



# North American COVID-19 Policy Response Monitor: Québec

September 28, 2020

## What is the North American COVID-19 Policy Response Monitor?

The North American COVID-19 policy monitor has been designed to collect and organize up-to-date information on how jurisdictions are responding to the crisis. It summarizes responses of health systems as well as wider public health initiatives. The North American Policy Monitor is an offshoot of the international COVID-19 Health System Response Monitor (HSRM), a joint undertaking of the WHO Regional Office for Europe, the European Commission and the European Observatory on Health Systems and Policies. Canadian content to HSRM is contributed by the North American Observatory on Health Systems and Policies (NAO).

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## List of Abbreviations

CAF	Canadian Armed Forces
CDPQ	Caisse de Depot et Placement du Quebec
CEGEPs	Collège d'enseignement général et professionnel
CERB	Canadian Emergency Response Benefit
CHSLD	Centre d'hébergement et de soins de longue durée
CNESST	Commission des normes, de l'équité, de la santé et de la sécurité du travail
CPAC	Communications, Political Action, and Campaigns
CTPAB	Concerted Temporary Action Program for Businesses
EAP	Employee Assistance Program
EESAD	Cooperation Network of Social Economy Enterprises in Home Help
FNQLEDC	First Nations of Quebec and Labrador Economic Development Commission
INSPQ	Institut National de Sante Public
LSPQ	Laboratoire de santé publique du Québec (Quebec Public Health Laboratory)
LTC	Long-term care
MSP	Ministère de la Sécurité Publique (Ministry of Public Security)
MSSS	Ministère de la Santé et des Services Sociaux (Ministry of Health and Social Services)
MUHR	McGill University Health Centre
NML	National Microbiology Laboratory
PHAC	Public Health Agency of Canada
PPE	Personal protective equipment
RACJ	Regie des Alcools, des Courses et des Jeux
RAMQ	Régie de l'assurance maladie du Quebec
TAAN	Le test d'amplification des acides nucléiques

## 1. Preventing transmission

This section includes information on key public health measures that aim to prevent the further spread of the disease. It details how jurisdictions are advising the general public and people who (might) have the disease to prevent further spread, as well as measures in place to test and identify cases, trace contacts, and monitor the scale of the outbreak.

### 1.1 Health communication

The public health authorities in Quebec first addressed the public on the novel coronavirus on January 30, 2020 (Government of Quebec, 2020ar). They reminded the public to practice basic respiratory and hand hygiene and clarified that there is “no cause for excessive concern, although it is important to be cautious and to promote protective measures” (Government of Quebec, 2020ar). Since that time, the Ministry of Health and Social Services, Ministère de la Santé et des Services Sociaux (MSSS), has been informing the public with daily updates on Twitter account, as well as the Government of Quebec’s general webpage (Government of Quebec, 2020aw). On June 24, the Quebec Health Department as well as the Institut National de Sante Public (INSPQ) announced on their website that these formerly daily updates on the COVID-19 statistics will be switched to a weekly reporting schedule as of July 2 (INSPQ, 2020b)

Quebec residents with access to internet can also receive up-to-date information concerning the epidemiology of COVID-19 in Quebec, public health measures, self-care and COVID-19 symptoms; dedicated webpages are also provided with resources for individuals, schools and daycares, businesses and workers, as well as dedicated pages describing available financial mental health, and other resources (Government of Quebec, 2020m). Further, detailed information regarding store closures/re-openings, access to public spaces, available services and recommendations for animal owners during the COVID-19 pandemic are available through the Government of Quebec’s COVID-19 Frequency Asked Questions webpage (Government of Quebec, 2020ah). In addition, a toll-free COVID-19 telephone information line has been established to complement the province’s existing 811 non-urgent health services number for the specific purpose of referring people to the available COVID-19 resources (Government of Quebec, 2020j).

Since March 12, 2020, Quebec government officials, including the Premier (Francois Legault), Health Minister, and National Director of Public Health, have hosted daily video briefings of the coronavirus streamed through Francois Legault’s (Premier of Quebec’s) public Facebook page (Legault, 2020l). On March 13, 2020, two days after the World Health Organization (WHO) declared COVID-19 a pandemic, the Government of Quebec declared a provincial state of health emergency and released an official information note summarizing the key COVID-19-related government policies and measures that were currently in place (Government of Quebec, 2020aw; WHO, 2020).

On March 17, 2020, during a press conference, Francois Legault appealed to all artists, public and sports personalities, web influences and youtubers to stress to their audience the importance of following the public health guidelines (Legault, 2020g). During this announcement, Legault introduced a new campaign to the public: ‘spread information, not virus’ (ibid.).

Additional documents, in French and English, were also produced to support measures that Indigenous communities could take to prevent the spread of COVID-19, including a list of available health and social resources available for Indigenous communities; these information bulletins were later updated on March 25 and June 19, 2020 (Government of Quebec, 2020e).

On March 24, 2020, Quebec released a “Self-care Guide for Coronavirus Disease,” which provides information on the best ways to protect oneself from COVID-19, take care of others, and when to seek medical care (Government of Quebec, 2020as). It also provides a decision-making tool sheet to guide individuals with symptoms (Government of Quebec, 2020as). As of March 26, automated calls have been made daily at 6 pm to those aged 60 years and over to remind them of the importance of following public health guidelines (Premier’s Office, 2020d). On April 7, 2020, the Quebec government released provincial model projections for the COVID-19 pandemic, which provided information on the projected minimum and maximum numbers of intensive care patients and deaths due to COVID-19 that the province could potential observe over the following weeks (Lalonde, 2020).

As the province prepares to send individuals back to work, the Commission des normes, de l'équité, de la santé et de la sécurité du travail (CNESST) launched an occupational health and safety promotional campaign regarding COVID-19 in the workplace on April 20 (MSSS, 2020ah). In the early stages of the pandemic, the province did not recommend the use of face masks for the general public, except for those with COVID-19 symptoms (Government of Quebec, 2020ap). However, in early June 2020, the Quebec government released a digital infographic outlining on how to correctly wear a face mask, as well as how to sew home-made face masks; they also began stating that the use of non-medical face masks in public is ‘strongly recommended’ (Government of Quebec, 2020ap). Notably, these infographics are available in English, French, and 21 other languages (ibid.). From July 13, wearing a face covering or a homemade mask will be mandatory for individuals aged 12 and over on all public transport in Quebec (Government of Quebec, 2020aq). Children under the age of 12 and individuals with medical conditions that prevent them from wearing a mask are exempt from this regulation (ibid.). On July 13, 2020, it was announced that as of July 18, 2020, face masks have to be worn in all closed public spaces (Government of Quebec, 2020x). As part of this announcement, Quebec residents were reminded again that the use of facemasks is not obligatory, but highly recommended for children under the age of 12 (ibid.).

As Quebec struggled to curb the spread of COVID-19 in its long-term care (LTC) facilities, updates on the provincial policy response to COVID-19 in nursing homes have been frequently featured in official government communication (Government of Quebec, 2020d). On April 17, Quebec Premier Francois Legault announced that the military will deploy 125 soldiers with medical training to LTC facilities throughout Quebec (Lampert & Malo, 2020). Legault assured the public that even though LTC facilities are facing a tough period with a significant death toll, the province is ‘in solution mode’ (ibid.). As the number of LTC residences considered ‘critical’ by the province nearly doubled within a week since Legault’s announcement of short-term military support on April 17, Quebec openly asked the federal government to send an additional 1,000 soldiers to help staff in the province’s LTC facilities on April 22 (Stevenson et Montpetit, 2020). On May 28, 2020, Legault announced that he would be speaking to Prime Minister Justin Trudeau to ask that soldiers remain in LTC residences affected by the virus until September 15, 2020 (Laframboise, 2020b). To keep the public updated on the military involvement in Quebec LTC residences, the Government of Quebec has made the report from the Canadian Armed Forces, which outlines their observations while present in these facilities, public (Government of Quebec, 2020an).

## 1.2 Physical distancing

Premier Legault's Office announced on March 12 that Quebec is entering emergency mode due to the novel coronavirus and Legault urged the public to start keeping physical distance from others in common spaces and follow all public health recommendations (Legault, 2020b).

Since the Government of Quebec declared a provincial state of health emergency on March 13, 2020, it has been renewed 22 times to date and, most recently, on July 29, 2020, the state of emergency was extended until August 5, 2020 (Quebec Council, 2020) (See section 5.1 for more information about Quebec's state of emergency). Declaring this public health emergency status enabled the Minister of Health and Social Services to enact a number of orders. In order to ensure that the enacted orders pertaining to both individuals and businesses are followed, Quebec Premier Legault announced on April 2, 2020, that failure to respect governmental measures will result in fines ranging from CA\$1000 to \$6000 (Legault, 2020f)<sup>1</sup>.

### Schools, childcare facilities and youth camps

As of March 13, 2020, physical attendance at all educational institutions has been suspended, including elementary schools, secondary schools, Collège d'enseignement général et professionnel (CEGEPs), and other post-secondary institutions, such as universities and colleges (Government of Quebec, 2020f). Effective the same day, the Quebec Court suspended all but emergency proceedings (ibid.). On March 14, an order was announced which cancelled any electoral poll or advance poll in the province (MSSS, 2020l). The following day, all childcare centres (e.g. daycare, home childcare services) and all cultural, educational, and recreational facilities were closed (MSSS, 2020n).

On March 30, an "Open School" platform was created by the Minister of Education and Higher Education to provide online learning resources for preschool, elementary, and secondary school students (Government of Quebec, 2020bb). Emergency daycare services were, however, allowed to continue to be offered for children of healthcare, social services, and other essential services personnel (MSSS, 2020n).

On April 27, the Government of Quebec announced that daycares, preschools, primary schools and educational childcare outside of the metropolitan area of Montreal would be permitted to gradually re-open effective May 11; however, most facilities in the Montreal metropolitan area and Joliette Municipality are scheduled to remain closed until late August 2020 (Government of Quebec, 2020bc). Initially, they were to re-open on May 25, but on May 14, 2020, the Quebec Government announced that conditions to reopen schools in Montreal were not met and their reopening will be pushed until August (Government of Quebec, 2020ab). Daycares inside Montreal were to re-open on June 1, 2020 (Government of Quebec, 2020bc). All school personnel were ordered to return to work starting May 4. (Government of Quebec, 2020bg).

On June 8, the Government of Quebec announced that certain elementary schools were permitted to host learning camps for young people with learning difficulties, lasting a minimum of three weeks (Government of Quebec, 2020bh). Adult learners were allowed to resume their studies in person at adult

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<sup>1</sup> All amounts in Canadian dollars (CAD).

education centers from June 20, 2020 (Government of Quebec, 2020ad). As of July 2, institutions were authorized to organize in-person summer courses for Secondary IV and V level students (Government of Quebec, 2020ad). Secondary schools will remain closed until September 2020 (Government of Quebec, 2020ab).

As part of the re-opening process, schools must follow strict hygiene and distancing measures, as recommended by public health, including reducing the number of students to 15 per room (Government of Quebec, 2020ad). The government has also stated that return to in-person daycare and schools will be on a voluntary basis, meaning that parents wanting to continue home-schooling will be permitted to do so (ibid.).

### **Public and private gatherings**

On March 13, 2020, the Quebec government banned gatherings of more than 250 people, following a press conference announcement by Francois Legault from the previous day (MSSS, 2020k), (Premier's Office, 2020b). On March 22, all indoor and outdoor gatherings were prohibited, with exceptions for essential work and service activities that can only be done in-person, transportation, and households; this, in effect, banned all gatherings of two or more people (MSSS, 2020p). The Quebec government recommends everyone keep a minimum distance of 2 metres between each other; i.e., physical distancing (Government of Quebec, 2020i). On April 10, the Quebec government announced that all festivals, sporting, and cultural events scheduled for the summer should be cancelled or postponed (Government of Quebec, 2020t).

