

COVID-19 Facebook live update: January 5, 2022

>> Good morning to you all and Happy New Year. I'm Renée Francoeur with cabinet communications and the moderator for today's COVID 19 update. We are joined today by Premier Sandy Silver, and the Acting Chief Medical Officer of Health, Dr. Catherine Elliot. Thank you to Mary Tiessen for joining us on Zoom and providing our ASL interpretation and Andre Boissier for providing our French translation. Following the remarks from our speakers, we will go to the media present in the room and then on the phone lines for round of questions. I'll call you by name. And you'll each have two questions. We'll also circle back at the end for another round of questions. Before we begin with our speakers, I would like to verify that everyone can hear us. If any of the reporters are having problems, please email ecoinfo@gov.yk.ca. I will now hand it over to Premier Silver.

>> Thanks very much, Renée. And thanks, everybody for joining us here. We're coming live from the traditional territory of the Kwanlin Dün First Nation and the Taa'an Kwächän Council. It's really good to be here with Dr. Elliott and the whole team. I hope that you all had some rest and some downtime over the holidays, at least when you're not shoveling or trying to keep warm here.

Obviously the situation has been very dynamic over the last two weeks, and even over the last few days as well. The omiron variant continues to spread at alarming rates across the country. And we are now seeing an increased spread here in the territory. I know this disrupted an awful lot of holiday plans and things had to be scaled down. I've said it before, you know, you may be done with with the pandemic but certainly the pandemic is not finished with us yet. And it does remain a very serious situation. We have lost another Yukoner to COVID. This is the 15th death since the pandemic began. I offer my sincere condolences to the family of this individual. Our thoughts and prayers are with them and their friends and their loved ones at this time.

We have been through an awful lot over the last two years. And we need to keep

going. Yesterday marks the one year anniversary since the first doses of COVID-19 vaccine were administered here in Whitehorse at Whistle Bend Place. Since that time, we have rolled out vaccines for all Yukoners over the age of five. It was a busy year. By the end of 2021 nearly 90% have-- of Yukoners age five and up have received one shot and 80% have received two shots. I want to thank all of the immunization teams that have helped us get to where we are right now with our huge success in vaccination rates. Every shot delivered helps keep our territory safe. We are now into the booster shots. We began rolling these out to the most vulnerable Yukoners in September and also then after that to our long term care residents and those over 50 years of age.

The boosters are now available for those 18 and over who received their second shot more than two months ago.

I'm very happy to see so many folks eager to book their boosters and I thank everyone for their patience as well. Additional clinic appointment times have been had been made available and we have increased access to the clinic here in Whitehorse as well. Starting this week, the clinic is now opened Monday through Saturday. This is so that we can help get more Yukoners vaccinated and boosted, which is absolutely our priority right now. Again, you can book your appointment time online, just go to the website Yukon.ca/this-is-our-shot.

Booking an appointment is always recommended, but walk-ins will be accommodated as much as possible. And I want to thank the folks that are working at the clinic. I know several people who have received their booster shot. And I received mine just yesterday. And I tell you the clinic is very, very well organized, and it is operating smoothly and quickly and very, very professionally.

The folks at the community health centers, they're also doing a fantastic job as well. So thank you very, very much to everybody helping to inoculate Yukoners.

The vaccine remains our best form of protection against COVID-19 but as we know, they're not enough to address the new omicon variant. You know, it's spreading like wildfire. So, being vaccinated is the best tool against omicron. Last Friday, we

announced additional temporary public health measures as well based on new recommendations from Dr. Elliot and her team. Those include limits on indoor and outdoor personal gatherings, limits on organized gatherings, and restrictions on restaurants and bars, as well as recreation and leisure sites such as gyms. Now you can find all the information you need about the new public measures that's all available online@Yukon.ca.

These measures are being introduced to reduce the risk of transmission of COVID-19 and to limit impact on our territory's health care system. We are strongly encouraging all Yukoners to follow these new measures immediately. They will be enforced under the Civil Emergency Measure Act starting Friday, January the 7th. Now we recognize that these measures are not welcome news for everyone, especially as we start a new year. If you asked me a year ago if we were going to be in this situation as of now, I would have been surprised but the variant, the virus, continues to surprise.

But we are still here, we're still here to support you. In the initial phase of the pandemic the Government of Yukon took early action to provide financial support to Yukon businesses and employees and we have continued to adapt as we navigate through this pandemic. Since we declared a state of emergency in November, we launched the Yukon Emergency Relief Program and this program focuses in on funding eligible fixed costs for Yukon businesses and non-recoverable financial commitments for events that were cancelled or significantly altered because of new orders under CEMA, the Civil Emergency Measure Act.

It has one stream for businesses. It also has another stream for NGOs. Yukon businesses and organizations can contact the Department of Economic Development to start an application by emailing them at ECDEV, and that's at yukon.ca. So ECDEV@Yukon.ca, or also by phoning 867-456-3803.

Additionally, the paid sick leave rebate is still available for folks

that need to miss work due to COVID. It provides up to 10 days wages for workers who are sick, self isolating or caring for others-- other household members due to

COVID-19. All eligible Yukon employers and self employed individuals may apply.

Now this rebate program has supported hundreds of employers in the territory and it's still available, even if you've accessed it earlier in the pandemic.

Our COVID-19 support programs, they are the gold standard across Canada, and we will continue to provide them for as long as needed.

I want to thank all of the businesses and organizations that continue to adapt to ensure that their employees and those who they serve, remain safe and protected.

These continue to be extremely challenging times. With the new omicron variant spreading quickly in the territory, we need to take action to protect the health and safety of Yukoners and ensure that our health care system is not overwhelmed.

These new temporary public health measures are intended to limit the number of contacts between individuals and ultimately reduce transmission. We all have a role to play in keeping the territory safe. And we all need to take precautions to prevent COVID-19 from spreading in our communities.

This includes practicing the safe six, masking up and getting vaccinated.

This is a new variant, but we already know the fundamentals of how to prevent it from spreading. This includes in our health-- in our school systems as well. I know that many patients, many sorry, many parents are anxious about students returning to the classroom as we see some spikes in cases. Dr. Elliot and her team have been working extremely close with the Department of Education over the last several months. This is not our-- the first school year that the pandemic has hit us in, and we've learned a lot over the years. All schools have operational plans in place to keep students and staff healthy and safe.

These are developed based upon guidance from Dr. Elliot's office.

When we declared the state of emergency last November, we strengthened public health measures in our schools. This includes requiring students to wear masks at all

times when inside schools. Dr. Elliot continues to recommend that schools remain open for inperson learning and it is our priority to keep students in the classroom. Students should be the last that-- sorry, schools should be the last thing to close down in a pandemic. We know that keeping schools open and available to students is good for their well being. Social interaction is important, especially as we work to minimize the social activities that are going on outside of schools to limit the spread of COVID-19. I want to give a big shout out to all the educators and all the staff that have worked extremely hard in the schools, with the school community, to keep our schools running, and to support our students, and to keep them learning through these very, very trying times. This is such important work. And as a former educator myself, I know how challenging it can be, and how committed our teachers are to supporting their students. So again, thank you very much. We will continue to monitor the situation and adapt as necessary, based upon the best public health advice available.

