

## COVID-19 Facebook live update: August 7, 2020

>> Pat: Good afternoon,  
I'm Pat Living with the  
Department of Health and  
Social Services and moderator  
for the COVID-19 update for  
Friday, August 2nd.  
I'd like to thank you all for  
joining us on such short notice.  
Our chief medical  
officer of health,  
Dr Brendan Hanley,  
will make a statement.  
Following that we will go to the  
phone lines for  
questions from reporters.  
As usual, we will call  
you by name and you  
will each have one question  
plus one follow up.  
Our sign language interpretation  
is being provided today by  
Mary Thiessen.  
We also have with us,  
Andre Bourcier from French  
Language Services Directorate  
who will translate any questions  
from French speaking reporters.  
Dr Hanley.  
>> Thank you, Pat.  
Good afternoon.  
[Speaking French]  
>> Today marks another pivotal  
moment in the still young  
history of COVID and Yukon.  
We have a new case of COVID  
infection in Yukon and this  
case,  
our 15th,  
is the first that has been

locally acquired in Yukon.

We received the positive result this morning.

For this briefing,

I would like to share with all of you what we know about this case and what you need to do.

I'm going to say a little bit in French.

[Speaking French]

>> The case involves a Whitehorse individual who was recently tested at the RAC here in Whitehorse.

The results were received, as I said,

as positive this morning.

This individual did travel with family members to Dawson City within the last two weeks.

Contacts in Dawson have been identified and will be followed up.

The person has not traveled outside of the territory.

This person was in Whitehorse as well during the infectious period which began on July 27th.

Again,

contact tracing is underway.

It is therefore possible that the person acquired the infection either in Whitehorse or in Dawson.

Now you've all heard about our out of territory visitors who were here in Whitehorse and who also visited Dawson recently.

Due to the visitors being present in these two places between July 16th to 24th, we suspect there is a chain of

transmission between the visitors and this person. As this person and family also visited tourist areas in Dawson, we are further investigating any possible sites visited in common.

>> Pat: Excuse me, Doctor Hanley, if I can just have you pause for a second we've lost sound.

>> Okay.

>> Pat: Sorry.

[No audible dialogue]

[No audible dialogue]

>> Pat: Can I get you to start at the beginning of your speaking notes please, Dr Hanley?

>> Sure.

As of now?

>> Pat: Yeah.

Yeah. Well, yeah, if you could start at the beginning please.

I won't do my bit but you can do yours.

>> Sure, okay.

>> Sorry.

>> Good afternoon again.

[Speaking French]

>> I hope you're hearing me well now.

I hope everyone as well.

Today marks another pivotal moment in the still young history of COVID and Yukon.

We have a new case of COVID infection in Yukon and this case, is the first that has been locally acquired in Yukon.

We received the positive result

this morning.

For this briefing,  
I would like to share with all  
of you what we know about this  
case and what you need to do.

I'm going to say  
a little bit in French.

[Speaking French]

>> The case involves a  
Whitehorse individual  
who was recently  
tested at the RAC, or  
respiratory assessment centre,  
here in Whitehorse.

The results were received,  
as I said,  
as positive this morning.

This individual did travel with  
family members to Dawson City  
within the last two weeks.

Contacts in Dawson have been  
identified and will be followed  
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The person has not traveled  
outside of the territory.

This person was in Whitehorse as  
well during the infectious  
period which began on July 27th.

It is therefore possible that  
the person acquired the  
infection either in Whitehorse  
or in Dawson.

And I'll just say a little bit  
in French again.

[Speaking French]

>> You've all heard about our  
out of territory visitors who  
were here in Whitehorse and  
who also visited Dawson,  
that was recently.

During the time that the  
visitors were present  
in the Yukon, between the

dates of July 16th to 24th,  
and because these visitors were  
both in Whitehorse and Dawson,  
we suspect there is a chain of  
transmission between the  
visitors and this person.

As this person and family also  
visited tourist areas in Dawson,  
we are further investigating  
any possible sites visited  
in common.

So, here's what's  
important to know.

