



HOUSE OF COMMONS
CHAMBRE DES COMMUNES
CANADA

43rd PARLIAMENT, 2nd SESSION

Standing Committee on Health

EVIDENCE

NUMBER 001

Friday, October 9, 2020



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• (1305)

[*English*]

The Clerk of the Committee (Mr. Jean-François Pagé): Honourable members of the committee, I see a quorum.

[*Translation*]

I must inform members that the clerk of the committee can only receive motions for the election of the chair. The clerk cannot receive other types of motions, cannot entertain points of order nor participate in debate.

[*English*]

We can now proceed to the election of the chair. Pursuant to Standing Order 106(2), the chair must be a member of the government party.

I am ready to receive motions for the chair.

Hon. Michelle Rempel Garner (Calgary Nose Hill, CPC): I nominate Mr. McKinnon.

The Clerk: It has been moved by Mrs. Rempel Garner that Mr. McKinnon be elected as chair of the committee.

[*Translation*]

Are there any further motions?

[*English*]

(Motion agreed to)

The Clerk: I declare the motion carried and Mr. McKinnon duly elected chair of the committee.

The Chair (Mr. Ron McKinnon (Coquitlam—Port Coquitlam, Lib.)): Thank you all. I shall move to the head of the table now.

If it's okay with the committee, I will ask if the clerk can carry on with the election of the vice-chairs.

Seeing no dissent, Mr. Clerk, will you please go ahead with the election of the vice-chairs?

The Clerk: Yes.

Pursuant to Standing Order 106(2), the first vice-chair must be a member of the official opposition.

I am now prepared to receive motions for the first vice-chair.

Mr. Don Davies (Vancouver Kingsway, NDP): I nominate Michelle Rempel Garner.

The Clerk: It has been moved by Mr. Davies that Ms. Rempel Garner be elected as first vice-chair of the committee.

[*Translation*]

Are there any further motions?

[*English*]

Mr. Marcus Powlowski (Thunder Bay—Rainy River, Lib.): Are we voting on the first vice-chair?

The Clerk: Yes, it's on the opposition vice-chair.

(Motion agreed to)

The Clerk: I declare the motion carried and Mrs. Rempel Garner elected as first vice-chair.

I'll now move to the second vice-chair.

[*Translation*]

Pursuant to Standing Order 106(2), the first vice-chair must be a member of an opposition party other than the official opposition.

I am now prepared to receive motions for the position of second vice-chair.

Mr. Marcus Powlowski: I nominate Luc Thériault for second vice-chair.

The Clerk: Mr. Powlowski has nominated Luc Thériault for second vice-chair of the committee.

Are there any further motions?

(Motion agreed to)

The Clerk: I declare the motion carried and Mr. Thériault duly elected second vice-chair of the committee.

[*English*]

Mr. Chair, we may continue.

The Chair: Thank you, Mr. Clerk.

I'll ask the people who wish to speak or to be recognized at any point to use the "raise hand" function on the participants panel.

Mr. Van Bynen, I see that your hand is raised. Please go ahead.

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

I'm still relatively new at this. Is this the appropriate time for me to introduce a motion for a study? I intend to bring forward a motion on the impacts of COVID-19 on the mental health and well-being of Canadians. I would like to go forward with that.

The Chair: Thank you, Mr. Van Bynen. Now is not actually the appropriate time. We have to undertake the routine motions that build the structure around the committee. I will give you first dibs once that's completed to move or to discuss your motion.

• (1310)

Mr. Tony Van Bynen: Thank you.

The Chair: Next on the list is Mr. Kelloway.

Mr. Kelloway, please go ahead.

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

Hello to our new colleagues and to our colleagues from the last session.

I'd like to move that we readopt all routine motions from the previous session.

The Chair: Thank you, Mr. Kelloway. I'm going to suggest that we go through them one at a time so that we're clear as to what the motions are and what exactly we're doing. May I get you to move them one by one, please?

Mr. Mike Kelloway: Sure.

Hon. Michelle Rempel Garner: I have a point of order, Mr. Chair.

The Chair: Yes, Ms. Rempel Garner.

Hon. Michelle Rempel Garner: Since you started a speaking list on Mr. Van Bynen's item, I would like to be first in line to respond.

The Chair: I'm sorry; do you mean you'd like to be first in line to respond to Mr. Van Bynen's motion?

Hon. Michelle Rempel Garner: That's correct.

The Chair: Yes, certainly.

Mr. Don Davies: Mr. Chair, I have a point of order as well.

The Chair: Yes, go ahead.

Mr. Don Davies: It's more of a suggestion. I'm just wondering if we can get unanimous consent from everybody on the committee to adopt the routine motions as a whole. They were distributed to members, and if we don't have any objections to them, we can adopt them all at once and save time. Maybe you can test the committee.

The Chair: Is it the will of the committee to proceed this way? Do we have any dissent?

I recognize the will of the committee. I think it's appropriate in this case that we do that. I would caution, though, that on an ongoing basis we should make sure to do motions one at a time. I think there's less confusion that way, but with routine motions, we'll be fine.

Once again, I'll test the will of the committee. Is it okay if we pass all the routine motions in one fell swoop? Is there any dissent?

Mr. Darren Fisher (Dartmouth—Cole Harbour, Lib.): Mr. Chair, are you talking about passing every motion in the routine motions as we did prior to virtual Parliament?

The Chair: That is correct. That is Mr. Davies' suggestion.

Mr. Darren Fisher: I only have one concern. I remember that when we were doing these things, there were hiccups with technology. There would be 10 minutes with some of our witnesses, and then we would go over our time. Quite often there were times when a member who was going to speak near the end wouldn't get a chance to speak. I don't know if that's a concern of other members on the committee, but I think it's important that everybody and all parties have a chance to speak.

The Chair: One of the routine motions says that witnesses will be given 10 minutes for their opening statements. I think if we're going to modify that, we should deal with that separately.

Mr. Darren Fisher: Mr. Chair, I'm okay if you use chair management on that, but we should make sure that all members are okay with that.

The Chair: All right. The suggestion is that we adopt the routine motions from the previous session as is, except that the motion that the witnesses be given 10 minutes for their opening statements would be amended so that witness statements can be shortened at the discretion of the chair.

Mr. Fisher, do you have a suggestion for what—

Mr. Darren Fisher: Actually, I would say keep it the way it is, if all members on the committee are okay with the chair using his discretion to ensure that all members get a chance to ask all the questions they want to ask.

Hon. Michelle Rempel Garner: I have a comment on this point, Mr. Chair.

The Chair: Yes, go ahead.

• (1315)

Hon. Michelle Rempel Garner: From my understanding, now that all committees are going to be meeting virtually, it is not likely a possibility that committees can extend past their original slots, which would preclude members of the opposition from asking questions, depending on the speaking order. It would be the preference of the Conservative Party that witness statements be held to five minutes to allow time for technical difficulties. I believe the PROC recommendation was that witnesses submit their written statements to members ahead of time.

I look to some of my colleagues for thoughts on that, but I don't think it's technically possible for the meetings to go over time so that everybody can speak. I'd hate to see us in a situation where members don't get their speaking slots because we've allowed witnesses, especially department officials, 10 minutes when they could have submitted statements ahead of time.

Mr. Darren Fisher: I think that's an excellent suggestion, Mr. Chair.

The Chair: The suggestion I'm hearing is that we adopt the routine motions as is except that witnesses not be given 10 minutes, as previously, but five minutes for their opening statements. All else will remain the same.

Are we in agreement on that?

Mr. Don Davies: Mr. Chair, I have a comment on that.

It's not a hill that I would die on, and Michelle makes a good point. My only concern is that we're adopting routine motions for this entire session. We might or might not be operating under virtual guidelines for the entire session, so the real question we have to ask is whether five minutes is sufficient for a witness.

In times when we've had people come to Ottawa or when we're inviting experts and people who are very busy to come to committee, quite honestly five minutes is not very long for someone to be able to make a meaningful contribution to the committee. I don't know how much time we'd gain. Generally, we have two witnesses per hour, so you're talking about gaining 10 minutes.

Again, if it's the will of the committee to reduce it to five minutes, so be it. However, we've all spoken in the House, and it's very difficult to express a well-developed position or to give information in that time, so if we're asking people to come to committee, five minutes is too short. That's my sense of it. I don't think we gain too much as a result of that. That's just my two cents.

The Chair: Okay, let's do this: Let us propose to adopt all the routine motions except the one regarding opening remarks and questioning of witnesses. We can adopt all of them in one block, and then we can deal with this and amend it appropriately as a second step.

Would it be acceptable to proceed in that way?

Mr. Darren Fisher: I still think we could use good chair management and get through this and make sure that everyone gets a chance to speak. If we had four witnesses, perhaps the chair could say you get five minutes, or six minutes; and if there are two witnesses, maybe....

That way, we get what Ms. Rempel Garner has suggested, but we also cover what Mr. Davies has suggested.

The Chair: Let's get on with the other motions and sort it out. There doesn't seem to be any disagreement or discussion on the other motions. Let's pass all the other motions, and then we'll deal with this particular motion separately.

Don, go ahead.

Mr. Don Davies: Sorry, Mr. Chair. I don't want to get bogged down here in too much minutiae, but quite honestly, I think you misinterpreted what Mr. Fisher was saying.

I think what Darren was talking about was giving you discretion to extend the meeting so that we could get all the questions in, and you've interpreted that to mean a limitation on the speakers' time. Maybe I'm misunderstanding that, but the thing is, if you start changing one part of the routine motion to limit it to five minutes, it could affect other things as well.

One thing I was going to suggest that maybe can solve this is to do as you say, by adopting all the routine motions except the one on the witnesses' length of time, and just amend that to be "up to 10 minutes". I think that meets what Mr. Fisher was talking about.

I don't think this is a routine motion issue. It's more a question of practice. It's that if we are allowed to extend the meetings and we have that time, then as we did last session, we can continue the meeting past the two hours in order to get more questions in, if that's technically feasible. As Michelle said, maybe it's not, but in the event that it is, we always have the ability as a committee to agree to extend the meeting to get the last couple of questioners in and give everybody a chance to ask the questions they want.

• (1320)

The Chair: I'm seeing that you're in favour of dealing with this particular motion separately and passing all the other routine motions in one fell swoop.

Again I ask, is that the will of the committee? Is there any dissent?

Seeing none, I declare that all the routine motions, except the one regarding opening remarks and questioning of witnesses, are passed.

(Motions agreed to)

The Chair: I welcome our analysts to the meeting as well, formally, because now they get brought into the picture.

Now let us carry on with the final routine motion, which is the matter of time for opening remarks and questioning of witnesses.

The motion as it existed previously was:

That witnesses be given 10 minutes for their opening statement; that, at the discretion of the Chair, during the questioning of witnesses, there be allocated six minutes for the first questioner of each party as follows: Round 1: Conservative Party, Liberal Party, Bloc Québécois, New Democratic Party.

For the second and subsequent rounds, the order and time for questioning be as follows: Conservative Party, five minutes; Liberal Party, five minutes; Conservative Party, five minutes; Liberal Party, five minutes; Bloc Québécois, two and a half minutes; New Democratic Party, two and a half minutes.

Would somebody like to move that motion?

Mr. Darren Fisher: Mr. Chair, I liked what both Ms. Rempel Garner and what Mr. Davies said.