Thank you very much, folks. And with that, I'll turn it over to Dr. Elliot.

>> Thank you, Premier Silver. And good morning, everyone. Bonjour.

Happy New Year to everyone. And I hope you enjoyed a safe and happy holiday, even though it may not have turned out as you planned.

Once again, COVID-19 is at the forefront of many people's minds. There are many other important things in life. And I hope that we are able to move away from this focus soon.

As we begin 2022 we're entering a new phase of the COVID-19 pandemic.

We're in another wave of omicron. And we're in another wave-- sorry, we're in another wave with omicron variant and this means that we need to adapt.

Omicron is like a blizzard that's blown in.

It's causing disruptions to many lives and forcing many of us to respond.

Even though many of us wish it were over.

I was driving down here today and doing my usual effort of not speeding which is high effort for me and

realized how cold it was and hoped my car would do okay.

Suddenly, I realized I was in ice fog and going a little too fast. So I slowed down, made sure my lights were on

and adapted. And just like that, it's time to go slow to be wise and to adapt.

In the short term, this may be challenging.

It already is for many people in Yukon and it will continue to be in the coming weeks.

I'm so glad that so many people in Yukon are vaccinated because vaccines protect people, so fewer will have severe disease requiring hospitalization and fewer will die.

Over the long term, this actually is a step forward toward living with a milder form of COVID-19 and over the long term this means we can focus our focus our efforts on those who most need them.

Here's what's happening with COVID-19 around the territory today.

Two people are in hospital with COVID-19. The average new daily case count is 50 over the past seven days, and 60-- sorry, and 63 over the past three days. So 50 over the past seven day average and 63 over the past three days. Tells you the case count is rising.

There are 302 active cases in the territory. These are unprecedented numbers for us.

Over the course of the pandemic, there have been a total of 2,010 Yukon cases and 1,704 of those have recovered.

15 Yukoners have died.

I send my heartfelt condolences to the family and to all who have lost loved ones, whatever the cause.

We are seeing a rise in case counts and cases have been diagnosed in many territories throughout the community as-- many communities throughout the territory. We also know that there are many more cases that have not been diagnosed. So our case counts reflect a portion of the true number of cases in Yukon.

This means that there is widespread community transmission and potential for exposure in most settings and most communities and people would be wise to use their COVID cense throughout the territory.

We have already seen the epidemiologic signature of omicron; the rapid case rise over a very short period.

Omicron is highly transmissible, it spreads wider and faster than delta. It can affect all people, even those who are vaccinated. But it tends to cause severe disease in those who are not yet fully vaccinated, those who are older and those with chronic disease.

In Yukon, it's following the pattern we've seen in other parts of Canada.

In the short term, the number of people who could be infected with omicron means that a large number of people could require hospitalization at the same time.

We are starting to see this in other parts of Canada. In Yukon, we're not there and now is the time to prevent this.

We now need to pull together and do what it will take to keep severe cases as low as possible.

It's time to get our boosters so we don't have severe disease.

It's time to reduce our number of contacts, to follow the safe six, to wear our masks and follow all the measures.

Without these measures, our health system will very likely be overwhelmed.

Even with them, we will see a large number of people infected but fewer than without.

I'd like to emphasize why we're seeing this even though so many of us are fully vaccinated. Vaccination works a little differently with omicron. With omicron, vaccine reduces the likelihood of infection but not as well as with delta.

Therefore, people who are partially or even fully vaccinated are being infected.

Adults, as their turn comes, are eligible for their primary series of two doses eight weeks apart, and a booster six months later.

When they have received all of these doses, they are-- they have the strongest immunity possible.

Over a third of Yukoners are now-- have now had their boosters. Over a third of adult Yukoners have now had their boosters and many more on the path to becoming fully vaccinated with that strong immunity.

What does that mean for you? Well, that means an awful lot of people have gotten vaccinated which helps you be protected. It also means it's time to check your vaccine status and get your dose when your turn comes because when you are fully vaccinated, you are less likely to become infected.

When you are fully vaccinated, you are less likely to infect your contacts.

When you are fully vaccinated, you are less likely to be hospitalized, to need oxygen or breathing support, or even to die.

This is why vaccine is so important now.

And I just want to give a shout out to the team that's working to get--

help people get vaccinated around the territory. The health care professionals, the IT support, the people who clean the vaccine centers, the people who drive people to get vaccines, the people who have those tough conversations where maybe they don't agree with the person they're having a conversation with, but they know how to listen, be kind, and meet people where they're at.

Thank you.

If you've had COVID-19, it's still important to get vaccinated. Vaccine and past infection work together to train the immune system so it knows what to do when you become infected.

Most of us will be infected at one point or another so vaccine is so very important now.

Yukoners are seeing this firsthand, whether infected themselves or for the first time knowing someone close to them who has been infected. We are seeing mild illness among those who are fully vaccinated and each vaccine contributes to this.

That demonstrates how effective vaccine is and it shows how getting fully vaccinated and getting your booster is still absolutely critical more than ever. But it can't be the only action that you take.

Our intensive care system in Yukon is very limited. There's four ICU beds in Whitehorse and these are the only beds in the territory. So we don't have a lot of surge capacity.

We need to follow these measures so that the hospital is able to treat all of the patients who need care whether that's for COVID-19, or another illness and injury, or something else. The hospital is doing well so far and if you have any illness, please don't hesitate to go to the hospital for care.

It really won't take much however, to overburden the system. It's essential therefore, even if you're vaccinated, even if you have your booster, that you continue to lay on-- layer on the other protections. Keep your distance physically, but stay in touch emotionally. Clean your hands.

Stay home if you feel sick, even with the mildest of symptoms. Avoid any crowded places. Avoid any non-essential travel.

Self isolate when it's necessary.

Wear your mask, limit your contacts as much as possible.

One key tool we have now, and that is still serving us well, is isolation.

It's only by constantly combining all of these protections, especially limiting our contacts as much as possible that we'll control the spread of omicron and stay healthy.

You see, controlling omicron is important now not only for the health and wellness of individual Yukoners but also for our healthcare system and for our communities as a whole.

If too many of us get so ill that we require medical care, there's a very real risk that we'll overwhelm the healthcare system. There's a very real risk of other essential services being shut down and businesses being closed. We are seeing this happen in other jurisdictions where they're being forced to take even more stringent measures.

We need to work together to prevent that happening here in Yukon.

Already in Yukon, the numbers we're seeing are high, high enough that there's a very real risk of services being affected.

We only have four ICU beds so even if you don't get vaccinated for yourself, and even if you don't follow the measures for yourself, even if you hate wearing a mask, do it. Do it for your family, do it for your friends. Do it for those seniors and those elders, those traditional knowledge holders. Do it for our vulnerable populations. Do it for the doctors, nurses and other frontline workers who-- many of whom are very close to burnout and that is real. Do it for the people working at the businesses and in public spaces. Do it for the Yukon.