Since May 22, 2020, outdoor gatherings were permitted, with certain restrictions, e.g. no more than 10 people from no more than 3 households (Government of Quebec, 2020bh). On May 27, the Quebec government announced a gradual resumption of tourist activities (Government of Quebec, 2020bh). Further, effective May 29, drive-in movie theatres, public libraries and museums were allowed to re-open but access to shelves and common areas continue to remain prohibited (Government of Quebec, 2020bh). As of June 1, marinas and certain tourist accommodation establishments have been permitted to resume operations (ibid.). Furthermore, on June 15 2020, Quebec Premier announced at a press conference that places of worship were to reopen as of June 22 2020, provided that church attendees limit physical contact and do not engage in singing (Legault, 2020a).

Since June 8, 2020, all outdoor activities were permitted, including group sports and local competitions carried out individually or in pairs, provided a 2-metre distance between individuals (Government of Quebec, 2020bh). Throughout June, further easing of physical distancing took place for private indoor gatherings, permitting gatherings of no more than 10 individuals from three or fewer households; these measures came into effect on June 15, for establishment outside of the Montreal area, and on June 22 in Montreal (Government of Quebec, 2020i). The provincial government also stated that weather permitting, outdoor gatherings are preferred to prevent the spread of COVID-19 (ibid.). On June 22, indoor gatherings in public places of up to 50 people were allowed if physical distancing of at least 2 metres can be achieved, and day camps were permitted to open for the summer, provided that compliance with physical distancing can be assured (Government of Quebec, 2020bh). As part of this easing stage of gathering restrictions, Quebec Premier also announced that religious services and places of worship were to recommence as of June 22 (Legault, 2020a).

On September 8, 2020, Quebec implemented a colour-coded system aimed at keeping the public informed about the state of COVID-19 in the province. The four levels of the coding are: green, yellow, orange, and red. On September 15, 2020, indoor, outdoor, and private home gatherings have been allowed for a maximum of 10 people in the regions of Bas-Saint-Laurent, Chaudière-Appalaches, Montreal and the Montérégie (Government of Quebec, 2020bk). However, this was scaled back in Montreal, Chaudière Appalaches, and a portion of the Capitale-Nationale region on September 20, 2020 to a maximum of 6 people, as these regions status was moved to the orange zone (Government of Quebec, 2020bl).

### **Non-essential businesses and services**

On March 15, 2020, all bars and restaurants were ordered restrict dine-in services to half-capacity, otherwise they are permitted to provide take-out services only (Government of Quebec, 2020o). Museums, libraries, theatres, bars and disco bars, as well as pools, spas, cinemas, arcades, gyms, zoos and aquariums were ordered to close (Legault, 2020c).

As of March 22, all shopping malls and hair/beauty salons have been ordered closed (Government of Quebec, 2020o). On March 23, the provincial government ordered the closure of all non-priority services, effective March 24, unless businesses could engage in teleworking or e-commerce activities (Government of Quebec, 2020ba). The government provided a list of essential businesses which included, for example, grocery stores, pharmacies, and businesses providing inputs or raw materials for priority services were told to maintain their activities (Government of Quebec, 2020ba). However, on March 24, the government announced several clarifications to this order and, further, announced that non-essential businesses, excluding retail, could continue a minimal level of operations, with public health measures in place, to support their future resumption of activities (Government of Quebec, 2020h).

To support physical distancing efforts, pharmacies, grocery stores and other food retailers have been allowed to extend their hours of service beyond the legal periods, effective March 30 (MSSS, 2020u). The same order prohibited all retail establishments to open on Sundays in April, with exceptions made for pharmacies, gas stations, take-out restaurants and convenience stores (ibid.)

On April 13, 2020, Quebec began to expand its list of essential services to allow residential construction, mining industries, landscaping, pool services, automobile repairs, and other services to resume operating (Staff & Wires, 2020). To support the safe re-opening of these activities, CNESST published a guide for the management of COVID-19 on construction sites (CNESST, 2020). As of April 2, non-essential workers and businesses that do not comply with public health instructions can face fines between \$1,000 and \$6,000 (Premier's Office, 2020g). On April 26, Health Minister McCann ordered that any public meeting, sitting or assembly that takes place in person may be held using a means that enables all members to communicate with each other immediately. (MSSS, 2020ak). Since May 25, 2020, all manufacturing companies throughout Quebec were authorized to resume operations with no restriction on the number of employees present; however, the province emphasized that employees who can engage in teleworking must continue to do so (Government of Quebec, 2020bj).

On April 28, it was announced that retail operations outside of the Montreal region with exterior operating doors could open on May 4 and, those in Montreal, on May 11 (MSSS, 2020ai). Other announcements on April 28 allowed manufacturing and construction companies in all regions to resume activities, also effective May 11, with a maximum of 50 workers and a 50% surplus of employees per shift at any time on

a site (MSSS, 2020ai). Complete re-opening of the construction industry therefore occurred on May 11, 2020 (including public and road transport, residential, institutional, commercial and industrial sites) (Government of Quebec, 2020bi).

Business began re-opening starting the week of May 18, 2020, with some restrictions. All businesses could re-open on May 25, 2020, with no restrictions (Government of Quebec, 2020bh). Museums and libraries were allowed to re-open on May 29. Since May 30, the provincial government allowed outdoor swimming pools, playgrounds and their washroom facilities to re-open (Government of Quebec, 2020ai).

Since June 1, 2020, private health care, body and beauty services (e.g. hair stylists), dental clinics and pet grooming have been allowed to reopen outside the Montreal Metropolitan Area, the province's most populated region (Government of Quebec, 2020bj). Within the city of Montreal, only dental care, therapeutic care and pet grooming services could resume activities, while other businesses in the personal and beauty-care sector could resume activities starting June 15, 2020 (ibid.).

As part of the initial relaxation phase of imposed physical distancing measures, the Quebec government ended the temporary COVID-19-related changes to the hours and days of opening for businesses, effective May 24 (Government of Quebec, 2020a). Since this date, all commercial establishments have been authorized to operate on Sundays and priority commercial enterprises can no longer open beyond normal business hours without restricting the number of employees present (Government of Quebec, 2020a). However, retail stores without direct outside customer access were to remain closed until June 1, for those outside the Montreal metropolitan area, and until June 19, for those within the Montreal area (Government of Quebec, 2020bj).

Furthermore, except for the Montreal metropolitan area, indoor dining areas of restaurants were permitted to re-open on June 15, provided they comply with public health conditions; buffet and self-service remain prohibited (Government of Quebec, 2020i). Inside the city of Montreal, certain dining areas are permitted to open effective June 22, prior to which only take-out services could be offered (Government of Quebec, 2020ah). An official announcement has also been made for the gradual re-opening of bars, nightclubs and other non-catering services, such as casinos and water parks (ibid.). However, on July 09, 2020, the Government of Quebec announced that these re-openings, particularly pertaining to bars and nightclubs, will be halted as of July 10, 2020, due to insufficient respect for the imposed hygiene and sanitation measures by the public (Government of Quebec, 2020w).

Also effective June 1, activities by music and sound recording studios have been permitted to resume, provided that a distance of at least 2 metres is kept between people on stage or in studio (Government of Quebec, 2020bh). On June 1, in an effort to revitalize Quebec's cultural sector, the provincial government announced that film and television productions could resume on June 8, with new health guidelines in place; the same announcement also outlined that the province would be making a \$250 million investment to support the resumption of cultural and artistic activities (CBC News, 2020).

On September 15, 2020, the Minister of Health and Social Services announced that for regions of Bas-Saint-Laurent, Chaudière-Appalaches, Montréal and Montérégie, which were in the yellow level, performance halls, cinemas, theatres, museums and places of worship may accommodate 250 people. There is also a maximum of 50 people per room allowed for funerals and for activities organization in a public indoor space (such as rented rooms, weddings). If such activities are carried outdoors, however,

250 people are permitted to gather. Moreover, bars, brasseries, taverns, casinos and restaurant dining rooms are permitted to have 10 people per table. These businesses will be opened at 50% capacity, alcohol sales will end at midnight, and dancing will be prohibited. They must also close at 1 a.m. A customer registry must be maintained (Government of Quebec, 2020bk). On September 20, 2020, it was announced that in a portion of the Capitale-Nationale region in the orange level, performance halls, cinemas, theatres, museums and places of worship may accommodate 250 people. There is a maximum of 25 people per room allowed for funerals and for activities organized in a public indoor or outdoor space (such as rented rooms, weddings, picnics, organized leisure and sports). Moreover, bars, brasseries, taverns, casinos and restaurant dining rooms are permitted to have 6 people per table with alcohol sales ending at 11 p.m., as well as dancing being prohibited. These businesses must close at midnight and maintain a customer registry (Government of Quebec, 2020bl).

### **Outdoor facilities**

On March 28, 2020, the city of Montreal announced that all dog parks, playgrounds, outdoor sports facilities, botanical gardens and recreational grounds will be closed for an indefinite period (Ville de Montréal, 2020b). On April 5, 2020, the city of Montreal added to the list and announced closure of all parking around the Mont Royal park and Notre-Dame Island in the context of COVID-19 (Ville de Montréal, 2020c).

As of May 15, the Quebec government announced the first resumption phase of non-organized outdoor recreational, sports and leisure activities and outdoor areas, which would be permitted for individuals and pairs, without physical contact, starting on May 20, 2020 (Government of Quebec, 2020am).

On September 15, the Minister of Health and Social Services announced that for regions of Bas-Saint-Laurent, Chaudière-Appalaches, Montreal and Montérégie in the yellow alerts, all organized leisure and sports will permit a maximum of 250 people for outdoor activities and 50 people for indoor activities. Moreover, independent practice in a closed outdoor or indoor area will be permitted for 50 people (Government of Quebec, 2020bk).

### **Healthcare facilities**

A Clinical Triage Protocol for Coronavirus, as well as a specific protocol for patients with severe respiratory illnesses was developed in Quebec as early as February 7, 2020, when instructions were announced regarding triage and case management of suspected COVID-19 cases (MSSS, 2020f). General practitioners and family doctors were advised by the Quebec Government to provide telemedicine or virtual care when possible to limit unnecessary trips to the hospital and prevent the spread of COVID-19 (Federation des Medecins Omnipraticiens du Quebec, 2020).

According to the McGill University Health Centre (MUHR) website, as of May 12, all patients, helpers and caregivers will be required to wear a mask upon entering the hospital triage (MUHR, 2020a). Individuals without facial covering will be provided with a mask by a member of the hospital triage staff upon arrival and all individuals will also be screened for symptoms at the door (ibid.).

Further, Quebec Ministry of Health announced that as of July 9, family members who offer essential support during hospital visits are permitted at all sites of the MUHR with the exception of the COVID-19

units (MUHR, 2020b). In cases when visits are not permitted, MUHR has also developed a new scheme to schedule a virtual visit with a hospitalized patient (ibid.).

### **Long-term care facilities**

The Government of Quebec has also made a number of recommendations for seniors and vulnerable populations. On March 8, 2020, the Minister of Health recommended that travellers returning from abroad should avoid visiting individuals in hospital or LTC homes for 14 days after (MSSS, 2020h). Since March 14, all non-essential visits to hospitals, residential and LTC residence have been prohibited; further, Premier Legault asked all residents 70 years of age and older to only leave home if necessary, e.g. to attend important medical appointments (MSSS, 2020r).

As of March 23, a lockdown has been in place for residents of LTC and other residential homes, including private seniors' residences, which has prohibited residents from having visitors and outdoor access (ibid.), (Government of Quebec, 2020az). Exceptions are in place to permit temporarily leaves for people needing health care services; otherwise, any essential items should be delivered to residents (Government of Quebec, 2020az). For those who do not have the means of having essentials delivered to them, the government stated it would connect them with community partners that would provide these services (Government of Quebec, 2020az). In an effort to further prevent the spread of COVID-19, especially among older adults, buffer zones have been created in congregate living facilities to accommodate individuals discharged from hospital before they can be transferred to the residence, e.g. a LTC residence (MSSS, 2020an). Further, local buffer zones were established and classified to account for the different risk levels of patients; for example, residents with symptom suggestive of COVID-19 must be placed in a designated "hot zone" (ibid.).