In follow up to last week's  
announcement when we put out  
the...the posting just a week  
ago, today.

If you were in Dawson between  
July 20th to the present,  
you should still be monitoring  
for symptoms.

If you have symptoms you  
should-- if you are a Dawson  
resident,  
then contact 811 or do the  
self-assessment or go for  
testing at the-- at the hospital  
over the weekend or at the...at  
the clinic otherwise during  
the week.

And always make sure that you  
call ahead.

And if you're in Whitehorse,  
the testing of-- if you're named  
as a contact,  
the testing will be done over  
the weekend at at the YCDC and  
the respiratory assessment  
centre has also been extended so  
it will be available for testing  
over both weekend days from 9:00  
to 5:00 pm.

If you were in the following

locations in Whitehorse,  
you should also self monitor and  
come forward if you have  
symptoms.

And this is as will be posted in  
the-- in the news brief.

The Superstore in Whitehorse on  
August 1st between 8:00 and  
9:00 a.m.

and the Sacred Heart Church for  
the mass that was  
August 2nd.

The 10:30 service.

Regardless of exposure,  
it is more important than ever  
that individuals with symptoms,  
even mild ones,  
step forward for testing.

And this is how we're going to  
be able to live with COVID.

Follow each element of the safe  
six.

And please rehearse and practice  
the safe six every day.

That's maintaining physical  
distancing.

Two meters away from everyone  
who is not a member of your  
social bubble.

Wash your hands frequently with  
soap and water or with hand  
sanitizer.

Stay home and away from others  
if you're feeling sick.

And don't gather socially in  
groups of more than 10 people  
indoors or 50 outdoors and  
remember to keep two metres  
apart from people not in your  
bubble.

Limit travel to rural  
communities and be respectful  
when you're there and self

isolate when you're required to.  
There are likely as yet unknown  
contacts in one of our  
communities,

Whitehorse or Dawson.

We will do the contact tracing  
that is required so we can  
identify the contact chain.

Testing, as I said,  
in Dawson will be available  
through the hospital over the  
weekend.

And, as I said,  
we...we will be posting the  
numbers and location so that  
everyone knows where to go  
if they do need testing and to  
which location.

So what does this mean?

What we have at this time no  
indication of increased risk of  
the general public.

Although this case is locally  
acquired,  
this does not mean that we have  
community transmission.

What we likely have is what we'd  
call a second generation case of  
COVID related to an original  
exposure outside Yukon.

So, this is still  
considered to be  
travel-related even though it's  
not the person who had actually  
travelled.

But likely a short train of  
transmission that that has led  
to this person being...being  
exposed.

So in-- an indirect travel  
exposure.

So we need people,  
of course,

to be aware and to be aware of symptoms and to stay calm.

I said that we had expected to see cases as we lifted some of our restrictions and this is what has happened.

And we can manage this if we continue to work together as a team.

I was thinking,  
we can do this in one  
of two ways.

We can panic,  
we can assign blame.

We can regret any decisions  
made today.

Or we can decide that this is  
another COVID hurdle to overcome  
which I assure you,  
we will.

And we can work together,  
support each other and be kind  
in doing this.

We know how to do this.

As public,  
we are aware that COVID may be  
among us and we act accordingly.

By following the safe six and  
getting tested when appropriate  
to do so.

As public health people,  
we do our job and contact  
tracing and following up on  
investigations.

As health care providers,  
we continue to provide  
compassionate and efficient  
health care for whomever needs  
help.

As leaders,  
we continue to trust that with  
good public health management,  
we can manage to live with



COVID.

We will still be going to work.

We will still be going to school.

We will still play and we will continue to strive for a balanced approach in reconciling our fight against COVID with the healthiest possible way to live our lives.

Thank you for your support.

I will keep you informed as we learn more and I'll answer questions.

>> Pat: Thank you.

We'll go to the phone lines now.

Doug from Shone FM.

>> Reporter: Hi.

Thank you.

Dr Hanley,

I want to go back to the issue of face masks and I know it's been talked about before and I know there is lots of controversy as well as information and misinformation about it.