It's important to recognize that each of us is part of this community and each of us has an essential responsibility to play in maintaining the health of our community. Only if we get the spread of omicron under control and keep ourselves healthy and our healthcare system stable will we find ourselves in a position to rollback the new measures that I'm going to discuss today.

That's why we all need to start following these new measures that I recommended to government. We need to start following them now. And the government has put these in place in law.

I'll describe these in detail now.

Yukon remains in a state of emergency. We're already-- we already have public health measures in place and these new measures build upon those. These new measures were

announced last Friday and they'll become enforceable on January 7th.

There are new restrictions on indoor personal gatherings. For households where everyone is fully vaccinated, you can gather with another household where everyone is fully vaccinated.

Fully vaccinated means that in this case, and for these statements, it means two doses, except for children who are between 12 years and four months and 18 years-- 17 years for whom it means at this point, one dose.

So two households can gather together. Maybe they have a six year old in that one of those households; that six year old is not counted amongst those people who need to be fully vaccinated.

So if two households gathered together, it's a maximum of 10 individuals. So if you haven't nine people in your household, you can have one person over from another household. A maximum of 10, it's capped.

If anyone attending does not have all the vaccinations they're eligible for, they don't have those two doses, or one dose for youth, then gatherings are restricted to a single household only.

Households with a single person who is not vaccinated may gather with one other household. This is so no one is alone.

There's a new restriction on outdoor gatherings, personal gatherings. Up to 25 people from a maximum of three households may gather, regardless of their vaccination status.

There are new restrictions on organized gatherings. Proof of vaccination is required at all indoor and outdoor organized gatherings except for those children who are under 12 years and four months.

Indoor organized gatherings are limited to 25 people or 50% of venue capacity, whichever is less. Outdoor organised gatherings are limited to 50 people.

At both indoor and outdoor organized gatherings, physical distancing between households is strongly recommended.

There are new restrictions on the following eating and drinking establishments and casinos. This includes restaurants, bars, nightclubs, tasting rooms with seating, distilleries, and breweries and casinos. This includes indoor areas, outdoor areas, including outdoor patios of food establishments, at which individuals may sit and drink including quick service restaurants and cafes. At all of these establishments, proof of vaccination is required for table service, except for children under 12 years and four months old.

Anyone can still pick up takeout food, as long as the business allows it.

No more than six people may sit at a table, and patrons seated at different tables must be separated by a distance of at least two meters. No bar or countertop seating or service is permitted.

Patrons must remain seated except to use the washroom facilities and may not move between tables. Dancing is not permitted.

It goes without saying that we all-- it's also enforceable that we need to wear our masks and indoor spaces when we're not eating or drinking.

There are new restrictions on entertainment and cultural venues. This includes movie theaters, museums, another type of theater or cultural space, which would include spaces where an indoor concert or dance or theater rehearsal or performance is held. Places where indoor singing or wind instrument practice are performances held, places where an indoor organized recreational activity or class for individuals is held.

At all of these places, proof of vaccination is required except for children under 12 years and four months.

A maximum of 25 people or 50% venue capacity may attend the place whichever is less.

There are new restrictions on sports and physical recreation places. This includes gyms, fitness studios or facilities including but not limited to those where indoor exercise or fitness activities held by a business or organization are held. Dance studios, recreation facilities for active recreational activities, including without limitation; Canada Game Center, all arenas, indoor and outdoor pools including hot pools, recreation centers, community centers, ski chalets, places with climbing facilities, escape room facilities, laser tag facilities, arcades. At all of these places, proof of vaccination is required except for children under 12 years and four months. A maximum of 25 people or 50% venue capacity may attend the place whichever is less.

To be clear, that limit is for each space in a facility where the activity is being held. For example, at the Canada Game Center, there are multiple areas of activity, large gyms, ice rinks, the Fieldhouse, the multipurpose room, among others-- boy, are we lucky to have that place. And each of those areas is individually governed by a new limit of 50% capacity or 25 people whichever is less.

There are also new restrictions on recreational team sports.

This includes places where an indoor sporting event is held, regardless of whether a ticket is required to enter, and regardless of whether spectators are in attendance.

At these places, proof of vaccination is required, except for children under 12 years and four months.

A maximum of 25 people or 50% venue capacity may attend the place, whichever is less.

In addition, for sports, arts and recreational activities, teams or groups may not be larger than 25.

While practices are allowed among teams, there can be no mixing of players between teams, and no--no team play.

Travel between communities should be for essential purposes only.

There are new restrictions on businesses, retail stores, public libraries and places that provides services to the public.

This includes...

..movie theaters, stores including, but not limited to, grocery stores, clothing stores, retail stores, liquor stores, cannabis stores, and pharmacies, banks, and credit unions.

Excuse me a minute.

Right.

Banks and credit unions, cafeterias, and workplaces of post--and post-secondary institutions, public libraries.

Any space in a government office where a service is provided to the public.

All of these places must limit attendance to a maximum of 50% capacity.

In addition, at movie theaters proof of vaccination is required, except for children under 12 years and four months.

Public saunas and steam baths are not permitted to operate.

And all businesses are strongly recommended to have operational plans in place to show how they will go about limiting close contact between people and keeping their employees and customers safe.

There are new restrictions on personal services.

Proof of vaccination is now required, except for children under 12 years and four months.

A maximum of 25 people or 50% venue capacity may attend the place, whichever is less.

There are new restrictions on places that provide faith-based services.

Proof of vaccination is required, except for children under 12 years and four months.

A maximum of 25 people or 50% venue capacity may attend the place, whichever is less.

Mandatory masking continues to be in effect in all indoor public settings and outdoor public settings where physical distancing cannot be maintained.

I strongly recommend that people start taking these actions now if you haven't already.

And I thank everybody who's already put these things in place for their community, for their business, for their organization, for their team, for their school, and many other places.

These will become law on January 7.

They will be enforced under the Civil Emergency Measures Act or CEMA.

You know, we're gonna have to learn to live with COVID-19.

And sometimes we have to use these legal tools to mandate things.

But we're all going to have to learn to follow these rules because they're the right thing to do.

Over the long run, I'm hoping that we won't need to legislate so many things, and that we'll move into a space where we all just know what to do.

We're not there yet, so we're using the tools we need to use.

Well, there's many people who want to know what to expect in the days and weeks to come.

In the short term, we will all work to prevent transmission.

We will have measures in place, and we'll need to ensure we become vaccinated.

And in the meantime, we slow down.

We keep our contacts low, and we use our COVID sense.

Many people will become infected, and many people will be off work, more than we've had in previous waves.

This could be hard on the healthcare system, for staffing.

It can be hard on staffing at essential services, schools, businesses, organizations, etc.

Therefore, we will all also need to prepare throughout our lives by having contingency plans for when things don't go how we normally expect them to, when fewer people are in the workplace, or there's a shift in schools or in childcare.

It's a good time for us to ensure that we have what we need and plans in place should we need to isolate.

It's also a time to help others.

It's easy to see that everyone right now could just use a little help.