In the light of increasing number of COVID-19 cases in Quebec's LTC facilities and criticism from media, Legault announced on April 7, 2020, that protecting Quebec's older population is his absolute priority (Legault, 2020j). On April 10, 2020, Quebec Minister of Health and Social Services Danielle McCann reinforced Legault's statement and announced the following additional measures to protect the safety of Quebec's elderly population, namely reallocation of existing human resources and reorganization of the provision of care, intensification of safety measures in LTCs and an increase in COVID-19 screening for LTC staff and the elderly, cessation of transfer and admission of new residents into LTC facilities, provision of personal protective equipment to all staff working with seniors, development of a team of epidemiology experts to increase the support and staff training in infection control and prevention (Government of Quebec, 2020z).

Further, buffer zones were implemented on April 30 to prevent the spread of COVID-19 to individuals living in residential and LTC centers, including intermediate and family type residences, private senior residences, and other living centres (MSSS, 2020am). These centres are divided into two zones: hot zones, for those who are COVID-19 positive and cold zones, for those who have tested negative but may develop symptoms (ibid.). Similarly, staff was to be divided between the two zones without the ability to move between zones. This has been done in an effort to minimize the transmission of COVID-19 and, also, to pave the way for individual patients to transition back into their communities without fear of spreading the infection (MSSS, 2020am).

## **Indigenous communities**

To protect the province's remote regions from the spread of COVID-19, the Quebec government has set up "checkpoints" on major roads, starting March 28, to block non-essential travel into these vulnerable remote communities, such as Indigenous Communities (Banerjee, 2020a). Individuals attempting to enter or leave these regions, who are not travelling for health or humanitarian reasons, are sent home (Government of Quebec, 2020ak). The government of Quebec issued a COVID-19 information document (internet and print) that was translated in Atikamekw, Cree, Innu, Inuktitut, Mohawk and Naskapi (Government of Quebec, 2020e). The governmental website states that a crisis unit has been created to support the intervention of Indigenous authorities and a specific channel of communication has been set up with the geographically challenged Inuit community (ibid.). The website also includes useful resources for Indigenous and First Nations individuals living outside their communities in the city of Montreal (ibid.).

## **Subpopulations**

When it comes to supporting Quebec residents experiencing homelessness, existing shelters had to adapt to support physical distancing measures. However, this had the consequence of reducing the number of available beds, which has meant an increase in the number of people being sent away from shelters (Ville de Montréal, 2020a). The city of Montreal has managed to use idle resources, such as empty sports centres, churches and libraries, to set up additional facilities and drop-in centres in accordance with new safety standards (Ville de Montréal, 2020a). Further, Montreal established a food truck to reach individuals experiencing homelessness in boroughs further away from the downtown core; new chemical toilets with wash basins have also been provided (Ville de Montréal, 2020a). The city of Montreal also announced that an emergency fund was launched specifically to provide sanitary products to individuals experiencing homelessness (Ville de Montréal, 2020a). Media sources suggest that, despite demands from multiple organizations working with individuals experiencing homelessness, no such plans have been realized to date (Hendry, 2020b). Instead, the province opened 100 designated beds in early April 2020 at the former Royal Victoria Hospital to serve the Montreal's most vulnerable individuals experiencing homelessness, including the elderly, persons awaiting COVID-19 test results, persons who tested positive for COVID-19, and those who require self-isolation (Luft, 2020).

Since the beginning of the pandemic, the Ministry of Public Security, Ministère de la Sécurité Publique (MSP), has followed the recommendations of INSPQ by implementing numerous measures to protect detainees and MSP correctional services staff (Government of Quebec, 2020ag). For example, since March 14, 2020, detainee visits were suspended and since March 26, all inmates admitted to a correctional facility in Quebec have been quarantined for a period of 14 days before being placed in the facility's general living areas (ibid.).

Recommendations were published for immunocompromised individuals and individuals with chronic diseases (Government of Quebec, 2020ac). People with specific diseases, including those living with HIV, anemia, those taking corticosteroids or undergoing chemotherapy are asked to limit contact with people and avoid public places and are encouraged to work from home (ibid.).

### 1.3 Isolation and quarantine

On February 6, 2020, MSSS made its first recommendations for self-isolation; specifically all individuals arriving from Hubei province, China were asked to isolate for 14 days after arrival to Quebec (l’Innovation, 2020).

On March 8, in the context of the province’s return from school spring break, public health authorities reminded travellers to self-monitor for COVID-19 symptoms and, if symptomatic, individuals should contact the provincial helpline to speak to a healthcare provider (MSSS, 2020h). As of March 8, only travellers from the Chinese province of Hubei and Iran were asked to voluntary isolate (MSSS, 2020h). Those travelling to Quebec from other international destinations were only recommended to self-monitor for 14 days (MSSS, 2020h). On March 12, Quebec officials asked all individuals returning from any international travel with symptoms suggestive of COVID-19 to self-isolate for 14 days; this was a compulsory order for all public service employees and for all individuals offering healthcare, education, and childcare services (Premier’s Office, 2020a). As of March 25, all travellers arriving in Quebec were mandated to quarantine for 14 days according to the federal *Quarantine Act* (PHAC, 2020). Further, anyone experiencing symptoms suggestive of COVID-19 has been asked to self-isolate (Santé Montréal, 2020c). Specifically, all symptomatic people must remain in isolation for a minimum of 14 days or, if symptoms persist longer than 14 days, until they are without a fever for 48 hours and symptom-free for 24 hours (Santé Montréal, 2020c). Those who are concerned about exposure to or symptoms of COVID-19 have been advised to call the province’s dedicated helplines to receive further instructions (Santé Montréal, 2020c). Individuals arriving in Quebec from other countries and Canadian provinces without a self-quarantine plan are asked to isolate in a designated government facility, such as a hotel, expenses for which will be paid by the federal government (Immigration Canada, 2020).

For individuals who cannot self-quarantine and those who experience homelessness, Montreal and local health authorities announced through media sources on March 20, 2020, that the former Royal Victoria Hospital was to be converted into an overflow isolation centre, where individuals tested positive for COVID-19 shall be placed in individual rooms (Bruemmer, 2020).

In order to ensure that isolation and quarantine measures are being followed, Quebec Police Department in Montreal (SPVM) created an online platform for Quebec residents to report non-compliance and violations of governmental guidelines, such as social distancing or the operation of non-essential businesses (SPVM, 2020). Reported non-compliant individuals and businesses face fines of up to \$6000 as per Legault’s announcement on April 3, 2020 (Legault, 2020f). Individuals who violate compulsory 14-day quarantine can face fines of up to \$750,000 and up to 6 months in prison as per the federal *Quarantine Act* assented to 2005 (Government of Canada, 2020b).

### 1.4 Monitoring and surveillance

On April 8, 2020, the Government of Quebec published the following the Public Health Agency of Canada (PHAC) case definitions for COVID-19 as per the federal guidelines; a *confirmed case* is that where nucleic acids from SARS-CoV-2 are detected via laboratory confirmation; a *case confirmed by epidemiological link* is that where an individual demonstrates clinical symptoms compatible with COVID-19 and has a history of close exposure with a known COVID-19 case; a *clinical case* is any individual with clinical symptoms compatible with COVID-19 that is not better explained by another disease (MSSS, 2020z).

## **Screening and surveillance**

All individuals with a positive laboratory test result for COVID-19 must be reported to the regional public health unit where the individual resides (Government of Quebec, 2020at). Further, all confirmed and probable cases, i.e., individuals who present with clinical manifestations compatible with COVID-19, must have a declaration form submitted to public health by their healthcare practitioner (Government of Quebec, 2020at). The Institut National de Santé Publique du Québec (INSPQ), Québec's public health research and laboratory organization, has published interim guidelines for case and contact management in the community and in residential and LTC homes (INSPQ, 2020f). Specific measures to be taken by public health staff depend on whether an individual is under investigation, asymptomatic, or has been identified as a probable or confirmed case (INSPQ, 2020f).

MSSS has also published procedures to be taken for individuals waiting for a COVID-19 test result, recent contact with a case of COVID-19, self-isolating with COVID-19, and returning from abroad (MSSS, 2020e). For instance, individuals who have been in contact with a case of COVID-19 are recommended to stay home and take precautions to prevent the spread of COVID-19, such as respiratory etiquette, self-monitoring; they are also provided instructions for steps to take if symptoms develop (MSSS, 2020e).

On the official Government of Quebec Coronavirus website, six specific self-surveillance and isolation instruction documents are provided for individuals returning from abroad, individuals waiting for a COVID-19 test result, individuals with diagnosed COVID-19 at home, individuals with animals during self-isolation period, individuals who came in contact with a confirmed COVID-19 case and those with COVID-19-like symptoms (Government of Quebec, 2020k).

In response to Québec's inability to curb the spread of COVID-19 in its LTC facilities and particularly the tragic elderly mistreatment in Herron LTC facility, Legault announced on April 12, 2020 that five senior homes are to be put under new, strict surveillance measures (Legault, 2020d).

## **Contact tracing**

On May 18, Québec Premier Legault announced that the province is considering using COVI, a contact-tracing smart-phone application developed by Mila, a Montreal-based artificial intelligence research institute (McKenna, 2020). Currently, the province relies on the manual process of contact-tracing, whereby hundreds of healthcare experts were hired to call COVID-19 positive patients and ask them to recall everyone with whom they may have been in contact (ibid.). In LTC facilities, contact tracing, monitoring and surveillance is currently provided by medical professionals deployed from the Canadian Armed Forces (Government of Québec, 2020an). No specific information has been reported to the public regarding contact tracing and surveillance of cases and suspected cases in vulnerable groups in the province, such as individuals without access to telephones, permanent address, or Québec's Indigenous population.

On July 08, 2020, the Québec Government launched an online consultation regarding a potential deployment of a COVID-19 contact-tracing application (Government of Québec, 2020ao). Québec's minister responsible for digital innovation, Eric Caire explained that such consultation is necessary prior to formally introducing a contact-tracing application, because it would be doomed to failure without public interest (The Canadian Press, 2020e).

## Projections and modelling

Quebec's National Public Health Institute (INSPQ) has firstly launched an interactive data visualisation website for displaying all confirmed cases, deaths, hospitalizations, testing and inter-provincial comparisons by categories, such as gender, age, requirement for intensive care or living place (i.e., LTC) (INSPQ, 2020c). Since April 25, 2020, INSPQ in collaboration with The University of Laval has also started publishing provincial projections and modelling of the COVID-19 pandemic situation (i.e. evolution of COVID-19 cases or number of hospitalizations given gradual resumption of social, economic and clinical activities. (INSPQ, 2020e). More information about official projection and modelling in Quebec can be found on the [INSPQ website](#).

The most recent modelling report was published on June 29, 2020 and its underlying objective is to predict the evolution of COVID-19 epidemic in Quebec and particularly Greater Montreal during the upcoming summer months given two different scenarios; one of which assumes current adherence to social distancing measures, while the other scenario accounts for a reduction in the level of population adherence to these distancing measures (INSPQ, 2020d).

### 1.5 Testing

Health Minister McCann announced that the first specialized clinic designated for COVID-19 testing opened on March 9, 2020 (MSSS, 2020j). Residents with self-assessed symptoms of COVID-19 are told to first contact the designated hotline (Info-Santé 811) and, if required, will be referred to the appropriate facility for testing (MSSS, 2020j).

On March 17, Legault announced that nine new designated clinics will be opened to the public in Quebec, adding to a total of 31 clinics in the province (Legault, 2020g).

### Assessment centres

Since March 9, 2020, Quebec has continued to open in-person and drive-through mobile assessment/screening clinics throughout the province and, further, has established regional hotlines dedicated to COVID-19 to relieve Info-Santé to respond to non-COVID-19 calls (Government of Quebec, 2020ax). These testing centers and clinics are accessible through both appointment and on a walk-in basis (exclusive to specific centers) (ibid.).

On March 18, the first drive-thru screening clinic opened at the Chauveau Hospital in Quebec City (Rowe, 2020). To that date, provincial COVID-19 tests determined 94 confirmed positive cases, 5213 negative results and 3627 tests waiting for a results (Legault, 2020e). The first drive-thru clinic in Montreal opened on March 22 (Rowe, 2020). On April 10, 2020, Quebec announced that it will test all LTC facility staff (Legault, 2020h). On May 1, a new testing centre opens in Montreal North, the major provincial COVID-19 hotspot (Rowe, 2020).

