

## COVID-19 Facebook live update: January 27, 2021

>> Pat: Good afternoon.

I'm Pat Living with the department of health and social services and your moderator for the COVID-19 update for Wednesday, January 27th.

We're joined by the Minister of community services, the honourable John Streicker into the Yukon's Chief Medical Officer of health, Dr Brendan Hanley.

Once again sign language interpreter Mary Tiessen and Andre Bourcier from French language services directorate are also joining us.

Following our speakers we will go to the phone lines were questions from reporters.

We will call you by name and you will each have two questions.

Before we began I would like to verify that everyone can hear us?

If any reporters are having problems, please e-mail [ecoinfo@gov.yk.ca](mailto:ecoinfo@gov.yk.ca).

Minister Streicker?

>> Thank you, Pat.

And thank you, Yukoners, for joining us today.

I am pleased to be here with Dr Hanley on the traditional territory of the Taa'an Kw'och'on Council and the Kwanlin D'n First Nation.

And I am very happy to report that we continue to have no active cases of COVID-19 in the territory.

This is great to see and I want to thank all Yukoners for doing their part to keep our territory healthy and safe.

While there are no active cases, we remain in the middle of the pandemic.

News of new variants of the virus showing up in Canada are a clear reminder that this continues to be a dynamic situation and we must remain vigilant.

Last week, we were reminded of the kind of selfish actions let put our communities at unnecessary risk.

On January 21st, 2021, two individuals presented at Yukon's Mobile COVID-19 vaccine clinic in Beavercreek Yukon.

At the clinic, they presented out of territory healthcare cards.

Following a tab, Yukon's civil emergency measures act enforcement officials followed up and were able to confirm that the couple had violated our self isolation requirements and were not abiding by the declarations they provided upon entry into the territory.

They were charged under the EMA with two charges each as a result of failure to self isolate for 14 days upon entry into the territory, and failure to behave in a manner consistent with the declaration provided upon entry into the territory.

The RCMP were also immediately alerted to the situation.

I have to say, I am outraged by this selfish behaviour.

All of us as Yukoners are outraged.

I find it disturbing that people choose to put fellow Canadians at risk in this manner.

Reports allege these individuals were deceptive and violated emergency measures for their own advantage, which is completely unacceptable at any time but especially during a public health crisis.

Our current self isolation requirements are in place to protect the health and safety of all Yukoners, especially our communities.

Anyone who violates these requirements puts all Yukoners at risk and we take these actions very fiercely.

We will continue to enforce the emergency measures under CEMA to keep our communities healthy and safe as we carry on our vaccine rollout across the Yukon.

We also made changes to our vaccine eligibility at our clinics.

If you live in the Yukon and don't have a health card, a temporary worker, student or recently located, you're eligible to be vaccinated in the Yukon but will have to bring valid ID plus one of the following.

A valid Yukon student card, proof of employment in the Yukon, or reasonable proof of Yukon residency, for example, a utility bill.

If you have any concerns about needing these requirements -- meeting these requirements, please reach out so we can look into how to accommodate you.

You can call 1-877-374-0425.

I want to be very clear though.

If you're a Canadian but do not live in the Yukon, you're not eligible to be vaccinated in the Yukon.

You must be -- be vaccinated in your home jurisdiction.

Yukon is a beautiful destination, and we look forward to welcoming visitors again when it is safe to do so.

I have also spoken with and heard from many Yukoners who are angry about the situation.

We share your feelings.

Yukoners, let me tell you this.

We are doing everything possible under our Yukon laws to hold these people accountable.

The RCMP are also working on this matter.

Being in a state of emergency is what makes it possible to require people to self isolate, to sign declarations, and comply with public safety measures.

Without the state of emergency, the government does not have the authority to enforce these rules and restrict who can enter the Yukon.

We all take this very seriously.

We share in your outrage that people would do this, and we strongly condemn this behaviour.

I want to thank all of those in Beaver Creek, and the mobile vaccine clinic who were alert and took quick action to help us.

-- sorry, who took quick action to help us identify this situation.

And thanks to our CEMA enforcement team who found and charged these two individuals.

I also want to emphasize that all Yukoners are able to get the vaccine when it is their turn.

Please don't miss this opportunity to get vaccinated.

Thankfully, and to the credit of all those who are involved in the effort, the vaccine rollout is going really well.

As of end of day yesterday, we have immunized more than 5,170 individuals.

I was in car across yesterday at the clinic, as the clinic opened at the learning centre.

Thanks to the many people who booked appointments, the clinic was also able to immunize more than 240 people yesterday.

And the clinic is open again today.

It was really wonderful to see everybody come out, and that was my first time seeing the mobile clinic at work and I just want to say do the teams that were there working, you're doing a fantastic job.

Everybody I spoke to that came to get immunized yesterday praised the work that was going on there.