And a little extra kindness will go a long way.

What we have already done is helping us all, and it matters so much to have done so much already.

We've gotten our shots, we've experience in running businesses and schools and households in these new circumstances, we've developed operational plans and along the way, we've learned an awful lot of COVID sense.

We understand now how to run these organizations, businesses, and essential services in all parts of our lives with COVID.

This is all so important now and it's trained us for what we are facing.

I'd like to talk a little bit about schools.

Schools open on schedule this week because they were ready to be safe and healthy

learning environments for students and staff.

I know many of you have questions about the rationale for reopening here in the Yukon while other jurisdictions across Canada have delayed the school reopening.

Many other jurisdictions are taking an additional week, or even more, to prepare their operational plans and put measures in place in order to be safe places to welcome students back to the school environment.

Our schools in Yukon are already well positioned with established operational plans to control the spread of the Omicron variant.

School administrators, teachers, parents, and students are aware of the actions to take in school and what to do in the case of illness.

Many of them worked over the holidays to do so.

In school, there are established distancing and masking rules and many practices.

If students, teachers, or administrators have symptoms, they know that they must stay home and self-isolate until they no longer have any symptoms.

It's essential that our children attend school facilities and socialize with their peers.

It's important for their education to be in person.

It's important for their mental health and their social development.

I'm extremely confident that the correct action is to open schools and open as scheduled for students to attend.

I will continue to monitor the situation and provide advice to the Department of Education and school officials as we move forward.

We're in regular contact, we are watching the situation.

If the department needs to move to online learning due to operational matters such as,

for example, shortages of staff or other reasons, they will do so, they have done so.

If I need to, I'll recommend a shift to control COVID, but that's not what is needed now.

Each of us is playing our part by keeping anyone even with the slightest symptoms out of schools, staying home, isolating when we need to, and being patient as things change.

I'm going to move to--to remind you of two other recommendations that we've made recently.

First, keep your contacts to a very few people.

Let me explain this one.

Take a moment right now to think about what would happen if and when you become infected.

If you developed a cough right now, how many contacts would you have in the past two days?

How many people would have been within six feet of you for a total of 15 minutes in any day, either yesterday or the day before?

Last night?

Yesterday morning?

Yesterday afternoon?

The day before?

This is the part that you can control.

Keep it low.

Keep things running smoothly, help people not have to stay home because they've been exposed, and prevent healthcare overwhelm.

Even if your contacts aren't likely to require hospital care, transmission to them could be the start of a chain of transmission that leads to someone who is.

Last week, I was very pleased to lighten the burden on people who are contacts of a case.

If you are a contact, and you have had two weeks since your booster shot, then you need to self-monitor for 14 days.

You'll note I didn't say self-isolate.

You might be wondering about that.

Here's what self-monitor means.

It means if you have any symptom, even the tiniest sore throat or sniffle, stay home and away from others.

It may well be COVID.

It's not the time to go and eat at a restaurant with a bunch of people in different households.

Wear your mask when you're out and about and keep it on.

You can't do that when you're eating.

It's the time to lay low, go about the things you need to do, and be even better than ever at practicing the measures.

If you're a contact and you've had two shots, and it has been between two weeks and six months since your second shot, then you can self-monitor for 14 days.

If you are a contact and you are not in one of those categories above, then please isolate for seven days and self-monitor for seven more days.

It would be very wise, when you're self-monitoring, to stay away from those who are at risk of severe disease.

People become infectious before their symptoms start.

So that's why we have all these measures and why we need to keep people safe who are at risk of severe disease.

This includes anyone, whatever age, with a chronic condition.

You can find this information at [Yukon.ca](https://www.yukon.ca), what to do if I'm a contact of a case

Following the period of isolation if no symptoms are present, close contacts can move to self-monitoring.

If you are a contact and you develop symptoms, then you should check online.

There you will find information about whether you need a test and what to do next.

Here's part two.

I am pleased today that we will be able to lighten the burden on cases.

Today, we will shorten the isolation for cases who do not--who already have strong immunity.

Here's what cases need to do.

If you are a case, and you are two weeks since your booster shot...then isolate for seven days.

And when-- If all of the following conditions are true, then you can come off isolation.

Seven days have passed, you feel better, and you're off any fever medicines like Tylenol or Advil or Ibuprofen and still don't have a fever.

If you are a case and you've had two shots, and it's between two weeks and six months since your second shot, then isolate until all of the following are true...

Seven days have passed, and you feel better, and you are off fever medicines like Tylenol, Advil, or Ibuprofen, and you still don't have a fever.

If you are a case and you are not in the categories above, then isolate for 10 days until -and you feel better and you're off fever medicines and don't have a fever.

Note, this information will be posted online soon at Yukon.ca, what to do if I am a case.

This starts today for any new cases.

Older cases should follow the advice of YCDC, their nurse managing their case, or the instructions they've seen online.

We have reduced the burden of isolation, as the science currently supports it.

We know many people who have taken on isolation.

We know people who have isolated themselves or even their children or their families.

Sometimes even when these close household contacts are not sick, and they've done this to keep us all safe.

Thank you so much, I know it's a challenge

You're partners in our fight against COVID, and this is what we all need to do.

This is so important now to stop the chains of transmission.

Part Three.

Now, I mentioned we'll be shifting our focus to those who are most at risk of severe disease, and there's more to be said on this.

Let's talk about testing.

With community transmission of Omicron, and exposures possible in many places, we're at the point that you can safely assume that you have COVID if you have symptoms, and most people won't need a test.

Now I know it might sound strange coming from a person who's been telling everyone to get tested. So let me explain.

Omicron is the beginning of a new phase in the pandemic and we are shifting our management to be in line with the characteristics of this disease. When a disease is mild in most people and highly transmissible, it results in many cases in the population. People with strong immunity don't need a test. They just need to slow down, stay home and take care of themselves for seven days.

They don't need to get tested.

How will you know if you have COVID, then?

The answer is you will know by your symptoms. Very soon, we will have information online that will tell you specifically how to sort this through.

And I urge you to check that before you seek testing.

We know we've all heard that many jurisdictions have gone this way because their testing systems have been overwhelmed. We expect our testing system to become overwhelmed here too. And it's getting there. People right now may not be able to book a test as quickly as they would like to.

You see, tests are most important for those people who are at risk of severe disease. They need to know whether their chest heaviness is COVID or something else that requires a medical assessment.

Some work in a place where they may expose a vulnerable person, such as long term care.

They need to test to make sure that the right things are done to protect their patients.

This is what we need to do in order to protect those who are most vulnerable.

The list of those who should get tested will be found on Yukon.ca soon. Most people, healthy adults and youth with strong immune systems that have been trained by vaccines do not require testing.

Keeping away from others by isolating for seven days and taking care of yourself is all that it takes to recover, limit the spread and protect our healthcare system and keep those tests available for those who need them.

It's very important to protect these systems and limit the spread right now.

Still, I understand many people still want to test, they want to know.

So we're working hard on developing access to rapid home testing kits for those who want them.