Mr. Davies' suggestion that you just make it “up to 10 minutes” for the opening statements gets us to where all the members would feel comfortable. That's how I saw the situation.

The Chair: Let's move the motion, and then we can entertain amendments to it.

Mr. Kelloway, you were moving routine motions. Would you like to move that motion as it stands?

Mr. Mike Kelloway: I will move that motion as it stands, yes.

The Chair: Okay, that is the motion on the floor.

Hon. Michelle Rempel Garner: Mr. Chair, can I chime in on this?

In my experience in the industry committee, we had a couple of meetings cancelled because of technical difficulties with witnesses. My preference would be—and I'm not sure if we can write this into the routine motions—that any scheduled witnesses be required to connect with IT well in advance, the day before if possible, on the computer and headset in the room that they are going to be using, so that these issues don't occur. That's where a lot of the friction came from. It was because witnesses hadn't done that.

It would be my preference for that to become a requirement.

The second thing is that if we're having technical difficulties with a witness and the technical difficulties go longer than their required statement, we move directly into the questions for that witness, if possible and if it makes sense.

I don't like to see technical difficulties with witnesses precluding a meeting from happening. It happened several times to me in the previous committee that I vice-chaired. I'm not sure it's as much a function of the chair as it was of witnesses not being tested by IT ahead of time. Sorry, Joshua.

I think that's the core of the issue here.

The Chair: I think that's a separate motion on how to deal with those kinds of technical issues.

The motion before us right now, which I'm looking for amendments for, is about the time they have for an opening statement and so forth.

I see Mr. Davies has raised his hand. Please go ahead.

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

I'm happy to speak to this motion. I think the motion needs an amendment that says witnesses be given up to 10 minutes.

I noticed something else that I think needs to be addressed. The motion goes on to say, “that, at the discretion of the Chair, during the questioning of witnesses, there be allocated six minutes for the first questioner”.

I would like to see you given discretion over the witnesses' 10 minutes, not over the six minutes that is given to the speakers. I don't think it's the intention of these routine motions to have you determine whether the Conservative Party, Liberal Party, Bloc and New Democrats get six minutes in our first round.

I think there might be a punctuation error. It should say, “that witnesses be given up to 10 minutes for their opening statement at the discretion of the chair”, and then a semicolon. Then it should say, “during the questioning of witnesses, there be allocated six minutes for the first questioner of each party as follows”.

You'll notice that in the second round, there is no discretion—which, by the way, is where you actually do exercise discretion occasionally—where it says the “order..be as follows”. We know that in the second round, you sometimes have to reduce our questioning time proportionally, which is fine. I don't even think we have to say “discretion”, because you've always asked for permission and we always give it to you.

I think we should straighten out that problem in the first round, because the six minutes is certainly not at your discretion. The six minutes should be set down as what it is for each of the parties.

● (1325)

The Chair: Are you making that amendment?

Mr. Don Davies: Yes, Mr. Chair, I will make that an amendment.

The Chair: Could you clarify that amendment, please?

Mr. Don Davies: Sure.

Where it says now, “That witnesses be given...”, I propose we amend it to insert the words “up to” in front of “10 minutes for their opening statement”, then remove the semicolon, the word “that” and the comma. The sentence continues “at the discretion of the Chair”, then semicolon. Then it continues, “during the questioning of witnesses, there be allocated six minutes....”

The Chair: I'm going to speak up for “the discretion of the chair”. Perhaps we should have an amendment...well, we'll deal with that separately.

We have an amendment on the floor. Is there anyone who wishes to speak to that particular amendment?

Go ahead, Mr. Powlowski.

Mr. Marcus Powlowski: I support Don's amendment. It seems like a good idea. I like the fact that we leave open the possibility that people can speak for 10 minutes, because some of the issues we're going to be facing require some explanation, such as testing. The value of testing—its positive and negative predictive value, and those kinds of things—is pretty hard to explain in five minutes to people who aren't familiar with it; however, I think 10 minutes would probably be enough time.

There are a number of issues we'll be looking at that will take more than five minutes to understand. I think this allows enough flexibility, and it also addresses the possibility of cutting people off because we don't have enough time. I support Mr. Davies' amendment.

The Chair: I believe Mr. Kelloway has a point.

Mr. Mike Kelloway: Yes, I have a quick comment in terms of Don's approach. It's a good catch. I like the addition of "up to 10 minutes", and of course, the discretion is in the second round, not in the first round, which is a great catch. I think it's a good move.

The Chair: Thank you.

Is there any further discussion on the amendment?

We have people raising their hands physically on the screen. We also have people raising their hands on the participants' panel. I'm not sure which of the ones in the participants' panel are related to Mr. Van Bynen's motion, after we're done with the routine motions. For the moment, everybody wave to me on-screen if you wish to make a comment on this particular amendment.

Mr. Maguire, please go ahead.

Mr. Larry Maguire (Brandon—Souris, CPC): I was going to go back to what was said earlier about the technical difficulty.

We are certainly faced with a different situation in the virtual meetings. I agree with the 10 minutes, if you're sitting in the House all the time or if we are all together in the committee room. However, we're not, and I think the instruction that we received was that there would have to be co-operation from witnesses in providing written statements well ahead of time. If that's the case, five or six minutes might be enough for us to understand what the witness is saying, even though in a regular setting it would take 10 minutes.

We also don't always get copies ahead of time. We're supposed to, but in this particular direction I thought that was where we were. I expected that even if we were participating virtually, we would receive copies by email or text prior to any witness coming forward, so we'd have a good understanding and it would be to the point, particularly with members of the departments.

• (1330)

The Chair: Thank you.

Is there any further discussion on this amendment?

Go ahead, Mr. Van Bynen.

Mr. Tony Van Bynen: I'm sorry. I think I saw Ms. Sidhu raising her hand. I wanted to alert you to that.

The Chair: Thank you.

Ms. Sidhu, did you have a point?

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

I agree with Don's suggestion. I think it's necessary to ensure everyone has to ask questions in the second round. It's more important.

The Chair: Thank you.

Is there any further discussion on this amendment?

Mr. Davies, you have your hand up on the panel, as does Ms. Rempel Garner. Are these points on this amendment?

Mr. Don Davies: No. I would just conclude that in answer to Larry's concern, if we give you the discretion of up to 10 minutes, then—as Mark has pointed out—if we have a professor from Harvard who's going to be talking about some complex issue, that's something they may need 10 minutes on. A different witness may have fewer points to make, so you can use your discretion. When we talk to witnesses, we can maybe communicate to them that it's a hard 10 minutes, and if they send their statements in advance, we would appreciate their taking as little of the 10 minutes as possible to allow time for questions. I think we can achieve what all of us are saying here by the amendment.

The Chair: Is there any further discussion on this amendment? Seeing none, I'll ask the committee if there is unanimous consent to adopt the amendment. Is there any dissent?

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

The Chair: We now go to the main motion, which has been amended.

Is there any discussion on the motion as amended? Seeing none, I'll ask if the committee is in agreement with this motion. If there is any dissent, please indicate that.

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

The Chair: Ms. Rempel Garner, you had comments about process, such as requesting written copies in advance, and so on and so forth. If you wish to go ahead with that, I think that would be a routine motion.

I should point out that when we ask for written statements from the witnesses, sometimes they don't give them to us in time for them to be translated and distributed, so I would ask that if you have a motion there that you would like to put forward around technical issues and so forth....

Hon. Michelle Rempel Garner: I would say, Mr. Chair, just for the record, if you could encourage IT services to test witnesses where possible ahead of time, as well as request written statements, then that just becomes a practice, and I don't have to raise it as points of order if we have a meeting that is shut down due to technical difficulties.

The Chair: We will certainly do so. We will get our clerk to request that when we invite witnesses, they get their statements in, as I think we need them 72 hours in advance, ideally, to get them translated. We can certainly make that request, absolutely.

Seeing no other discussion on the routine motions....

Mr. Van Bynen, as promised, I said that you would have first shot on substantive motions following the routine motions.

• (1335)

Mr. Tony Van Bynen: Thank you, Mr. Chair.

Mr. Chair, tomorrow, Saturday, October 10, is World Mental Health Day. The motion that I am proposing is to study the impacts of COVID-19 on mental health and the well-being of Canadians.

Over 9,500 Canadians have tragically died due to COVID-19, and every day we're seeing case numbers rise as Canada enters into a second wave. In the spring, we heard from many witnesses who spoke about the physical impacts of COVID-19 and what we need to do to protect ourselves from the virus. I believe we had 34 meetings, 171 witnesses and 51 briefs.

With the exception of one meeting, we didn't hear about the real psychological impacts that we know are happening. Many Canadians are struggling. In April, the CMHA put out a statement that said that Canada must now act to prevent an echo pandemic for mental illness due to COVID-19—a pandemic, unfortunately, Mr. Chair, for which we have no vaccines.

My concern is for a brewing issue that we should address, and we should make sure that we have the effectiveness and efficiencies in the programs to go forward and deal with that before it gets out of hand.

My motion, Mr. Chair, is:

That, pursuant to Standing Order 108(2), the Committee undertake a study, of no less than eight meetings, in order to (a) understand the impacts, including the gendered impacts, of the COVID-19 pandemic on the mental health and well-being of Canadians; (b) analyze the impacts on Indigenous peoples, racialized Canadians, and vulnerable populations in an effort to identify and address support gaps; (c) study the availability of mental health-promotion programs and supports for those experiencing new pandemic-related stress and anxiety and how those supports have been affected since the pandemic began; (d) study the effectiveness and availability of virtual mental health services; (e) analyze how the government can assist provinces and territories in alleviating potential new demands on their healthcare systems resulting from any increase in depression, psychological distress, substance use, PTSD and domestic violence; that the Committee report its findings and recommendations to the House no later than December 7, 2020 and that, pursuant to Standing Order 109, the Committee request that the government table a comprehensive response to the report.

The Chair: Thank you, Mr. Van Bynen.

Hon. Michelle Rempel Garner: Mr. Chair—

The Chair: Ms. Rempel, please go ahead.

Hon. Michelle Rempel Garner: Thank you.

The Chair: Actually, before you do so, let me interject.

This is an important motion, and Ms. Rempel, I am absolutely going to give you an opportunity to respond to it. I'm suggesting that perhaps with the number of studies we have already considered, including the COVID study we were doing prior to prorogation and so forth, that we might want to have a separate business

meeting to deal with all of these issues and to prioritize them, and so I'll ask you all to consider whether you're interested in doing that.

Having said that, I will pass the floor over to Ms. Rempel Garner.

Hon. Michelle Rempel Garner: Thank you, Mr. Chair.

I really do find a lot of encouragement in the spirit of this motion that's on the floor. I try not to put my personal life into the public domain, but as somebody who is separated from her family due to COVID-19 measures, I understand the impact on mental health of some of these measures. Talking to other people who are in situations similar to mine, I know that's tough, and that's just one group of people. There are people who have lost their jobs or who are experiencing domestic violence or mental health breakdowns. It's certainly something that I think is important for our committee to look at.

