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No consensus on broad COVID-19 study during first HESA meeting of current session

RESEARCH EXCLUSIVE | OCTOBER 9, 2020

After two and a half hours of continuous debate on the merits of a broad COVID-19 study proposed by Conservative health critic Michelle Rempel Garner (Calgary Nose Hill, Alta.), the health committee's first meeting was adjourned with no decisions made.

Rempel Garner proposed the health committee (HESA) undertake a study to look at 17 different elements, including rapid, at-home testing; vaccine development; long-term care protocols within federal jurisdiction; the Public Health Agency of Canada's Global Public Health Intelligence Network; contact tracing protocol; and Canada's level of preparedness for future pandemics.

The motion also proposed that various ministers, including those for health, procurement and public safety, be required to appear before the committee separately for three hours each in order to answer questions about the government's response to COVID-19.

Rempel Garner's motion was introduced after opposition members of the committee voted to adjourn the debate on a motion presented by Liberal MP and committee member Tony Van Bynen (Newmarket-Aurora, Ont.), who was calling for a study on the mental health impacts of COVID-19 on Canadians.

"There are several issues that this committee needs to look at, and mental health is certainly one of them, but I think it needs to be done in a more holistic way," said Rempel Garner.

The Conservative health critic's motion received unofficial support from most of the members of the committee excluding the Liberal members, who asked for more time to study what Liberal MP and re-elected committee chair Ron McKinnon called an "enormous" motion.

NDP health critic Don Davies said Rempel Garner's motion had a number of important subjects that required studying, including vaccine development.

"We're giving ourselves a lot of things to do but Canadians deserve it," said Bloc Québécois health critic Luc Thériault (Montcalm, Que.) in French. "That's why I'm going to support the motion."

Liberal MP and committee member Dr. Marcus Powlowski (Thunder Bay

—Rainy River, Ont.) said he wasn't sure if the list of subjects was comprehensive enough considering there was no mention about the issue of COVID-19 within Indigenous communities.

Davies countered that he read Rempel Garner's motion as not being limited to those 17 subjects as it stated that "all issues" should be addressed and those issues would include the subjects outlined.

As the meeting continued past its end time of 3:00 p.m. ET, Thériault said he would be leaving the meeting at 3:30 p.m., and asked McKinnon, in his role as chair, if the meetings would continue to go long "each time the Liberals disagree with us?"

At 3:30 p.m., Liberal MP and committee member Mike Kelloway (Cape Breton—Canso, N.S.) moved to adjourn the meeting. That vote was passed thanks to Liberal members' support and the vote of Thériault.

Rempel Garner's motion for a COVID-19 study was not put to a final vote.

Standing Committee on Health (in alphabetical order)

John Barlow (Foothills, Alta.)

Conservative MP Barlow was first elected federally in 2014, and is joining the health committee for the first time after stints as vice-chair on the agriculture and human resources committees in previous sessions.

Don Davies (Vancouver Kingsway, B.C.)

The NDP health critic returns to the health committee. In an [interview](#) with Hill Times Research in August, he said a focus for him going forward is ensuring Canadians receive access to the most effective or therapeutic treatment for COVID-19. Pharmacare, seniors and dental care will also be areas of concentration for the MP first elected in 2008. Davies is also his party's deputy critic for public safety and emergency preparedness.

Chris d'Entremont (West Nova, N.S.)

Conservative MP d'Entremont turned to federal politics in 2019 after serving 16 years as a Progressive Conservative member of Nova Scotia's legislative assembly, including six years as a health minister. In his time as health minister, he ushered in Nova Scotia's first continuing care strategy for seniors' health care and launched a family pharmacare program with catastrophic drug coverage. D'Entremont is a new member to the health committee. He is shadow cabinet minister for intergovernmental affairs and the Atlantic Canada Opportunities Agency.

Darren Fisher (Dartmouth—Cole Harbour, N.S.)

Liberal MP Fisher was first elected federally in 2015, and appointed to the role of parliamentary secretary to the minister of health in December 2019. He initially joined the health committee in January 2020. Fisher [spoke](#) to Hill Times Research in April 2020 where he said the federal government had an opportunity to "leverage what appears to be good collaborative partnership" between the federal government and the provinces during the pandemic.