The government has just under 5000 self administered rapid antigen tests remaining from the initial shipment from the federal government.

These have been and are being used to limit spread and outbreaks in setting-- settings where there's high risk of spread.

We're actively working with the federal government to increase our supply of rapid antigen tests, to have that supply for those who have symptoms, don't really need a test but want to get tested

More information will be released in the coming days on how to access these test kits

If you're using a rapid antigen test, and you've been exposed or you have symptoms, I want you to know this.

If you get a positive test result, it means you have COVID.

If you get a negative or indeterminant test result, it means you might have COVID, you might not.

It doesn't shorten your isolation. It doesn't mean you can break the rules and gather with large numbers of people. It just means you might not have it, it doesn't confirm that you have it

So, here we are, together in another phase of this pandemic. It has taught us a lot.

It has pushed many of us to work harder, to grow and to do the things that we didn't think were possible.

Many of us have suffered losses.

For some, this pandemic has taken away something, a business, a source of income, other things or someone before we were ready.

For many of us, it has shown us what is most valuable, helping each other, showing kindness, finding new ways to work together, rediscovering the joy in nature, in loved ones, and in time to ourselves.

This may well be challenging in the short term, I think that's easy to see.

I hope you can see also that in the long term, this is the next step forward in living with COVID-19.

Right now we need to follow the rules, keep our contacts down, be flexible, patient and kind as things change, get vaccinated and use our COVID sense.

Soon we'll be past this wave, the measures will lift and we will have developed and learned even more common sense along the way.

The challenge right now is to keep the cases down to avoid hospital strain. And also for those with strong immunity to learn to manage this mild illness by using the guidance and tools we have at hand.

It will need us all to shift our thinking to be flexible.

It will require us all to be kind and patient even when we don't feel like it.

But the days are getting longer and this storm will run its course and we will get through this together.

Thank you for listening today. [Speaking Indigenous language]. Thank you. And merci. I'm happy to take questions.

>> Thank you, Dr. Elliott, and thank you, Premier Silver. We'll now move on to the question and answer session with media. A reminder to reporters, please identify which speaker you would like to answer your question before you start. And please also remember to mute and unmute yourself accordingly. I understand we do have one line open creating an echo. So if you could mute yourself now, that would be great. Thank you. We have no reporters in the room. So we will go to the phone lines. And we will start with John at CKRW.

>> Reporter: Hi. My question is either for the Premier or for Dr. Elliott, whoever is best to speak on it.

Canada just announced that they're sending 140 million rapid tests to the provinces and territories. I'm curious to know how many the Yukon is getting or if we're getting any seeing as we're not distributing them as widely as other jurisdictions around the country are?

>> Yeah, I would say that we're getting our fair share more details on what we're getting will come out of health and social services. But these tests are on their way.

>> Thank you. Do you have a second question, John?

>> Reporter: Yes, I do. With the vaccine boosters rolling out, I'm curious to know if the government will be changing their official description of fully vaccinated to three doses. And if that affects isolation, as well as how individuals access vaccine dependent services, such as restaurants and other places where you'd have to present your proof of vaccination.

>> That wouldn't be a call from me, that would be a call from the-- from the medical officers across Canada.

>> So this is-- we're getting tricky here. But it's important because people are all going to have the same question. So we now have two-- two definitions of fully vaccinated. Sorry, folks, that's just the way it is. If you're thinking about proof of vaccination or mandatory vaccination for workplaces, fully vaccinated is two doses.

That's a national definition and it is what it is.

If you're thinking about because you're a case or a contact, and whether you need to isolate and for how long then you need to think about-- I'm going to read this because I want to get it absolutely right. Just a second.

Oh, there's a lot of pages here.

Okay.

For contacts or cases, fully vaccinated means you have had two shots. And it's been between two weeks and six months since your second shot.

Or you've had three shots. And it has been two weeks since your third shot. Thanks.

>> Thank you. We'll now move to Haley at Yukon News.

>> Reporter: Thank you. My first question was, you know, as we're looking at the potential of hospitals being overwhelmed, if we do see a lot of Omicron cases, I'm wondering if you could explain how that works. You know, if our four ICU beds fill up, and we're sending folks down to Vancouver, and they're also-- or Vancouver, British Columbia, and they're also seeing a strain on their healthcare system, how does that work for priorities?

>> Do you want me to speak to that?

>> Sure.

So-- so how it works is, we do our best with what we've got. And we work-- teamwork across the country. So we've seen this in other places, there's been strain in parts of Alberta, we've seen it in Ontario and other places.

We augment, the hospital has an acute care surge plan, and they implement that we have access to the national supply of emergency materials and equipment. And we implement that and we work with partners to bring healthcare providers in and also to-- to move people around the country in order to ensure they have the care that they

need. We wouldn't be the first to be in that situation. And we all need to do everything we can to avoid it. Thanks.

>> Just to-- just to add that, whether it's in COVID days, or not in COVID days, we have always received exceptional service from the two provinces that we rely on heavily, both British Columbia and Alberta. Anybody who's ever had to go out for medical or medevac, you know, we really do have instant access to some of the best medical care in the country, if not the planet. And so nothing should change really, when it comes to our relationship with these health centres.

>> Thank you. Haley, do you have a second question?

>> Reporter: Thank you, I do. My second question was about mandatory self isolation. I'm wondering, you know, if people are not getting a positive test done, is that still-- is isolation still enforceable under CEMA? If you have, I don't know, cold symptoms, for example, and are going outside the community and not self isolating, can you receive a fine for that? How does that work?

>> You know, people are thinking about whether to self isolate or not.

This isn't the time to think about whether you're going to get a fine if you break isolation. This is the time to think about the people you love, the-- the territory you love, and do the right thing and isolate. It's-- it's just not the time to think about that.

>> Yeah, I would just add, you know, our approach has always been education, as opposed to, you know, go right to the restrictive nature of the-- of CEMA.

You know, and if you take a look over the last two years, Haley, when we see what Yukoners mostly do, which is adhering to the rules, and you know, and what-- what ends up happening is we can move forward. If we see folks that aren't and-- and we see spread or we see outbreaks, these are the situations that then invoke more severe measures, not just here, but right across Canada and the world. So we've been very lucky in the Yukon, because most Yukoners had been very kind, have been very good to keeping up to date with the-- with the most up to date measures. We don't want to be

overly-- an overemphasis on-- on enforcement, we want to really focus in on education.

>> Yeah, and I might add that, you know, isolation can be hard. And we're doing all we can to support people who need to isolate.

And it's going to take the whole community to-- to support people at this time. And that's another part of-- of what we're asking of people. Thanks.

>> Thank you. We'll now move to Maya at CBC.

>> Reporter: Hi, my first question is for Dr. Elliot, and it's about long COVID.

What kind of data is the government gathering on long COVID? And what can you tell us about what you found?

>> Yeah, we're, you know, long COVID or symptoms that extend beyond the acute phase or the short period in which people are infectious and ill, have that inflammatory response is-- is something that's occurring in Yukon and-- and around the world. We're working to develop the systems to gather that data and watch it more closely.