According to Quebec's COVID-19 testing strategy, designated screening clinics and mobile assessment clinics have been set up throughout Quebec taking each region's specific situation into account to ensure that individuals who need to be tested will be able to do so in a timely manner and separate from other healthcare facilities (Government of Quebec, 2020k). This was, Quebec Government claims, so that

regions with higher levels of community transmission, such as the Montreal Metropolitan Area, could have more testing sites (ibid.).

According to the Quebec Government's main COVID-19 website, individuals who present symptoms must consult the specific website of their region's CIUSSS - integrated health and social services centre or call a designated phone line to be referred to the appropriate resource (ibid.). The governmental website includes links to all regional CIUSSS websites, which all provide a detailed list of all testing sites and clinics, their opening hours and information on whether that specific clinic operates by appointment only or whether it also provides walk-in testing services (ibid.). For example, residents of Greater Montreal are redirected to a [website](#) to find all necessary information for COVID-19 testing in their region of residence.

### **Testing criteria**

Since community transmission became the largest contributor of new COVID-19 cases in Quebec, on April 2 the province announced a priority screening protocol that reflects the need of health and social services (MSSS, 2020x). A prioritized approach was taken for referral to assessment centers. Specifically, screening and testing for COVID-19 is prioritized for hospitalized patients; symptomatic health professions in direct contact with patients; residents of LTC and other residential centres, as well as private residences; symptomatic people living in remote regions; symptomatic first responders; and other symptomatic people, at the recommendation of public health (MSSS, 2020x).

Screening and assessment for COVID-19 can be done by health care providers, including family medicine groups/networks, clinics, and emergency departments (MSSS, 2020x).

The official governmental website states that Quebec residents who develop any of the following COVID-19 symptoms, namely:

- a fever, a new cough, sudden loss of smell without nasal congestion, difficulty breathing
- sore throat, headache, aching muscles, severe loss of appetite, intense fatigue or diarrhoea

must contact a designated phone number and as needed, the caseworker will direct them to appropriate nearby institutions for testing or check-up (ibid.).

As Quebec rolled out a plan to re-open elementary schools and ease economic restrictions, on May 1, provincial authorities assured the public that they will be able to ramp up COVID-19 testing further, and was aiming to increasing testing capacity to 15,000 and had ordered additional rapid tests to further increase capacity to 20,000-30,000 tests per day (MacLellan, 2020). To date, such testing capacity has never been achieved on any single day; for example, from May 1 to July 16, the province completed between 6,937 and 15,375 tests per day (INSPQ, 2020c).

The official governmental website for COVID-19 testing was updated on May 1, following the increase in rapid testing capacity and availability (Santé Montréal, 2020b). It currently states that individuals in Quebec can get tested free of charge regardless of whether they have a valid health card if they have above-mentioned flu-like symptoms or if they have been in close contact with someone who tested COVID-19 positive (Santé Montréal, 2020b). Individuals are also encouraged to assess their symptoms using the official federal COVID-19 Self-Assessment Tool (Government of Canada, 2020a).

In addition to these standard testing criteria and in response to an increase in cases among young people aged 15-39, Montreal's regional health department issued a public advisory on July 11, 2020, asking

anyone who has gone to or worked in bars in the city of Montreal since July 1, 2020 to call a designated phone line and get tested for COVID-19 (Santé Montréal, 2020a). On a press conference on July 15, 2020, Legault acknowledged that currently, the waiting times for testing are sub-optimal and indicated that Public Health would remedy the situation by establishing a new COVID-19 walk-in testing clinic opened to all, but especially with the goal of testing young people aged 15-20 who have gone to bars since July 1, 2020 (Legault, 2020k).

No official government announcement has yet been made on the availability of antibody testing in the province, but the public can take advantage of an appointment system for free diagnostic testing at designated clinics through telephone (Santé Montréal, 2020b).

### **Laboratory and testing capacity**

In the initial weeks of the pandemic, Quebec's testing and reporting protocol functioned in a manner similar to other provinces. Positive cases detected at a regional level were sent to the provincial public health laboratory, LSPQ, for confirmatory testing (MSSS, 2020i). LSPQ would then report positive test results to PHAC and to the provincial Ministry of Health (MSSS, 2020i). From March 9, 2020 onwards, LSPQ was authorized to test its own laboratory samples without sending them to the National Microbiology Laboratory (NML) in Winnipeg for confirmation, which significantly sped up the province's testing process (MSSS, 2020i). With the aim of accelerating testing procedures, on March 22, the province declared regional laboratories would be responsible for testing and directly communicating this information to the Ministry of Health, effectively bypassing the provincial laboratory and the need for a second confirmatory test (Government of Quebec, 2020at). Regional public health directors are responsible for drafting and submitting reports on population health statuses, aided by INSPQ, and the provincial public health officer provides a provincial report to the Minister of Health (Legis Quebec, 2020). All reports are made available to the public and to the appropriate federal authorities.

On March 18, the director of Quebec's testing program stated that the province had ramped up its testing capacity to be able to process as many as 12,000 COVID-19 tests per day (Derfel, 2020c). However, from April 9 to April 13 Quebec only completed between 3,656 and 4,898 tests per day (ViriHealth, 2020).

At a press conference for Communications, Political Action, and Campaigns (CPAC) on May 8, Quebec's Public Health Director Horacio Arruda announced a new strategy for testing in Montreal as a response to the province's failure to meet daily COVID-19 testing target for two consecutive weeks prior (CPAC, 2020b). Arruda set a daily goal of 14,500 tests and mentioned that the provincial screening program may soon expand to include asymptomatic individuals (ibid.). A week after Arruda's press conference, the government scaled down its daily testing target to 14,000 (Derfel, 2020a). However, to the date of this report (July 16, 2020), the daily target has been met on only 3 days since testing began (INSPQ, 2020c).

On June 18, given the gradual deconfinement of Quebec's economy and anticipation of a second wave of infection, MSSS announced that specific COVID-19 TAAN testing (le test d'amplification des acides nucléiques) priority should be extended to all individuals with symptoms compatible with COVID-19, asymptomatic patients in hospitals and LTC facilities, healthcare workers (MSSS, 2020b).

On July 7, MSSS published a new recommendation report concerning the use of TAAN testing for priority individuals depending on specific regional needs, including particularly healthcare workers, LTC facilities staff and vulnerable, at-risk individuals (MSSS, 2020b).

### **Test results and reporting**

Individuals awaiting test results are asked to self-isolate at home according to normal quarantine procedures (Santé Montréal, 2020b). COVID-19 test results will be delivered to them by phone, and upon receipt of a negative test result, individuals can resume their day-to-day activities subject to provincial health and safety guidelines (ibid.). Individuals with positive results will be asked to self-isolate until recovery or required hospitalization (ibid.). As per the updated document on INSPQ website from June 8, 2020, the response time for the TAAN Covid-19 testing results take between 24 and 48 hours depending on the level of prioritization (INSPQ, 2020a).

All anonymized test results for a given day are reported on the official INSPQ COVID-19 Data website and the public is further briefed daily on this matter by Quebec Premier Legault (INSPQ, 2020c), (Legault, 2020l).

## **2. Ensuring sufficient physical infrastructure and workforce capacity**

Infrastructure and workforce capacity are crucial for dealing with the COVID-19 outbreak, as there may be both a surge in demand and a decreased availability of health workers. This section considers the physical infrastructure available in the jurisdiction and where there are shortages, it describes any measures being implemented or planned to address them. It also considers the health workforce, including what jurisdictions are doing to maintain or enhance capacity, the responsibilities and skill-mix of the workforce, and any initiatives to train, protect or otherwise support health workers.

### **2.1 Physical infrastructure**

#### **Health system capacity**

In terms of hospital capacity, the province reported having 18,000 acute care beds, 1,000 intensive care beds and 3,000 ventilators available, as of March 19, 2020 (Hendry, 2020a). In an effort to mitigate potential bed shortages, the Quebec government identified 4,000 hotel rooms that could be used to room non-COVID-19 cases, if extra capacity is needed during a COVID-19 surge (Howlett, 2020).

On March 20, the Premier of Quebec announced that the Quebec healthcare system freed up 4,000 hospital beds, mainly as a result of measures to postpone elective healthcare procedures as of that date (Premier's Office, 2020c). On April 1, the Premier stated that the province had more than 6,000 beds available across the province (Howlett, 2020; Premier's Office, 2020e).

The province also identified an addition 3,000 beds outside of the healthcare system that could be used during a surge, including 1,500 beds outside hospitals, e.g. non-hospital institutions, and the recently decommissioned Hôtel-Dieu hospital (Howlett, 2020).

As LTC centres across Quebec were experiencing outbreaks of COVID-19 cases, on April 14, officials announced that temporary units in hospitals will be dedicated to receiving and treating COVID-19 patients from LTC facilities and residential homes (The Canadian Press, 2020b). For instance, LaSalle Hospital was preparing to open a specialized unit, a hospital tent, dedicated for critically ill patients from local LTC homes in the area (The Canadian Press, 2020b). Even though efforts were made to ensure the provision of necessary physical resources to hospitals shortly after Quebec announced their state of health emergency, the provincial government later admitted that not enough attention and care was given to equipping LTC facilities with adequate protective equipment and medical supplies (Mulcair, 2020). At a news conference on May 11, Premier Legault confirmed that the government failed to take adequate action despite being well aware of the potential problems that could arise from allowing part-time personnel to serve multiple LTC facilities, which had resulted in catastrophic infection rates among the province's vulnerable elderly population (Mulcair, 2020). Since then, efforts have been made to ensure nursing homes are properly equipped with adequate physical infrastructure and personnel, by deploying medical personnel from the Canadian Armed Forces (CAF) in LTC facilities throughout Quebec (Framboise & Olivier, 2020). Despite these efforts, a report prepared by the CAF on May 18, 2020, about the situation in Quebec's LTCs notes that proper use of protective equipment and staffing shortages remain major challenges (Canadian Armed Forces, 2020).

The Parti Québécois, one of the province's main political parties, has called for the need to identify appropriate "buildings, arenas, conventions centres, or existing hospitals and convert them into temporary facilities to accommodate patients with symptoms of COVID-19" (Parti Québécois, 2020). Further adding that, "Screening can also be organized there, as well as providing support and training for caregivers. In a dedicated hospital, it is also easier to divide the sectors, depending on the level of care required. Such arrangements have been successfully used during the SARS epidemic and, more recently, in China" (ibid.). However, no current action towards implementing designated COVID-19 buildings is yet underway in the province (Parti Québécois, 2020).

### **Medical equipment and supplies**

In Quebec, the shortage of medical supplies needed to address the COVID-19 pandemic has been a major concern. There have been no published reports of care being rationed in Quebec; however, healthcare providers have been told to ration personal protective equipment, being told by the Premier to wear a mask only "when it is absolutely necessary" (The Canadian Press, 2020a). On March 23, 2020, the government published a protocol to be used when healthcare facilities are running over capacity (MSSS, 2020s).

On March 31, Health Minister McCann stated that supplies of masks in Quebec were 'insufficient for a pandemic situation of a tenfold increase in usage', leading healthcare workers to disinfect and reuse masks (Boshra, 2020a). To address shortages in medical supplies, Quebec's premier stated on April 2, 2020, that the province is doing everything it can to make sure that orders of medical supplies go directly to Quebec hospitals (Banerjee, 2020b). These actions included using various provincial contacts and third-party sources to secure supplies, as well as using local manufacturing companies to produce some masks, shields and other PPE (ibid.) He also assured the public that Quebec's supply of N95 masks was stable for at least an additional week before the arrival of new supplies (Kovac, 2020).

On April 11, Alberta's Premier Jason Kenney announced that the province will distribute personal protective equipment (PPE) and ventilators to Quebec, whereby Quebec will receive 250,000 N95 masks, two million procedural masks, 15 million gloves and 25 ventilators (Henriques & Maratta, 2020). Notably, Quebec-based Bauer has agreed to shift its hockey skates production lines to make face shields for front-line staff (Government of Canada, 2020f). According to local media sources, CAE Inc, a Montreal-based company associated with flight simulators has announced on April 2, 2020 that it has created a ventilator and hopes to be able to produce up to 10,000 new ventilators within three months (Cherry, 2020).