That said, our committee has been prorogued for some time due to the government's decision to prorogue Parliament. Today we are seeing record numbers of cases in Ontario, as well as shutdowns of businesses again. This particular issue needs to be looked at not just in light of the evidence that was considered in the previous session of this Parliament but also in light of what has happened over the last couple of months. We need to have answers on the rapid testing procurement process, vaccine status and the decision to shut down the early warning system. There are several issues 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. I certainly support this particular motion, but it needs to be done in the context of a larger motion and within the larger picture.

The other thing I would say, Chair, is on your comment to reschedule this for a separate business meeting. I don't agree with that. We've lost nearly two months of this committee and we're in the middle of what I would call not a second wave but a tsunami. There are things that this committee has to look at with regard to its role and to scrutinizing the government's response.

I know there is a desire among certain committee members to look at a perhaps more holistic motion, and with that, I move to adjourn debate on this motion.

• (1340)

The Chair: We have a motion to adjourn debate. I believe that is non-debatable, so I will ask the clerk to conduct a vote.

(Motion agreed to: yeas 6; nays 5 [*See Minutes of Proceedings*])

Mr. Don Davies: Mr. Chair, on a point of order, with regard to future conduct of the committee, that was an unusual voting order. Generally the votes always begin with the government side and then go through the official opposition, the Bloc and us. I just found it unusual to start voting in that order, so it's something I think we should straighten out for future votes.

The Chair: Thank you, Mr. Davies.

I believe that the voting order is at the discretion of the clerk, but if the clerk wishes to speak to this he can. We can certainly consider this as something to take up later.

The Clerk: I will adjust to the will of the committee. I don't mind, honestly. I'm sorry about that.

The Chair: Ms. Rempel Garner is next.

Hon. Michelle Rempel Garner: Thank you, Mr. Chair.

I move:

That, pursuant to standing order 108(2), the Standing Committee on Health commence a study on the emergency situation facing Canadians in light of the second wave of the COVID-19 pandemic, and that this study evaluate, review and examine all issues relevant to this situation, including the following:

- a) rapid and at home testing approvals and procurement process and schedule, and protocol for distribution;
 - b) vaccine development and approvals process, procurement schedules and protocol for distribution;
 - c) federal public health guidelines and the data being used to inform them for greater clarity on efficacy;
 - d) current long-term care facility COVID-19 protocols as it pertains solely to federal jurisdiction;
 - e) the availability of therapeutics and treatment devices for Canadians diagnosed with COVID-19;
 - f) the early warning system Global Public Health Intelligence Network (GPHIN);
 - g) the government's progress in evaluating pre or post arrival rapid testing for travellers;
 - h) the availability of paid sick leave for those in quarantine and voluntary isolation;
 - j) the adequacy of health transfer payments to the provinces in light of the COVID-19 crisis;
 - k) the impact of the government's use of WHO advice in early 2020, decision to delay the closure of borders and delay in the recommendation of wearing of masks on the spread of COVID-19 in Canada;
 - l) the Public Health Agency of Canada's communication strategy regarding COVID-19;
 - m) the development, efficacy and use of data related to the federal government's COVID-19 Alert application;
 - n) the impacts of COVID-19 on mental health;
 - o) Canada's level of preparedness to respond to another pandemic, and;
 - p) the availability of PPE in Canada and a review of Canada's emergency stockpile of Personal Protective Equipment between 2015 and present;
 - q) The government's contact tracing protocol, including options considered, technology, timelines and resources, and;
 - r) the government's consideration of and decision not to invoke the federal Emergencies Act;
- that this study begin no later than October 20, 2020, that the Committee table its findings in the House upon completion, that the government provide a response to these findings within 30 sitting days, and that evidence and documentation received by the Committee during its study of the Canadian response to the outbreak of the coronavirus commenced during the 1st Session of the 43rd Parliament be taken into consideration by the Committee in the current study.

2. That in order to fully study this emergency situation;

(a) an order of the committee do issue for all memoranda, e-mails, documents, notes or other records from the Prime Minister's Office, the Privy Council Office, the Office of the Minister of Public Safety and Emergency Preparedness, Office of the Minister of Health, Health Canada and the Public Health Agency of Canada, concerning options, plans and preparations for the Global Public Health Integration Network, since January 1, 2018, provided that these documents, organized by department, shall be provided to the clerk of the committee within thirty days of the adoption of this motion;

(b) an order of the committee do issue for a record of all communications between the government and the World Health Organization in respect of options, plans or preparations for any future operation, or absence thereof, of the Global Public Health Integration Network, since January 1, 2018 provided that these documents, organized by department, shall be provided to the clerk of the committee within thirty days of the adoption of this motion;

(c) an order of the committee do issue for all memoranda, e-mails, documents, notes and other records from the Prime Minister's Office, the Privy Council Office, the office of the Minister of Public Services and Procurement, the office of the Minister of Health, Health Canada and the Public Health Agency of Canada, concerning plans, preparations, approvals and purchasing of testing products including tests, reagents, swabs, laboratory equipment and other material related to tests and testing applications used in the diagnosis of COVID-19, since March 19, 2020, provided that these documents, organized by department, shall be provided to the clerk of the committee within thirty days of the adoption of this motion;

(d) an order of the committee do issue for all memoranda, emails, documents, notes and other records from the Prime Minister's Office, the Privy Council Office, the office of the Minister of Public Services and Procurement, the office of the Minister of Health, Health Canada and the Public Health Agency of Canada concerning plans, preparations and purchasing of personal protective equipment including gowns, gloves, masks, respirators, visors and face shields since, March 19, 2020, provided that these documents, organized by department, shall be provided to the clerk of the committee within thirty days of the adoption of this motion;

● (1345)

(e) an order of the committee do issue for all memoranda, emails, documents, notes and other records inclusive of correspondence with contracting firms and companies, from the Prime Minister's Office, the Privy Council Office, the office of the Minister of Public Services and Procurement and the office of the Minister of Innovation, Science and Industry concerning plans, preparations, article 1.3 designations and purchasing of ventilators since March 19th, 2020, provided that these documents, organized by department, shall be provided to the clerk of the committee within thirty days of the adoption of this motion; and

(f) that, to protect against the premature disclosure of national security matters, or personal privacy information, contained in the documents provided to the clerk prior to the release of the documents by the Clerk of the Committee, any potential redactions be undertaken by the Office of the Law Clerk and Parliamentary Counsel, provided that the process for redactions begin the day after the documents have been provided to the clerk of the committee, and shall last no longer than seven days, unless granted an extension by unanimous vote of the committee, and (i) that redactions be limited to the protection of national security matters, or personal privacy information to the exclusion of all other reasons, and (ii) that in the event of a request for an extension the request be accompanied by the release of all documents for which redactions have already been completed, and (iii) that in the event of multiple requests for extension, all documents for which redactions have been completed since the last request for an extension must accompany any additional requests for extension, and (iv) no request for an extension may exceed seven days and all extensions shall be granted only by unanimous vote of the members of the committee; and

(g) seven days after all documents have been provided to the Clerk of the Committee or the deadlines for their production have elapsed, as the case may be, and the redaction process mentioned in subparagraph (b)(ii) has concluded, invite the Minister of Health, the Minister of Public Services and Procurement, the Minister of Public Safety and Emergency Preparedness, and the Minister of Innovation, Science and Industry each to appear separately before the committee for at least three hours, provided that in respect of each of them who does not agree, within one week of the adoption of this motion, to accept this invitation for the length of time prescribed, the Chair shall be instructed to report to the House forthwith a recommendation that this committee be empowered to order his or her appearance from time to time.

Mr. Chair, you, the members of the committee and the clerk should have received the full text of this motion in both official languages.

I realize that this is a lot; however, this committee has been inactive for some time, and we are in one of the greatest public health challenges that our country has ever faced. Many of the documents that I am proposing that the committee compel have been discussed in this committee before, and their coming to light was delayed by prorogation.

I think it is very important right now for our committee to get back to work and to be doing our job regardless. None of us has a government appointment, outside of Mr. Fisher, so our job is to hold the government to account across party lines to make sure that the government is serving the best interests of Canadians with the best possible response to the COVID-19 pandemic.

I certainly urge members of the committee to support this motion. It will allow us to get to work right away.

Also, we should not delay the compulsion of these documents. We will be going into a parliamentary recess over the next week, after being prorogued for some time. The adoption of this motion today will allow folks who are involved in pulling those documents—who should have been doing that already, because of the session in the previous Parliament—to finish that work in an expedient manner and allow us to start reviewing that information as quickly as possible.

If there are arguments made today that there is not enough time to review this, there is really nothing new here. These are all things that have been brought up in question period and in previous sessions of this committee, but we're now in a second wave, and the results of the government's response are showing, with an increase in cases as well as another economic shutdown in parts of the country, and that's concerning.

I would like to have this motion adopted today. I have endeavoured to include my colleague's component on mental health. I do think that's important, but it has to be considered within this broader context, so I would like us to get to work. I would like all members of this committee to really think about this in terms of their obligations as individual members of Parliament, not as one political affiliation or another who might be leaned on by the centre of their party. We need this done; we need this done well. I will not accept any delay on this issue. I will not accept any argument that we somehow need to wait.

You do have the motion in front of you, and I certainly hope we can proceed to adopting it.

• (1350)

Ms. Sonia Sidhu: I have a point of order, Mr. Chair.

The Chair: Yes, Ms. Sidhu, go ahead.

Ms. Sonia Sidhu: Mr. Chair, the opportunity was not given to me. I had my hand raised in the Zoom and physically, but the opportunity was not given to me.

I would like to bring my motion forward. My hand was up before Ms. Rempel Garner's.

Hon. Michelle Rempel Garner: I have a point of order on that point of order, Mr. Chair.

The Chair: Thank you.

Thank you, Ms. Sidhu. Ms. Sidhu, I apologize. That was my error. However, I did give the floor to Ms. Rempel Garner. I think that has to stand, but I do apologize. I'll have to keep an eye on that panel a lot better than I have been.

Hon. Michelle Rempel Garner: On a point of order, Mr. Chair—

Ms. Sonia Sidhu: But Mr. Chair—

Hon. Michelle Rempel Garner: I have a point of clarification, Mr. Chair. I would direct Ms. Sidhu's attention, when the minutes of this meeting come out, to the fact that after you had recognized Mr. Van Bynen, I believe, prior to reading the motions, I said that since you were taking a speaking list, I would like to speak first. You recognized me for that. In terms of proper procedure, you put me second on the speaking list.

Thank you.

Ms. Sonia Sidhu: Mr. Chair, may I speak?

Mr. Chair, if you can check on the Zoom...

The Chair: Just hold on one second.

Ms. Rempel, I did give you second place for responding to Mr. Van Bynen. Also, I did recognize you, later on, to move your motion. That was my mistake.

Ms. Sidhu, go ahead. You have something further to say.

Ms. Sonia Sidhu: Mr. Chair, I have a right to present my motion if my hand is raised in the Zoom before Ms. Rempel Garner.

The Chair: Unfortunately, I did give the floor to Ms. Rempel Garner. That was my mistake. I apologize.

With respect to Ms. Rempel Garner's motion, it's enormous. I think certainly there are aspects that are clearly within our mandate, but in terms of the whole motion, I don't think it's appropriate for me to rule on whether it's in order until I can see it and examine it in its entirety, so I would ask that this decision be deferred.

I'm not—

• (1355)

Hon. Michelle Rempel Garner: Mr. Chair—

The Chair: Sorry.

