

B.C. Covid-19 Update Press Conference – September 13th

Dix: Good afternoon. My name is Adrian Dix. I'm BC's Minister of Health. To my right is Dr. Bonnie Henry, BC's provincial health officer. This is our covid-19 briefing for today. Just to let members of the media know, we will now be holding again regular weekly briefings on covid-19 to provide relevant information and to respond in a formal way to your question. Today is obviously Monday. We're holding it today, is the first one. We will be holding them in subsequent weeks on Tuesday afternoon. We'll work out the time that is best and most convenient for everybody. So that's what we're starting to do. We're honoured to be here on their lands today. And it's my honour to introduce, Dr. Bonnie Henry.

Henry: Thank you very much and good afternoon. I want to start today by thanking the millions of people throughout the province who are doing what they need to do to get us through this pandemic. I know it has been a most challenging time and we've had lots of optimism. And we are now in a place where we need to take additional measures. And I know most people in this province are doing their part. I also want to take our health care workers across the spectrum in the province. That go to work every single day to do the best they can to care for us as a population and individual patients. Whether that's in an acute care facility in our ICUs, the healthcare workers that are greeting you at the door, our paramedics, our public health teams that I talk to every single day. My colleagues across the province are stepping up, even after 20 months of this. Even when they are tired. To make sure we are doing the best we can to care for people across the province. You have faced and continue to face an incredible amount of pressure and stress. And I am incredibly grateful, and I want everybody to know that your efforts are gratefully felt by the vast majority of us here in BC. We stand with you and are supporting you in everything we can do.

Today is uhhh. Couple of things today. One is, our BC vaccine card comes into effect today. This means that we will be able to do more of the things that we love, that much more safely, knowing that everybody else in that situation is vaccinated as well. My hope is that in the weeks ahead, we'll be able to remove things like capacity limits and other restrictions because of the protection we have knowing that vaccinated people are in these settings. I'm pleased to see that over a million people across the province now have downloaded their card or have it coming in the mail. Thank you for your continued commitment to doing your part to keeping our province safe and to keeping those important functions open, those jobs going.

And if you have not yet taken the steps to get your vaccine card, it only takes a few minutes. These next couple days, as everyone gets used to the system, please be patient. We are in this together. We'll get through this; we'll get over the bumps over the next little while. To those of you who haven't yet been vaccinated, clinics are open every day. If you have concerns, connect with your doctor. Talk to your pharmacist. Get the information you need to make the right choice to protect yourself and your community.

I'm also happy to say that the vaccine card means that the orders that were in place in the Interior Health, restrictions on gatherings, restrictions on some outdoor operations of some businesses,

will now be revised to allow for the exemptions for these businesses and events that use the BC vaccine card to ensure attendees are fully vaccinated. That extra layer of protection means that we can start going back to those activities in the Interior Health that had been restricted over the last little while as cases increased.

Also today, in addition to the vaccine cards coming into effect, we're making two additional changes in our pandemic response. Late last week, many people would know NACI announced the recommendations for a third dose for a group of people who are severely immunocompromised. In alignment with these recommendations, we will now start providing a third dose to that group of people. For the vast majority of people, a third dose is what we would call a booster shot, it means it would increase our response and prolong our response. But for people who are immune compromised it's a different story. As a result of their medical conditions, people who are immune compromised don't respond as well to any vaccine and have a reduced ability to fight infection. This means that they may not have responded adequately to the first two doses and given them sufficient antibodies that they would be protected. This puts them at much higher risk than most of us. For these people, a third dose is needed to give enough protection that most of us would get after our primary series of two doses. So, for these people, that have less protection from two doses than the rest of the population, the third dose completes that primary series.