And-- and as we have findings that develop, I'll be happy to share them. Thanks.

>> Thank you. Do you have a second question Maya?

>> Yes, and this is for Premier Silver. I spoke with Yukoners who have long COVID. And they say it can be especially hard to get proper care for their symptoms in the north, they say they're being dismissed by medical professionals or have to wait years before they can see specialists to treat their sys-- their symptoms. I'm wondering what plans does the Yukon government have to help people with long COVID in months and years to come?

>> I would say, you know, our healthcare system in the north here is extraordinary. We're all grappling with this virus, you know, not only just the different variants, but long term effects. And you know, we do our best with, you know, the isolated nature of living up in the north. We do our best with small populations and-- and massive geography. And we hold our own when it comes to conversations on a national level as

far as getting the resources that we need to keep Yukoners safe and healthy. And we'll continue to do that.

>> Thank you. We'll now move to Tim at the Whitehorse Star.

>> Yes, good morning, or I guess, afternoon now. My first question is for Dr. Elliott. And I'm going to echo some of what Haley Ritchie just asked you as far as using symptoms to identify whether you should self isolate or not. I'm not sure that what you're suggesting is really that practical. I myself have respiratory allergies and there's a-- it's rarely I have a day where I don't have sniffles. Am I supposed to self isolate? My wife has asthma, she has a cough almost every day. Is she supposed to self isolate? Those aren't practical symptoms to use, and you're asking a lot of people to go and self isolate just on that basis.

>> Yep, I am asking a lot of people right now. And I think some people do find it hard to understand how their symptoms could be-- lead to a diagnosis of COVID. And that's why we're developing tools online that you can use to help you with that.

Some people have chronic conditions that cause them to have symptoms that are the same symptoms as COVID-19.

Let me tell you a bit about what we're seeing when we talk to people who get COVID and some of the challenges we have. It is very challenging to manage an infectious disease that causes mild symptoms in most people. It's very challenging to limit the spread. And-- and that's why we all need to do our part.

Sometimes, and we've had any number of these situations which-- which a person can understand, you know, somebody wakes up in the morning, Monday morning, they have a sore throat. But they were out shoveling the driveway last night and every day after they shovel the driveway they get a sore throat. Tuesday morning they wake up with a headache. Well guess what? First week back to work, always get a headache on the first week back to work. Carry on about their business. Day three, fever, chills.

So they say "wait a minute, I've had symptoms for two days already. And I've been going about my business, how many contacts am I going to have to phone and say, 'you know what, you're a contact, you've been exposed.'"

So it's not always easy at the individual level to know which symptom is attributable to COVID-19 versus other things going on in one's life. And that's why we're developing tools. I would say at this point, you err on the side of staying home and away from others, because there's an awful lot of COVID spreading in the community. And-- and people can be exposed in any place. So that's what we're asking people to do right now.

>> Thank you. Tim, do you have a second question?

>> Reporter: Yes, I was just wondering how many people are in ICU at the moment with COVID symptoms.

>> To my knowledge in the territory, we have one person who's in ICU at the moment.

>> Thank you. We'll now move to Mike at Media Q.

Hello, Mike at Media Q.

We'll circle back to you.

We'll now move to Jackie at CBC Yukon.

>> Reporter: Hi. My first question is for both the Premier and Dr. Elliott. It's related to the COVID situation in Dawson City. So yesterday 36 of approximately 250 students showed up for school. And I've also heard from a number of community members who say they have no faith in the Yukon government provided case counts for communities, that the numbers are just too outdated or too behind to be relied on. There's been a clear break of trust in the community of both the government and public health recommendations just based on student numbers and what community members are saying. How will you address this? How-- how quickly can you start reporting

community numbers? What do you say to Dawsonites and particularly the premier since you're their MLA as well?

>> Yeah, I would say that the Yukon Communicable Disease Center has done an impeccable job when it comes to testing and to make sure that we have the statistical relevance that we need when it comes to the health of all of our citizens. As a teacher in Dawson, you know, with, especially with this weather, it's-- it's really hard to get a whole bunch of people to school in the best of times, I would say that, you know, the-- the school system, the educational department, the-- the Chief Medical Officer of Health, everybody is live to the situation in all of our schools. And we will make sure that every single building that we open as a government is safe. We are aware that there was a low attendance. Again, it is -50 up there as well. And I wouldn't say that there's a complete lack of trust, I would say people have questions. And that has been the status quo for the last two years when it comes, every time we get to another outbreak, every time that we get to another fork in the road, it's always challenging times. Add on to that the exacerbating factors of the temperatures right now in Dawson. You know, I remember being in school before COVID. And yeah, if it's cold out, you're going to have a lot less people in the school. When it comes to the accuracy of our-- of our tests, again, we have the best testing, with PCR testing, with our availability in BC as well. And really, again, it comes down to if folks are using testing-- testing, to allow them to go do things, that's not what testing is for. If we use testing to make sure that we have the statistical relevance to track and to trace and to understand how this various-- how this virus reacts and acts, then we're doing it properly. I understand people's frustrations. I know that for every call that I get for people saying to shut down the school, I get five other calls saying thank you for not shutting down the schools. And it's you know, it's a difficult job to make. It's-- it's difficult-- difficult decisions to make. Those decisions are made easier because of the profound professional advice that we get from Yukon Communicable Disease Center and the Chief Medical Officer of Health.

>> I'll address that question too if that's alright. Thanks, thanks Premier Silver. And I

know that touches pretty close to home.

I would like to talk a bit about the community numbers, the numbers of active cases by community and what those numbers mean.

Those aren't practical symptoms to use, and you're asking a lot of people to go and self isolate just on that basis.

>> Yep... I-- I am asking a lot of people right now. And I think some people do find it hard to understand how their symptoms could be a-- a lead to a diagnosis of COVID. And that's why we're developing tools online that you can use to help you with that. Some people have chronic conditions that cause them to have symptoms that are the same symptoms as COVID-19. Let me tell you a bit about what we're seeing when we talk to people who get COVID. And-- and some of the challenges we have. It is very challenging to manage an infectious disease that causes mild symptoms in most people. It's very challenging to limit the spread. And-- and that's why we all need to do our part. Some...times and we've had any number of these situations which-- which a person can understand, you know, somebody wakes up in the morning, Monday morning, they have a sore throat, but they were out shoveling the driveway last night and every day after they shovel the driveway, they get a sore throat. Tuesday morning, you wake up with a headache. Well, guess what, first week back to work, always get a headache on the first week back to work. Carry on about their business. Day three, fever, chills. So they say wait a minute, I've had symptoms for two days already. And I've been going about my business, how many contacts am I going to have to phone and say, "You know what, your contact, you've been exposed."? So it's not always easy at the individual level to know which symptom is attributable to COVID-19 versus other things going on in one's life. And that's why we're developing tools. I would say at this point, you err on the side of staying home and away from others, because there's an awful lot of COVID spreading in the community. And-- and people can be exposed in any place. So that's what we're asking people to do right now.

>> Thank you. Tim, do you have a second question?