The two-time MP is known for his mental health advocacy.

Mike Kelloway (Cape Breton—Canso, N.S.)

Liberal MP Kelloway is a first-time MP after being elected in 2019, and returns to the health committee in the current session. He is also a member of the justice committee. In February 2020, he moved a motion that the health committee study primary care and team-based care. That study never proceeded due to the committee's change of focus towards COVID-19.

Larry Maguire (Brandon—Souris, Man.)

Conservative MP Larry Maguire was first elected in 2013, and is a first-time member of the health committee. In 2015, he put forward Motion 592 in the House of Commons calling on the health committee to study the creation of national standards for electronic health care records. That motion was placed on notice but never debated.

Ron McKinnon (Coquitlam—Port Coquitlam, B.C.)

Liberal MP Ron McKinnon first joined the health committee in 2017, and has continued to remain a member. He was voted in as the health committee's chair on Oct. 9. His health advocacy includes sponsoring Bill C-224, the Good Samaritan Drug Overdose Act, which provides immunity from prosecution for those who possess controlled substances and call for medical assistance in response to a drug overdose. That bill received royal assent in May 2017. McKinnon was first elected in 2015.

Marcus Powlowski (Thunder Bay—Rainy River, Ont.)

Liberal MP Powlowski went from the emergency room to Parliament Hill when he first won his seat in the 2019 election. He was a physician in the emergency room at Thunder Bay Regional Health Science Centre, and spent two years practicing medicine in northern First Nations communities. He has a Masters of Public Health in Health Law and Policy from Harvard University in Cambridge, Mass., and has worked as a consultant for the World Health Organization. He became a member of the health committee following his election win.

Michelle Rempel Garner (Calgary Nose Hill, Alta.)

Conservative MP Rempel Garner was named her party's health critic in September following new leader Erin O'Toole's (Durham, Ont.) leadership win. In the four weeks since taking on the role, she has focused on issues related to rapid testing for COVID-19 when speaking in the House of Commons. She was elected vice-chair of the health committee on Oct. 9.

Sonia Sidhu (Brampton South, Ont.)

The Liberal MP has been a health committee member since first being elected in 2015, and is also a member of the status of women committee. She is known for her advocacy for diabetes awareness, and her House of Commons motion calling for the designation of November as Diabetes Awareness Month was agreed to in June 2019.

Luc Thériault (Montcalm, Que.)

Bloc Québécois health critic Thériault was first elected in 2015, and joined the health committee following the 2019 election. He was voted into the role of vice-chair for the health committee on Oct. 9. A key focus for Thériault and his party is increasing the level of federal health transfers to the provinces and territories, a topic which he continues to speak on in the House of Commons during the current session.

Tony Van Bynen (Newmarket-Aurora, Ont.)

The former mayor of Newmarket, Ont., turned to federal politics in 2019. He first joined the health committee following that election win, and brought forward a motion in the health committee meeting on Oct. 9 that asked the committee to study the mental health impacts of COVID-19 on Canadians. That debate was adjourned when the opposition party members voted to do so to focus on a motion for a comprehensive study of COVID-19 policy brought forward by Conservative health critic Rempel Garner.

INTERVIEW: Health minister Hajdu currently ‘not open to delaying’ drug pricing changes

RESEARCH EXCLUSIVE | OCTOBER 9, 2020

Amid an industry request that new drug pricing regulations be delayed, Health Minister Patty Hajdu (Thunder Bay—Superior North, Ont.) said she is not prepared to make that move.

“At this point, no, I’m not open to delaying further. Certainly, I’ll have conversations with the [Patented Medicine Prices Review Board] themselves to determine their readiness but ... my perspective is we’ve already delayed to give opportunity for those consultations to happen in alternative ways,” she said in a phone interview with Hill Times Research on Oct. 7.

Changes to how drug pricing will be regulated in Canada was one of many policy topics explored during the half-hour interview as Hajdu continues to focus on her government’s response to COVID-19.

The global pandemic threw a dramatic wrench into the health minister’s mandate. What should have been a year in which Hajdu focused on election promises connected to lowering the costs of prescription drugs and improving access to mental health and addiction treatment services has become months of implementing emergency financial and public health measures.

