and of vaccine hesitancy.

The only thing that most Canadians see is all of us at each other's throats in five-second sound bites or snide blasts on Twitter. That is not the Canada we know, and I have every intent to be forthright, productive and a voice for my constituents. We need to invest in education and encouraging prevention and a healthy focus. We need to lead by example, instead of division. Working together, and positively, I believe that we can do this. We can do it here, not as Liberals, not as Tories, not as Bloquistes or NDPers, but as parliamentarians and as Canadians on this health committee.

The Chair: Thank you, Ms. Kramp-Neuman.

Go ahead, please, Mr. van Koeverden.

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

Thank you to my colleagues. I really appreciate all of the comments so far. I think there have been some very salient points raised.

I also really want to echo what MP Kramp-Neuman referenced with respect to our mutual obligation to work together beyond our party affiliations on this committee. Canadians are counting on us. They demand and deserve a really effective health committee. In that regard, I feel very fortunate to be on the committee with so many people who are like-minded and who have similar ambitions to serve our constituents in Canada.

I'm happy to be having a meeting next week. In fact, I recall back on December 13 it was raised that we possibly would be reconvening for a meeting at some point in January, and I'm glad that we are. I would say that Standing Order 106(4) is one way to get there. We can also in future rely on each other. We have each other's contact information. We can convene for the mutual benefit of all of our constituents.

On the topic of funding from a national level, I think it's important to recognize that the Government of Canada has invested incremental billions to help provinces and territories strengthen their health care systems over the last couple of very difficult years. They have increased the testing capacity and they have stopped outbreaks from happening. That includes outbreaks in long-term care. In 2020-21 alone, the Government of Canada provided \$42 billion in cash support to provinces and territories through the Canada health transfer. That has grown to \$43.1 billion this past year, 2021-22. In 2020-21, \$9.7 billion was sent to Quebec alone.

We will continue to work directly with our provinces and territories to fight COVID-19 together. It's nobody's fight alone. Every Canadian is sick of these lockdowns. I definitely count myself among them. I am sick of doing online Zoom. I would way rather be in the same meeting room as all of you. I'm looking forward to getting back to that as quickly as possible. However, I soundly refute the suggestion that the federal government is responsible for lockdowns. If that were true, then there would be lockdowns in a similar way in every single province and territory across the country, and that is just not the case.

We have continued to support provinces and territories. On the topic of PPE, we have procured more PPE per capita than probably any other country. Different types of masks are available for public use. Many are available in stores at low cost, or free in the case of

many communities. On rapid test kits, to date we've shipped over 89 million test kits to provinces and territories, and 35 million, one for each Canadian, back in December 2021 alone. We just recently announced that an additional 140 million rapid tests, enough for every Canadian to take one through the months of January and February, will be delivered to the provinces and territories in the month of January 2022 alone. We are doing what it takes to fight this pandemic.

On boosters, vaccines absolutely remain the most important tool for stopping the spread of COVID-19. I appreciate the sentiment in that regard of my colleague MP Kramp-Neuman. I'm happy to hear that she got her booster. I also got my booster. I really want to say thank you to the Prime Care team in Milton, who set up a clinic just this week to fully vaccinate every Miltonian who hasn't yet received their last dose.

On December 3 the National Advisory Committee on Immunization released more guidance, all of which we will continue to follow. There continue to be solutions in the future that we haven't yet necessarily been able to take advantage of. Dr. Ellis, my colleague from Nova Scotia, referenced antivirals and other medications to ensure that people who are hospitalized don't have to go to the ICU. For those who might otherwise have to go to the hospital, taking an antiviral pill will be a solution. Our government has signed an agreement with Merck & Co. to procure half a million treatment courses of this oral antiviral, whose name I won't even try to pronounce, because it's a little difficult. Unlike my colleagues Drs. Powlowski, Ellis and Hanley, I don't have a medical degree. I don't know if you take a course on how to pronounce some of these pharmaceuticals.

• (1315)

We've also signed an agreement with Pfizer to procure an initial quantity of a million treatment courses of the oral antiviral from that company. We are waiting for authorization from Health Canada, which is forthcoming. Vaccination continues to be the absolute most central tool we have in fighting COVID-19, and it will provide Canadians with additional treatments as we're going forward—in addition to but not instead of vaccines, I would like to say. Additional measures are definitely necessary due to this difficult omicron time that we've all found ourselves in.