Our other mobile team is in Dawson City this week.

More than 300 citizens got their shots yesterday.

I know many folks lined up outside the clinic and braved the cold

temperatures as they waited to get their shot.

I want to thank Premier Silver, the deputy chief...

Simon Nagano, the Dawson Mayor, and great to hear you're back.

And elders Peggy and Victor for getting immunized.

I would also like to acknowledge chief Linda Dixon who got immunized yesterday in Carcross.

It is great to see leaders across the territory taking their shot to help protect Yukoners.

The clinic is open in Dawson for the rest of the week and this afternoon, up until 6:00 for Carcross and -- Carcross and Tagish.

Book your appointment and get your shot.

The vaccine is an important step in our fight against COVID-19.

The vaccine will save lives here in the Yukon, across Canada, and around the world.

But we all need to do our part.

Get your shot when the clinic is in your community.

They mobile teams will be in Pali Crossing later this week.

Next week, they will be in Vrebosh landing, destruction Bay, Haynes Junction, Carmax, Ross River, Mayo, and Stewart Crossing.

The clinic.

In Whitehorse is open to eligible adults over 65 years of age.

Next week it will be open to those over 60.

Book your appointment online at [Yukon.ca](http://Yukon.ca) or by calling 1-877-374-0425.

Last week, we were able to immunize more than 1,930 Yukoners over 70 years of age, and a personal shut out to my mother-in-law who went and got her shocked.

We have also rolled out the vaccine 250 or so folks at the Whitehorse emergency shelter, as well as staff and inmates out of the Whitehorse correctional Centre.

We're really happy with the uptake we have seen so far and we want to continue to encourage all of -- eligible Yukoners to take their shot when it is your time.

You do not want to miss this opportunity.

You can find the full vaccine rollout schedule online at [Yukon.ca](http://Yukon.ca).

I know there have been some concerns raised about the booking systems, and our clinics.

I want to assure you that while there will be kinks that come up, we have a team working tirelessly to address issues and keep the booking system working.

I now Premier Silver has spoken about the importance of the booking system already, and I know Dr Hanley will offer some more detail as well.

The most important thing is that the booking system is helping us to rollout the vaccine safely and effectively for all Yukoners.

As I said, we are prioritizing those most at risk.

Two weeks from now, the clinic will be open to all those aged 18 and over in Whitehorse.

I encourage everyone to remain patient and wait your turn.

Everyone who wants to get immunized will get the chance in the coming weeks.

We are in a very fortunate position in the territory and we are on track to immunize everyone who once it in the coming weeks, well ahead of most other Canadians -- most other Canadian jurisdictions.

Please keep that in perspective and be patient with the team that is rolling out the vaccine.

Tell them thanks, by the way, when you go.

This is a major public health initiative with many moving parts and variables.

I must give credit to Minister Frost and the team at health and social services who are really driving this vaccination and shish -- initiative.

As I said, I went and saw that clinic in Carcross that -- Carcross, Tagus yesterday.

I will be going back and it is really a great job that they are doing.

The role it is designed to be flexible so we can adjust as necessary as we go.

Or example, opening up to those over 65 in Whitehorse is just such an example.



The supply of vaccines is also a major factor.

We're scheduled to receive the next shipment of vaccines next week.

We will continue to rollout the vaccine as quickly as we can, while prioritizing the health and safety of Yukoners.

As we go forward, we will continue to provide updated information on Yukon.ca and at these weekly updates.

You can find accurate and detailed information about the vaccine online at Yukon.ca.

In a closing, I want to acknowledge that our collective efforts to keep our territory healthy and safe are working well.

A big thank you to all Yukoners for doing their part.

Even so, our work is not over and we cannot let our guard down.

The best thing that we can all do to prevent the virus from spreading and keeping ourselves safe is to practice the Safe Six.

Wash your hands often.

Maintain physical distancing.

Stay-at-home if you're feeling sick.

Travel responsibly and respectfully.

Self isolate as required, and follow the gathering guidelines that are in place including limiting indoor gatherings to ten people.

The plus one, of course is to mask up in the public.

Do it to keep yourself safe, to keep your family and friends safe, and to Gabe the Yukon safe.

In addition to that, got CEMA charges I mentioned earlier in connection with the Beaver Creek incident, we issued two separate charges for failure to self isolate in the last week.

Any of these charges are disappointing and concerning.

The self isolation requirements are in place to prevent the spread of COVID-19 in our territory.

When you failed to self isolate, you put your friends, your neighbours, your colleagues and your fellow Yukoners at risk.

What do we need to do is our part, and work together to keep our fellow Yukoners safe.

As you wait your turn to be immunized, please stay vigilant.

We are not out of the woods yet.

It is important to continue to practice the Safe Six and mask up.

Minimizing the spread of COVID is especially important as we continued to rollout the vaccine across the Yukon.