“Any professional leading a response either at the local level ... or federal level had to adjust rapidly in terms of a couple of ways. One, their expectations of what they thought they might be working on this year – that’s been completely blown out of the water for many, many leaders regardless of where they’re situated,” Hajdu said in a phone interview with Hill Times Research on Oct. 7.

With a new parliamentary session underway, Hajdu looks at how she will guide her department forward as staffers and bureaucrats continue the government’s response to COVID-19, while also working on health policy related to her party’s pre-pandemic policy priorities.

Hajdu spoke to Hill Times Research about how she will approach key policy areas as she awaits a new mandate letter from Prime Minister Justin Trudeau (Papineau, Que.) following the government’s throne speech on Sept. 23.

Patented Medicine Prices Review Board

Updates to how the Patented Medicine Prices Review Board (PMPRB) regulates patented medicine prices in Canada have been controversial for the pharmaceutical industry and some patient advocacy groups. While the Liberals say the new regulations will improve access to medicines by lowering the prices of drugs, naysayers maintain that access may be diminished if pharmaceutical manufacturers decide not to launch new medicines in Canada.

The PMPRB’s new rules are expected to be in force on [Jan. 1, 2021](#), after Health Canada delayed its original implementation date of July 1, 2020.

In an emailed statement to Hill Times Research on Oct. 6, Declan Hamill, vice-president of legal, regulatory affairs and compliance for industry group Innovative Medicines Canada, said that the new rules should be postponed, thereby “allowing the government and the industry to focus on the fight against COVID-19.”

Hajdu told Hill Times Research that she is not open to further delaying the regulations at this point.

Hajdu called the updates to the PMPRB an “important piece of work” that will give the PMPRB a greater ability to negotiate for better prices.

“We’ll always work with industry and we’ll always work with the pharmaceutical companies as we have throughout the pandemic on vaccines,” she said, calling the industry very important. “But at the end of the day, ... we’re asking for industries to come and negotiate in good faith with the PMPRB based on realistic base prices. And I think that’s a reasonable request.”

But COVID-19 treatments and vaccines will not be subject to the traditional regulatory pricing process. As first [reported](#) by Hill Times Research, drugs connected to COVID-19 are exempt from receiving a maximum price from the regulator that details the highest level at which a medicine can be sold.

With COVID-19-related drugs, manufacturers can provide these products at

their own list prices unless the PMPRB receives a complaint from any minister of health at the federal or provincial/territorial levels.

When asked if she felt the exclusion for COVID-19 treatments from PMPRB pricing processes was a double standard, Hajdu called it a “separate conversation,” saying that the process to obtain the vaccines comes from direct negotiations between the government and pharmaceutical manufacturers.

“There will be limited doses of vaccines available, regardless of which company is successful. I think Canadians expect us to get doses of those vaccines. I know that the procurement minister [Anita Anand (Oakville, Ont.)] has negotiated very effectively to get Canada’s foot in the door and to have a number of promising candidates,” said Hajdu.

Pharmacare

A “national universal” pharmacare program was a promise in the Liberals’ 2019 election platform.

Hajdu told Hill Times Research that she began talking to her provincial and territorial counterparts about a possible program after she was first appointed to the health portfolio almost a year ago.

“I think there was a complete agreement that we needed to work on a rare disease strategy together, given the cost of medication to treat these rare diseases,” Hajdu said, adding there were different opinions on the issue of collaborating on a pharmacare program.

Ontario and Manitoba are examples of provinces that have been public about their reluctance to join a national pharmacare program.

Through the throne speech on Sept. 23, the Liberal government said it would accelerate steps to develop a pharmacare program, and it would work with “provinces and territories willing to move forward without delay.”

“After the speech from the throne, I spoke with the deputy [minister Dr. Stephen Lucas] and his associate deputy ministers about the need to refocus on pharmacare,” Hajdu said. “We anticipate we’ll be talking to the provinces and territories as soon as we have an opportunity to catch our breath and as soon as they do ... Some provinces and territories have the bandwidth to manage this [and] others are fully consumed and trying to manage the outbreaks in their provinces. And that, of course, has to take precedence.”