Ms. Rempel Garner, go ahead.

Hon. Michelle Rempel Garner: Mr. Chair, are you ruling this motion inadmissible?

The Chair: I am asking for time to analyze the motion and determine whether it is, in fact, in order.

Hon. Michelle Rempel Garner: On a point of order, Mr. Chair, I do not give you that time. It is on the floor and it is in order. Are you deeming it in order?

Mr. Tony Van Bynen: Mr. Chair, my point of order—and it goes to Ms. Sidhu's comment—is that if my memory serves me correctly, as I think the record will show, you permitted Ms. Rempel Garner to respond to my motion, but you did not make a commitment to permit her to put forward a motion.

My thought is that if in fact that was the case—and the record will show that—then I believe Ms. Sidhu's motion should be before us, before Ms. Rempel Garner's motion.

Hon. Michelle Rempel Garner: To respond to that point of order, Mr. Chair, Bosc and O'Brien actually does not support that particular analysis. You did give me the floor, my motion is in order and it's on the floor right now. I believe that we should be debating my motion, according to the rules, which I have right here.

The Chair: We have....

Ms. Sonia Sidhu: Mr. Chair, can we ask the clerk? If I raised my hand in the Zoom, I think I have the right to present this motion. This motion is very important for me, too.

The Chair: I believe the problem is my mistake. I did give Ms. Rempel Garner the floor when I should have given it to you. That was my mistake. She did have the floor.

I'm going to focus on the participants' panel and whose hands are up there.

Mr. Kelloway, your hand is up.

Mr. Mike Kelloway: One of the things I was going to say, Mr. Chair, is to maybe refer to the clerk for his thoughts as well.

I appreciate Ms. Rempel Garner's motion on the table, but I need to be able to go through, line by line, anything that I'm going to vote on for my constituents—and for the constituents of Canada—to ensure that I'm aware of what I'm voting on. Every syllable needs to be reviewed by me. I would asked for that to be deferred, but I will defer to you and to the clerk and to others in this debate.

The Chair: Thank you, Mr. Kelloway.

Ms. Sidhu, I see your hand is up on the participants panel.

Ms. Sonia Sidhu: Mr. Chair, can you examine the digital rules? Can you ask the clerk?

This motion is very important to me. I really want to present this motion.

The Chair: Thank you, Ms. Sidhu.

I wonder if the clerk would like to comment here.

The Clerk: Yes.

Well, the chair has recognized Mrs. Rempel Garner, so....

Can we just have a little chat by phone, Mr. Chair, just to make sure that...? Can we suspend for, like, two minutes?

Hon. Michelle Rempel Garner: On a point of order, Mr. Chair, I don't believe the clerk can ask to suspend the meeting. Only you can do that.

The Chair: I'd like to talk to the clerk anyway and find out what the straight scoop is on this. I will suspend the meeting for a couple of minutes.

Thank you.

• (1355) _____ (Pause) _____

• (1400)

The Chair: Thank you, everyone. We can resume the meeting.

I have not actually seen this motion in writing. It was sent a very, very short time ago. I don't think it's reasonable for me to rule on this order without fully being able to analyze it. I think it's very difficult for all of our members, on both sides of the House, to consider this motion. It's a massive, huge motion, and I think it deserves proper evaluation and analysis.

Again, I would like to defer that decision until I have a chance to examine the motion.

Hon. Michelle Rempel Garner: On a point of order, Mr. Chair, there is no actual way for you to do that.

The Chair: That being the case—

Hon. Michelle Rempel Garner: I mean, you can ask, but we have been prorogued for a long period of time. We can take as long as we need today for members to read it while we're sitting here. We have time scheduled. We have a full other hour. I know that I read a lot more in a lot shorter period of time than that.

The motion is in order and it is on the floor. People can debate it now if they'd like, but it is in order, and we should be moving to debate.

The Chair: Well, whether it's in order or not is actually a decision of the chair. However—

Hon. Michelle Rempel Garner: As a point of clarification, Mr. Chair, are you ruling the motion in order or out of order?

The Chair: I'd prefer not to rule on it at this time, because I haven't really had a chance to digest it, nor have any members of the committee, other than perhaps yourselves. However—

Mr. Mike Kelloway: Mr. Chair—

The Chair: Go ahead, Mr. Kelloway.

Mr. Mike Kelloway: I suppose it's a point of order. I'm going to make the motion that we adjourn debate on this one. I think it's essential that we have time and not have to do it within an hour. It's not a game show. It's not a time-limited thing.

The Chair: If you wish to adjourn the debate, you need to move to adjourn the debate and say nothing afterward. Do you wish to move to adjourn the debate?

Mr. Mike Kelloway: Yes.

The Chair: We have a motion to adjourn the debate on the floor.

Mrs. Karen Vecchio (Elgin—Middlesex—London, CPC): I request a recorded vote.

The Chair: Absolutely.

Mr. Clerk, would you carry on with the vote?

Hon. Michelle Rempel Garner: On a point of order, Mr. Chair, I believe Mr. Kelloway moved this motion on a point of order, which he can't do. Can I just get the clerk—

The Chair: I believe you can't move a substantive motion on a point of order. I will ask the—

Hon. Michelle Rempel Garner: Could I get a clarification from the clerk on what happened there?

The Chair: Please go ahead.

Actually, I didn't recognize him on a point of order, but he did say "point of order" when he spoke—

Mr. Kelloway: I did.

The Chair: —but he was not recognized on a point of order. I'm going to say that despite his saying he was bringing a point of order, he was not recognized as such, so we will carry on with the vote.

Carry on, Mr. Clerk.

(Motion negatived: nays 6; yeas 5 [*See Minutes of Proceedings*])

The Chair: The motion to adjourn debate is not adopted, so we will carry on.

I am going to rule the motion out of order at this time—

• (1405)

Hon. Michelle Rempel Garner: Mr. Chair—

The Chair: Ms. Rempel Garner, I'm still speaking.

I'm going to rule the motion out of order at this time, pending the opportunity to review it—

Hon. Michelle Rempel Garner: Mr. Chair—

The Chair: —and analyze it.

A voice: It's right there.

The Chair: Go ahead, Ms. Rempel.

Hon. Michelle Rempel Garner: Thank you, Mr. Chair.

I challenge your ruling.

The Chair: Thank you.

Mr. Clerk, the motion is to sustain the ruling of the chair.

Mrs. Karen Vecchio: Can we have a recorded vote, please?

(Ruling of the chair overturned: nays 6; yeas 5 [*See Minutes of Proceedings*])

The Chair: The ruling of the chair is not sustained. Therefore, it would apparently be in order.

Mr. Davies, go ahead.

Mr. Don Davies: Thank you. I would like to speak to the motion. I might also just say that in my 12 years in Parliament, I have never heard anybody raise a point of order that someone else was recognized before they were. You know, we are going to have to have some stable rules and respect of the process in this committee. When the chair recognizes that someone has the floor, we can't be complaining after the fact that we should have been recognized.

Second, I am very glad that the committee saw fit to overrule your attempt to declare a motion out of order when it had been validly moved. You know, we may not like a motion before us, but that's not a reason to prevent us from discussing it. We are in our first committee and we are discussing committee business, and it is wholly in order for any member of this committee to put forward any motion they want—short, long, simple, complex—as they see fit. Complexity is not a reason for ruling a motion out of order.

Now, to the motion itself, to be honest, I am surprised that anybody on this committee—in particular the Liberals, who sat through eight months or really seven months of study on COVID with me—would find anything complex or challenging about this motion. Really what this motion does is a couple of very important things. It adopts all of the evidence that we heard from the previous session and, second, it continues the extremely important work this committee has in looking at the COVID-19 issue on a holistic basis. There is nothing surprising and nothing complex or disturbing and nothing that should be controversial about this motion.

I want to say, as my colleague Michelle Rempel Garner said, that we are facing the biggest public health crisis in a century, and while I totally respect the motion that was raised by Mr. Van Bynen to segregate this committee's attention onto mental health, as vitally important as that is, it is not the only issue facing this country as this point in time.

We are in the middle of a second wave. In fact, some might even argue that we are in a continuation of the first wave. Our two largest provinces in this country, Ontario and Quebec, are on red alert, with a thousand cases of COVID occurring in Quebec and, I think, cases approaching that in Ontario. As we speak, we are approaching the same high level of pandemic that we were experiencing back in March or April.

Now, HESA of course has a critical role to play in this. It's our job to evaluate the effectiveness of the federal government's response and, first and foremost, fundamentally to protect Canadians. That is what we are doing here across party lines, and I believe all of us share that same goal. It's about not only holding the government accountable but also the larger purpose of making sure that we can produce information that will allow the government to provide the best possible health care, safety and protection for Canadians.

In the last session, of course, all of us were dealing with COVID-19 on the fly. When this committee was meeting in March and April, it was unprecedented. We had no real context. We had no real experience. I remember back in March the health minister of Canada saying that the risks of COVID-19 were low. I remember the chief medical officer, the public health officer of Canada, saying that not only were masks not helpful but that they were harmful. Of course we had, I remember, Dr. Theresa Tam telling this committee that there was no real evidence of community transmission or asymptomatic transmission. These were all arguably somewhat forgivable errors back in March or April. It's now October. We have a lot of context here. We are facing a deepening of this crisis that, if you listen, public health officers across this country are warning us could get disastrous.

Therefore, I think it's incumbent on this committee to have a broad study. I think that the itemization is not exclusive; it is inclusive. The motion that's before us lists a number of things that I think are critically important for this committee to be studying, things like vaccine development. If there is one thing that Canadians are waiting for to get our economy back on track and to get public health taken care of, it's to develop a vaccine as soon as possible and to get that distributed.

• (1410)

We need to be delving into this to find out where we are with it. This can't be done by a task force in secret. We need all Canadians.... This committee has a right to ferret out full information on this, because it's the number one public health concern of every Canadian in this country.

I want to know why the early warning system, the GPHIN, was cancelled. I want to look into this, not necessarily only to hold people accountable, although that's critical, but also because I want to know if this network is back in operation. If not, why not? Who made the decisions?

On the adequacy of health transfer payments, which has been a very important priority to my Bloc colleague, it is critically important to look at whether our provincial and territorial governments have the resources they need.

On our level of preparedness for the next level of the pandemic, we know—let's face it—that the current and previous governments were caught with their pants down in preparing this country for a pandemic. We did not have sufficient PPE in this country.

As we stand on the verge of perhaps a second wave or a deepened wave, surely every person on this committee should want to do everything we can to find out how prepared we are today.

These are the kinds of matters covered by this motion. As much as Mr. Van Bynen's motion is absolutely something that should be looked into—I note this motion does look at the very important part of mental health—for us to limit ourselves just to mental health issues in light of all the rest of what I said would be flagrant irresponsibility and a dereliction of duty of this committee.

I want to conclude by saying one thing about redaction. Prime Minister Trudeau famously said that his government would be open by default. He pledged that the government would be transparent.

When this committee asked for documentation to be provided—and we limited the criteria of redaction in our motion—it was ignored by the government. The ministry redacted information on 15 grounds, the grounds listed in the Access to Information Act, and not the criteria we specifically limited them to in our motion.