I would also say that because of my former career as an athlete, I got to travel a lot and meet a lot of people from other countries. Everybody in the world is going through this omicron thing. It's not an issue that's endemic to Canada. I will say that my friends from the U.K., Australia, Germany, Sweden and Norway are going through the same thing. I think we're doing quite well. I think we should be proud of our system. I think we should be proud of our officials. Next week, when we welcome them to this committee, I hope we will express that, because our communities are in good shape.

Our health care teams are stressed and tired, but they have our support. Our officials also need to feel that they have our support, because we are on one team. This is not one party versus another in fighting the pandemic. We are on team Canada. I thank my colleagues for their team Canada approach on this. Partisanship is not going to get us through this pandemic. It's not going to make things happen faster. It's not going to save more lives. We are all in the business of saving lives here on this committee and in this government.

So let's get to that work. Let's welcome our officials and the minister to this committee next week. Let's thank them for their hard work, because nobody has worked harder on this pandemic than these folks. We do owe them a debt of gratitude, while at the same time we demand some accountability. I appreciate that accountability from my colleagues here. I'm looking forward to having that conversation next week.

I thank you for taking me up on my invitation, which I sent out in committee on December 13. I said if you'd like to meet in January, then just let me know. We went a little bit of a circuitous route with Standing Order 106, but you know what? It worked, and here we are. I am happy to see all of you guys.

Happy new year, and I'm looking forward to the meeting next week.

● (1320)

The Chair: Thank you, Mr. van Koeverden.

Mr. Williams, go ahead, please.

Mr. Ryan Williams (Bay of Quinte, CPC): Thank you very much, Mr. Chair.

I think we're all agreeing here, which is fantastic. Canada needs a team Canada approach. I will agree with my colleagues on that, and our members. The government should want to work with the opposition in tackling this crisis, and I'm glad that we're all here today. I look forward to hopefully meeting next week and discussing this.

You know, at the very least, if Parliament is not meeting, this committee should be meeting in preparation for Parliament on January 31. All of the solutions to the problems that plague this country—the lockdowns, hospital capacity, lack of PPE, lack of emergency testing, nurse and doctor shortages, antiviral medications, Health Canada approvals and vaccine readiness—should all be debated in this committee, with the recommendations not coming fast enough to all of Parliament. I think we've heard that from all of our colleagues.

First on the list is why Canada has such a low capacity rate in our hospitals and little to no surge capacity as this pandemic nears its peak. This pandemic touches every single part of the country—the health and mental health and well-being of the entire populous along with the economic well-being.

I'm going to be very brief: Let's get to work. It sounds like we're on the right path here. Let's all agree to hear from our health professionals, our government and from all of our parties as we fight our way out of this pandemic together.

Thank you very much. Let's get to work.

The Chair: Thank you, Mr. Williams.

Dr. Powlowski, please go ahead.

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

Happy new year to everybody.

I am hearing two messages. The overwhelming one from the Conservatives is that this is about team Canada, that we're all on the same side and are all working towards the same goals—although there was a smattering in there of, "It's all our fault, we suck, and it's all because we suck that we have the problems we have now". I don't agree with that, and I won't enter into that conversation.

I encourage working together. At least at the beginning of the last session, this committee worked very well together. We have a great mix of people on this committee from various backgrounds, including a bunch of people with medical backgrounds. Because we are a group of members of Parliament discussing this issue, we have a fairly unique ability to shine a light on various issues with respect to COVID, whether that's the value of rapid testing or of therapeutics, which I talked a lot about in the last session.

I think we did a pretty good job, actually, with COVID. I believe our committee was one of the first to talk about asymptomatic transmission—i.e., transmission of COVID by people who are asymptomatic—before the need for mandatory masks and spacing intervals between vaccines was really impressed upon us. We were pretty well on top of that. I hope the fact that we publicized it may, in some way, have contributed to faster action.

I am glad to hear these words coming from the Conservatives. I take it that it will probably also come from the members of the other parties. Let's work together; we can do a valuable job.

This sucks. My family, my kids, are in the other room here. They're not at school. Their hockey games were all cancelled, as the season has been cancelled. My parents are going nuts in Thunder Bay, because it's 20 below every day and they've been used to being in Mexico for the last 20 years. Businesses are suffering. There are people with mental health problems. There are overdoses. It goes on and on.

This is extremely important. Let's try to put partisan politics behind us and work together to shine a light on problems and make some useful suggestions as to how to deal with them.

• (1325)

The Chair: Thank you, Dr. Powlowski. You have a way with words.

Mr. Davies, please go ahead.

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

First of all, I want to thank my colleagues in the Conservative Party for their initiative in calling this meeting, pursuant to Standing Order 106.