Thank you to all Yukoners for your ongoing efforts.

Remember to be kind, patient, and respectful of one another.

We are in this together, and together we will get through this.

Thank you.

>> Pat: Thank you, Minister Streicker.

Dr Hanley?

>> Thanks, Minister Streicker.

Good afternoon.

[ Speaking French ]

>> Pat: --

>> As the Minister says, we continue to be free of active COVID cases.

In fact,, it is now over two weeks since we announced our last new case, and a week since our most recent case recovered.

It is good for all of us to have a breather as we focus our efforts on the vaccine campaign.

But we know our brief look south or west of here reminds us that COVID risk is still very much present.

We were talking in my team yesterday about the Groundhog Day effect.

I mean the movie, not the actual day, which is coming soon actually.

On Monday, Canada Psalm really noted the first anniversary of having a confirmed case and in this country and thus began Canada's challenging journey through this pandemic.

Toward the end of 2020, we'll definitely felt ready for a new year.

The return of liked, fresh start, arrival of a vaccine.

It is with some disappointment that we have to consider that 2021 is bringing us some new challenges.

While in some ways we may feel like Bill Murray starting the day all over again, we should consider how much better a place we are in, no matter what is ahead of us.

This is a virus that we know so much more about.

We have experienced, we can test for it, we know what the public health measures work, and perhaps most exciting of all, we have a vaccine.

So this is a plea to hang in there.

Let us continue to get the most out of our favourable position.

Our wonderful winter, and the returning liked.

Let's focus now on getting through the rest of this winter and landing into spring with a well vaccinated population, and when we will have a better sense of what measures we can begin to adjust.

With winter blues, the beginning of vaccinations, and just plain pandemic fatigue, it can be easy to let down our guard, to ease personal restrictions and take on more risks.

Maybe it is something simple as having a friend or taking off a mask when we talk to a neighbour, or even shaking someone's hand.

All of those rituals that we need and naturally year in for, but not yet.

And it maybe a while until we can.

As the days cool off, we will be spending more time inside.

And it is inside, particularly when close to others not from our bubble that we can be more susceptible to COVID-19 infection.

There is no need at this point to do anymore or any less then we have been doing.

We just need to keep doing it well.

We need to get to -- we will get to a better place with vaccine but we need to get their first.

And we are off to a good start.

As Minister Streicker said, we have immunized over 5,000 Yukoners in seven communities, including long-term -- long-term care residents in Whitehorse and Dawson.

And between this week and next week, we will be covering all the rest of the communities.

Last week, the teams completed their first trips to Watson Lake, Beaver Creek, and old Crow.

This week we will continue to administer vaccines.

We have recently opened up appointments to the 65 plus in Whitehorse, and those 60 and older can book this week for appointments next week.

What a great day we had yesterday.

Over 300 in Dawson, lineups in the cold notwithstanding.

240 in Carcross, and a successful campaign at the Whitehorse emergency shelter, as well as people coming to the convention centre.

I am very pleased with the progress of the campaign so far, and if people step up, we will see the numbers mount rapidly.

I know it can be frustrating for people to feel we could be running more people through, but we are managing these initial leaks very

carefully for reasons I have previously explained.

Our focus is on older Yukoners, those in long-term care, and covering vulnerable populations living in group settings.

And getting out and around to all our communities.

That means a lot of vaccinated heirs out and about all around Yukon while the detailed training of more vaccinated heirs is still going on.

These ultimately mean less hands on deck of the Whitehorse clinic until we ready up for the Whitehorse clinics where they will then be prepared to crank through as many people as our supplies allow.

Soon we will be starting second doses as well, so we are basically starting whole groups of people over while others are getting their first shots.

You can only imagine the complexities of getting so many different teams and supply chains in place, all the while attempting to minimize wastage of doses.

So once again, I echo the Minister in my thanks and appreciation to both the clinical teams of vaccinated heirs and their supports and to the logistical teams doing all the moving around of vaccines, IT support, global freezers, transport, in other supplies.

This is a massive operation.

And thanks to the silent majority of you out there for your patience as you wait your turn, or make your booking.

We all know there have been glitches in booking.

While it has been challenging at times to recognize and correct those glitches, the use of the booking system has helped tremendously with clinic flow and our ability to effectively plan for the right amount of vaccines in the right amount of immunized or is on site to ensure a smooth thoroughfare of individuals receiving their vaccinations.

You may notice there is a wide range of appointment availability for the cohorts that are taking bookings for now.

We hope this availability promotes accessibility -- accessibility by providing choice and the opportunity for people to come when they are able to do so.

Quick reminder on the use of the booking system.

When entering your healthcare number, please enter the digits only without dashes or spaces.

Despite what you may have read in the news, it is important in very helpful when individuals book appointments in advance.