As for whether a “national” program might not start with all provinces and territories, Hajdu said working with those that are interested is a “great place to start.”

“We know that it is very difficult for the federal government to force the provinces and territories to do anything so I think that sometimes by demonstrating the success of a project or a program, like pharmacare, is one way to illustrate to Canadians from all provinces how beneficial this could be in their lives.”

COVID-19

As the media has documented long line-ups at testing centres in cities across the country and reported on the backlog in provincial test processing, the federal Liberals and Health Canada have been dogged by criticism that approving rapid testing solutions is taking too much time.

“You’ve heard the opposition howl about access to rapid tests, but in fact, it indicates a lack of understanding about the complexity of using these tests and when we might use them,” Hajdu said.

The most recent federal development in testing is the government’s announcement on Oct. 6 that it had entered an agreement to purchase 20.5 million antigen rapid tests, which can produce results in 15 minutes, from Abbott Rapid Diagnostics.

Hajdu is in the process of forming a task force that will focus on testing and diagnostics, and she told Hill Times Research that the decision of who will be included is being finalized.

This team will offer guidance to the government on how to move forward with rapid self-administered tests to ensure these tests help fight COVID-19 instead of increasing the risk of the virus, Hajdu said.

While the federal government continues to develop and roll out an emergency response to the current COVID-19 crisis, Hajdu has her eye on future events.

At the beginning of the pandemic, she told her department to track every piece of paper connected to COVID-19 decisions to ensure that the information would be available for a review that will “inevitably” come, Hajdu said.

The Liberals also plan on looking at whether the current structure of the Public Health Agency of Canada (PHAC) is suitable for future pandemics. And Hajdu has ordered an external review of PHAC’s decision in May 2019 to turn the focus of Canada’s Global Public Health Intelligence Network (which is supposed to track and identify global public health threats) to domestic matters.

Mental Health

While the federal Liberals have designated targeted funding for mental health services in the last five years to provinces and territories, mental health continues to be a health issue that is mainly funded out of Canadians’ pockets or by private insurance programs.

Hill Times Research asked Hajdu whether her government would consider adding mental health services as a publicly-funded service under the Canada Health Act.

“In terms of opening up the Canada Health Act, I’m not sure that that we need to do that to address mental health access, but we’re always open to any ideas around strengthening access to mental health services for

Canadians, because at the end of the day, it is artificial to separate mental health from physical well-being,” Hajdu said. “And we live in a culture that has done so for far too long, and that's the intent behind our increased transfers to provinces and territories.”

Opioids

Hajdu is now waiting for the results of a public consultation on how to improve the system of supervised injection sites in Canada. That process was launched in August and comments are due Oct. 14.

“The intent behind the regulation consultation is to understand how we make it easier ... for operators to set up these sites, and ... how we make these sites more permanent in nature,” Hajdu said.

The goal is to ensure that both site operators and the users of those services can be certain that the services will be available regardless of the ideology of the provincial or territorial government, according to Hajdu.

“This ... is a very ideological space, but ... the evidence is clear that safe consumption sites, safer supply, access to safer supply in ... pharmaceutical grade opiates saves lives,” she said.

There have been approximately 16,300 Canadian deaths due to apparent opioid-related overdoses between January 2016 and March 2020, according to a PHAC press release dated Sept. 30.

And some parts of Canada are reporting [spikes](#) in deaths due to illegal substances during the pandemic, as it has become harder to obtain particular health services amid lockdown-type measures.

The Liberal government has faced repeated questions about whether it will decriminalize illegal substances in order to focus on problematic substance use as an issue of health and not criminality. In recent months, both British Columbia Premier John Horgan and the Canadian Association of Chiefs of Police (CACCP) have formally called on the Liberals to move forward with decriminalization for personal possession.

Hajdu said her government continues to review recommendations from decriminalization advocates and that she has reached out to the CACCP for a better understanding of how their recommendations would look in various jurisdictions.

“I think we're on the right track in terms of the actions our government has taken, and you can tell by the work that we've done in drug policy that we're an incredibly progressive government when it comes to drug policy,” Hajdu said.

“I know this is what activists are calling for as a solution to opioid overdose, for example. It is only one piece of the puzzle, and I am acutely aware of that after many years of working in the area of drug policy myself and working at the grassroots level in community with people who use substances.”