It appears that violent agreement is breaking out, so I will keep my remarks uncharacteristically brief.

The only thing I would like to mention is that the health committee hasn't had an opportunity to meet since early last July. It's been a little over six months since we've had an opportunity to meet. I'm hearing a bit of damning with faint praise, and I'm hearing a bit of very positive commitments to collegiality and working together, with a little tinge of politics. That's exactly as it should be.

What I would say is this. I've had the privilege of being on the health committee since 2015, with my colleague Sonia Sidhu. I think we're the grizzled veterans of the crowd. I want to say that HESA is one of the very few places in our country where we have an opportunity to really question issues, to call whomever we want to our committee to receive the best evidence we can and to hold officials and the government to account. That's a really important role we play. Each one of my colleagues on this committee takes that role very seriously. I'm really looking forward, as the New Democrat critic for health, not only to working together, but to being that crucible of accountability and open questioning that is important in a free and democratic society.

I hope all of my colleagues feel free to bring the witnesses and evidence forward they think are important. Sometimes it is to give voice to the voiceless; to critique orthodoxy and challenge established narratives; and to do what I think Canadians want us to do, which is to make sure that they have access to the very best health policy at the federal level that we can possibly deliver to them.

Mr. Chair, I congratulate you again for your election. I look forward to working under your wise stewardship and to working with everybody else as we meet next week to begin our work.

The Chair: Thank you, Mr. Davies.

Dr. Hanley.

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

First of all, I want to greet everyone with a happy new year as well.

I want to start out from the beginning, especially as a new member—not only new to this committee but as a new MP—by repeating the calls for setting the right tone and working together. I did partly joke with my colleagues when I was first elected that everything I learned about politics, I learned in public health in my previous role. To me, this is about health and progress first and about politics second. I like the way the previous member described the "tinge of politics", but let's keep it as perhaps a tinge to jostle and to encourage us to be accountable. Let's aim for progress.

On the federal support, I'd really like to listen first and then draw conclusions, and to perhaps not set up the next meeting with foregone conclusions. I will say, having been a CMOH during or from the beginning of the pandemic, that the feeling of having federal support behind us...whether it was vaccines, whether it was helping us to collaborate on our FPT meetings or whether it was the advice from the Public Health Agency on the modelling and on not under-

emphasizing the massive economic supports we needed and still need to get us through the pandemic. As a public health leader, I was constantly grateful for and appreciative of the federal support we had. That is the premise I want to try to establish.

Was it a perfect response? By no means. Did we learn lessons? Absolutely. We should be taking every lesson we can for the rest of this pandemic, and for the next. I certainly learned the value of humility—learning from my colleagues, learning from experience, learning from our mistakes and improving. And here I have to agree: I think overall Canada has borne this very well.

I will also say that omicron has completely changed the paradigm and has perhaps surprised us by the degree to which public health measures, there from the beginning, are still necessary in addition to all of the other tools, and the amazing new tools, that we have. I'm also going to say "molnupiravir"—just to show that I can say it—and echo that we are entering a new era that I think is a potential game-changer. I'm so pleased to see the government stepping up with the acquisitions that will be required.

I want to touch briefly on a couple of things.

(1330)

[Translation]

First of all, I want to ensure that the motion includes the provinces and the territories as well. I know that's the intent of the motion, but I want to make sure it's clear that the territories are included with the provinces.

[English]

I would like to echo the need for us to be available to each other in the preparations for meetings. I see no reason why that needs to stay within party lines.

I would also like to reflect on the other member's comments about health care worker exhaustion and burnout. I think we have to continually remember in what we are about to hear, and of what we are constantly hearing, that our health care workers, whether in the public health workforce or in the clinical workforce, are tired and exhausted.

I want to see us move through this review of the pandemic progress to the consideration in committee of how to support our health care workforce, and to look at recruitment and retention of all layers of our health care workforce, from physicians to nurses to technical support. This should be one of the committee's priority studies going forward.

The Chair: Thank you, Dr. Hanley.

[Translation]

Mr. Thériault, go ahead.

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

I also want to wish everyone a happy, hopeful and satisfying 2022, free from frustrations.

We are in the midst of one of the worst health crises in human history. In times of crisis, it's important to have a united front when it comes to the best health care practices to encourage people to adopt these practices. This involves being able to highlight important issues and ask the same questions that people are asking, especially at a time when there is a lot of disinformation. It will be up to us to put partisanship aside and ask the necessary questions to get Quebeckers and Canadians the information they need. We must be able to ask decision-makers and first responders relevant questions. This motion reflects that all parties want clarifications and want to start the year by taking stock.