>> Yes. I was just wondering how many people are in ICU at the moment with COVID symptoms?

>> To my knowledge, in the territory, we have one person who's in ICU at the moment.

>> Thank you. We'll now move to Mike at Media queue. Hello, Mike at Media queue... We'll circle back to you. We'll now move to Jackie at CBC Yukon.

>> Hi. My first question is for both the Premier and Dr Elliot. It's related to the COVID situation in Dawson City. So yesterday, 36 of approximately 250 students showed up for school. And I've also heard from a number of community members who say they have no faith in the Yukon government provided case counts for communities, that the numbers are just too outdated or too behind to be relied on. There's been a clear break of trust in the community of both the government and public health recommendations just based on student numbers and what community members are saying. How will you address this? How-- how quickly can you start reporting community numbers? What do you say to Dawsonites, and particularly the premier since you're their MLA as well?

>> Yeah, I would say that the Yukon Communicable Disease Centre has done an impeccable job when it comes to testing and to make sure that we have the statistical relevance that we need when it comes to the health of all of our citizens. As a teacher in Dawson, you know, with-- especially with this weather, it's-- it's really hard to get a whole bunch of people to school in the best of times. I would say that, you know, the-- the school system, the educational department, the-- the chief medical officer of health, everybody is live to the situation in all of our schools. And we will make sure that every single building that we open as-- as a government is safe. We are aware that there was a low attendance, again, it is minus 50 up there as well. And I wouldn't say that there's a complete lack of trust, I would say people have questions. And that has been the status quo for the last two years when it comes-- every time we get to another outbreak, every time that we get to another fork in the road. It's always challenging times. Add on to that the exacerbating factors of the-- of the temperatures right now in

Dawson. You know, I remember being in school before COVID. And yeah, if it's cold out, you're going to have a lot less people in the school. When it comes to the accuracy of our of our tests, again, we have the best testing, with PCR testing, with our availability in B-- BC as well. And really, again, it comes down to if folks are using testing-- testing, to allow them to go do things, that's not what testing is for. If we use testing to make sure that we have the statistical relevance to track and to trace and to understand how this various-- how this virus reacts and acts, then we're doing it properly. I understand people's frustrations. I know that for every call that I get for people saying to shut down the school, I get five other calls saying thank you for not shutting down the schools. And it's, you know, it's a difficult job to make. It's-- it's difficult-- difficult decisions to make. Those decisions are made easier because of the profound professional advice that we get from Yukon Communicable Disease Centre and the chief medical officer of health.

>> We gave some more questions too, if that's all right?

>> Thanks. Thanks, Premier Silver. And I know that touches pretty close to home. I would like to talk a bit about the community numbers, the numbers of active cases by community and what those numbers mean. Let's use Dawson as an example. So as of this morning, we have 20 active cases. This in Dawson City, this means that 20 people with a residence in Dawson City, according to our files, have COVID-19. They may live in Dawson City and be somewhere else, they may live in Dawson City and be out of the territory. I also want to say that it-- we know that not everybody with symptoms is getting tested. Our test positivity rate is over 30%. And that's okay. In fact, as I said, if you have symptoms, you can assume it's COVID. And we'll get-- get more information soon on exactly how to do that. So I think when people look at these numbers, you do have to know that it's not an exact count. What we're looking at is trends, changes over time. And-- and also, we're looking to help those people who are at risk of severe outcomes, because those are the ones who need medical and public health support. Those people at risk of severe outcomes and those who are at risk of exposing others or or causing an outbreak where there's a lot of people who are at risk of severe

outcomes such as in long term care. So I think people have to recognize what the numbers mean. And we've been really transparent about this. What they mean and what the limitations are and-- and certainly, it takes a lot to have a number that is verified, checked, confirmed. And-- and it's-- it takes, you know, we're working quickly, but it still takes a bit to verify numbers. So I think that's a part of the system that everybody in the world-- around the world is-- is working with and-- and it's really important to know that if your community also says there's no cases so, you know, Beaver Creek, Burwash Landing, Carmacks, Destruction Bay, Faro, Mayo, Ross River, all of whom have no active cases, according to our count. Does that mean there's no one with COVID in those communities> It doesn't mean that. It means that there's no one with a residence in that community who has been tested, and tested positive, and is-- has been entered into our system, which happens really quickly. So I think really, we have to be careful about knowing the strength of these numbers, we can trust these numbers on the page. And knowing that not everybody's getting tested, not everybody is counted. And-- and they're based on the best information we have, which is where people live. Thank you.

>> Thank you. Jackie, do you have a second question?

>> I do. This could also go to either the Premier and/or the acting chief medical officer of health. So we've seen really long lines for the drive thru testing centre in Whitehorse. I've heard from a few people who say they've been turned away for capacity issues. As well, I'm hearing from people who don't drive but need or want testing, who are having difficulty accessing it, because even with the other testing centre you're not supposed to take the bus if you're symptomatic, some cab companies will not take up symptomatic people. And walking at minus 40 to the testing centre is unsafe and unrealistic. I'm wondering if you can confirm that there are currently capacity issues at either or both of the Whitehorse testing centres? What options exist for people who don't drive but need a COVID test? And as well, with the new recommendations around testing, how will you track cases and how will people who need access to these COVID support programs get them if they don't have proof of their... their positive COVID status?

>> I can start. ?? Sure. >> Yeah, I mean, it's-- it's no secret that right across Canada, testing is being strained. And that's no difference here in Yukon, again, exacerbating that is our cold temperatures as well. So we do recognize that there is a strain on the testing. I thought the information shared today by Dr Elliott, as far as, you know, how we are going to move into a new era, you know, with COVID and with the Omicron. And how we shift our priorities. I think that was very succinct messaging today. But we do recognize that the the system is strained here in Yukon, it's strained right across Canada.

>> Thank you. To build upon what Dr Silver said, people might be having symptoms and having difficulty getting a test right now. And they might wonder what it is they should do. Here's what you should do. If you have strong immunity, because you don't have a chronic disease, you're not elderly and you're fully vaccinated, you should stay home for seven days from the first symptom and take care of yourself. Stay away from others. And you can go back in-- off your isolation...once seven days have passed, you don't have any symptoms and you are off all fever reducing medicines like Tylenol, ibuprofen. If you can't get a test, and you either don't have strong immunity, or you have a chronic disease, whatever age, or someone you're caring for as-- is fits in this situation, and you can't get a test, the best thing to do right now is to book your test. And check in with your primary health care provider if you-- if you or the person you're caring for needs care. We have a fantastic primary health care system. We have virtual appointments available. And this-- they can help you with how to care for yourself and what you need and whether you need any further assessment. If you get really sick, you need to go to the emergency department, the emergency department's open, it's available, it's safe, and-- and that's what you need to do. So even if you can't get a test, there's a lot you can do right now to take care of yourself and to take care of those people who you're caring for. Thank you.

>> Thank you. We'll now move to Laurie at Radio Canada.

>> Oui, bonjour. [Speaking French].