On April 20, 2020, the Government of Quebec granted a \$4 million loan to Medicom, an American medical supply company, to accelerate the creation of a new factory in Montreal, which would have the capacity to produce of tens of millions of level 3 surgical masks and N95 masks to meet the province's health system PPE needs (Government of Quebec, 2020be). This investment will also result in the creation of 33 jobs in Montreal. Manufacturing is expected to begin in July 2020 (Government of Quebec, 2020be).

Regarding possible price gauging of necessities during the COVID-19 pandemic, Parti Quebecois filed a motion calling for a probe to launch an investigation by Quebec's consumer protection office, but on June 10, the Legault government rejected that proposal (Bergeron, 2020). Unlike some other provinces, such as Ontario, the Quebec government has not released any official means for citizens to report price gouging related to COVID-19.

## **2.2 Workforce**

### **Workforce capacity**

The government has taken various steps to maintain the healthcare workforce during the COVID-19 pandemic. On March 15, the government announced that childcare services must continue for any child who has a parent employed in health or social services, including private practice, community pharmacies and hospital emergency services (MSSS, 2020m). On March 17, this order was extended to provide childcare services for anyone providing home assistance or other essential services during the pandemic, e.g. veterinary surgeons, public health inspectors, coroners, or any other job deemed essential during the COVID-19 pandemic (MSSS, 2020o).

As well, on March 21, the government announced that provisions outlined in the collective agreements for unionized health and social services employees, as well as the employment conditions that apply to non-unionized employees, would be amended to allow employers to meet the needs of the population (MSSS, 2020q). This order allowed health and social services employees and their employers to defer vacations, cancel leaves, transfer personnel as needed, and modify work schedules. On April 14, restrictions in LTC facilities were changed to allow a single primary caregiver to be allowed to visit and care for a patient (Boshra, 2020b). Caregivers must be a single, regular individual, i.e., the identified individual could not change over the course of the pandemic, and skilled at providing care for activities of daily living. The caregiver is required to have prior experience, test negative for COVID-19 and follow strict infection control protocols while in the facility (ibid.). With this announcement, the Premier also noted that the province has been redeploying healthcare workers to LTC residences; however, he noted there was still a shortage of staff (ibid.). He called on anyone with relevant training to offer their services in the

LTC sector and, on April 17, announced that medical professionals from the Canadian Armed Forces would be deployed to LTC facilities to help with staff shortages (Lampert & Malo, 2020).

On April 16, the provincial government announced that persons enrolled in college or university programs whose program grants them access to practice within certain professions would be granted special authorization to practice during the pandemic (Government of Quebec, 2020bc). These programs include nurses, nursing assistants, respiratory therapists, medical technologists, medical imaging technologists and social workers. Further, to help with labour-intensive contact tracing efforts, Santé Montreal, Montreal's public health agency, has hired hundreds of people with healthcare expertise (McKenna, 2020).

On April 20, the MSSS released an order inviting any physician who has withdrawn from the *Health Insurance Act*, for example due to retirement, to return to work with a temporary authorization and full remuneration (MSSS, 2020o). On May 13, the Quebec Minister of Health, Danielle McCann, announced that Nurse practitioners in Quebec were to be granted more autonomy in establishing their own guidelines and working without direct doctor's supervision (Government of Quebec, 2020aa).

### **Workforce training**

On June 2, 2020. Premier Legault announced the need to hire an additional 10,000 orderlies in Quebec's labor-strapped LTCs (Laframboise, 2020a). In the same announcement, the Premier also stated that the province was looking to hire 550 LTC orderlies from abroad, in a pilot program with the province's Ministry of Immigration (ibid.). In efforts to provide new, trained personnel, the province has prepared a three-month course for aspiring orderlies with a promise of a competitive salary at the end of the training and a permanent job (ibid.). Thousands of people applied to take part in this new training initiative, which recently started on June 15, 2020 (ibid.).

### **Workforce support**

Facing a continuing critical shortage of workers, on May 7, 2020, the Quebec government announced new bonuses of up to \$1,000 extra per month for front-line healthcare workers (C. Harris, 2020). These bonuses are particularly aimed at workers in LTC institutions but will also cover some hospital workers, such as nurses and orderlies working in Montreal "hot zones" with confirmed cases (C. Harris, 2020). Quebec Treasury Board President, Christian Dube, further announced that these bonuses are meant to provide incentives to those working part-time to pick up more hours and keep working throughout the pandemic (ibid.). Additionally, bonuses of \$2,000 per month will be given to healthcare workers from other regions of Quebec who decide to come work in Montreal (C. Harris, 2020). This represents the second time that the government has increased wages of healthcare workers since the province announced a state of health emergency. Prior to this, on April 2, the government distributed an 8% raise for healthcare workers working in direct contact with COVID-19 patients (C. Harris, 2020). Furthermore, apart from provincial programs to support front-line workers, various businesses have pledged to support Quebecois workers at hospitals most impacted by COVID-19; for example, telecommunications companies TELUS and Koodo have offered free wireless service to frontline workers to support their ability to connect with their families (TELUS, 2020).

To support the mental health of healthcare workers, the *'Association Paritaire pour la Santé et la Sécurité du Travail du Secteur des Affaires Sociales'* launched an informational website specifically targeted at offering mental health advice to front-line workers (Santé Québec, 2020). In their efforts to help healthcare professionals, two documents were prepared: 1) a checklist that summarizes 10 basic safety skills for dealing with the public and 2) a checklist for interventions in violent situations (Santé Québec, 2020). The website also includes strategies for taking care of oneself during the challenges that may arise throughout the COVID-19 pandemic (ibid.). In addition, a group of Montreal researchers launched a mental health monitoring app for healthcare workers, which allows healthcare workers to monitor their mental health, seek support, and help other healthcare workers throughout and after the pandemic (The Canadian Press, 2020d).

Throughout the pandemic, concerns have been raised by parents of severely disabled children that continued assistance from caregivers outside of the home might lead to increased risk of COVID-19 infection (MSSS, 2020ao). To address this, on April 27, 2020, MSSS announced that it would allow parents to take over some of these services, that would otherwise be provided by a trained healthcare professional (ibid.). Health Minister McCann further stated that she encourages this initiative but points out that families must be aware of the demanding efforts that will be required to take over their child's care and addressing these challenges accordingly will be necessary to ensure the safety of themselves and their children (ibid.). This move does not include remuneration for the parents who wish to take on these responsibilities (MSSS, 2020ae).

### **3. Providing health services effectively**

This section describes approaches for service delivery planning and patient pathways for suspected COVID-19 cases. It also considers efforts by jurisdictions to maintain other essential services during periods of excessive demand for health services.

#### **3.1 Planning services**

##### **Infection control**

On March 12, 2020, the François Legault held his first press conference from the Premier's Office on coronavirus and announced that Québec is entering emergency mode due to the novel COVID-19 (Legault, 2020b). As part of speech, Legault urged the Québécois to follow hygiene recommendations published on the new COVID-19 Public Health Québec agency website, specifically stressing the need for regular handwashing with soap and coughing into one's elbow as opposed to the hands (ibid.). Legault briefly mentioned the need to protect the older population of Québec and urged individuals with flu-like symptoms to refrain from visiting their loved ones in LTC facilities (ibid.).

Two days later, on March 14, Legault readdressed the topic of sanitation measures in LTC facilities, announcing a state of urgency in the CHSLD centres (Premier's Office, 2020b). During the press conference, Legault announced that visits in LTC facilities and hospital centres were prohibited and new measures were taken to offer health services 'from distance' (ibid). Legault explained further that from March 14, non-urgent medical consultations should be conducted via telephone and will be covered by the provincial RAMQ insurance (ibid.). As per the same public announcement, Québec residents aged 70 and

over were recommended to isolate at home and avoid common places in all instances except for unavoidable medical appointments (ibid.). All indoor gatherings of over 250 people were canceled (ibid.).

During the initial efforts to curb the spread of COVID-19, the use of face masks was not recommended by the public authorities. However, on July 13, the Government of Quebec announced that as of July 18, the use of face masks would be compulsory in all enclosed public spaces for individuals over the age of 12 (Government of Quebec, 2020x).

In order to reduce the spread of infection, contactless payments were encouraged by the public authorities since the early stages of the pandemic, but on July 7, 2020, Quebec's Finance Ministry Cabinet released a statement that Quebec's businesses are advised to accept cash payments so as, given low risk of infection transmission, not to discriminate against citizens without other means of payment (Government of Quebec, 2020p).

### **Prioritized reduction of services**

As part of the initial measures to free up valuable healthcare resources announced by the Premier of Quebec on March 20, 2020, non-essential elective surgeries were postponed until further notice (Premier's Office, 2020c).

On April 22, as the COVID-19 situation in the province slowly improves and needed resources for non-COVID-related care are freed up, Quebec released its plan to gradually resume elective surgeries, delivery of which was temporarily paused as well as a published system of prioritization of access to procedures (MSSS, 2020b). During an interview on May 22, 2020, Health Minister McCann specified that around 68,000 surgeries have been postponed across the province and stated that procedures could resume once capacity allows (Gilmour & Ross, 2020). This means that the process of resumption of non-COVID-related elective surgeries will not resume on one pre-specified date but will most likely first resume outside of Montreal metropolitan area at hospitals less burdened with COVID-19 cases.

## **3.2 Managing cases**

### **Patient pathway and treatment protocol**

Quebec recommends that individuals concerned that they may have COVID-19 contact should call its designated COVID-19 telephone line prior to any in-person consultation with a physician (MSSS, 2020y). MSSS later published a clinical pathway for call center staff, which specifies the course of action that a patient should take, depending on certain clinical factors (MSSS, 2020y).

Health authorities have stated that all healthcare facilities in Quebec have a COVID-19 triage protocol, as well as a protocol for treating patients who present with a severe respiratory illness (MSSS, 2020ad). On February 7, 2020, Quebec announced that instructions regarding triage and case management of suspected COVID-19 patients in hospital emergency departments had been distributed throughout the province (MSSS, 2020f). If patients require hospitalization, they should be cared for in one of the four designated COVID-19 care centres across the province (MSSS, 2020f). On March 31, Quebec expanded the number of designated hospitals across the province from 4 to 13 (Derfel, 2020d). Further, MSSS devised a four-point alert scale that indicates the severity of crisis in each of the hospitals (Derfel, 2020d). The criteria for activating each alert scale is outlined in the province's contingency plan (not publicly

available) but officials have stated that considered factors include the number of COVID-19 patients presenting to the emergency department, hospital personnel availability, and the number of negative pressure rooms occupied (Derfel, 2020d).

Clinical guidelines have been developed by the COVID-19 Clinical Steering Committee for professionals caring for COVID-19 patients (MSSS, 2020ac). Guidelines have been provided on the topics of screening, infection prevention and control, hospitalization, critical care, emergency, pre-hospital services, operating room, and endoscopic procedures, among others (MSSS, 2020ac). Clinical guidelines state that, generally, mildly symptomatic cases should self-isolate at home and do not require hospitalization (MSSS, 2020ac).

On April 26, 2020, a mobile hospital was set up inside a local arena, near Hôpital de LaSalle (LaSalle Hospital), to increase capacity for COVID-19 patients and increase capacity for care in the province (MSSS, 2020aj). This mobile hospital has a capacity of 40 patients from LTC centers and would be fully staffed and equipped. The aim of this mobile unit is to divert patients from Hôpital de LaSalle, in the case that the hospital exceeds its bed capacity (ibid.).

### **Home care and long-term care**

The official provincial Questions and Answers website specific to the management of COVID-19 in LTC facilities states that residents are constantly monitored for symptoms and any resident with a suspected or confirmed COVID-19 case is to be isolated from the rest of residents (Government of Quebec, 2020aj).