In my opinion, that was contempt of Parliament. It's not going to happen again. This motion requires the production of documents to this committee be limited only to redaction for national security concerns and personal privacy concerns. That's as it should be. In order for this committee and its members to do their job, we have the right and the ability to have the documentation before us unvarnished, so we can see the information on behalf of Canadians and do the job they elected us to do.

These committees are not nuisances to government. These committees aren't inconveniences to be managed by the government. We play a critical role in the parliamentary process. Part of that is to act as a second set of eyes and a set of information, and, to a wise government, a source of helpful information. We can't do that job if the government is censoring the information that comes before this committee.

I want to put down a marker right now that if this motion is passed, the information that comes to this committee better not be redacted beyond the information specified in this motion or that will be a clear and premeditated contempt of this committee.

Every member of this committee has an independent obligation to get the information we need to do our job. I can't imagine anybody, even on the government side—unless they are just doing the bidding of the government—who would want to limit the information this committee can see.

For all these reasons, I very much support this motion. I want to continue this committee's very critical work to examine the most important public health issue in this country.

There are a thousand issues in public health, and there are many that are extremely important. We all know what they are. Everyone on this committee has priorities, but surely we can all agree that standing above all of them right now is a global pandemic that is crippling our economy, killing our senior citizens in long-term care homes and threatening the health of Canadians from coast to coast.

I urge my colleagues to vote in favour of this motion. Once again, there is nothing complex about this motion; of course it is in order.

• (1415)

We should all be, I would hope, unanimous in getting back to the business of putting the health of Canadians before partisan interests and getting the study under way as soon as possible.

The Chair: Thank you, Mr. Davies.

We will now go to Mr. Kelloway.

Mr. Mike Kelloway: Thanks so much, Mr. Chair, and thank you, Mr. Davies, for your comments.

Most of everything that's been said today has a profound impact on Canadians. The pandemic has ravaged individuals, communities and sectors. It has touched mostly every facet, if not all facets, of life.

When I thought about voting on the motion, I looked at the e-mail I received. I think I received the motion at 2:52 p.m. Atlantic standard time. It's now 3:18 p.m. It's absolutely serious to every parliamentarian. For someone to own that, or say that perhaps it's of less importance to a particular group or party.... We're all in this together.

What I'm suggesting is that we take a little time to actually read what's been presented. Yes, our committee was one of the few committees that met during COVID. We interviewed copious numbers of witnesses, important witnesses, people who are impacted by this pandemic and people who are on the ground servicing the needs of people who are impacted by it. However, if we take just a little time to review, to do the due diligence that's important to do as parliamentarians, I think we'll do the people of Canada a great service.

All I'm asking for is the ability to take a look at this and give it a thoughtful reading. I think that's what Canadians expect, and I don't think they would expect anything less of us.

The Chair: Thank you, Mr. Kelloway.

[*Translation*]

Mr. Thériault, the floor is yours.

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

Before I talk about the motion, I would like to emphasize something. We will have to get organized in order to properly see and manage the raised hands appearing on the table. I raised my hand a long time ago. At that point, we were not many. There were Mr. Van Bynen, Mr. Davies and Ms. Rempel Garner. I can wait for you to give me the floor, I don't want to prolong debates, but the speaking order will have to be managed better, Mr. Chair. At some point, I was turning the raised hand function on and off because I wanted to let you know there was no interpretation. I don't want to keep experiencing this over the next six months. When there is an issue with interpretation, we have to stop. Someone has to let you know, and we have to stop everything, out of respect for the interpreters and for me as a francophone. That said, it's lucky that I received the proposal.

I will not speak for too long. In brief, I agree with all of Mr. Davies' remarks. I just want to talk about the merits of this motion. We worked very hard for five months, and I don't want to throw all that away. During the biggest health crisis the planet has known, the government decided to prorogue Parliament. That is its decision. However, we will not put aside those five months of tireless work.

In my view, the merit of this motion lies in its continuity. What has already been done will be part of what still needs to be studied. Another advantage of the motion is its global vision. After we began our work, five months ago, the problematic issues, the chapter headings, were added week by week. My first reaction was to note that we have a very robust work plan. We have hard work ahead of us, but Canadians deserve that we do it.

This is the advantage I am seeing to this motion, which effectively covers all the issues. That is why I support it.

I will stop here.

• (1420)

The Chair: Thank you, Mr. Thériault.

[*English*]

The clerk advises me that Ms. Vecchio is next.

Go ahead, Ms. Vecchio.

Mrs. Karen Vecchio: I recognize that we may go a bit longer than three o'clock, so I just want to make sure we recognize that we will not be suspending or adjourning at 3 p.m. and that we will continue this discussion.

I know many people seem to have reasons for not supporting this motion, but as a member from Ontario, where we're seeing the horrible things that are happening—

[*Translation*]

Mr. Luc Thériault: Mr. Chair, there is no interpretation.

[*English*]

The Chair: Excuse me, Ms. Vecchio, we have a problem with the translation.

Mrs. Karen Vecchio: Okay. I will stop. Thank you.

The Chair: Mr. Thériault, are you getting the translation now?

[*Translation*]

Mr. Luc Thériault: The issue is likely related to the fact that Ms. Vecchio has no microphone and the interpreters cannot interpret her comments.

My apologies, Ms. Vecchio, but I do not want to begin the committee's work being marginalized.

Thank you.

[*English*]

Mrs. Karen Vecchio: I have no headset. It's my fault. I can put it back to the floor. That's okay.

The Chair: Thank you, Ms. Vecchio.

Mr. Thériault, Ms. Vecchio was advising that we can go past the top of the hour and doesn't want to suspend or adjourn at that time.

Now we will go to Ms. Rempel Garner.

Hon. Michelle Rempel Garner: I have no further comment at this time.

The Chair: Okay. Going back to the participants' panel, I see Dr. Powlowski is next.

Mr. Marcus Powlowski: Yes, you keep getting that wrong, Ron.

It's looking kind of bleak for the Liberals here. This seems to be decided upon.

It may surprise those in the opposition to know that I don't actually have a lot of disagreement with a lot of what any of you have said. I absolutely agree that COVID-19 is the number one issue facing Canadians right now. There is a priority. I do in fact like what Ms. Rempel Garner said about getting to work on this. As a long-time emergency room doctor, in that life when we say we have to do something right away, it means within seconds or minutes. There aren't weeks or months for answering questions.

Given the importance of this crisis, I do agree we have to start looking at it. As for the motion itself, there was a very long list of things that we ought to be looking at. I think it was pretty comprehensive in that it dealt with pretty well all of the problems related to COVID. On all those things, I agree; however, I do have some disagreement.

First, you've provided a great big long list of things. I don't know if you had a paragraph (z) for all other matters related to COVID not included in the list, because I don't know if that's a comprehensive list. To accept that motion means that we've accepted this comprehensive list, and I'm not sure that the list is comprehensive. I think other things could be included on that list.

I think this is an evolving situation. As time goes by, there may be other things that we didn't really think about that will become more priorities. For example, I don't know if on that list was concern about COVID-19 getting into isolated indigenous communities. That's certainly been a big concern. Influenza was really devastating in those communities. I don't know if that's on that list. If we vote and say, "Yes, okay, we're going to vote for this," what about that? It wasn't on the list, so are we not going to do it? That doesn't make sense to me.

Second, there's no prioritization. I totally 100% agree we stay on COVID. This is our number one problem in Canada. It's our number two problem in Canada. It's our number three problem in Canada. For many of those who've spoken, I do believe that the health committee can serve a constructive role in addressing this problem and be a forum to bring up many ideas that we have to look at. We have to prioritize which things in COVID we're going to look at. This list, in setting the agenda, has no prioritization in what we're going to do.

Those are a couple of substantive issues I have with it. In the previous session, I think we worked pretty well together. I think we decided together what things we wanted to study. Together, we called witnesses. In a way, I think we did rise above petty politics in dealing with this issue. That's what we should continue to do. I don't know. This seems to me to be a bit like petty politics in that we've allowed one party, the Conservative Party, to set the agenda, set the table, and then we all follow suit.

Included in that, you throw in the request for procurement of a bunch of documents with no redactions. Maybe I'm just a stupid doctor and not quite as complex as you people, but that was a very long motion, and by the end of it, I can't say I was falling asleep, but I was starting to lose track of all the things that were in the mo-

tion. I'm not sure what was actually said about redactions, but obviously this is a big issue.

I think almost everybody agrees that there probably ought to be some redactions of, for example, personal privacy issues. If there are things in documents that are related to individual names, I think we can probably all agree that we don't want that kind of information coming out. There might be things to do with national security. You've thrown it all together in a kind of omnibus motion.

● (1425)

There's a lot of good stuff in there. Yes, you've outlined a lot of the important measures related to COVID, but you've thrown in these other things that are problematic. I don't think the redaction issue is really nice and clear and that we can come to an easy agreement on it.

I think we ought to collectively decide that, yes, we're going to deal with COVID, but decide what issues we want to pursue with respect to COVID, what meetings we want to have, and then take the procurement of documents issue as a different thing, rather than addressing it all together in one omnibus motion.

Thank you.

● (1430)

The Chair: Thank you, Dr. Powlowski.

I believe we go now to Mr. d'Entremont. Go ahead, please.

Mr. Chris d'Entremont (West Nova, CPC): Thank you very much.

I have just a little point of order before I get going. A number of hands are going up, and I know some have spoken and some haven't. I just want to know if it's going to be the clerk or the IT folks who will be taking their names off the list or whether we as members should take our names off the list once we've spoken.

The Chair: That's a good question. I actually have a conversation going with the clerk about that very matter. I'm hoping that we can focus on the participants panel and the hands raised there to manage our speaking list. If you've spoken and your hand does not go away from the speakers list, please take it off, but I believe it should be up to the administration, the staff, to probably do that. I'm getting the thumbs-up from Mr. Clerk on that.

Please go ahead.

Mr. Chris d'Entremont: Perfect.

I just wanted to support the motion the way it is. I've had the opportunity in the time that Mr. Davies and Dr. Powlowski were speaking to read it a couple of times, even to the point of what Dr. Powlowski was talking about when it came to personal privacy. Paragraph (f) clearly lays that piece out within the motion that we have before us.

There's a reason that some of this is here. As a new member of this committee, I've been paying attention to what the committee had been doing previously. I think it's a very good way to take information that should have already been compiled in the previous run of the health committee and be able to bring that stuff forward for our consideration as we've started to look at the number one issue in Canada today, which is COVID. Which part of COVID do we want to focus on? I think all are as important as each other. I think this motion is able to prioritize it a little to understand that this is a very complex health situation that is before us. There should be nothing here that is a surprise to the previous members of this committee, or even to the new members.

Here's the part that upsets me a bit as you bring these things forward. The Prime Minister uses it and other members of cabinet use it. We continually hear that we're all part of team Canada. We should be working together on things that are important to Canadians, and I agree with that. I do agree that we should all be part of team Canada and make sure that our constituents are getting the services they require to get over this issue, but I can tell you, as an opposition member, that I do not feel like I'm a part of team Canada. It's team Liberal; it's not team Canada. I ask for information. We try to get stuff shared with us all the time and we continue to hit the blocks. We hit issues. We're not getting what we need.

I think this motion tries to put some of those things back on track so that we understand where the government is, where it has been and where it is going so that we can all continue to be part of this so-called team Canada.