>> So Dr Elliott, could you please repeat in French, what motivated you not to recommend keeping the schools closed, as has been done in many other provinces and territories

[Dr Elliot Speaking French]. [No translation provided].

Thank you. I won't ask you to repeat in English Dr. Elena as you did answer that question previously. And Ultra Castillo Laurie. Laurie, do you have another question?

>> Et oui. Excuse moi. [Speaking French].

>> So the question is for Dr Elliott, we've seen in South Africa that the cases disappear quite rapidly. There was also a recommendation in BC from-- from the chief medical officer there that we can open up a bit more with-- with Omicron. So what is your take on what is being discovered right now about Omicron and how will it change the recommendations that you have right now?

>> Merci pour la question. [Speaking French]. Merci.

>> And Dr Elliot, if I could get you to repeat the summary of that answer en Anglais?

>> Oh, sure. So a lot of people are wondering what the long term will bring for COVID-19. I'm wondering myself. So I can tell you what the science is telling us today. The science out of South Africa, it-- it looks like the COVID Omicron wave went up quickly. And it also ended quickly. Lots of differences between South Africa and Canada. So we are watching the UK and, and other places around the world that are experiencing this to see whether they also peak quickly and descend quickly. It makes it very hard during that peak because of this risk of hospital overwhelm. But it also makes it a short period where we need these strict measures. And my hope is that we'll be able to reduce the measures as quickly as they've come on. And we do that based on the data and the science at the time. We also know that there is a time not too far away, where even more Yukoners have strong immunity. Strong immunity brought on by boosters, strong

immunity brought on by pediatric vaccines, and-- and we expect the vaccine options as well to increase. That is going to be a busy program. So with that strong immunity, it also means that with common COVID sense, we can-- we can reduce the-- the measures that are enforceable and-- and go about our day to day lives. There will always be as-- in the near future people who are more vulnerable. And those people will always need to-- some degree of protections. And-- and that's something that we can all do to help protect those people.

So with that strong immunity, it also means that with common COVID sense, we can-- we can reduce the, the measures that are enforceable and, and go about our day to day lives. There will always be in the near future people who are more vulnerable. And those people will always need some degree of protections. And-- and that's something that we can all do to help protect those people. This is what I foresee right now, I foresee the days getting longer and with that us also using our COVID sense. But I would say this journey with COVID is a lot like a, a wilderness trip. You never quite know what's going to come your way and that is part of the journey. And if you let your guard down too fast, you're going to get burned. So, you know we need-- we need to keep our COVID sense about us and that's not going to change. But the better we are at that the more we're going to get to a more stable situation and learn to live with COVID Thanks a lot.

>> Thank you. We will now move to our final reporter on the line. My apologies I don't have your name here but the reporter with Aurora Boreal.

Just check-- checking one more time. Do we have a reporter from Aurora boreal on the line? All right, I'll circle back one more time to media queue. Mike from media queue. We understand there is a lot to cover today. So I'd like to take the opportunity to circle back with all reporters for one additional question. So if you're still on the line, I'll start with John again at CKRW. I'll move to Haley at Yukon News.

>> Great. Thank you. One more question. I think for Premier Silver. I was wondering the number of rapid tests that we're expecting from the federal government. Is there a

reason you can't confirm that number right now? I've heard 100,000 as a rumour, and I'd just like to know if we could confirm that number that we're getting from the feds?

>> Yeah, that's the number I heard as well.

>> Thank you. We'll move to Maya at CBC.

>> Yeah, I think you mentioned that the positivity rate was above 30%. Can you give us the exact number?

>> So currently the three day running average positivity rate is 35%. Thanks.

>> Thank you. We'll move to Tim at the Whitehorse Star.

>> Thank you. With a 35% positivity rate could you give me a ballpark figure on how many undetected cases that will compute to?

>> Yeah, I wish it was a perfect science like that, it's not. That number 35% means that of every 100 tests that are completed 35 of them are positive. We use that combined with the rate of increase and direction of increase to tell us that we expect the case count to continue to increase over the next week or so. Thank you.

>> Thank you. We'll move to Jackie at CBC.

>> Hi, I just want to move back to my second question. So, again, for people who can't or don't drive in Whitehorse, how can they access testing? And if the advice now is that not everyone who's symptomatic needs to be tested what does that mean for the case count and tracking cases and kind of gauging how well we're doing?

>> I don't have any specific answers for you right now, as far as, you know, the-- the complications of getting to a testing site in -40, you know, with a strain on the medical system as well, but we can have officials follow up with you and give you some specifics about the full gamut about how we're trying our best to get testing out the door.

>> And in terms of what it means for case counts, when we decrease our testing rates amongst people with good immunity and-- and mild symptoms, it means that we will continue to follow case counts and percent positivity. And those will be indicators of what to expect in the coming days. But they are not exact counts of cases, they never have been honestly and-- and they will become less so. What is a good indicator is the number of people who need hospitalization and that is because that's a very distinctive indicator and it's also what we are working to prevent. So we will be following that as well. And, and all of these indicators together require clinical judgment to-- to really look at what the situation is and what the next best step is. And so I'll continue to watch this and give my recommendations as they're needed. Thank you.

>> Thank you. We'll now move to Laurie at Radio Canada.

[Speaking French].

[Speaking French].

>> So the question is for Dr. Elliott, what kind of indicators would you use to reconsider keeping schools open? Would it be the number of employees that are sick or the number of cases you would have-- would in the school population? What would you look at to change our take of keeping schools open right now?

>> Okay, I'll start in English. So the-- so some people are wondering, what would it take for us to move to virtual learning, online learning or other options. So the options that we would look at next would be reducing-- reducing the number of students in schools. We've done this before, by asking parents who can keep their students home to do so and move to virtual learning. And we-- we also have a more stringent sort of characteristic of priority populations that we would do if we needed to do that. If we-- I apologize. If we need to move entirely to virtual learning, we will do that and the Department of Education is ready to do that. Schools may move entirely to virtual learning or classes to virtual learning, because of other reasons besides COVID-19. For example, if there's not enough employees to work-- to run the school facility safely or any number of other reasons. And in terms of which measures-- communicable disease

measures we're watching to inform this decision. We are watching number of cases, we are watching is their transmission in school. So when we see cases among school aged children, we look at where did they acquire their disease? And is the school a place where we're seeing a lot of transmission? It has not been that case. We look at the severity of disease amongst children. We look at how well is the school able to carry out the operational plans and keep kids safe and healthy. We know that if we move to virtual learning, even if we move to part time virtual learning as we had in the high schools earlier in the pandemic, it's very hard to shift back. And, and so not only is it a big decision in terms of safety and health and etcetera, it's a-- it's a big operational decision as well. We will take it if we need to, to keep people safe, and students safe and we're ready to do that. But we don't need to do that right now. Thanks.

[Speaking French].

[Speaking French].

[Speaking French].

[Speaking French].

[Speaking French].

[Speaking French].

>> Thank you. That concludes our COVID-19 update for today, the first of 2022. Our next COVID-19 update will be next week. Thank you again to our speakers, the media and everyone who tuned in to watch live over Facebook. Stay safe everyone.