Here in BC, we have identified and prioritized 300,000 people who have medical conditions that make them clinically extremely vulnerable to covid-19, our CEV group. These are the people we prioritized early on, along with other high-risk people by age, to receive their vaccine series. Part of this group, a subset of this group, who are severely immune compromised. This is about 15,000 people and these are the people who would be receiving an invitation this week to get their third dose, to complete their primary series. The people we are talking about are people who have had solid organ transplants, people being actively treated for hematologic cancers and lymphoma, people who have taken anti-CD20 medications or B-cell depleting agents, these are medications that cause suppression of the immune system, since January of 2020, people with severe primary immunodeficiencies, these are some conditions that people are born with that means their immune system doesn't respond as well, particularly the cell-mediated immunity like B and t cells, and people who have had a bone marrow or stem cell transplant. This group of people, you will be receiving a text or email from Immunie BC. We know who you are, because you have received your CEV card and you've received your vaccine doses. You'll be receiving a notice this week, to be able to go into any clinic in BC and get your third dose. The studies that show that many people in this group get no or very few antibodies, even after a second dose of vaccine. A third dose can stimulate a moderate dose in as many as half. What does this mean? This means that even though you have three doses of vaccine, it is still important for people who have severe immune compromising conditions to continue to take precautions to avoid exposure. And it reminds us again that there are some people that cannot get as much protection from vaccine. And it's that much more important that all of us around them are protected to keep them safe as well.

As part of our CEV group, there are also a second group of people, about 120,000 in BC, who are moderately immunocompromised. These people are also identified as NACI as people who might need a third dose to complete their primary series. Here in BC, we are looking at these data, and our BC immunization committee will be reviewing this with the clinical experts who developed the CEV program. We will be providing an update once we have a better understanding of these risks – it is likely to be later in September or early October. If you do not receive an invitation, you do not need a third dose this time. It really is limited right now to those 15,000 people that are. But rest assured, we are looking at that information and will be getting in touch with people soon.

The third group in the CEV group is the majority, and those are people who have a strong immune response. We know that they have a condition that made them more susceptible to having severe illness from covid-19 but their immune systems respond as everybody else's to the two doses. If you haven't had your second dose, now is the time to do that. And we will be monitoring the vaccine effectiveness as we are for everybody over the next few months. If a third dose is required, a true booster dose, then we will be prioritizing everybody in the CEV group again to make sure that you get your third dose soon.

The third thing that we are talking about today, as we have done with people that work in LTC we are also making changes to the vaccine requirements for all healthcare workers across the acute care and community care across the province. We will be implementing a new order that makes vaccination against covid-19 a condition of employment across all healthcare facilities in BC. This includes all people, workers, students, physicians, residents, contractors, and volunteers who work in a healthcare facility, including contracted facilities, which are accessible to patients, and where they receive services. So it's also includes people who work in settings such as home and community care settings, including client's homes. This order will come into effect on October 26th. I recognize that there are some rare instances where people may have a medical condition that prevents them from being fully vaccinated. We will have a process in place through office with a committee of experts, provincially to review every individual request for a medical or religious exemption. And the details of that will be coming out very soon.

I recognize that for some people the vaccine card is difficult, or something that they have challenges with. And I'm very disheartened to see, however, that some people find it is okay to take out this frustration on healthcare workers. Our healthcare workers across BC are day in and day out, providing the care we need, in sometimes extremely stressful situations. And they continue to care for people no matter what their vaccination status is, whether you have covid-19 or whether you have any other illness in this province. But I know from talking to my friends and colleagues that we are tired and stretched from this pandemic. And we are all working tirelessly regardless of that. We must all come together to show our respect and caring for the healthcare workers who have supported us over this last year and a half. That means being patient, it means being respectful when you are asked to wait before entering a healthcare facility. Or asked to come at a specific time. It is making sure to continue to wear a mask in all healthcare setting. That is still the rule. That is still required in all healthcare settings across this province because we know that those are higher risk settings, and it's a setting where people are more vulnerable

to getting covid. These rules are in place to protect all of us. And healthcare workers alike. And need to respect them. Our hospitals are strained right now. And they're strained with the burden being felt across this province. Our emergency departments, our ICUs are filling up, not just with patients who have covid, most of which, most of whom have not yet been unvaccinated. But it also means an impact on others in the community who can't get the surgeries they need. Who have to wait longer to get the services they need. Sadly, choices not to get vaccinated is affecting our families and our communities across the province. Our healthcare workers deserve better. And so do we, all of us in BC. It is our shared responsibility to get through this next phase of the pandemic. And the best way that we can reduce our risks, individually as a person, and to those we are closed to, and to our community, and to improve the safety of everybody, and get back to the things we need to do, is to get vaccinated. We need to have as many people as possible with as maximum protection as possible so we can get as much open as possible and get back to doing the things that we need and love. And that is one of the tools we have, is the vaccine card, to help us do that. I want to remind everybody that this is a chance for us to continue to get through this storm together. And to recognize that we all have our own experience of this past journey, and We need to respect that and continue to support each other. We need to continue to be kind to each other. And to be calm. And to still do those things that keep us safe. Thank you.