The last point I want to make is that I know Mr. Van Bynen wanted to bring the issue of mental health forward, one that we all think is very important, and of course looking at the effects on mental health of COVID-19 is included in this motion. There's already some appreciation of what everyone in this committee is looking for.

Those are my quick comments for today.

The Chair: Thank you, Mr. d'Entremont. Did I say that reasonably correctly?

Mr. Chris d'Entremont: You had it right on—d'Entremont. You used the best French word you can use there.

The Chair: Thank you.

We go now to Mr. Fisher. Please go ahead.

• (1435)

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

Hello, from self-isolation in Nova Scotia, in a friend's basement where I have my Surface Pro, which is where I read my email. I'm on Zoom on my Surface Pro.

I've not read this motion. I think Dr. Powlowski called it an omnibus motion. There's a lot in there, guys.

I think it would be reasonable, since we talk about transparency, that we should be able to take a look at this. I have not seen this in print. I try to take a quick glance at it when I take my eyes off the screen for a minute.

Mr. Chair, as Mr. Kelloway said earlier, he wants to break it down and read this motion to see exactly what this is. Maybe there are amendments to be made. Maybe this is something that this committee supports with amendments. I can't even think of an amendment right now, because I haven't seen this motion in print. I would love to take Thanksgiving weekend.... By the way, I won't be with my family for Thanksgiving weekend because of isolation.

I would love to drill down on this to see what's in there. I have some concerns with regard to Mr. Thériault as well. I'm not sure what he got, but this came in at 2:52 on Nova Scotia time.

Again, if this were a short little motion and we got it at 2:52, I think it would be fairly reasonable to have a conversation about it. We could look at it and we could decide whether there are things we'd like to suggest amendments on. This is too big to look at to even suggest amendments on a Friday afternoon before a long weekend, when I would have to basically shut off my Zoom screen in order to scroll through this omnibus motion.

Maybe—and I'm looking at all your pictures here—no one else minds the fact that they got this motion.... I'm assuming that everybody got it at the same time. I know Don Davies is a speed-reader—my gosh, he had a really good handle on this motion—but I just don't feel that I have a handle on that motion. I would seek that transparency we talk about, and that level of reasonableness. Give us a chance to look at this motion and maybe propose amendments, and maybe the next time we meet, we could sit down and come up with something that works for everybody.

Those are just my thoughts on something that's really a very large motion.

Mr. Chair, I would love to have the weekend to take a look at this.

The Chair: Thank you, Mr. Fisher.

We go now to Ms. Sidhu. Ms. Sidhu, go ahead, please.

Ms. Sonia Sidhu: Thank you, Mr. Chair.

I agree with what Mr. Davies was saying. We are having Canada's worst health crisis. I have seen these impacts, including in my own riding. The CF report on long-term care homes included one home in my riding. These issues are extremely important. We need to analyze these things properly. PROC had a similar long motion that came forward, and they had to take time to analyze it properly. As Mr. Fisher was saying, it's long. I know we have to analyze it properly in the next three days before moving forward on it.

All of us on this committee want to do good work for our constituents and for the country. We have to be reasonable and work together. I think it's reasonable to take some time to go through this very long motion. As Mr. Davies said, we were working through COVID for seven months. We did a lot of good work. We heard many, many witnesses from many parts of the country.

I would also like to speak on the importance of my friend Tony's motion. It's so important. Limiting the discussion of COVID-19 by studying what he proposed, and narrowing it to the part of the pandemic is important. The mental health of many Canadians is affected. The mental health impact of COVID-19 is real.

It is here, and things are only worsening with COVID-19. I was at my youth council yesterday, and they were telling me horrible, horrible stories. That is why it's so important, as well, because in different parts of the country people are being told to stay home once again. I'm from Peel, and the cases there are rising. We need to prioritize issues. May I mention the Canadian Mental Health Association and its CEO, Margaret Eaton, who also came to HESA? Members know that. There were mental-health-related COVID-19 meetings. She phrased it as, "We are experiencing two pandemics. The first is obviously COVID-19. The second is the mental health impacts of it."

She also said we are at the tip of the iceberg in understanding the impact this pandemic is having on Canadians' mental health.

CMHA did a study and found that Canadians are feeling more isolated than ever. According to CMHA, 47% of people are feeling more alone than before. Luc said earlier that we were looking at many issues under COVID-19. I think it is important to focus on one area and then move forward on the next one.

I appreciate what my other colleague said about the importance of being on team Canada. I would agree. We must work together, and Canadians expect us to work together. Providing an extremely long motion during a meeting and not allowing members to have time to review it is not exactly operating as a team.

I have not had the time to properly assess the motion, but I want it. There's so much to it that we need to use a reasonable time to take a look into it. I think my other colleagues agree with that. I ask how we are able to prioritize paramount points for the health of Canadians. I ask who decided on how to support provinces for long-term care on mental health. It's very, very important.

In my riding, the cases are rising. Long-term care is an issue. Mental health is an issue. This is not the time to play politics. Just prioritize, and focus on, the health of Canadians. I sincerely believe that we are not prepared to properly study this issue, and we need time to. Let's prioritize issues one by one. I can say over 80% of all COVID-related deaths occurred in long-term care homes.

This issue is very close to my heart. I know many colleagues agree. I know one of the issues is this, too: I think we need to prioritize, one by one. It's extremely important for this committee to study how the federal government can work with its provincial and territorial counterparts to ensure what happened in our long-term care homes, and the first wave, won't happen when we hit the second wave. This is very, very important.

Is it more important than issues raised by all our colleagues? It's hard to decide. Are we going to have another chance to do it? Therefore I ask you all, why this rush?

• (1440)

Let's set up our priorities and prioritize the issues. I hope we will all understand this, and then we can properly study this issue, which is more important to Canadians.

Thank you, Mr. Chair.

The Chair: Thank you, Ms. Sidhu.

We go now to Mr. Davies.

Mr. Don Davies: Thank you.

I think a lot of excellent concerns were raised. Dr. Powlowski raised a couple of excellent concerns, and if he looks at the motion, I think he'll see that all of his concerns are completely taken care of. I'm happy about that.

For instance, in terms of it being limited, the motion explicitly says, "that this study evaluate, review and examine all issues relevant to this situation, including the following". One of his concerns was that he thought the motion may be too restrictive. It's open to everything.

Second, he raised a concern about the redaction around national security or personal privacy. Both of those criteria are mentioned explicitly in the motion as being grounds for redaction, so that concern is taken care of.

The third concern was was prioritization. He was concerned that there was no prioritization. Let's remember what we studied last session. What we were studying was the government's response to COVID. That was the topic that was given us. There was no prioritization in that either. Of course, if anything, this motion is far more prioritized than anything I've seen.

I think it remains open to us to make the priorities we want anyway. Nothing in this motion says that we have to study anything in any particular order. I would suggest that once we adopt this motion, if it is the pleasure of the committee to do that, then we sit down and we do what we did last time. We break this down into themes. We start getting witnesses together. We start the task of rolling up our sleeves and getting at it.

I don't see any problem with prioritization. As well, when you go through the items that are listed as issues that we want to look at, it emerges pretty quickly, I think, which ones may be higher priority than others.

I also just wanted to say that I don't see any petty politics here. There's no ganging up on anybody. This motion has the support of the majority of people on this committee and the majority of parties, though it may not be the motion the Liberal Party wants to study.

Might I remind you that Liberals came to this committee with a motion of their own. They wanted to study the impacts of COVID on mental health, which again is laudable. This motion just says that we want to study far more than that. Once again, I have to sort of gently but categorically reject any notion that this is complex.

It's basically no more than just saying that this committee wants to continue studying COVID-19. It just has listed a number of specific areas that we want to look at, which, now in October of 2020, this committee is far better placed to identify. We couldn't do that back in February when we got the motion from the House. We didn't even know what to study. It was just to study everything in the government's response to COVID, which we did very well.

I think that was everything I wanted to mention. I think we should go ahead and adopt this motion. Then, perhaps at our next meeting, we could decide to sort of prioritize these, start the process of witness selection and get to the job that Canadians want us to do, which I think all of us here want to do at this committee.

• (1445)

The Chair: Thank you, Mr. Davies.

We go now to Mr. Van Bynen. Mr. Van Bynen, go ahead, please.

Mr. Tony Van Bynen: Thank you, Mr. Chair.

We're hearing a lot of anecdotal evidence about the second pandemic and the increased risk that some people may have in terms of depression, psychological distress, substance abuse and PTSD. I very much appreciate my colleague Mr. Davies's passion towards the urgency of the situation.

One of my concerns is that we are lacking focus on this. If we have too many priorities, we have no priorities. There are a considerable number of requests, and frankly, if we're talking about transparency, I think transparency is the obligation to give others the opportunity to read what is being proposed and an adequate amount of time to consider what's being proposed. I don't think that's the case with this motion. I have not had an opportunity to go through it in detail.

I think, in the interests of transparency and openness, that we should all be given an opportunity to review it and find out what the implications are. With some of the documents that were being produced or that were requested to be produced, we had a considerable amount of discussion on that in committee previously. As I said earlier, we have had 34 meetings, 171 witnesses and 51 briefs, and we've yet to hear what that has produced in things we should be considering on a go-forward basis. We've invested a lot of time already and we haven't heard the recommendations or the analysis as we go forward.

The study I have proposed would provide us with a better understanding of the current situation relative to mental health and its impact on mental health. It would enable and provide us with a more informed strategy on mental health and on well-being as we go forward.

We've spent a considerable amount of money in dealing with the early stages of mental health, and I think it's important for us to understand how effective those items are. With this study we would

understand the impacts of the COVID-19 pandemic on the mental health and well-being of Canadians.

In this motion I see nowhere where it says that we would want to take a look at high-risk groups like indigenous people, racialized Canadians and vulnerable populations, and I think it's important that we take a look at the socio-economic implications that would require us to develop different programs. A general, all-encompassing motion such as what we have before us now takes away the opportunity for us to focus on areas that we need to put an early focus on.

If I recall what we heard from one of the witnesses, it was that if we had focused on what was in the curve as opposed to focusing on the curve itself, we might have had some better results. There is no mention of any of that in this motion.

My concern is that as we go forward with such a broad mandate, we're losing the ability to focus on priority areas, and I think we need to give close consideration to that. When I say "close consideration", please give us a week to read the document, to consider all the aspects, to look at the implications.

In terms of the document I proposed, I had fully anticipated that if it needed to be referred, I was quite prepared to be transparent in that respect and to permit others an opportunity to give full consideration to that document. That's not happening here, and it's a bit of a disappointment that the proposal with respect to what I consider to be the second pandemic, for which there is no vaccine, was so summarily dismissed, and now it's buried deep between two pages of small-font documents. I think that's totally unfair to people who are suffering at a very critical time.

I would ask that we be given the opportunity to review this in more detail. I know we can go chapter and verse in rules and regulations, and that's fine, and I think they're in place for a reason. Let's respect everyone's desire to make a thorough decision, to do a thorough analysis and to come forward with a consensus, which I think can happen with more thorough discussion and debate and an opportunity to review it.

Again, if we have too many priorities, we have no priorities, and this is too much of a shotgun approach for me to be happy with it. I am willing to give it further consideration if people are willing to give me the opportunity to review it in more detail.