While the clinic does have limited capacity for walk-ins, individuals are preferred to make an appointment.

It is this information that dictates how much vaccine we make available.

Remember how we need to plan every bio and every dose, not just because of the storage requirements, but because we are actively managing inventory while awaiting incoming supplies.

In what may seem quite random to some, this rollout has been meticulously planned and in light of these initial supply limitations, groups eligible to receive vaccines have been prioritized for specific reason.

While recognizing all the other important people in important reasons to vaccinate, ages the biggest risk factor for serious and fatal COVID disease.

This is why we have designed the clinics starting with long-term care residents, the staff of care for them, and others living in Conroe get settings.

Then moving to those seven years and older will also covering our higher risk healthcare workers.

These are at highest risk a Stone Age, living conditions, and the frequency of interaction with COVID-19 patients.

Vaccines based on the number of individuals than Yukon within each group, so we reserve a vaccine for those in that age group until we are ready to open up until the next age group.

As the minister said, the current age group is 65 years and up and next week will be 60 in up with the general public clinics after that.

Just a point.

There are up to ten appointments available for each timeslot.

MAC up to -- multiple...

When all appointments at that time were booked, then the time is deleted.

With us now past the 5,000 mark, we are seeing those vials start to move.

We are on track to see that by April, we will have provided second shots to every eligible Yukon adult who wanted one.



As planned, the three territories are already far ahead of the provinces.

With some peoples rushed to find holes in the system or glitches, or screenshots of a multiplicity of appointments, we need to slow down a bit and reflect on how privileged we are.

Nahreman a many Canadians who will be unable to receive the vaccination until the late months of the summer and early days of the fall.

A little more time, a little more patience, and we will get there.

And we are doing this well, with skilled vaccinate or's, live data entry to track vaccine doses, and the ability to track for adverse effects and to stick to second dose schedule.

Yesterday, I took a little time out that days in for a ski.

I hit the freshly groomed trails in the evening and watched the pink in blue sunset over snowy mountains as the nearly full moon rose into sight.

I could not help but feel all ones again that what a beautiful place we are in, and grateful we are in a place with no active COVID cases, with a territory relatively free of restrictions, and already almost one sixth of our target population reached 41<sup>st</sup> dose of the COVID-19 vaccination.

We're in a good place in the fact we mean -- remain on track to be one of the first jurisdictions in Canada to vaccinate most of their adult population is quite the success in itself.

So please wait your turn and allow the teams to do their work in the way that was planned.

Our plan has also been created to waste as little vaccine as possible.

We are vaccinating on schedule, based on our population in resources.

In once we do open to the general public, we will see doses in Whitehorse administered at a higher rate than what we are seeing right now.

One dose, one dose per person will not achieve herd immunity.

We have allocated enough doses so individuals who have received their first dose can receive their second dose on schedule between 28 days and not more than 42.

If someone does not receive their second dose, the vaccine will not be as effective.

We need to remember that herd immunity, if we get there, will take time to achieve.

It is not going to be immediate.

Again we need to be patient and considerate of those who have already received the first dose who will need their second dose fairly shortly after.

Already by next week, we will begin administering the second dose for long-term care home residents and staff.

By being patient and waiting your turn, you're helping us reach that goal of getting Yukon vaccinated in is rapid a manner as possible.

As we make our way through this exciting era of vaccine, we can still face illnesses of any can't -- Clyne and are still susceptible to case importations in even outbreaks.

Canada's cases remain high, even if more stable in most provinces.

So the risk of impartation remains a significant.

Plays remember that respiratory symptoms could mean COVID.

Let me stress again how important it is to seek testing if you have symptoms.

Our job as a whole population is to be alert for symptoms, even mild symptoms should be taken seriously.

If you do have symptoms, you should seek testing at the COVID testing assessment centre or at your rural health centre.

Always stay home and self isolate when you're symptomatic and when you're awaiting your test results.

Coming out of a pandemic is a long and gruelling process.

The ongoing cycle of news, revised public health measures, and economic turbulence have left Yukoners with doubts and concerns.

The question was even raised here last week.

If we get vaccinated and nothing changes in our public health measures, then what is the point?

Well, the point is that gets us closer to where we need to be so that things can change.

We do know that the vaccine is a crucial ingredient to getting out of this pandemic.

We may not have all the steps in place yet, and the order, and the timing.

But without a vaccinated population, it will be much more difficult to make changes.

As we move further down the path of vaccination, we will learn more week by week about what to expect and what might be possible.

We will learn more about how long the vaccine lasts, how effective it is against variant strains of COVID, whether and at what intervals boosters may be required, and how well the vaccine prevents or limits a some dramatic disease and transmission of COVID.

Meanwhile we will continue to watch the progress of the current wave of COVID activity in Canada.

And continue to reinforce and revise our protections so that we can live as well as possible while limiting the ability of COVID to enter and circulate through Yukon.