Dix: Thank you very much Dr. Henry. I just wanted to bring a few updates on questions I know members of the media will have with respect to the vaccine card and with respect to surgeries and operation of the healthcare system as of today. I want to, first of all, express my appreciation to now, the more than 2.1 million BC's who have registered for their card. That was as of 10:30 am this morning. It is a very busy 24 hours, that number is significantly higher today. We will be providing more information on that before the end of today. But, 2,110,000 people have downloaded the BC vaccine card in the six days since we've announced it. Which I think is an exceptional and extraordinary thing.

Second, I want to say, today, that almost 4 million BCer's have now received their first dose immunization against covid-19. That's 85.8% of people in BC. That's one of the highest levels in the world. 78.4% are fully vaccinated, meaning they have received two doses of a covid-19 vaccine. And that number of course continues to climb as well. I want to acknowledge young people who continue to lead the way in that regard. those 18-24, now vaccinated at an 87% level, above the provincial average, and that number continues to go up every day. That group of people leads in registrations and new vaccinations and has for the last few weeks.

Thirdly, that we are also obviously focused very much on 12-17 year old group, including with immunization clinics in schools around BC this week to raise the level of immunization in those groups. Which right now is the lowest level, because they started last. But it's approaching and we'll, I think pass 80% this week. Which is a good result. I want to acknowledge in the Interior Health we have now passed the 80% level of first dose immunization against covid-19. And in Vancouver Coastal health, the 90% level. The people who are providing the covid-19 vaccine around BC I think are doing an exceptional job. I wanted to note that as of this the BC vaccine card verification app has been downloaded more than 14,000 times from Apple app store and another 4,370 on the Google app store. For those businesses who have questions and

information, you can call 1-833-838-2323, support line, and press 1 then option 3 for further assistance. And we appreciate all that everyone is doing today to make the BC vaccine card a success. To allow us to do in this time, in this period of the pandemic, many of the things that we all want to do together. The key to that of course, and I encourage everyone to do that, is for everyone to get vaccinated. There are today, releasing numbers around 4 pm today, the numbers of cases in a written statement. But there are today, 139 in critical care in BC. 139 people with covid-19 I should say, and 121 of those are unvaccinated. Considering that comes from a very small group in the population who are unvaccinated, that is a remarkable number of people, that under the age of 50, there are 38 people in critical care with covid-19. 37 of them are unvaccinated. And that when you consider that we have in the neighborhood of 510 base critical care beds across the province and 218 surge beds put in place, and that 431 of those base beds and 16 of those surge beds are filled in BC. The number of people that we are dealing with unvaccinated with covid-19 is a very high proportion and puts significant pressure on our healthcare system. And I think the answer to that for most people is very simple, and it's two-fold. First, we are going to care for everybody who is sick in BC. **We are going to provide the best critical care in the world to everyone.** You see that in our critical care results. Our critical care team's tired, sometimes frustrated, sometimes exhausted are providing the best care. Particularly to those with covid-19 right now. Their efforts, their research, their practical experience means they are going to provide you with extraordinary, exceptional care. But all of them would rather be doing something else. And I encourage everybody to get vaccinated today. 85.8% really is just about as good as anywhere else in the world. It is significant for achievement for health care workers and for people in BC. But we can do better. 86 is better. 87 is better. 93 is better. And so on. So, let's continue our efforts to get vaccinated. Thinking of our healthcare workers, thinking of one another, but also understanding to be in critical care in with covid-19, and Dr. Henry and I spoke this weekend with many people who are struggling and contacted me, and talked about how ill people can be. This is something that all costs to be avoided. And in this case, the cost is a free vaccine. And I recommend everyone get vaccinated.