• (1450)

I know that a number of things are reflected in this document that we had quite a robust discussion on, and we came to consensus. Why is it that we're rushing into this without providing the transparency of full due consideration?

Thank you, Mr. Chair.

The Chair: Thank you, Mr. Van Bynen.

I go now to Dr. Powlowski, please. I'll get that straight one of these days.

Mr. Marcus Powlowski: Yes, yes. Don't worry, you'll have another—

The Chair: I'm sorry; I skipped over Mr. Fisher. Mr. Fisher, please go ahead.

Mr. Darren Fisher: We could have gone with Dr. Powlowski.

My apologies to Mr. Van Bynen. I was trying my best to scan through this motion while he was speaking. I'm taking a quick look right now, and I see that the motion asks public health officials basically to stop what they're doing to protect Canadians and sift through emails and documents instead.

Gosh, I've got to tell you that these health care professionals, these public health officials, are working hard day and night. As has been said numerous times, we are in a resurgence. Some people call it a second wave; I call it a resurgence. You have these public health officials working with provinces, working with the Province of Quebec and the Province of Ontario to make sure that people are safe.

I would expect that some of these documents could also catch up a lot of correspondence with the provinces. I think about the need to respect our relationship with the provinces and territories. We hear Mr. Thériault in the House of Commons talking about that all the time, about respecting that jurisdictional relationship.

Again, public health officials are working day and night, especially since this resurgence has hit. I think, as I said the previous time I spoke, that it's very important for us to be transparent, and I know that it's very important to Canadians that they understand how officials are working to keep them safe. I'm not suggesting that we wouldn't get to a place where we get that.

I want to make sure that Canadians indeed have access to accurate and reliable information from public health experts. Those public health experts deserve, at this point in the resurgence or the second wave, to focus on the work at hand.

Again, Ontario is in a second wave. Other provinces are seeing case spikes. Chris, Mike and I are fortunate to be wrapped in the loving arms of the Atlantic bubble; however, we're starting to see some cases creep up in Moncton now in a long-term care facility, and I know that Sonia had intentions of moving a motion forward on long-term care, I believe. I didn't see a motion.

Looking again at this motion, it seems like it's all over the map. Our previous study on COVID lacked a little bit of specificity; it was the opposite of this omnibus motion. It was, strictly speaking, to speak about every aspect of COVID; however, when Tony talked about his motion, his motion was specific in an area that of all of the things that... Of all of the witnesses we had and all of the testimony we had, we didn't get very much testimony on the mental health aspect of COVID-19 that I think—Tony, I was trying my best to listen to what you were saying—you were calling the pandemic within the pandemic, or a second pandemic. There was an example of a mental health crisis line in Nova Scotia that was receiving 25 calls a day pre-COVID and 750 calls during COVID.

It certainly is something that needs to be done, and perhaps it's covered in this motion. Again, I haven't been able to drill down in this motion, so very likely there is a mental health aspect to this motion, but again, with my Surface Pro in front of me and my

iPhone in my hand, I have not been able to drill down into this motion.

I'm perfectly in agreement that the committee must focus on COVID-19, but I would have been very much in support of focusing on the mental health side. One of the focuses in my community and through our constituency office is the mental health of my constituents. We've held numerous town hall meetings in our riding, and they're all very well attended. What we've come to see pre-COVID is that we have a patchwork of mental health services across this country. That is one of those things that we all in the House of Commons should be working on tackling: how we can assist provinces and territories that have the jurisdiction for much of this stuff. How do we assist them? We don't want to trample on jurisdiction, but we want to be there to help in all things COVID.

If we truly want to be there to help in all things COVID, we have to be a willing partner with provinces and territories. We have to be a willing partner with Quebec and Ontario as it pertains to COVID and as it pertains to the mental health aspect of a pandemic within a pandemic.

• (1455)

Again, I would seek the ability to drill down on this motion, which, on continuous looks, seems to have an awful lot of good stuff in it. I think it's something that we as a committee could work on, much like we did in the last session, when we worked really well as a committee on finding ways to come to an outcome. We very often had unanimous support for folks' suggestions on studies and where to go, especially as it pertained to COVID.

Mr. Chair, I would seek the ability as a member of Parliament to be able to look at this over on Thanksgiving weekend, drill down on this, and perhaps come up with some suggestions for amendments down the road. That is my plea for members of this committee: It's to give that opportunity over this weekend.

Thank you, Mr. Chair.

The Chair: Thank you, Mr. Fisher.

We go now to Dr. Powlowski.

Mr. Marcus Powlowski: I'm happy that you finally got it right for me as “Dr.”, for a change.

With all due respect to Don, I think this is a complex motion. For example, he rightly pointed out that in the preamble it does say that you're looking to “examine all issues” related to the situation. That kind of detail is something that takes time to fully appreciate, to read and to read again, and ask, “Well, is this an inclusive list? No, it's not an inclusive list.”

However, what's in my mind, having spent a bit of time writing health legislation, is that I would have thought the consideration would be that when you make a list, there is a kind of a supposition that those are the priority issues. Okay, you can add other issues, but you have decided to delineate what you think the major issues are, and I think you've missed some. You've missed some of the big issues. For example, there's nothing here about the global response to this pandemic. This is something that's affecting everyone in the world. I think it certainly ethically becomes us to consider what's happening in other countries and our role as Canadians in addressing the difficulties faced by people in other countries. Just as it is in Canada, it's even more so in poor countries that it's the poorest people who are most often adversely affected. There is nothing on this list to suggest that this is at all a concern of ours, nor is there a suggestion that we perhaps have to look at the global health response and look at the future of the global health response in order to prevent this from happening again.

The International Health Regulations give the World Health Organization the authority to issue recommendations in response to an outbreak of disease or a public health emergency of international concern. These obviously need revising. There are things that could be done with those to perhaps make them more effective. One example is a proposal in the International Health Regulations that the WHO be given the power to be able to send independent observers into a country early on in order to determine whether there is something developing. That's not on your list either.

A big concern, as I said before, is indigenous communities. What happens if COVID gets into the indigenous communities? It's not on your list. There's the disruption of the medical health system and the harm to people because they don't want to go to the hospital because of COVID. People aren't going in when they have their heart attacks. We're not doing the investigations we need in order to detect and treat cancer. This has been a pretty major theme and a pretty major concern. That's not on your list. Schools and day cares have obviously been a really big concern in the last month now that schools have restarted. That's not on your list.

You chose to write a list here, and these seem to be our priorities. Why don't we work collectively to decide what our priorities are, rather than you kind of dictating a list of what we think the priorities are? I think you got some of those priorities wrong. The very first thing you talk about is testing. I have to look at the actual wording, because there again, I don't think you got it quite right. You say, "rapid and at home testing approvals and procurement process and schedule, and protocol for distribution". You're not even looking at the science, the public health of testing, the rationale for testing and how much you can rely on a test. These are fundamental. That's what you do as a doctor. You decide, when you do a test, what you're going to do with that test. This is somewhat complex. It's the negative predictive value of a test you're looking at. This takes time to explain. When you talk about rapid testing, you have to consider the negative and positive predictive value, and that's complex. It depends on the incidence of the disease in the population. You're just jumping right to the conclusion that we want to do rapid testing. Well, I think it's a little more complex than that.

I think, without the Liberals, you've decided that these will be the things we ought to be examining, and I don't think you got it quite right.

• (1500)

That's one thing, and there's certainly no attempt to prioritize what we're going to do. Heck, if we were to have one meeting on each of these things, I don't know if we'd even have time before Christmas to do all those things.

The second thing, a big concern, is the procurement of documents. As Darren has said, certainly a consideration for all of us ought to be possible implications on our relationships with the provinces. Obviously the provinces take the lead in health issues. They have jurisdiction constitutionally for health care. A lot of our response to the pandemic has been in concert with the provinces. Having a good relationship with the provinces is absolutely fundamental. If you're asking for all emails and all communications, I would think almost inevitably there are going to be some things that could potentially harm our relationship with the provinces. It would seem to me that this might not be a really wise idea at this time when our relationships with the provinces are so important.

Thank you.

• (1505)

The Chair: Thank you, Dr. Powlowski. We'll go now to Mr. Kelloway.

Go ahead, Mr. Kelloway.

Mr. Mike Kelloway: Thanks, Mr. Chair.

Just to be somewhat of a bookend to Mr. Powlowski, I wonder if there is an appetite to look at having the Liberal members of the committee take a little time—a little time—to look at the motion. I don't know if this motion is good, bad or indifferent, but I want to be part of the solution. I want to be able to speak to it.

I can certainly mute the microphone and read, and do that now, but I don't think any of the people who elected us across the country did so based on our ability to read quickly. It's to think about what we're reading and how we can add to it, how we can contribute to it. That's team Canada. That's a Team Canada approach. It is looking for a specific amount of time to be able to do that, and not necessarily to tear it and rip it apart, but to add quality and contribute to it for the benefit of all Canadians from coast to coast to coast. I wonder if that is something that could be discussed here.

Thank you.

The Chair: Thank you, Mr. Kelloway. We go now to Mr. Van Bynen.

Go ahead, Mr. Van Bynen.

Mr. Tony Van Bynen: Thank you, Mr. Chair.

“Seniors’ mental health is a highly relevant issue right now”, according to Dr. Mah, who is the associate professor of psychiatry at the University of Toronto. She further stated:

We know that during the SARS epidemic in 2003, there were increases in psychiatric problems among older adults in areas with large outbreaks of the virus. Today, one-third of people below 65 years of age are experiencing depression and high stress, even when they have not been infected or exposed to COVID-19. These numbers may be even higher in older adults, who are more vulnerable...

Further, I will offer the comments of the assistant professor at the University of Victoria, who said:

But there are some unique features of the COVID-19 pandemic. The virus' ease of transmission compared to others has necessitated, in some regions, much more broad-reaching public health responses. For example, lockdowns of cities, extensive business and school closures.

I don't think we're addressing the issues that are global, as was mentioned by Dr. Powlowski.

The Canadian Medical Health Association stated:

Canadian mental health has taken a severe hit during the pandemic with the nation seeing exploding rates of anxiety and depression, increased use of alcohol and drugs, and difficulty accessing important supports, according to a recent survey from Mental Health Research Canada.

That's as recent as April 2020.

More than half of Canadians feel the federal government and the provincial governments should be doing more to support mental health for Canadians. I am saying this in addition to the United Nations, which said that good mental health is critical to the functioning of society at the best of times, and must be front and centre in every country's response to recover from the COVID-19 pandemic. The mental health and well-being of whole societies has been severely impacted by this crisis, and it is a priority to be addressed urgently.

When I see that it is one simple bullet point on two small-font recommendations, I believe that we are missing an opportunity. I know we have seen an awful lot of finger-wagging and accusations that we should have done more sooner when we got engaged and responded to the pandemic that we are now in.

This is my point. We now have an opportunity to get ahead of what I refer to as the “second pandemic”, and it would be on us if we didn't take the appropriate steps to make sure that we acted when we could. That's one of the reasons I brought my own motion forward.

Now is the time for us to focus on containing the issue that we have and, in part, some of these recommendations will help. I'm not sure the production of documents is a productive step forward, but we can work our way through that. Now is the time for us to be proactive and deal with what lies ahead of us. What lies ahead of us in mental health is something that concerns me deeply. I've seen its effect on members in my community.