Not everything in this journey has been certain, and a common theme I have come back to is how often we have had to make decisions in the face of uncertain evidence.

But we do know a lot more about this disease, and we can be very confident that this vaccine is safe and the most effective way ultimately to combat COVID-19.

While many people are excited for their turn, it is also normal that others have trepidation towards COVID-19 immunization.

The vaccine was developed at astounding speed.

But without any skipped steps in development, clinical trials, where the regulatory processes that led to this vaccine being approved.

If only vaccines -- all vaccines could be developed at this speed and with so much global investment and cooperation.

There is plenty of inaccurate, or plain bad information out there.

Some of it is circulating locally.

If misinformation gets the better of us, we will have a hard time seeing ourselves through this pandemic.

A high uptake up vaccine on the other hand means we get to keep COVID to eight dollars and level up menace, rather than a daily threat to our lives and livelihoods.

If we don't take action in achieving immunity, there is no telling when we will be able to relieve some of our public health measures in place.

If you're feeling unsure about receiving vaccines, please dictate -- the time to research trusted sources in find answers to your question.

You can e-mail or call the COVID-19 in phone line.

Visit [Yukon.ca](http://Yukon.ca).

So if you're hesitant or reluctant about getting her vaccine.

-- your vaccine, please take a moment to visit credible sources.

Most Yukoners are only a week away from looking into vaccine clinics and Whitehorse will be able to begin booking a time slot for immunization beginning a week prior to for Britain.

As Minister Streicker said, always or member the Safe Six plus one.

Using your mask, and all those measures in your daily lives.

This is our best way to protect ourselves from COVID-19.

That is all for my update.

Thank you.

[Speaking Indigenous Language]

>> Remember to take -- take care of each other.

Stay well.

>> Pat: Thank you both.

We will now go to reporters and we will begin with Haley, Yukon News.

>> Reporter: Thank you for the update.

My first question, sorry.

My first question involves the couple again from Beaver Creek from last week.

I know I heard there that the government and RCMP are working as hard as they can do kind of determine what can be done.

I am wondering at this point if you have ideas about what options there are beyond the fine of \$500 per charge.

>> Thanks for the question.

Obviously the one other thing that is there is compelling those two individuals to attend court, which is also there now.

That is the only update that I have.

As I said during my opening remarks, we have done all that we can, or the most that weekend under the act to make sure that we are trying to address this situation.

So the fines are there, but also-- but what is also there is that once they are served, they will be required to attend court.

>> Reporter: Thank you.

Second question for Doctor Hanley.

I am sort of looking to clarify some rumours that are floating in the community.

When it comes to people who have been vaccinated so far in Whitehorse, it is open to age 65 plus now.

The correctional Centre and the shelter as well.

Have there been other environments other than healthcare workers who have been immunized, such as hotels or businesses?

>> Sorry, other than healthcare workers?

>> Reporter: Yes, sorry.

So beyond age 65 plus, the correctional Centre, the centre, and healthcare workers, are there other groups that have been immunized in Whitehorse?

>> No.

We have been focusing on those groups, the groups I outlined in my notes.

We have not been including sectors, such as some of the essential worker categories that you mentioned, because we are able to include all of those including people with underlying medical conditions in that kind of one big category with the public clinics, because that is going to be our most efficient way to take care of those people.

>> Reporter: Thank you.

>> Pat: Thank you.

Now to John, CKRW.

>> Reporter: Hello.

I am wondering, as the vaccine rollout continues in the territory, what is our shipment of Maxine's supposed to look like?

There have been supply issues across the country and I am wondering if we are still on task to receive as many vaccines as we are supposed to, and I'm also curious as to when the last vaccine judgement was.

>> Yeah, thanks for that question.

So they vaccine supply issues have been all around the Pfizer product.

Not around the Moderna product.



We have no signals or indication that they Moderna supplies will not come in as scheduled.

We have the February dates.

We do not have March dates confirmed for delivery yet.

I believe the February date is around the seventh or eighth of everywhere he.

The last shipment came in a in I think the 3<sup>rd</sup> week of January.

>> The third week.

>> The beginning of the 3<sup>rd</sup> week of January.

So so far, we have been maintaining that schedule in we have no indication to expect at this point any supply disruptions.

Minister Streicker, anything to add?

>> I will just add that the whole of the vaccine rollout and how a prioritized long-term care facilities, front-line healthcare workers, our elders, and our communities was all based on this supply.

So we watch it closely.

Has we are confident of the next delivery date that allows us to keep moving, we are always sort of watching ahead a few steps.

If we have any reason for concern, that gives us the ability to adjust.

So far, so good, and it is why we have been able to move up even with adding the category of 65 plus, and things like that.

So that gives you a sense that we are still feeling that things are well on track.

>> Pat: Thank you.

John, follow-up?