I have in prior briefing provided regular updates on surgeries in BC. As we have regular updates, and we will next Tuesday, I will continue to provide those updates. Last week, from this podium, I announced postponement of surgeries, in Interior, Fraser, and Coastal Health. These were because of increasing pressure on our hospitals, and on our healthcare workers, largely. As I noted, the result of individuals requiring care for covid-19, the vast majority of whom are unvaccinated. **Those postponements could have been prevented by people getting vaccinated. We have made that case.** We want people to understand how seriously and how hard the people in critical care are working to support people in those circumstances. There is no judgment in the hospital, only care. That is why I think our staff deserves so much credit.

People are obviously anxious, especially those waiting for surgery. Anxious about the issue of surgery postponement. I want to report in detail on that. From September 5 – 11th, the three health authorities I mentioned, Interior Health, Fraser Health, and Vancouver Coastal Health, postponed 289 surgeries, that's 176 in Interior Health, 50 in PH, 63 in VCH. There was no surgical postponement that week in Northern, Island PHSA. In launching surgical renewal, in May 2020 we set our target and timelines, that were vulnerable to resurgences or further waves.

Surgical postponements during the past winter and spring made this clear. And the days do present challenges ahead. But I also want to note the reasons for optimism. The first is that we have been through this before and we had significant cancellations before, and we have responded. As of July 22nd, when we did our last comprehensive report, available online, we delivered surgeries to 98.7% of 149,925 patients that had surgeries postponed during the first wave. And just as significant, 80% of the surgeries postponed over the second and third wave have been completed already.

I want to also note that we are completing more surgeries overall. That between June 26, 2020, and July 22, 2021, we completed 375,048 surgeries. We are completing more scheduled surgeries. We completed 293,790 scheduled surgeries. That's a 13,514 increase in the number of surgeries compared to the timeframe prior to covid-19. Considering all the challenges of the pandemic, that is an extraordinary achievement by healthcare workers in BC. We are adding operating time for those who have had their surgeries postponed. We are adding operating time, and have done, to address that backlog and to reduce our overall waitlist. Through 84 capacity increasing initiatives across all health authorities, we ran 652,983 hours of operating time in that period. That's 29,000 more hours than the same timeframe in 2019 and 2020. We are also increasing staff. Since September April 1st, 1981 healthcare providers have been hired to support the surgical renewal. 500 surgical speciality nurses have started their training and 385 have completed their programs. All of this is, of course, good news, but the challenge is in the immediate moment. And I understand because this weekend I talked to some people. Who had their surgeries delayed, and it is stressful. We talk about elective surgeries, but there is nothing elective about surgeries. They are scheduled surgeries – is a proper step. When a surgery is cancelled it is unbelievably stressful for the people involved, for their family, for their loved ones. We want to do as little of that as possible, and when we are back to full gear, we want to complete those surgeries as soon as possible. And we need your help. We need people in British Columbia who have not been vaccinated to get vaccinated. We need to reduce the number of people with covid-19 in our hospitals and we can do that. There is a tried and true, practical, demonstrated way to do that. And that is get vaccinated. We can do this together. Last year, we took an enormous challenge. Which is dealing with a backlog in surgeries, and we left the waitlist smaller than it was when we started. We did more surgeries than we did in the year before that. Which is, I think, a great achievement. We can do this in BC. But we need your help. So I encourage everybody, everybody out there, to do what I think is required in this pandemic. Which is to join the 85.8% of BCer's that have received their first dose immunization, the 78.4% of BCer's that have been fully vaccinated today. We're happy to take your questions.

Question PERIOD – did not transcribe closely, just listened and wrote notes.

Question 1 – Zussman: Restaurants and bars using BC vaccine card receiving threats from public, threats around foods, threats of harm. What do you say to those people who are enduring the threat? What about those doing the threats?