To help with outbreaks of COVID-19 cases in LTC facilities and the staff shortages, 125 medical professionals from Canadian Armed Forces were deployed in the hard-hit LTCs throughout the province as of April 17, 2020 (Legault, 2020i). On May 28, 2020, to help manage cases of COVID-19 in LTC facilities, Legault announced that he would be speaking to Prime Minister Justin Trudeau to ask that soldiers remain in LTC residences affected by the virus until September 15, 2020 (Laframboise, 2020b).

## **3.3 Maintaining essential services**

### **Health services and virtual care**

General practitioners and family doctors were advised by the Quebec Government to provide telemedicine or virtual care when possible to limit unnecessary trips to the hospital and prevent the spread of COVID-19 (Federation des Medecins Omnipraticiens du Quebec, 2020).

On March 14, Canadian Medical Association acknowledged and supported Quebec's decision to expand access to telemedicine (Canadian Medical Association, 2020). According to the report, to deal with COVID-19, Quebec has decided to roll out a new scheme for virtually provided medical consultations covered by the provincial health insurance plan throughout the pandemic (ibid.). For 90% of non-urgent patients, Montreal family doctors turned to telemedicine to limit movement across the province (Derfel, 2020b). While general practitioners and family doctors were advised to provide telemedicine or virtual care when possible, no new billing codes were created (Federation des Medecins Omnipraticiens du Quebec, 2020). Since then, various governing physician bodies have created guides and seminars for clinicians to support their ability to conduct teleconsultations during the pandemic (Quebec College of Physicians, 2020b).

The provincial government has also decided to extend competencies for more health professionals to provide care. For example, on March 17, the Quebec College of Physicians and College of Pharmacists relaxed certain conditions relating to the professional activities of pharmacists, allowing for prescriptions to be provided for minor conditions, providing flexibility in the event of drug shortages, and permitting extensions to existing prescriptions (Quebec College of Physicians, 2020a). Similarly, on May 13, Health Minister McCann announced that nurse practitioners in Quebec were to be granted more autonomy in establishing their own guidelines and working without direct doctor's supervision (Government of Quebec, 2020aa).

### **First responders**

Quebec's General Deputy Director Yves Jalbert announced on May 1, 2020 that the provincial COVID-19 screening was revised so that first responders and essential workers (including fire fighters, paramedics, police officers, etc.) can access testing regardless of whether they present symptoms (CPAC, 2020a).

### **Pharmaceutical services and supply**

As mentioned above, as of March 17, 2020, pharmacists were given more agency to renew prescriptions in response to the pandemic to minimize the number of medical consultations (Quebec College of Physicians, 2020a). This change has been enacted through a Royal Assent given to Quebec's Bill 31, which specifies that pharmacists may not only prescribe and administer vaccines, medications and renew prescriptions, but also to substitute prescribed medications within the same therapeutic subclass and order, prescribe and interpret laboratory tests for the purposes of medication therapy (Assemblée nationale du Québec, 2020). As part of the same announcement, Quebec determined that drug supply chains such as pharmacies or drug manufacturers be regarded as essential services (ibid.).

On March 27, the Government of Quebec distributed patient information leaflets, informing users of hydroxychloroquine and chloroquine of their anticipated shortage and increased demand as a result of the COVID-19 pandemic (MSSS, 2020c). The leaflet further specified that current stocks of hydroxychloroquine and chloroquine in pharmacies are temporarily designated for patients suffering from systemic lupus erythematosus, pregnant women and children under 18 with juvenile idiopathic arthritis (ibid.). The document also specifically stated that the stocks are not intended for patients in Quebec with COVID-19 (ibid.).

### **Mental health and additions services**

After the first confirmed case of COVID-19 in Quebec was announced on February 28, 2020, the province's public health authorities provided contact information for psychosocial telephone services available 24/7 for individuals who are experiencing anxiety about the novel coronavirus (MSSS, 2020g). On April 9, Health Minister McCann announced an investment of \$500,000 to Tel-Jeunes, an organization which offers free and confidential counselling services to youth and parents 24 hours a day, 7 days a week (MSSS, 2020aa).

Psychological support is vital to the well-being of front-line workers during this pandemic, which is why on April 22, 2020, Montréal West Island Integrated University Health and Social Services Center (IUHSSC) began training teams to enhance the psychological support of front-line healthcare workers; these teams

will be building upon the province's existing Employee Assistance Program (EAP) (Montréal West Island IUHSSC, 2020).

A new program that seeks to support those facing the loss of loved ones during COVID-19 was launched on April 29, 2020 (Government of Quebec, 2020b). With the help of MSSS and the Ministry of Seniors and Caregivers, this program provides financial assistance to Tel-Ecoute so that their services can be available 12 hours a day, 7 days a week (Ibid.). The program will provide up to three grief counselling sessions and a guide for bereaved persons is available on their website (ibid.). Guidelines and practice guides are also available for managers, clinical supervisors, and network stakeholders to provide social supports for grieving individuals (MSSS, 2020a).

Mental health and psychological support services across Quebec received a \$31 million care package on May 6, aimed at improving and enhancing the province's existing 811 Info-Social, thereby improving accessibility to mental and psychological services and supporting the overall improvement of the delivery of priority of counselling services (Boshra, 2020c). These funds will allow these services to continue to be available for all who require them and will provide the necessary relief to members of the community that are being impacted by COVID-19 (ibid.). This effort will also support communities facing challenges after the end of the pandemic, making sure that all mental health and psychological support services will be readily available for those experiencing post-traumatic stress and other concerns arising after the pandemic (MSSS, 2020a).

More support for front-line workers was announced on May 8, 2020; specifically, the province announced that \$14 million would be allocated to EAP to increase the number of available support sessions for all 273,795 employees in the EAP network (MSSS, 2020a). EAP provides eligible workers with access to a team of multidisciplinary professionals through their emotional support line, e.g. to manage stress and anxiety; a crisis line for more serious health concerns; in-person consultations (MSSS, 2020a).

### **Services for seniors and long-term care**

As LTC homes have been the source of more than half of COVID-19-related deaths in the province, Quebec has dedicated specific measures for LTC populations (Valiante, 2020). On March 30, 2020, the Quebec government announced emergency financial assistance of more than \$133 million for seniors and vulnerable populations (MSSS, 2020w). On April 8, Health Minister McCann stated that the province would start systematically testing all residents and staff of LTC facilities, and (as mentioned above) hundreds of doctors and nurses will be redeployed from hospitals to LTC homes to deal with the outbreaks (Valiante, 2020). As of April 10, 2020, the transfer and admission of new residents into LTC homes and residential settings have been prohibited until further notice (MSSS, 2020ab).

In addition, officials stated that measures for screening residents and staff have been intensified and increased training of staff in infection prevention and control has been implemented (MSSS, 2020ab). On Apr 11 the Premier ordered the inspection of all private LTC homes in the province (Government of Quebec, 2020y). On April 14, the Premier put out an official request for anyone with medical training to consider volunteering in LTC homes as there was still not enough staff (MSSS, 2020ae). This was accompanied by the announcement of a rapid training program for new LTC staff, to be established and rolled out by June 15, 2020 (MSSS, 2020af).

On April 20, the province also announced their plan to re-deploy physicians into LTC homes to complement the temporary help from Canadian Armed Forces. (MSSS, 2020ai). Moreover, on April 25, Quebec issued a government decree that gave the Health Ministry the right to redeploy and shuffle all medical staff within its network (MSSS, 2020a). The province has received negative media attention for its failure to limit the spread of COVID-19 in LTCs by mandating the LTC workers to attend to a single facility instead of potentially spreading the disease through LTC site movement (K. Harris & Burke, 2020).

### **Services for Indigenous communities**

On May 21, 2020, the Government of Canada announced a \$75 million Indigenous community support fund for assistance during COVID-19. This funding is in addition to the \$305 million initial COVID-19 Economic response plan announced on March 18, 2020 (Government of Canada, 2020c). Of that fund, \$24.9 million will be distributed to Quebec's First Nation population and \$11.2 million to Quebec's Inuit population (ibid.). The new funds could be used for measures such as support for Elders and vulnerable community members, food insecurity, educational support for children, mental health assistance and emergency response services or COVID-19 prevention measures (ibid.).

### **Services for subpopulations**

More information on Quebec's provincial response in terms of resources and services offered to its Indigenous communities and subpopulations, such as individuals experiencing homelessness and those who are immunocompromised can be found in section 1.2.

### **Outreach and volunteer services**

On April 18, 2020, in an effort to maintain essential services, the Ministry of Health and Social Services announced that Hydro-Quebec and Revenu Quebec will be supporting the government by facilitating communication with individuals who are willing to contribute to COVID-19 efforts (Government of Quebec, 2020l) (MSSS, 2020ag). The initiative, titled "[Je Contribue](#)", has received over 51,000 offers to date from healthcare professionals, health and social service professionals, administrative staff, trade and labour workers, and even individuals without any formal training (ibid.). To date, 29,000 individuals have been contacted and, of these, almost 7,000 have been hired (MSSS, 2020ag).

## **4. Paying for services**

Adequate funding for health is important to manage the excess demands on the health system. This section considers how jurisdictions are paying for COVID-19 services. The subsection on health financing describes how much is spent on health services, where that money comes from, and the distribution of health spending across different service areas. The section also describes who is covered for COVID-19 testing and treatment, whether there are any notable gaps (in population coverage and service coverage), and how much people pay (if at all) for those services out-of-pocket.

## 4.1 Health financing

Just two months after tabling the provincial budget for 2020-2021, on May 14, 2020, Quebec Finance Minister Eric Girald announced that the document no longer represents a reliable roadmap to funding allocations and that he will officially announce a new 'supplementary statement' on June 24 (The Canadian Press, 2020c). On June 19, Quebec released its new, updated budgetary report, '[Quebec's Economic and Financial Situation 2020/2021](#)'.

### Testing and research financing

In Quebec's Annual Budget published on June 19, 2020, increases in daily screening capacity were said to have cost the province \$200 million and other support measures pertaining to screening and testing financing amounted to additional \$59 million on top of the predicted \$71.1 million (Government of Quebec, 2020af).

### Health system capacity financing

To support the increasing strain on health system resources during the COVID-19 pandemic, the provincial government allocated \$31.1 million to greater mental health support for the general population, \$27 million to additional beds for care services, \$14 million for employee assistance program, \$20 million to support for community organizations pertaining to health sector, \$2.5 million as an assistance for women who are victims of domestic abuse, \$3 million to support addiction treatment facilities and \$0.5 million to support *Tel-Jeunes* telephone line (Government of Quebec, 2020af).

### Medical equipment and supply financing

Over the course of the pandemic, the Quebec government allocated over \$2.4 billion in addition to the \$15 million allocated in the previous provincial budget to provide necessary supply of equipment, including gowns and masks (\$2.296 billion), protective and safety measures (\$64.8 million) and equipment for the Greater Montreal Public transit system (\$6 million) (Government of Quebec, 2020af).

### Workforce financing

On April 2, 2020, the provincial government announced that essential healthcare sector workers in direct contact with COVID-19 patients will receive an additional 8% pay raise and supportive healthcare professional (for example, laboratory technicians, 811 call centre staff, etc.) would receive an additional 4% pay raise (ibid.). In addition, beneficiary attendants working in private accommodations would receive a \$4 per hour pay raise. All of these premiums were told to be retroactive to March 13, 2020 and would last for up to 16 weeks (Premier's Office, 2020f). These bonuses amount to an additional \$287 million from the province (Premier's Office, 2020f). In total, the temporary wage increases totalled over \$878 million (Government of Quebec, 2020af).

A day later, on April 3, 2020, a new program targeted at essential workers in Quebec, 'Incentive Program to Retain Essential Workers' (IPREW), was created following the introduction of Canada Emergency Response Benefit (CERB) (FNQLEDC, 2020d). The primary objective of IPREW was to allow essential workers working full time at minimum wage to receive a higher wage than the one they would have received under the federal CERB program (ibid.). Specifically, essential workers who earn at most \$550 a

week with an annual income between \$5,000-\$28,600, would be able to benefit from an additional \$100 for each eligible week of work up to a maximum of \$1,600 for a 16-week period, retroactive to March 15 (ibid.). On July 15, 2020, the Government of Quebec announced that the IPREW program will not be renewed after the application period ended on July 4, 2020 (Government of Quebec, 2020n).