>> Reporter: I do, thank you.

I am interested in knowing, what exactly does herd immunity look like here in the territory?

Is there a set number that I guess we are going to use as a benchmark, in once we achieve set benchmark, what will happen with COVID-19 restrictions currently in place?

Will it be relative to other jurisdictions, or will there be some form of easing of restrictions?

>> Yeah...

These are good questions.

To be honest, they are questions we are all trying to figure out as we go.

So herd immunity for example is one of those things where we have this target figure of 75 percent.

To be clear, the 75 percent allocation is really based on anticipated uptake, and that is kind of a national figure.

That is the first kind of cut, as it were, anticipating 75 percent uptake of vaccines.

But that roughly also corresponds with what we think is going to be the amount needed to achieve the so-called herd immunity.

Herd immunity really means enough people in the community, or the territory, are immunized to prevent circulation of the virus.

That doesn't mean the virus will become completely eliminated, it means it would not really have enough grip on enough susceptible people to effectively circulate in the population.

So the estimates are, we think that is around 75 percent but that is a figure that could change again, as we get more study, study data and more of the sort of real-world information and data on the actual effectiveness of vaccine in COVID active areas.

So yes of course, then that is going to influence how confident we can be on our ability to look at all the public health measures.

Even right now, we're looking at what are all of the public health measures we have in place, and if we are thinking of a theme of emerging from the pandemic, what is the influence of vaccine on the ability to lighten, or to change, or alter public health measures and that will all be part of the advice we will then bring forward for our government through my team.

We are already working though with multiple departments to anticipate what might happen.

Clearly, this depends not just on Yukon but on the rest of Canada.

So clearly, there are many factors at play here including the role of variants, what will likely be the emerging an increasing role of variants and how that influences COVID activity and the state of the pandemic as we move towards the spring.

It depends on our actual uptake versus anticipated uptake.

Depends on the increasing evidence that we get, not just about what proportion of the population needs to be immunized but the effect, as I mentioned, of the vaccine on the ability to limit transmission and a systematic infection.

All of that is information we expect to have more available as we go forward.

Hopefully that gives you kind of a picture of what we are looking forward to.

>> Pat: Thank you, John.

We will move now to Philippe, CBC.

>> Reporter: Thank you.

Question for Dr Hanley.

What is your latest recommendation when it comes to people who are pregnant or breast-feeding?

Are they encouraged to get the vaccine?

>> So this is one of those areas where we really want to make sure that the woman has an informed consent.

That means that a conversation takes place so that the person and their family realize that the information, the specific information from trial data is lacking because pregnant and breast-feeding women were excluded from the trials.

So really, what we use in that conversation is a lot of information that we have based on what we would expect to see and what other vaccines, the whole history of the vaccination and pregnancy has told us.

And part of the writing that I did to prepare some notes in some background information for healthcare providers really tries to put this all into perspective.

I would say the data and the experience was very reassuring for the safety of these vaccines in pregnancy and breast-feeding, let's all of that in the context that we do not have that specific trial information to say what the actual outcomes are.

So it really goes back to that informed conversation with a healthcare provider.

So that the woman feels confident with the right information to make the choice best suited for her.

>> Pat: Thank you.

Follow-up?

>> Reporter: Yes, on a different topic.

We have seen in Germany at the recommendation for masks has changed, to asking people to where N95 or antiviral masks.

Do you expect we will see any change in terms of what is recommended for mask use?

>> Always difficult to know how far to project.

But I would say that, the use of masks in healthcare settings is really very different from the recommendations that generally come to the public, and for members of the public.

I think it is quite a complex conversation.

It is quite cumbersome and difficult to wear and N95 all day.

And when we are really looking for, what is the goal of use in the public, it is primarily to limit that transmission with fairly simple barrier methods.

We know that the three layer mask provides more of a filtering effect, but the main effect is really helping to limit droplet transmission between people, especially when that two metres distance is violated, as it were.

So all of these are also contingent on what is going on in terms of COVID activity.

And if you're looking for, sake, one more potential tool, that might be something that would be on the table when you have high activity despite all of the other measures that we know work.

So I would say, I feel that would be unlikely to be a useful and practical additional measure.

It would be interesting to see what the German experiences, but we kind of know what works and again, I go back to the basics, go back to the things we know work really well, that we have shown to work here.

Combine that with really good contact tracing capacity which we have here, keeping people aware of testing, and the need to test and testing capacity.

We kind of know what the packages.

I think it will get us through, and now we have vaccines to add onto that.

>> Pat: Thank you.

Now to Tim, Whitehorse Star.

>> Reporter: Yes hello.

My first question is regarding the couple from BC in Weaver Creek.

Do we have any idea whether they were tested for COVID or not, and should the people that were in contact with them much as the local pilot who chartered them to Beaver Creek, should they and their contacts be tested?