Henry: I think I said this last week and I'll say it again. This is not an option for these businesses. These are the businesses that have suffered the most through this pandemic. The people who work there are deserving of our respect and care. These are the rules that we have

put on. They have no choice. It really stuns and saddens me to think that people would find that an acceptable way to express their frustrations. Access and support your local business and you make the decision. Take it out on the virus; the virus is what is causing us to have this in place. Taking it out on businesses, taking it out on healthcare workers, is just wrong. And unnecessary. But really. My call is to all of us that have been immunized, to keep these people employed, to keep these businesses open, to go out there and proudly show your vaccine card, support your arts organization. These are the things that we can do to show who we are in BC to get through this pandemic. I don't know.

Dix: Very simply Richard, um, I don't know what we say to people or how it is in any way acceptable to threaten people for following the law. It is despicable and frankly, they are a very small group of people. 14.2% of people in this province. Most of them would be appalled and disgusted by that behaviour. It is unacceptable, as Dr. Henry has said. This is a provincial health order, and it is a law for a very good reason. We adopted the circuit breaker, which was to not allow in restaurant dining, in place for a couple of months, significant consequences. It had come after a period of similar measures, significant measures about gathering, we went through hockey seasons unlike any other. And in the NHL here in BC. And many other businesses, arts organizations. Measures provide people with the opportunity to gather again safely, provided that they are vaccinated. It allows for that to take place. That is really its purpose, it is going to bring about very positive change. I want to say to everybody, lousy behaviour is lousy behaviours and it is not opposition to the government to threaten a local business in this way.

Question 1 f/u – wondering about repercussions for those not immunized in the healthcare sector post October 26th – reassignment or dismissal? Restaurants are trying to get used to it, many don't have tools to do scanning, will there be supports? Continue to do visual checks?

The scanning is very simple, because it is not an app that downloads any information. We will be updating best practices. We have had a number of calls visual is just as good. That is the simplicity of this card.

In terms of healthcare workers, it is going to be a condition of employment. If there are medical reasons, strongly held religious reasons, there will be a central process to review these. There will be opportunities for accommodation, in some cases that may be reassigned, that may be people being assigned to separate areas being tested on a regular basis, but the ultimate end for people that choose not to be vaccinated is leave without pay.

Question 2 Shannon – how many total workers are we talking about for this new mandate? Any concerns, some let go, you may see people quit and then the healthcare sector will be short staffed?

Henry – I don't have numbers for you. Everybody who works for the health authorities or in a contracted organization. It's across the board. Where it doesn't apply, as a condition of employment for people that don't have privileges at any. Private in the community and doesn't have any privileges or work at a healthcare setting then it would not apply to you, because there is not that employer relationship. There are very few people who cannot be immunized with these vaccine for medical reasons. Those are things we will be paying attention to. We will be

looking at the necessary things. Having healthcare workers get sick is very disruptive and causes shortages. And that is much more likely in unvaccinated healthcare worker. Settings like LTC, cancer agency, where we have immune compromised people, can't mount a response, there are settings where we cannot afford to have unvaccinated healthcare working. The number is very very high, Doctors of BC, it is in the high with physicians. High 80-90s for nurses, but there are small pockets across the province. Our responsible as healthcare workers. We are able to care for people, especially through stressful times like this. We are not infecting our colleagues, or the vulnerable people we care for our affected. How disruptive acute care, LTC, and how damaging they can be. There is a shortage of healthcare workers across this country. Once added stressed but very very strong support from professional organizations to ensure that they and their colleagues re vaccinated to beset protect each other and we can continue to give care.

Question 2 f/u – third doses; can you foresee seniors I LTC being next in line for boosters? Vaccinated people who end up in hospital without vaccines tend to be older?

Question 3 – the small percentage that do. Yes they are more likely. There is a couple of things we are looking at. This is a third dose as part of a primary serious. The studies show that people who, with severe immune compromised conditions, 40-50% don't mount any detectable antibodies after two doses. As many as 55% who didn't respond after two doses will have a response after three doses. There is still a proportion that don't get protection from the vaccine. This is a completion of the vaccine for those people. For people who do mount a good vaccine response. Fading over time. Vaccine effectiveness studies. BCCDC under has been ongoing measuring the vaccine effective. The data will be coming publicly very soon. We are still maintaining a very strong response. Once thing that is different than US and Israel, we very early on extended the interval, one was that getting that higher level of protection in more people more quickly. We suspect and knew from basic immunology that it was likely to give a strong and longer acting response. We are starting to see the evidence of that. We are not seeing the need for a booster for most community dwelling seniors. The area we are paying attention to is because of the risk of those settings. What we are seeing, it can still spread. That is the next group of people we are looking at the data. NACI met last week and are meeting again this week to look at data around seniors and residents of LTC. I suspect that will be the next group we are looking at. I'm hopeful given the intervals we have used I BC, will hopefully align with our immunization program for influenza. Protect from both covid and influence sometime in October. See what the data comes out with.