This is not a pandemic we're going to fix with a vaccine. This is something that requires very careful early thought, and to be one of such a number of broad statements does injustice to people who are suffering from the mental health pandemic.

• (1510)

The Chair: We will now go to Ms. Sidhu.

Ms. Sonia Sidhu: Thank you, Mr. Chair.

As my colleague said before, what is in this motion? Yes, testing is important, and I didn't get a chance to read all of this, but what is in it? That is why, on the last statement, I said we need to set our priorities.

Mr. Fisher mentioned a very important point, which is that public health officials will have to work to produce documents to address this motion while case numbers are rising in Quebec and Ontario, let alone the fact that this weekend people will gather for Thanksgiving and we likely could see more cases arise. Today we have over 900 cases in Ontario, and Quebec cases have been over 1,000 a day while Ontario has seen, far and away, the largest case total today. In my riding, case numbers are also rising.

This Thanksgiving weekend has the potential to be a super-spreader weekend. That is what people are saying. This is what our public health officials are concerned about. We must take time to properly analyze and then listen to public health officials, and, with this motion, ensure that we are not overburdening public officials whose job it is to keep our constituencies safe. We need to be cognizant. There is a significant amount of personal information that needs to be protected.

I need to add that operational details and action taken by other orders of government would also likely be caught up in this surge, and it is important for them to be consulted beforehand as well. Materials that do not contain this information can be publicly shared, as requested, but we need to be mindful of privacy issues as well. The hard-working public servants who are doing the critical work to help Canadians and keep people safe would be forced to redirect their efforts to filling these orders. Our teams and departments are in regular communication with the provinces and territories. They are wrapped up in all of our communications.

This is a time to focus on Canadians' health. It is more important. Making some of these documents public at this time could put Canadians' positions at risk as we are trying to resolve the issues.

Mr. Chair, we need to turn on the light of discussion, hear from witnesses and do a proper study so that Canadians are not falling through the cracks. This is an urgent and important study, and through it we can make a real difference.

Mr. Van Bynen's motion would ensure that we study that right away. This is very important. I cannot stress it more. I know when I meet with my youth council, my constituents and stakeholders, I hear how this pandemic is exposing how broken our mental health system already is and how much we need to focus on that. We must invest in community mental health programs and services, especially for our isolated seniors. We need to improve on that. We need to improve our nationwide suicide prevention plan. These are very important topics, along with long-term care, and there are many more.

That is why we need time to read this, to prioritize the study and to read what is in it. We need to bring that in too.

• (1515)

The Chair: Thank you, Ms. Sidhu.

We go again to Mr. Kelloway. Go ahead, please.

Mr. Mike Kelloway: Thanks, Mr. Chair.

There's a lot of good discussion here on all sides of the aisle.

To go back to just the amount of time, I know that next week is a constituency week, but if there were an opportunity to have the weekend to review—I don't know the procedures for this, Mr. Chair or Clerk—to be able to come back to have that complete discussion, to have what is needed to move forward in whatever form or fashion.... I'm wondering if that is something that the members opposite are open to, to give us the weekend to do so. Is there a possibility, then, to form the meeting during the constituency week if possible, to be able to have that time to, again, simply digest what has been presented in the last half-hour?

The Chair: Thank you, Mr. Kelloway.

We go now to Mr. Fisher.

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

I just noticed that we also have a notice of motion from Mr. Barlow, as well as from Mr. Thériault, but it's too small to read.

We started this meeting by shutting down debate on Mr. Van Bynen's motion. We didn't get a chance to hear the motion from Ms. Sidhu. I can't read this because it is too small, but this could be very important. I don't know if other members have seen Mr. Thériault's motion.

Mrs. Karen Vecchio: I have a point of order.

He can't start talking about other motions.

Mr. Darren Fisher: Is that in English and French, Mr. Chair?

The Chair: Thank you for the point of order.

It's Mr. Fisher's time. He can use it as he pleases.

Mr. Darren Fisher: The member is actually right on that. My thinking is that we are here in our first meeting. This is what we've traditionally done, whether it be a blue-sky discussion or business meetings, as you called them, or we sit around and talk as a committee about which motions are the ones we want to move forward on.

Again, my apologies for not being able to read this small print on my iPad, but maybe this motion of Mr. Thériault is extremely important to Mr. Thériault and maybe it's very important to the rest of the committee. I don't know. Again, Mr. Chair, you call it a business meeting, where we sit down as a committee and ask what the most important thing is. What do we want to talk about? What motion, and how might we come to an agreement on a potential motion? Do we amend it? Do we take it holus-bolus as is?

There's been a lot of talk about the transparency of having a two-page motion that one truly can't digest while sitting here listening to the comments of all the other folks on the virtual meeting. I wish I could read Mr. Thériault's motion here. My apologies for it being

such small print. I'd like to look at Mr. Barlow's and Mr. Thériault's motions—and Ms. Vecchio is right—as they relate to what we are deciding to do for our first meeting.

I believe there was also a motion at the end, before our proroguing, that was going to continue some of the things that we've done. It was also going to potentially resurrect or save some of the things that we had in the past. All options should be on the table. However, all options are off the table today because we won't get to Mr. Thériault's study and we won't get to Mr. Barlow's study, assuming that they are studies. We won't get to what I truly feel is a very important study with Mr. Van Bynen. We won't get to a very important study that means an awful lot to MP Sidhu.

I would love to see us continue discussion on this motion the next time we meet and have some time to digest it, talk about it, and think about ways it might be amended, so that maybe we can get to a point where everybody agrees. I believe there's value in having a blue-sky meeting or a conversation about what the priorities are and whose motion has the support of the committee. It very well might be Ms. Rempel Garner's motion. It may very well be that we read Mr. Thériault's motion over the weekend and think it has merit and might be something worth looking at first. Again, we don't have that opportunity with this discussion today.

This is something that deserves a further drill-down on the details. It would be very helpful, certainly for this member.

• (1520)

The Chair: Thank you, Mr. Fisher.

[*Translation*]

Mr. Thériault, go ahead.

Mr. Luc Thériault: Mr. Chair, I don't know if this is a matter of procedure, but I would like to know how we will operate in the future. When the committee is convened, will we unduly prolong the committee meeting because the Liberals do not agree with what is on the table, or will we respect the committee notice of meeting? We are really starting off on the wrong foot.

I am a workaholic, I don't count my hours, but my schedule is organized. Everyone has an organized schedule, which is important. Time is equally important for everyone. Yet we have now gone 22 minutes over the allocated time. You have not said anything, repeated anything or pointed out the fact. I am a bit disappointed in the way the work is being aligned today.

In my case, it's clear. As of 3:30 p.m., I'm no longer available. Obviously, we will be able to continue to move motions. I'm not too concerned about my motion, as I know I will have another opportunity to move it. I also know that we have the important deadline of January 1.

Mr. Chair, tell us how you want to operate because this is not working well for me. When a convocation is issued by the Office of the Clerk, I think it should be respected. So I am asking you the question, Mr. Chair. How do you want to operate? Will we go over the allocated time every time the Liberals don't agree?

[English]

The Chair: It is up to the committee to decide whether to adjourn or not. The fact that it is proposed as a two-hour meeting does not necessarily bind us. The members have certainly been arguing for some time, so, Mr. Thériault, if you would like to move a motion to adjourn the meeting or the debate, that would be up to you. Do you wish to move such a motion?

[Translation]

Mr. Luc Thériault: What I want, Mr. Chair, is for you to respect the meeting time set by the office of the clerk. When the time for ending the meeting comes, I want you to at least raise that fact and ask whether the meeting can be extended. It has been a while since we should have decided whether the meeting should be extended and, if so, by how much time, instead of continuing to hear from colleagues. I do still want to hear from them, but we must not forget that we have schedules and agendas to respect.

That is what I wanted to hear you on. You are throwing it back at me by saying that I could move a motion to adjourn. I understand perfectly, but is it not your responsibility to raise the issue when the time set aside for the meeting is up?

• (1525)

[English]

The Chair: We already have Ms. Vecchio's intervention. They do not wish to stop right on the dot within our time slot, and I don't have the power to arbitrarily adjourn the meeting. That is up to the committee. We can carry on this debate as long as we wish to do so, or we can consider a motion for adjournment. It's really up to the committee.

I'll go now to Ms. Sidhu.

Ms. Sonia Sidhu: Thank you, Mr. Chair.

I understand Mr. Thériault's frustration. I totally understand when Darren said we need to dig further down.

I would like to take a minute to stress the importance and reasonability of taking some time to reflect on this motion. I think the opposition would agree that instead of rushing forward with the motion, it is important to take time to properly assess each and every aspect of it, because it's so important to Canadians.

As my colleague Dr. Marcus Powlowski said, we need to look at what is in it and what is not in it. That is why we need time to dig down and then collectively come up with what is more important to Canadians. Let us discuss that, but we need to dig down. Canadians deserve the best from this committee, especially during these challenging times. It doesn't mean rushing forward with an omnibus motion that we cannot digest. There's no time to read it.

It is a huge motion that only briefly references the mental health impacts of COVID-19. Over 9,500 Canadians have tragically died due to COVID-19, and every day we are seeing case numbers rise

as Canada enters a second wave. As I said before, we need to shine a light on the discussion, hear from witnesses and do a proper study to give proper direction so that Canadians are not falling through the cracks.

My colleague Tony's motion is also very important. As I said earlier, it is so important, because as we know, people are twice as likely to say their mental health has declined in these challenging times. They are five times as likely to feel depressed, three times more likely to have trouble coping, four times more likely to have had suicidal thoughts and four times more likely to have tried to harm themselves.

The motion also mentions long-term care, which I did not have a chance to present. With this motion, we would study long-term care, which is something that is very important in my riding. We have to go through things and dig down. By agreeing to study the impacts of COVID-19 on long-term care, our committee can be the first step in righting the wrongs of our government, which has ignored the issues of long-term care for far too long.

The type of person who needs long-term care assistance is not changing, as 62% of residents have some form of Alzheimer's and 90% of long-term care residents in Ontario have some form of cognitive impairment. As well, people were previously staying in these facilities one to two years, but now the average length of stay is six months. The needs of long-term care residents are changing. This is an important issue too.

To summarize, there are important issues at stake here. We must take the time to analyze the motion. We need to ensure that at committee we are using our time and resources properly. We need time to dig down. As my colleague said, we have to look at what is not in this motion. We need to prioritize what is important to Canadians.

I know we need time. I understand my friend Luc's frustration. It is why we need time to dig down, and I urge all members to agree that we have to look into that.

The Chair: Thank you, Ms. Sidhu.

We'll go now to Mr. Kelloway, please.

Mr. Mike Kelloway: Thank you, Mr. Chair.

I move to adjourn.

The Chair: Thank you, Mr. Kelloway.

We have on the floor a motion to adjourn the meeting.

Is it the will of the committee to adjourn? Is there any dissent?

• (1530)

Mrs. Karen Vecchio: I ask for a recorded vote, please.

The Chair: We will go to a recorded vote.

I will clarify that this motion is not to adjourn the debate; it is to adjourn the meeting.

(Motion agreed to: yeas 6; nays 5)

The Chair: The meeting is therefore now adjourned.

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