On April 23, 2020, MSSS confirmed that any bonuses that healthcare workers receive in relation to the COVID-19 pandemic will be extended until May 31, 2020. This includes the aforementioned pay raises for health sector workers in Quebec (Sante et Services Sociaux Quebec, 2020a).

### **Health services, mental health and virtual care financing**

On April 29, 2020, Health Minister McCann announced a \$240,000 investment in the development of a program supporting bereaved individuals, mentioned in Section 3.3 of this document (Sante et Services Sociaux Quebec, 2020b).

On May 6, 2020, the province announced an additional \$31 million of funding to improve access of psychosocial and mental health services in response to the COVID-19 pandemic (Sante et Services Sociaux Quebec, 2020d). On May 8, 2020, MSSS announced an investment of \$14 million for the province's EAP to better support the mental health of front-line healthcare workers (Sante et Services Sociaux Quebec, 2020e). This investment will allow the EAP to respond to an increase in demand and increase the quantity of psychological support sessions they conduct. For more information, refer to Section 3.3 of this document.

Virtual tele-medicine has become the new norm in dealing with common health issues through general practitioners and family doctors, but to this date, no new billing codes were created (Federation des Medecins Omnipraticiens du Quebec, 2020).

### **Subpopulations and Indigenous community financing**

On April 3, 2020, First Nations of Quebec and Labrador Economic Development Commission (FNQLEDC) has launched an application to help business owners affected by COVID-19 quickly access and identify assistance programs offered to them by the government and relief measures from financial institutions, such as banks (FNQLEDC, 2020b).

Most substantially, during the COVID-19 pandemic, Indigenous populations in Quebec rely on federal funding and relief programs, such as the Indigenous Business Assistance Fund (announced on April 18), the Canada Emergency Wage Subsidy (April 27), the Regional Relief and Recovery Fund for the Quebec Region (May 13) or the Fish Harvest Benefit and Fish Harvest Grant (May 14) (FNQLEDC, 2020a), (FNQLEDC, 2020c),(FNQLEDC, 2020d).

### **Long-term care financing**

On March 30, 2020, the provincial government announced \$133 million in emergency funding for LTC facilities and senior residences; this funding was specifically indicated for acquiring protective and disinfecting equipment, additional personnel (if needed), and providing overtime pay for staff (MSSS, 2020t). Specifically, \$40 million was earmarked for certified private senior residences; \$20 million for private homes that house seniors with a severe loss of autonomy, referred to as 'Centre d'hébergement

et de soins de longue durée' (CHSLD); and \$73 million for intermediary and family resources (MSSS, 2020t).

On April 17, 2020, the Government of Quebec granted additional funding of \$15.7 million to support staff working in the province's residential facilities, including LTC and other CHSLD centers (Government of Quebec, 2020bd). This funding will be used to support additional workers from the Cooperation Network of Social Economy Enterprises in Home Help (EESAD). Key allocations of the funding include:

- \$8.3 million towards supporting 800 full-time EESAD employees in the province's CHSLDs,
- \$1.3 million towards granting employees in CHSLDs the aforementioned \$4 per hour pay raise,
- \$0.9 million towards granting employees in private senior residences the aforementioned 8% pay raise, and
- \$2.2 million towards granting workers in the services employment check program an 8% pay raise (Government of Quebec, 2020bd).

Further, on April 24, Premier Legault announced that individuals who are readily available and volunteer to work full-time in the province's CHSLDs will be remunerated with \$3,368 per month, equivalent to \$21.28 per hour, regardless of their qualifications (Government of Quebec, 2020bf). This announcement follows the province's continued need for increased assistance in CHSLDs (Government of Quebec, 2020bf).

On April 30, 2020, the province announced a \$3 million investment to support LTC centers in the province, such as rehabilitation centres (Sante et Services Sociaux Quebec, 2020c). This investment will be distributed towards both community and private institutions to cover excess costs incurred throughout the pandemic, such as costs associated with increased surveillance, sanitation, disinfection, hiring and remuneration needs (Sante et Services Sociaux Quebec, 2020c). Existing integrated health and social services centers (CISSS) and integrated university health and social services centers (CIUSSS) will be responsible for distributing the resources in their respective regions (Sante et Services Sociaux Quebec, 2020c).

## **4.2 Entitlement and coverage**

### **Coverage for provincial healthcare**

Quebec's provincial health insurance program follows similar rules to that of other provinces. For example, an individual must have resided in Quebec for at least three months before being issued a provincial health card (RAMQ, 2020a).

Several steps have been taken to facilitate the requests of individuals seeking coverage during the pandemic. For example, newcomers to Quebec from outside Canada who intend to stay in the province can be issued a health card within 24 hours, provided they have the appropriate visa (RAMQ, 2020b). Specifically, coverage is extended to individuals with work- or education-related visas whose work or school (and by extension coverage) ends before the quarantine lifts (*ibid.*). Régie de l'assurance maladie du Quebec (RAMQ) administers the public health and prescription drug insurance plans in Quebec; however, RAMQ offices are currently closed (a drop box for documents and forms is available). In this case, proof that a health card application process has been started but is delayed due to COVID-19 is sufficient for coverage during the pandemic (RAMQ, 2020b).

The basket of coverage for the provincial health plan has also been extended temporarily during the pandemic. With the declaration of a state of emergency in the province, all services related to COVID-19 that are provided by a healthcare practitioner are now covered by the provincial health insurance program (ibid.). Up until May 13, 2020, costs incurred for COVID-19 treatment for individuals not covered by the provincial health plan were directly billed to the individual or their private health insurance company by the hospital to which they are admitted for treatment (RAMQ, 2020b). Since May 13, 2020, all COVID-19 screening, tests and related healthcare services have been covered for all individuals without incurring out-of-pocket costs, even for those with no or expired health insurance cards, travellers, refugees and undocumented immigrants (RAMQ, 2020b).

Non-COVID-19 related healthcare services continue to be covered according to the usual plan conditions or, in the case of individuals not covered by the provincial plan, are billed directly to individuals (RAMQ, 2020b).

### **Coverage for COVID-19 testing**

Testing for COVID-19 is provided free of charge with or without provincial coverage (Santé Montréal, 2020b). However, treatment by a physician or in a hospital is only covered for individuals enrolled in the provincial health plan (RAMQ, 2020a). Individuals from Indigenous communities are also fully covered for COVID-19 testing throughout the province, not only in the established testing centres, but also through school bus testing inside the communities, such as on April 17, 2020, as announced by the Mohawk Council (ibid.), (Mohawk Council, 2020).

## **5. Governance**

The governance of the health system with regard to COVID-19 relates to pandemic response plans and the steering of the health system to ensure its continued functioning. It includes emergency response mechanisms, as well as how information is being communicated, and the regulation of health service provision to patients affected by the virus.

### **5.1 Quebec's Pandemic Response Plan**

Quebec's *Public Health Act* states that various medical and public health authorities, including the Minister of Health and public health directors, are responsible for developing and maintaining regional and local response plans in the event of a biological threat to Quebec residents, including a pandemic; it further states that these plans must be in accordance with federal guidelines (Legis Quebec, 2020). The plan must incorporate ongoing surveillance of the situation; the Minister of Health can order any physician, public or private laboratory, or health institution to provide this information (ibid.). The *Public Health Act* also grants the Minister of Health the power to close borders, quarantine areas of the province, shut down schools, and enact other quarantine-related measures (Legis Quebec, 2020).

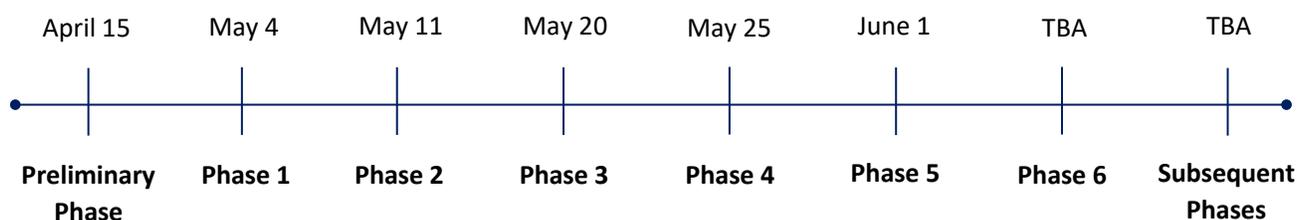
If a municipality wishes to declare its own state of emergency, it must first obtain permission from the Health Minister and must continue to follow all provincial orders, in addition to any the municipal government wishes to put in place (Government of Quebec, 2020ai).

To ensure public health measures are followed in workplaces which have re-opened since the pandemic closures, on May 25, 2020, the CNESST Commission announced that more than 1000 prevention officers were to be deployed around the province (Government of Quebec, 2020r).

## 5.2 Quebec’s framework for Re-opening

Quebec published its first and to date only [official 95-page gradual reopening and deconfinement planning document](#) for both public and private sectors on May 25, 2020 (Government of Quebec, 2020g). The planning document groups private and public sector reopening into 6 consecutive phases with a preliminary phase and subsequent phases to be announced at a later date (ibid.). Even though no other official deconfinement planning document was presented since then, many of the sectors mentioned in the undated subsequent phases of the document have now been deconfined through governmental press releases and official website pertaining to the gradual resumption of activities under the COVID-19-related pause. Moreover, on September 8, 2020 Quebec unveiled a colour-coded regional alert system consisting of four levels. The switch between colours is required when there’s an increase in transmission. Regions that are coded green are regions to be surveyed, but where basic measures are maintained in compliance with provincial health rules. Regions that are coded yellow signify an early warning and a strengthening of the basic measures. In these regions, activities are maintained in compliance with health rules, but with added enforcement, such as increased in fines. Regions that are coded orange signify a moderate alert and an implementation of intermediate measures that target specific sectors and activities where the risk of transmission is deemed higher. Finally, regions that are coded red signify a maximum alert and where maximum measures should be undertaken. This includes targeted additional and more restrictive measures that could extend to prohibiting non-essential activities, while avoiding provincewide confinement (MacFarlane & Shingler, 2020).

The deconfinement phases as pertaining to above official document are summarized below<sup>2</sup>:



<sup>2</sup> While the official deconfinement document states the date reopening of Phase 6 as “TBA”, the government announced opening of this phase on May 30, one day before the opening of Phase 5.

**Table 1. Overview of key re-openings**

<b>Category</b>	<b>Dates and Relevant Notes</b>
Schools, childcare facilities and youth camps	All school personnel were ordered to return to work starting May 4. (Government of Quebec, 2020bg). Secondary schools will remain closed until September 2020 (Government of Quebec, 2020ab). Childcare workers outside the Montreal metropolitan area returned to work as of May 11, whereas those inside the Montreal area and Joliette area returned on June 1, 2020 (Government of Quebec, 2020bh). Preschools and elementary schools have re-opened to students as of May 11, 2020 outside Montreal Metropolitan Area, while in Montreal, reopening was pushed back until September (Government of Quebec, 2020ab). Learning camps in elementary schools have been allowed to reopen since June 8, 2020 (Government of Quebec, 2020bh). See section 1.2 for further details.
Non-essential businesses and services	Business began restricted re-opening on May 18, 2020. All businesses were allowed to re-open on May 25, 2020 (Government of Quebec, 2020bh). Museums and libraries were allowed to re-open on May 29. In all regions of Quebec, except for the Montreal metropolitan area, indoor dining areas re-opened on June 15, 2020; inside the city of Montreal, only take-out services were allowed to open until June 22, 2020. Complete re-opening of the construction industry occurred on May 11, 2020 (Government of Quebec, 2020bi). See section 1.2 for further details
Public and private gatherings	Since May 22, 2020, restricted outdoor gatherings are permitted (Government of Quebec, 2020bh). Since June 8, 2020, all outdoor activities have been permitted, including group sports and local competitions (ibid.). Further, starting on June 22, 2020, camps were allowed to reopen for the summer (ibid.). Also starting on June 22, religious services, public indoor gatherings of up to 50 people and private indoor gatherings of up to 10 people were allowed in the Montreal metropolitan area, while in other Quebec regions, such gatherings were permitted since June 15, 2020 (Government of Quebec, 2020i), (Legault, 2020a). See section 1.2 for further details
Outdoor facilities	The first resumption phase of non-organized outdoor recreational, sports and leisure activities commenced on May 20, 2020 (Government of Quebec, 2020am). Since May 30, the provincial government allowed outdoor swimming pools, playgrounds and their washroom facilities to re-open (Government of Quebec, 2020ai). See section 1.2 for further details.
Mobility and travel	Travel restrictions were previously in place for Gatineau (for travel from Ottawa, Ontario to neighbouring Gatineau, Quebec); the Minganie and Golfe-du-Saint-Laurent (Basse-Côte-Nord) municipalities; Nord-du-Québec; Nunavik; the Cree Territory of James Bay (Government of Quebec, 2020bh). Since June 1, 2020, all provincial travel restrictions were lifted safe for the Cree Territory of James Bay and Nunavik, re-opening plan for which will be announced at a later date (Government of Quebec, 2020bh). See section 1.2 for further details

## 6. Measures in other sectors

Many measures beyond the immediate scope of the health system are being taken to prevent further spread of the virus. This section contains information on many of these areas, including border and travel restrictions and economic and fiscal measures, among others.