Question 3 – Justin: small pockets of unvaccinated workers in BC. Employers were asked to provide some data. What percentage are unvaccinated and how that has shaped the policy that has been released. I can't at the moment yet, we have had some challenges in getting that information. All of it has come in over the week. ON a facility by facility basis, every individual that works in LTC is being accounted for so that we can understand which facilities have lower immunization rates and help us understand which are more at risk of outbreaks. There are some facilities in the North, some in the Fraser region, but I don't have that data. We can put that together in the coming days. That takes care of the LTC and assisted living facilities, we don't

have individual level data of all workers in acute care and community care. So we are looking at how we get that information in a different way. I don't have the details on that yet.

Dix: Justine, roughly speaking, we're talking about 49,000 people, category of people who were required to be immunized in response to the earlier question, the full numbers across health authorities. Fraser Health, roughly 30,000, very significant number of them. These involve a large number of people. Once we have probably at next week's briefing. Progress to make between now and October 12th to get the maximum. A lot of people have been immunized in LTC. But when you go down facility by facility, there is some that are less than we would like. We are making significant efforts in all of them in order to give everyone an opportunity. What we are talking about are measures that are across the province. That's a lot of people who are required to be immunized. About those people, this is a group of people that have done extraordinary things. Make sure everyone is immunized. Simply once we have to meet in these times. Since we announce our decision to increase hiring in LTC in August and September of 2020, 5,000 positions have been added. But it is of course a concern. That's why we want to maximum number of people vaccinated.

Question 3 f/u – What it is that is driving the policy change today? We knew LTC, what is driving the change and the need to add healthcare workers? What are you expecting from the healthcare unions that have fought mandatory vaccines?

Henry: It was always our intention. We've been in ongoing negotiations through the healthcare association. Working with the colleges and associations that support healthcare workers. CMA. CAN. Other organizations here in BC have come out with support. So we are able to fulfill our jobs but we are doing the best we can for the population we care for. There is support for this, recognizing the impact on our healthcare system. It is something that has been in the works for some time. There is some talk some concerns that healthcare workers in LTC would leave LTC and move to other parts of the healthcare sector where they would not need to be immunized. I wanted to make it very clear that is not something that is able to do because the risks are similar in many settings across the healthcare spectrum. Something we have been negotiating through. Before we get to October 12th, that that is not an option for those.

Question 4 Liza – ballpark how many people this is going to impact by October 26th?

Henry: The rates of immunization in workers are higher than the provincial average. When we are talking about the different union groups. This is not going to adversely effect a large proportion of healthcare workers,

Dix: There will be some people who are health authority employees, who say work in an accounting job, this may not apply to. This will apply to patient facing. Significant number, overall, north of 100,000 people. That's a lot of people working healthcare in BC. What you see, and significant number of people in acute care who are waiting for LTC bed or an alternative level of care who are LTC Patient. In the course of the pandemic, this group of patients has been affected in acute care by covid-19. Ensure facilities doing the same thing across sectors have the same applicable of a vaccine requirement is why we are doing this. We will try to get you, 24/7,

soon as possible, estimate of the kind of numbers we are talking about, to provide precision on that. Certainly, north of 100,000 people.

Question 4 f/u – will you ever look at doing this for teacher? Easing up in the Interior with the additional restriction there, measures taken, are showing the province is turning the corner to mitigate transmission.

