



The Honourable Patty Hajdu

Minister of Health
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Sent via email: hcminister.ministresc@canada.ca


Dear Minister Patty Hajdu,

We are writing today on behalf of a roundtable of national and provincial healthcare organizations led by the Canadian Thoracic Society (CTS) and the Canadian Society of Respiratory Therapists (CSRT). This group was convened to discuss aerosol precautions to protect against COVID-19 across the country. Members of this roundtable are committed to working together to create clear aerosol precautions, examine existing guidelines across Canada, and advocate for effective health and safety guidance for healthcare workers and patients in high-risk settings.

Since the beginning of the outbreak of COVID-19 in Canada, we have learned quickly how to reduce the spread of this virus with public health measures, appropriate PPE and vaccinations. The international body of evidence gathered on this virus allows the federal government to provide vital precautionary guidelines to the provinces and territories, which shapes public health communications and practices in all healthcare settings. As we see vaccination rates across Canada rise rapidly and case numbers decrease, it is important that we remain vigilant about controlling the spread of COVID-19 in our communities. A core aspect of this vigilance, especially as highly transmissible variants of concern are present in our communities, is providing evidence-based guidance on aerosol transmission. This type of guidance is critical for all Canadians but particularly for healthcare workers and patients in high-risk settings. The federal government and the Public Health Agency of Canada (PHAC) have a leading role to play in developing clear, evidence-based aerosol precautions.

This is why we are calling on you to instruct the Public Health Agency of Canada to create guidance and precautions for aerosol transmission of COVID-19, based on the body of evidence suggesting that the virus is predominantly spread through aerosols. Currently, decisions regarding what is an Aerosol Generating Medical Procedure (AGMP) are being made at the local level based on a **non-exhaustive list of examples of AGMPs**. In order to provide clear, evidence-informed direction to provinces, territories and local health authorities, guidance from PHAC needs to be expanded beyond this non-exhaustive list. This would assist healthcare workers in assessing the level of risk present in various procedures and settings. In July 2020, 239 international scientists brought the issue of COVID-19 aerosol spread forward to the international community. Subsequently, the World Health Organization, Centres for Disease Control, and the Public Health Agency of Canada have all acknowledged the legitimacy of these findings and have adjusted their own guidance and messaging to differing extents. However, despite the evidence that aerosols are the predominant way the virus spreads, we have yet to see any significant improvements in workplace protections for healthcare workers, patients and other essential workers in Canada.

With current advice and guidance lacking clear direction on aerosol precautions and the absence of a delineation of the degree of risk present in different settings and procedures, our roundtable members have seen challenges that continue to persist on the ground every day. These challenges include different perspectives on what is considered a high-risk setting between clinicians and local infection prevention and control bodies, and a lack of clear direction from local and provincial public health units. These difficulties have impaired healthcare workers' access to necessary PPE. In addition, it has also put workers and vulnerable patients at a risk of infection.



This is especially concerning to healthcare workers who are running high-risk procedures such as pulmonary function testing, where evidence indicates that aerosols are generated. With the PPE supply issues of the early days of the pandemic behind us, the focus now needs to be on ensuring clarity of guidance moving forward. This guidance should include who needs to access essential supplies and PPE and how those determinations should be made, along with an evidence-based framework of risks to support healthcare workers and patients in high-risk procedures and settings.

While defining high-risk settings and requirements access to PPE are officially set by the provinces and territories, there remains inconsistency on aerosol precautions across Canada. A strong and clear message from the federal government will provide consistency across the country and set positive changes in motion at the provincial and local level. In addition, these recommendations would also bring Canada's guidelines in line with other jurisdictions, such as those from the American Thoracic Society in the United States.

At a time when many are looking to PHAC to provide direction for precautions and guidance, we believe that federal recognition of aerosols as the predominant form of COVID-19 transmission, clarity on which precautions are needed in high-risk environments, and elevating the standards for aerosol precautions overall will play a crucial role in supporting all Canadians and healthcare workers. This is critical to end this pandemic and for Canada's recovery from this crisis.

We hope to have an opportunity to meet with you or a member of your team to discuss aerosol precautions and how we can work together to support all Canadians and healthcare workers with improved guidance moving forward. If you or a member of your team is available for a meeting in the coming weeks, please reply to this letter and we will coordinate meeting details.

We appreciate your consideration in advance.

Sincerely,

Micah Kooperberg RRT, CRE

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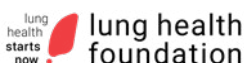
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