>> I think you...

>> I will be happy to take that, things.

So what we did, through my team on the communicable disease side, is we did a very detailed risk assessment to determine whether there had been any credible exposure to either team members, community members, the pilot.

And that is the same process we use when we are doing contact tracing.

The way we have a known case in the community and we are looking for, did contact occur, whether that is in the healthcare setting, within a family or household, within a public setting.

The same kinds of types of questions.

What we are looking for is were there protocols in place, sanitation protocols, or masks used, did the people themselves have masks within the flight, were protocols maintained?

Was there any possible breach of protocol?

So going through all of those, we determined-- and I must say, this is all premised on the people being positive.

So we kind of take that assumption, even though you could say the random risk of someone from BC being infectious, based on active cases in BC, is roughly one in 1,000.

So we know that the sort of random risk is already low.

But we make that assumption, okay, what if they were positive.

With there have been on exposure?

Having reviewed all of that information, we were very confident there was no exposure.

So there was no tests done.

Normally, someone who is in itself isolation is not tested unless symptoms occur.

Saw there was no indication for testing.

And as obvious, there was no control over what these people did anyway.

But we made the assumption as if a test was done and if it were positive, would there have been an exposure.

We were very confident there was not exposure in any of these scenarios.

>> Pat: Follow-up?

>> Reporter: Yes, my second question, all just changed topics a little bit.



A frequent question we are getting here at the paper is why isn't the clinic in Whitehorse open on the weekends if we are trying to move this vaccination process along?

The common comment is, the hospitals don't close down on the weekend, why does the clinic?

>> So, the clinics will be running six days a week.

You know, like anything, we are going for an endgame here.

So we are going for an intense vaccination period, over basically a four-month period of time.

That is pretty intense.

We need our staff to rotate, and to be arrested.

And we can do it.

I mean, we are seeing again that the numbers are ramping up.

We are on target, we are getting to where we need to be in doing this and the methodical way.

I think it is also an opportunity, when you have a down day, it is a time to reset, to recalibrate, to debrief, to clean, to ensure that everything is in place.

So I think in terms of quality and overall efficiency, having a down day built into the schedule is a really good idea.

I think it is really important to reflect that there have been a a lot of staff working in this sector for a year now.

And we are looking at, as I say, a long and potentially gruelling process the head of us.

So preservation of staff, allowing people to have breast time and family time, these are all Yukoners doing their part.

And everyone needs a break.

So realizing that we are always working with limited numbers of people, we need to schedule in that ability for resetting and recalibrating.

>> Pat: Minister Streicker?

>> I will add a little bit of a story.

When the pandemic first started here in the territory.

Dermot O'Donovan, the person heading up our emergency response, he explained to me that you want to set up systems that work smoothly be care -- because if you do them smoothly, they will flow better over time.

Yesterday when I went to the clinic, the vaccine clinic in Carcross, I saw that that work.

So first of all, it is not just one person doing the vaccination.

They had set up five station.

And also, they had adjusted because normally people are booking for themselves and one slot but what they understood was often, a household would come and you might have two or three people coming for the vaccination.

Quickly the teams figured out to add an extra chair.

If it was a household coming, we will do those two or three at the same time.

That increased the throughput, but it was smooth.

In Carcross, one of the community nurses had been sort of assigned as a greeter because she knows many of the community folks and she can help orient people.

But after a time, when things started to slow down a bit, at the front and she ended up helping as well to vaccinate.

So they ended up with six.

I saw the clinical lead checking around to make sure that each one of those people over the five or six hours, even though that doesn't seem like a long time.

There is a lot of focus required and everybody got a break.

Those breaks rotated through.

So what I saw was that it ran very smoothly, and I think that is part of the overall design in time.

So you can add a day, but of course, it's not that there is one person in the clinic here.

There were lots of people doing that vaccination.

We just wanted it to happen, and to Dr Hanley's point, between each but -- each vaccination or household that came to the table, there was someone cleaning right then in there after each person.

When they get up, someone else comes and cleans and after they get there vaccination, they go back to a waiting area on the way out to spend 15 minutes.

As they get up, someone cleans in behind.

It all works, it felt like clockwork.

So I think those things, just to give people a sense of what is going on or what they will experience going to one of those clinics.

>> Pat: Thank you.

Now to Claudiane, Radio-Canada.

>> Reporter:

[ Speaking French ]

>> Interpreter: So could you please tell us what change in the protocols that are in place given the incident that happened in Beaver Creek, and what new documents will be necessary to be able to get vaccinated?

[ Speaking French ]

[ Laughter ]

>> Bravo!

[ Speaking French ]

>> Reporter:

[ Speaking French ]

>> Interpreter: Dr Hanley, you're still confident that we will be able to achieve the level of vaccination within the timeframe that we have, that you said in the beginning of this process?