Henry: Yes, so a couple of things. The highest risk settings in terms of transmitting covid-19 are healthcare settings, particularly LTC. IT can be transmitted rapidly in some of communal living settings. We've seen that with some temporary farm workers, industrial camps. Becomes much more important, mandate for vaccination becomes important, not just from a business perspective so you can keep the respective working, whether farm or industrial settings. In schools we have other things in place to mitigate transmission. We prioritized all of the staff and settings to get immunized. Making it a condition of employment is something that needs to be thought through. Somebody who is not vaccinated and the mitigation of those factors. Proportional to the impact it can have on the setting.

Question 4 – wanted to get some clarification. With this proof of vaccination, are fans now allowed,

Henry: The short answer is yes. The vaccine card now means there is that layer of protection around events. So the restrictions around organized events and some business and restaurants and some restrictions and some sports events, yes, they can now with proof of fully vaccinated, using the card. Stepping up, so for most places you don't have to be fully vaccinated, given the level of transmission that is happening in the communities. Exceptions to the restrictions to allow the capacity limits. Yes, the western hockey league is one of them. Step three but for those vents or businesses that are using the vaccine card. The vaccine card is a way of mitigating the risk in those settings of making sure vaccinated people attend. High intensity fitness can reopen. It is one of the tools that allow us to lift the more. We are seeing a levelling off, particular in the Central Okanagan. Most onerous by using the vaccine card to mitigate some of the risk. We are still seeing a levelling, but we are seeing an increased number of people in hospital still. The strain on the hospital side, that starts later and.

Question 4 f/u – Wondering what immediate short-term solutions are available to address staffing strain at Royal Inland?

Dix: I think that our teams at Royal Inland hospital are facing real challenges. Today's hospital occupancy is 117% in Kamloops. Obviously not desirable. Significant pressure on the hospital. Everyone will know that as of Saturday there were 32 people with covid-19 at the hospital. And a significant subset, 13 at that time, were in critical care on Saturdays. Those are significant challenges facing the hospital. Some of these issues are not new. We put in place a significant number of measures, we investigated. And that two new full time nurses are completing orientation this week. Joined the emergency department. We're also making significant steps. All the players and people around the hospital, it's a significant challenges. We've taken a series of measures this week to support with agency nursing to support the management hospital with new staff to provide support for that. Susan brown as you will know. Support for discharge planning.

When the hospital is full, it is much more difficult to move people up to the wards, when the wards are full. **Discharging where possible to LTC. Early discharge who can get services at home.** The steps we have taken the postponement of nonurgent schedule surgeries. We've added supports at the physician level and the staff level. We are doing the centralized. Important priority and everybody knows this. Huge year for Royal Inland hospital. What we have tried to do is move that work over to someone new to support the management team. Support for our workers. We've heard a lot of stories about it, there are about 1,000 nurses. 13 nurses left the hospital who were in that. There's a regular movement when you. Three left the health authorities and resigned and are doing something else. I think our teams under very challenging circumstances. And in all of those areas, all of our actions. It's an important hospital. What we have to do in the mid-term, adding support services, added surgeries, increased hours for diagnostic. It's an important hospital. Over the last number of decades, the other hospitals have seen, while Royal Inland has gotten bigger, have seen a reduction in services. These are longer term responses we have put in place. 117% is a lot, there are real stresses on our healthcare workers. Everyone in Kamloops to respond to this, portion of this is to do with covid-19. It's really important people get vaccinated. But uh it can always be higher. At a time when there is such a high rate of illness among unvaccinated people. There is something in our hands to continue to do that and to continue to support the courageous and extraordinary work.

Question 5 – Janelle: On the matter of third shots, will people with development disability? Why or why not?

Henry: Most people with developmental disabilities don't have immune suppressing conditions. Their immune system response as well as other people to the two shots. They are most likely, unless they also have an, most people with heart diseases, diabetes, in our CVE group, their conditions make them more at risk of having severe. They respond well to the vaccine. We don't think that group of people needs to have that dose. But, at we prioritize people with developmental disabilities to receive their first series, if they need a booster, they will be.

Question 5 f/u – Removing restrictions in the IH? When will that be taking place and what will the first restriction be?

Henry: That will be lifted today. IH is putting out the details probably right now. Yes, that is something that will be lifted. All of the revisions to the orders in IH to align with the BC vaccine card.