I think that this surge of good intentions and enthusiasm for working together shows that we are prepared to move forward. I see that Ms. Sidhu wants to speak. I'm very pleased to see that everyone wants this meeting. I imagine it will be the first of many.

• (1335)

The Chair: Thank you, Mr. Thériault.

[English]

Ms. Sidhu, please go ahead.

Ms. Sonia Sidhu (Brampton South, Lib.): Thank you, Mr. Chair.

Happy new year to all.

As Mr. Davies said, we are all veterans in this committee. It was a pleasure to work with him and all other members. We have been together on the health committee since 2015.

I want to welcome all new members to this committee. I know we will do a lot of important work for Canadians this time as well.

We can all agree that Canadians' health is our top priority. We are all happy to hear from the minister and other officials. I know that when we met in December, Mr. van Koeverden volunteered to have the minister here, without any committee member asking for it beforehand. He said it was because we all want to do good work.

Mr. van Koeverden was saying that the Government of Canada provided significant support to provinces and territories. Mr. Chair, \$8 out of every \$10 spent on the fight against COVID-19 has come from the federal government. The bottom line is that we should put politics aside and come together as a committee to confront this world crisis. As we begin our work together as Parliament's health committee, I look forward to constructive work for all Canadians.

Let's find a way to work together moving forward. That is what Canadians want us to do. In the spirit of that, I think we can all support this. We can vote on this motion when all members have spoken.

The Chair: Thank you, Ms. Sidhu.

[Translation]

Mr. Berthold, go ahead.

Mr. Luc Berthold: Thank you very much, Mr. Chair.

I'll be brief. I am proposing an amendment that would integrate Mr. Hanley's request to include the territories in the motion. If everyone is in agreement, before we adopt the motion I propose that we add "and territories" after the words "the provinces".

I think this suggestion is worthwhile and would agree to making this amendment to the motion before you proceed to the vote, Mr. Chair.

The Chair: Thank you very much, Mr. Berthold.

[English]

Despite the conventional wisdom about friendly amendments, I am advised by the clerk that there really is no such thing. However, it is absolutely in order for the committee to do exactly what you have suggested, which is, by consensus, to agree with the suggestion of Dr. Hanley that the words "and territories" be inserted after the word "provinces" in your motion.

Do we have general consensus on that? If not, we can proceed more formally. We have a consensus.

I see no further speakers on the speakers list. Therefore, we are ready for the motion as amended.

Do we have consensus to pass the motion as is, or do we require the formality of a standing vote?

(Motion as amended agreed to)

The Chair: Is there any further business to come before the meeting?

Go ahead, Mr. Berthold.

[Translation]

Mr. Luc Berthold: I have a logistical question about when the meeting will be held. Will the clerk inform us as soon as possible when the majority of the witnesses are available? I think the goal is to find a time when the majority of the people named in the motion will be available to testify. All members of the committee will be available when necessary.

• (1340)

The Chair: You're right.

The motion states that the meeting will be held next Wednesday. An invitation will be sent to witnesses right away and, just like you said, they'll be asked to indicate which day works best for them. Once that's been sorted out, a notice will be sent out.

Mr. Luc Berthold: Thank you.

The Chair: Okay.

[English]

Is there any further business to come before the committee?

Do we have consensus to adjourn?

We have Mr. van Koeverden. Go ahead.

Mr. Adam van Koeverden: Just so that everybody has a really good weekend, I will let you know that the minister is available on Tuesday and Wednesday. It will likely not be a Monday meeting, but I look forward to seeing you guys next week. Enjoy your weekend

The Chair: Thank you, Mr. van Koeverden.

Go ahead, Dr. Powlowski.

Mr. Marcus Powlowski: Because I think this issue is going to come up—and hopefully we'll all start thinking about it—how are we going to deal with COVID and, at the same time, start dealing with the very many other medical issues that have been on the back burner for the last two years?

A lot of us personally know people who have suffered as a result of COVID. It's not because of COVID per se, but because of the lockdowns and because hospitals aren't functioning, etc. How are we going to deal with both COVID and talk about the very many other issues facing the medical system? Is it going to be a meeting on COVID one day and the next day a meeting on something non-COVID...?

I hope we all start contemplating that, because it's an important issue.

Thanks.

The Chair: Thank you, Dr. Powlowski.

With the goodwill I see on display today, I'm sure we'll be able to pull it off.

There being no further speakers, is it the will of the committee to adjourn? I see consensus. The meeting is adjourned.

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