### 6.1 State of emergency

On March 13, 2020, the province of Quebec first adopted an Order in Council declaring a health emergency (Government of Quebec, 2020at). The declaration of a state of emergency allows the province to promptly purchase equipment or to conclude the necessary contracts to protect the health of the population. As part of this state of emergency order, various associated orders have also been declared. On March 14, the government stated that a returning officer must cancel any electoral poll scheduled to be held during the declaration of a public health emergency (MSSS, 2020l). Another order, on March 15, stated that activities were to be suspended at any cultural, educational, sports, recreation or entertainment facility (MSSS, 2020n). As well, the order stated that any bars and restaurants must suspend their activities (ibid). On March 30, the government announced a new measure that allowed all pharmacies, grocery stores and other food retailers to extend hours to meet the needs of their customers and ensure they have the number of employees needed to attend to operations (MSSS, 2020v). This order also ordered that all commercial establishments close to the public on Sundays throughout April 2020, except for pharmacies, convenience stores, services stations, restaurants for drive-through, takeout, or delivery, and grocery stores for orders placed online or on the phone and delivery (ibid). The current Order in Council declaring a provincial public health emergency applies until July 8, 2020 (Government of Quebec, 2020aw). As of September 28, this state of emergency has been ongoing (Government of Quebec, n.d.).

### 6.2 Border Control, Mobility, and Travel Restrictions

Official travel information from the Government of Quebec (internal and external travel) during the COVID-19 pandemic can be found on the [Government of Quebec webpage](#).

#### Internal travel

Lockdowns and travel restrictions in Quebec began a day before the provincial state of emergency announcement, on March 13, 2020 (Government of Quebec, 2020c). Selected flights and VIA Rail routes were canceled and Quebecois were asked to limit non-essential travel (Rowe, 2020).

On March 29, 2020 the Government of Quebec announced that they would be enforcing provincial border restrictions and checkpoints to reduce the spread of COVID-19 (Gyulai, 2020). All Quebecers were asked to avoid travelling from one region to another, or from one city to another, except when necessary (Government of Quebec, 2020ay).

This ban included any non-essential inter-regional travels regardless of transportation means. On April 1, a new *Public Health Act* was published, ordering that access to regions of Bas-Saint-Laurent; Saguenay – Lac-Saint-Jean, Abitibi-Témiscamingue, Outaouais, Côte-Nord, Nord-du-Québec, Gaspésie – Îles-de-la-Madeleine, Nunavik and Terres-Cries-dela-Baie-James, to the territories of the regional county

municipalities of Autray, Joliette, Matawinie and Montcalm for the Lanaudière health region, to the territories of the regional county municipalities of Antoine-Labelle, Argenteuil, Les-Pays-d'enHaut and Les Laurentides for the Laurentides health region and to the territory of the urban agglomeration of La Tuque for the Mauricie et Centre-du-Québec be restricted solely to individuals with a principal residence in these regions, humanitarian and healthcare workers, persons transporting selected goods in transit or individuals who require to travel for medical and legal purposes (MSSS, 2020d).

On April 4, another regional lockdown was enforced to the Abitibi-Témiscamingue (especially the city of Rouyn-Noranda), Nord-du-Québec, Nunavik and Terres-Cries-de-la-Baie-James regions as well as the Charlevoix region (Quebec, 2020a). Starting on April 4, the police have been stationed at various checkpoints located along main roads into and out of the city, only authorizing essential travel in certain areas (Quebec, 2020a). In order to help enforce the travel bans, 14 CAF Ranger Patrols were deployed to Nunavik in response to a request from Quebec (Government of Canada, 2020d).

On April 29, the Government of Quebec announced that several of these regional travel restrictions would be lifted on June 1 and June 9 (Quebec, 2020a; Riga, 2020). As of June 9, access is allowed into all regions of Quebec, with the exception of the Cree Territory of James Bay and Nunavik, in the northern remote region of the province (Government of Quebec, 2020ak). Travel restrictions easing in the Cree Territory of James Bay and Nunavik, will be announced at a later date (Government of Quebec, 2020bh).

In terms of public transportation, measures have been taken at municipal levels. For example, on March 17, 2020, Montreal's public transit agencies announced that they were taking new safety measures, including: authorizing to enter by back door, ticket purchase and refill only available by automated ticket tellers, limit of one client per minibus and taxis, etc. (Leclair, 2020).

### **External travel**

International borders were closed on March 16, following an announcement by Justin Trudeau (Rowe, 2020). Any international travellers returning to Quebec must self-isolate for 14 days and postpone all non-urgent medical appointments (Government of Quebec, 2020ay). An official global advisory to travellers in force in Quebec and citizens are asked to avoid all non-essential trips outside of Canada until further notice (ibid.).

The official provincial website with instructions to travellers states that there are currently no isolation measures for people arriving from other Canadian provinces, but that non-essential travel should nonetheless be avoided (Government of Quebec, 2020ay). Individuals are also advised, however, to check whether other provinces have specific rules for travellers from Quebec (ibid.).

As of July 31, 2020, as per federal order measures, the borders remain closed to all international travellers apart from Canadian citizens and valid work or student visas and approval letters issued prior to March 18, 2020 (Government of Canada, 2020e).

## 6.3 Economic Measures

### Public financial support

To support individuals affected by the COVID-19 pandemic, the Government of Quebec has taken various measures to financially support people living in the province. Starting March 19, the Government of Quebec began offering a program to meet the needs of workers who are in isolation because they have contracted the virus, have been in contact with an infected person or have returned from abroad (Government of Quebec, 2020av). The program provides financial assistance in the form of a lump-sum payment of \$573 per week, for a period of 14 days of isolation (ibid).

On March 27, 2020, the Quebec government announced new relief measures to be put in place until June 30, 2020; Temporary Aid Program for Workers (PATT), Enterprises (PACTE), nursery reimbursement and delays for credit repayment and tax deadlines (Government of Quebec, 2020f). These measures pertaining to tax deadline payment for enterprises and individuals was renewed on May 29 until September 1, 2020 (Government of Quebec, 2020v). The government also postponed student debt repayments, whereby no payments will be required until September 1, 2020 (Government of Quebec, 2020at).

On April 3, the government announced a new financial assistance program for individuals working in essential jobs (Revenu Quebec, 2020). The financial assistance will make up the difference between the federal Canadian Emergency Response Benefit (CERB) and an eligible individual's typical wage (ibid). Eligible workers must work part-time or full-time in one of the essential service sectors during the program period and receive wages of \$550 or less per week (ibid).

Additionally, to help Quebec's young people and parents during the COVID-19 pandemic, Quebec's government announced on April 9, 2020, that they allocated \$500,000 of urgent financial aid to *Tel-Jeunes* and *LigneParent* – free and confidential frontline services offered 24/7 (Government of Quebec, 2020u).

On April 29, additional support for the bereaved, through a \$240,000 investment, was introduced (Quebec, 2020b). The program offers support to those who have lost a loved one during the pandemic by offering them access to information and services adapted to the suit the current context of the pandemic (ibid).

### Sectoral and business financial support

As of June 8, to support the cultural sector and recover from production delays due to COVID-19 safety measures, the Quebec government announced an investment of \$250 million for selected cultural projects, such as music, TV or radio programs (CBC News, 2020).

To support businesses in Quebec, the province launched the Concerted Temporary Action Program for Businesses (CTPAB) from June 2020 onwards (Investissement Quebec, 2020). The program provides financial assistance to businesses operating in Quebec who are facing cash flow difficulties as a result of COVID-19 and liquidity shortages that come from a problem with the supply of raw materials or products or the inability to deliver goods, products or services (ibid). Eligible industries include weapons manufacturing or distribution, games of chance and gambling, combat sports, bars, racing, production and sales of tobacco, any activity whose main purpose is protected by the Canadian Charter of Rights and Freedoms, and any other activity that may offend public morals (Investissement Quebec, 2020). The financial assistance will be in the form of a loan, with minimum funding of \$50,000 (ibid).

On June 8, 2020, Quebec has also vowed to enhance the Canada's Emergency Assistance program for commercial rent by \$140 million to help support businesses facing rent payment difficulties (Government of Quebec, 2020ae).

As well, in an effort to support the tourism industry, the government has developed the Tourism Development Strategy Support Program to provide loans to businesses in the tourism industry (Government of Quebec, 2020au).

The government has also accelerated processing of requests for tax credits for businesses and tax refunds; further, the deadline for businesses to file for their Quebec sales tax (QST) returns and payments has also been postponed and school tax has been dropped to July 1, 2020 (Government of Quebec, 2020s), (Government of Quebec, 2020at).

For business that need to provide employee training, on April 6, 2020, Quebec Government has announced a \$100 million subsidy program for staff re-training and maintaining employment (Government of Quebec, 2020q). Further, on June 4, Quebec Government announced an additional measure to help the provincial economy, this time in the form of support for commercial tenants until August 1, 2020 (Government of Quebec, 2020al). Specifically, this measure aims to protect commercial tenants against payment defaults and eviction (ibid.).

Quebec Pension Fund, *Caisse de Depot et Placement du Quebec* (CDPQ) has also announced on March 30, 2020, that it was to join the collective effort during the COVID-19 crisis with a \$4 billion envelope to support impacted Quebec businesses, \$300,000 philanthropic donation and a salary freeze for CDPQ leaders (CDPQ, 2020).

Furthermore, given that outdoor consumption of alcohol is widely favored by the public, Quebec's liquor and gaming board, *Regie des Alcools, des Courses et des Jeux* (RACJ), has adopted a streamlined process for licencing authorization to temporarily operate liquor permits for outdoor patios and terraces to support bars, restaurants, and other drinking establishments as they return back to business (Government of Quebec, 2020ah).

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## Appendix A. Key Resources

Government of Quebec websites	<a href="https://www.quebec.ca">https://www.quebec.ca</a> <a href="http://www.fil-information.gouv.qc.ca/">http://www.fil-information.gouv.qc.ca/</a> <a href="https://www.quebec.ca/en/health/health-issues/a-z/2019-coronavirus/situation-coronavirus-in-quebec/#c47908">https://www.quebec.ca/en/health/health-issues/a-z/2019-coronavirus/situation-coronavirus-in-quebec/#c47908</a>
INSPQ	<a href="https://www.inspq.qc.ca/covid-19/donnees/">https://www.inspq.qc.ca/covid-19/donnees/</a>
Legault, Francois (Premier's Office) website	<a href="https://www.quebec.ca/premier-ministre/actualites/">https://www.quebec.ca/premier-ministre/actualites/</a>
MSSS	<a href="https://www.msss.gouv.qc.ca/">https://www.msss.gouv.qc.ca/</a> <a href="https://www.msss.gouv.qc.ca/ministere/salle-de-presse/communiques/">https://www.msss.gouv.qc.ca/ministere/salle-de-presse/communiques/</a>
Sante Montreal website	<a href="https://santemontreal.qc.ca">https://santemontreal.qc.ca</a>

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