So, my first question is, does epidemiology or science prove that masks are in fact effective?

>> Thank you for the question about masks.

It's a really important question and...and you phrased it very well and I think it's a question we have to keep coming back to and reviewing where we are with the evidence and where we are with our epidemiology.

I would say there is no proof that, in terms of hard proof, as to what role masks play in

prevention.

But we are pretty sure that they do play an additional role in addressing-- an incremental and additional role

in addition to the what we call here is the safe six but primarily the distancing in terms of helping to prevent transmission of COVID.

So a mask does help to reduce the droplets that will be...that will be...that-- that could be thrown or transmitted for some...from someone who is breathing, sneezing, coughing.

So preventing that spread in those situations where physical spacing is not possible.

So I-- so still...still the the primary...primary benefit of masks is to provide additional protection when physical spacing is not possible.

So, again, in those close contacts in indoor crowded spaces, in particular.

So that...that's why we have identified a few places in territory here where masks may play a role and personal services is one of those areas.

Indoor public transport and public transit is another one and we will likely see further...further examples as we go of where masks may play an additional role.

>> Pat: Thank you.

Do you have a follow up

question, Doug?

>> Reporter: Actually,  
I do, yes.

Last time I asked this question  
about the mandatory use of  
masks,

you responded that Yukon was not  
even close to considering that.

Has that changed?

>> I don't-- I am still not in a  
position to favor mandatory use  
of masks.

But I prefer to take a  
permissive approach and a  
supportive approach so where an  
example-- a recent example is  
the Dawson school that has  
chosen to to adopt masks for  
school settings and...and really  
making it, you know,  
branding the masks in a way and  
attaching some identification to  
to the mask so that so it's  
something that is a mark of  
recognition of COVID and a  
contribution to the fight  
against COVID.

And I think that's fine and I  
think we'll see other  
circumstances like that.

And I think the more we...we  
kind of socialize and get used  
to masks for those...for those  
settings where, again,  
where physical distancing is not  
possible...

the more that-- the more we see  
of that the better.

But I do not favor mandatory  
use of masks.

>> Pat: Thank you.  
We'll move to Phillipe,  
CBC North.

Phillipe, are you with us?

>> Reporter: I cede my time.

Thank you.

>> Pat: Thank you.

Hayley, Yukon News.

>> Reporter: Hi, yes,  
thank you.

Given that the cases came from  
outside the territory,  
will there be any consideration  
about changing the current  
bubble or border restrictions?

>> Yeah, that's...that's  
a really important  
question too.

So, no...

Again, as I said,  
I think really nothing has  
changed from what we said might  
happen.

So, we have...

is my sound okay here?

>> Pat: Yeah.

That's better.

>> Yeah, okay,  
so I hope you've heard me okay  
today-- to date.

But what we...what we have  
is...is the type of case that  
still lends itself to  
containment and contact tracing.  
That...that you know the more we  
kind of open the valve and and  
let people in and the higher is  
our risk of importation of COVID  
into the territory and we're  
trying to open it enough that we  
have that good balance of  
being able to have more...  
more possibility of visitation,  
more flow of people, more flow  
of goods and-- and-- and a kind  
of a healthier overall approach

to us-- to our society.

So that's-- that-- this is  
the risk that we're taking.

And this is the-- that-- again,  
the balance that we're trying to  
achieve.

So we know there's a cost, that  
cost will be that we will see  
cases of COVID  
from time to time.

So this is another example.

This is our contact-- this is  
when our contact tracing goes  
into high gear.

And-- and when we do our best  
to minimize that risk and to  
minimize the effects  
of COVID introductions.

So this is the work that  
we've set out for ourselves.

And this is the work that--  
that we're capable of doing.

So I see that we will, for  
that-- for the time being, we  
will stay where we are.

>> Pat: Follow up  
question, Hayley?

>> Reporter: I do  
have one other question.

As of yesterday, August 6th,  
there were 31 test results  
pending.

I'm wondering if you have  
numbers for how many test  
results are pending right now  
and if you're expecting to see  
more cases connected to  
this one positive case.