On Oct. 9, Hajdu announced an investment of \$10.2 million for the Canadian

Institutes of Health Research to be used for projects studying the mental health and substance use needs of individuals during the pandemic.

Webinar: “Using Data to Make Public Health Decisions”

Location: Online - Date: October 13, 2020

The University of Ottawa Centre for Health Law, Policy and Ethics hosts a webinar on "Using Data to Make Public Health Decisions" featuring Dr. Vera Etches (Medical Officer of Health, Ottawa Public Health), Dr. Alan Forster (The Ottawa Hospital), and Prof. Raywat Deonandan (uOttawa). This event will take place [online](#).

Intergovernmental Affairs

OCTOBER 9, 2020

Minister of Intergovernmental Affairs and President of the Queen's Privy Council Dominic LeBlanc (Beauséjour, N.B.) announced top up funding for the Territories as part of the Safe Restart Agreement:

- over \$12.5 million in top-up funding for Nunavut
- over \$12.2 million in top-up funding for the Northwest Territories
- over \$12.4 million in top-up funding for Yukon

Call 613-957-5420.

Jack.org

OCTOBER 9, 2020

Jack.org, Health Canada and the Public Health Agency of Canada launch a new campaign in support of World Mental Health Day (Oct. 10) to promote mental health literacy and #WellnessForAll Canadian youth. Do Something #WellnessForAll encourages Canadian youth to take action and educate themselves about mental health. "Support, services, and self-care routines continue to be disrupted, which makes it more important than ever for young people to know how to look out for themselves and each other," said Jesse Hayman, Vice President, Jack.org. "As we experience the broader impacts associated with the pandemic, we need to be there for each other, through kindness, empathy, and support, even while staying physically apart," said Dr. Theresa Tam, Canada's Chief Public Health Officer. Call 604-603-0657.

Federal Economic Development Agency for Southern Ontario

OCTOBER 9, 2020

Minister of Economic Development and Official Languages Mélanie Joly (Ahuntsic-Cartierville, Que.) announced a total FedDev Ontario investment of \$13.4 million for four Toronto-based recipients to advance health innovation. The federal government is proud to announce a \$6.5-million investment for Toronto Innovation Acceleration Partners. This announcement also includes a total investment of \$6.9 million for MindBeacon Holdings Inc., Cyclica Inc., and Healthism Systems Inc. (InputHealth) to

scale up their innovations. The full release is available [online](#). Call 1-866-593-5505.

Canadian Institutes of Health Research

OCTOBER 9, 2020

Health Minister Patty Hajdu (Thunder Bay–Superior North, Ont.) announced an investment of more than \$10.2M in COVID-19 mental health and substance use research. This investment will support 55 research teams from across the country to tackle the mental health and substance use crisis that is emerging as a result of the COVID-19 pandemic. The full release is available [online](#). Call 613-941-4563.

Indigenous Services Canada

OCTOBER 9, 2020

As of October 8, Indigenous Services Canada is aware of these confirmed cases of COVID-19 for First Nations communities on reserve:

- 778 confirmed positive cases of COVID-19
- 129 active cases
- 61 hospitalizations
- 636 recovered cases
- 13 deaths

There are a total of 22 confirmed positive cases in Nunavik, Quebec, and all but 3 have recovered. The full release is available [online](#). Call 819-953-1160.

Statistics Canada

OCTOBER 9, 2020

Statistics Canada posted results from the Personal Protective Equipment Survey, August 2020. Data from the Personal Protective Equipment Survey are now available for August. This survey provides estimates of personal protective equipment (PPE) demand and supply, by type of PPE. Data are available at the Canada and regional levels and are grouped by industry. The full release is available [online](#).

The Royal Society of Canada

OCTOBER 9, 2020

The Royal Society of Canada has published a new policy briefing entitled "Easing the Disruption of COVID-19: Supporting the Mental Health of the people of Canada." The report focuses on the current situation, how the COVID-19 pandemic has exacerbated significant long standing weaknesses in the mental health system, and makes specific recommendations to meet these challenges to improve the well-being of the people of Canada. The full release is available [online](#).