[ Speaking French ]

>> Can I just add something, please?

I am just going to back up to the last question from Claudiane, and what was asked to me to repeat what we had said earlier about how we will add something in place-- health and social services, the vaccination team came up with some new ways to ensure that people here are residents of the Yukon when they go to the clinic.

I will add something more, because yesterday I talked with one of the clinic leaders.

We also had a conversation with first nations across the territory to talk about the situation.

We really have been working hard to make these clinics accessible for those Yukoners who want to get vaccinated.

And we want everybody in the community to get vaccinated, so we want to work with you.

We don't want to-- we know that the two people that came from outside the Yukon, and claimed that they were living and working in the territory has sent aerial jitter through the system.

And we will do our best to make sure that never happens again.

But at the same time, we don't want to do is to make this difficult for Yukoners to come.

So if you're here, you're a resident here, and I won't name names but I did talk to a reporter earlier this week who had moved to the territory but lives here.

That person still has an out of territory health card, no problem.

We will find the way.

We're just trying to make this work smoothly.

So what I saw from the team there at the clinic is that they would work to find a way.

We just need to find a way that you're at Yukoner and a resident here, but as soon as we are able to determine that, we will then get you your vaccine.

We don't want this to be a thing that displays anybody from coming for their vaccine if they wish to have it.

>> Pat: Thank you.

[ Speaking French ]

-- Maryne, L'Aurore borÉale.

[ Speaking French ]

>> Pat: We will move to news 1130.

>> Reporter: Thank you very much for taking my questions.

I was hoping to ask you, if that couple had an anyway tried to reach out to apologize or indicate that they try to make amends for what they did in our territory?

>> You know, I have no indication that I have.

And I am staying in touch with White River First Nation and so are our teams.

I have not heard of that, so I can't provide you any information about that.

I will say that after the incident, I have been asked a lot of questions about this couple.

Our team has just put its focus on -- back on how to keep the community safe.

It is our main job.

I have made no overture towards them, personally, nor has any of our team.

And I am unaware whether they have made any attempt to reach back into the community.

If they do wish to, if they reach us, we will give them that contact information.

Happy to do so.

>> Pat: Thank you.

Second question?

>> Reporter: I was hoping to ask you as well, Minister, what message do you hope to send to everyone in Canada to hear that British Columbia will not...

[ Inaudible ]

>> You know, I thought that the message that Doctor Henry gave before that was more the message.

I think she said something about, that she felt that these folks should be ashamed.

Sorry...

I think, you know, we are just upset that what they did.

They put our community at risk.

It was shellfish -- it was selfish what they did, appalling.

It doesn't mean that we don't want all Canadians to be safe.

It doesn't mean we don't want them to get a vaccine.

But we are trying so hard to keep our community safe, to keep our territory safe.

And average reduction, whether you're from BC, everyone is working to keep people safe.

There is a lot of hard work that goes into that.

Shout out to everyone doing that hard work, into every Canadian doing their job to keep the community safe.

We need to get past-- pardon me.

We need to get past thinking about ourselves in thinking about others, so we begin to think about others.

It is more important that we think about everybody, not just ourselves.

Things.

>> Pat: Now to Lauren, Radio-Canada.

[ Speaking French ]

>> Interpreter: So given that the vaccination is going well in the three territories and that we are on the right timeframe to be able to vaccinate everybody, do you entertain the idea of going back through the territory's bubble -- the territories' bubble that existed some months ago?



>> Let me just start, it will be Dr Hanley.

Listen, the way this works for us-- oh,.

[ Speaking French ]

>> Pat: If you could please repeat the response in English?

>> So yes, it is a really good question and an idea that is worth exploring.

There are a number of areas that we are already beginning to explore.

There is a lot at play here, of course, and it goes back to the previous question of when can we lift public health measures.

Clearly we are working to eventually make recommendations in that regard.

So much depends not only on the vaccine, on the knowledge of the vaccine, but also the uptake in whether we will get to that goal of herd immunity, community immunity production.

But then also what is happening not just in the three territories but in the rest of Canada.

What is the state of COVID activity.

Have we gotten through the winter, are way at a reasonable state, what is the role of the variance, then putting out altogether into what does that mean for all of our public health measures including the border measures?

Of course, it is also a national conversation into provincial borders, very much a national conversation right now in whether there

should be any reinforcement, let alone international borders.

There is a lot at play.

It is a really interesting idea, of course.

It would be very interesting to get there again, but there is still a lot they would need to -- we would need to know before we get there.

>> Pat: Thank you.

[ Speaking French ]

>> Pat: And we will move to Laura, Canadian press.

And we have lost Laura.

Okay, so I would like to thank everyone for their time today.

They next COVID-19 update will take place on Thursday, February 4th at 9:30 AM.

This is a change so again, Thursday February 4th, at 9:30 AM.