>> So the-- so the  
numbers will be updated today.

So-- and I haven't-- I don't  
have those numbers in my pocket  
right now.

But that will be posted as of today. So there will-- there will be a certain number of pending. And so I'm not sure if-- if you mentioned... I think did you-- you mentioned, am I expecting? I'm not expecting any-- anything right now. But-- but, you know, we are doing the investigation and we are doing the contact tracing. So this is-- this is what will happen. Are we prepared for potential positive contacts? Yes, we are. And-- and again, we're actually looking now for potential positives. So over the next few days we-- we might well find some.

>> Pat: Thank you. We'll move to John, CKRW.

>> Reporter: Hi. Dr Hanley, this regards maybe not so much changing the bubble of who we allow into the territory with the rules under which they're allowed in. Is the government considering only allowing people into the territory should they have a positive or negative result for COVID-19 testing or something similar?

>> So I-- no, we're not-- we're not at the moment contemplating testing as a condition of entry. That has been-- certainly has been applied in international examples and of course we know

that that is a requirement for Alaska for-- for either people coming in from other countries or from other states.

And-- but we also know that that comes with its own set of risks and its own set of problems.

One of them is, of course, the chance of someone being early in their disease and-- and negative and falsely negative.

So I think-- and certainly we're looking at a variety of future approaches for how-- how we manage, in a way, that risk and what kind of advice and what kind of follow up we might offer to people coming in.

I-- you know, and we can-- continue to follow the evolution of testing but testing asymptomatic people is inherently problematic.

It-- it comes with its-- with issues such as false positives, such as false negatives.

It diverts from targeted testing, where we really want to focus for the moment on people with symptoms and where are we going to find COVID and testing of contacts.

So by diverting from higher risk to lower risk, we also risk our system being-- being overwhelmed.

So there are-- there are many considerations to doing that.

And-- and limited evidence.

Are there blends that we're also looking at?

There is-- there is some emerging literature of-- of

blends of self isolation combined with testing and for particular settings that actually might be-- might be a worthwhile approach. So-- so we are looking at those potential other-- other areas where-- where perhaps a blended model but there are many issues still to be worked out before we have-- we would have confidence in such an approach.

>> Pat: Do you have a follow up, John?

>> Reporter: No, I cede my time. Thank you.

>> Pat: Thank you.

We'll move now to Chris at CBC.

>> Reporter: Yes, thanks.

I guess my first question is with previous positive cases, you have mentioned that the-- that the people who had these cases when they were feeling okay or were asymptomatic, you have said so.

Well, I know that there are privacy issues, but what information can you give us about the condition of the most recent positive test?

>> Yeah, thanks, Chris.

And that's-- that's my-- my omission but the person is doing well, is actually feeling better than when their symptoms first arrived and-- and is a recovering well.

>> Reporter: Okay.

And given that we've had some people ceding their questions, I'd like to ask a third question.



My second question is how long would this person have been infectious and circulating in the community, either in Whitehorse or Dauphin?

>> So you mean as of today, how-- how long? So the-- so the person was infectious over-- so I mentioned-- I think I mentioned July 27th as a date of infectivity and that which-- so that was the first date of infectivity up until when-- when the person was-- was tested, which was two days ago.

>> Reporter: Okay, sorry. How do you-- how do you do that?

>> So we determine infectivity. So we use a standard 48 hours-- 48 hours before symptom onset until the period of self isolation began.

>> Pat: Thank you. We'll move now to Gabrielle, Whitehorse Star.

>> No, I think Chris had asked for a third question.

>> Pat: Oh, I'm sorry. I thought that was his third. Sorry, Chris, go ahead.

>> Reporter: Thank you. Can you be specific about what locations in Dawson City the person may have visited?

>> No, not at this point. So, so really, it comes back to are there-- when we name locations is because we-- we are-- we name them when we are unable to be completely satisfied that-- that there was no risk to the public.

So in the case-- so in this case, we've named two-- as you know, last week we named two locations in Whitehorse. This week we named two locations also in Whitehorse, where again we know that generally protocols were followed in terms of the Sacred Heart Church, for example. We know that they have been very careful and-- and actually vigilant in their use and they're following of the guidelines. But we-- we can't rule out that there could have been some public mixing either at the entrance or the exit as people are coming in or going out and that's why we posted that as a specific location. And-- and similarly with the-- the Superstore. Although we know they're doing their best to follow protocols, we know that there may be opportunities where-- where there-- there may be people within less than-- less than ideal distancing, less than a two meter distancing. But when we know that either there's no risk from the venue or that we can-- we can do individual contact tracing based on knowing who was there at the time, then we don't disclose those locations.

>> Pat: Thank you.

Gabrielle, Whitehorse Star.

>> Reporter: Hi.

This-- this question is

somewhat related but...

so, two businesses in Whitehorse have-- have been mentioned so far.

Are there other businesses in Whitehorse that have been cleared?

As you mentioned on Wednesday, is some time-- is sometimes the case.

>> Yes.

Yes.

So there are-- there are particular locations when again, and you remember I-- when I gave the media update on Wednesday, that I explained those different layers of contact tracing.

And so when-- when we actually have conversations with settings, we review-- we review protocols, get an idea of how reliable is the information.

So it's not just saying, "Did you follow the guidelines? Yes?"

It's really going over what are all of the potential risk areas and how are they-- how are they covered and how consistent is that applied.

And so then-- and of course it also relates to duration.

So-- so we-- if someone is in a-- in a location but for a very short time and under 15 minutes is our-- is our guide, then-- so those transient-- and I've mentioned that many times before, you know, in relation, for instance, to travellers passing through who may have a casual contact at a gas station

or in and out of a store  
within-- within a few minutes,  
then those are much less-- those  
are much lower risk settings.  
So that's-- that's some of  
the information that we use to  
establish whether to-- to  
follow up where and post contact  
location or not.

>> Pat: Follow up, Gabrielle?

>> Reporter: Yeah, so there's  
been an ask that people in  
Whitehorse and Dawson City  
self-monitoring based on this  
event.

Is there an end date, say two  
weeks from today or less than  
that where we can leave  
ourselves to be in the clear  
based on the cases  
that we know about now?

>> Yeah.

So there will be and I think a  
lot of that just depends on-- on  
further-- just further  
information that we will be  
gathering based on our est-- our  
estimates of, you know, contacts  
and the testing around contacts.  
So I think, for the time being,  
and then we will-- we will  
certainly update you.

>> Pat: Thank you.

We'll move to

Claudiane, Radio Canada.

[Reporter speaking French].

>> Voice of interpreter: So  
given that we have a new case  
and maybe more, does it change  
the schedule that we have for  
phases at this point?

[Speaking French]

[No translation]

Do you think I should think explain that?

>> Pat: I think, perhaps, you should expect that.

>> Sure.

[Laughter].

>> Thank you.

>> If you don't mind, Claudiane, I'll continue that in English.

And the question, again, was about what does this mean for Phase 3?

And does that

mean we have to go?

Does this mean we, you know, we should-- we should go back?

And I was just saying that, again, we predicted cases and we expected to see cases and this is where we are.

And as long as we can stay in this mode of identifying cases, doing the contact tracing, and containing-- containing these cases.

So if we see further cases related to this one, as long as we stay in that containment mode and stay ahead of community spread, that is our goal.

And again, I think I'm-- I'm just as confident as I was three days ago, that-- that we can do this and that we've built ourselves up for this.

And I've also tried to make our movements slow and steady enough that-- that it builds us that resilience, I guess.

So we don't have to go backward, so that we can continue to be at least where we are and-- and hopefully continue to move

forward.

>> Pat: Thank you.

[Speaking French].

[Reporter speaking French].

>> Voice of interpreter: So given that we now have at least one more cases, are you expecting that we'll be able to face an increased number of testing within the conditions that we have right now?

[Speaking French]

[No translation]

>> Pat: Thank you.

That's all for today.

Thank you very much.

The next COVID-19 update is scheduled for Wednesday, August 12th.