

This is the 2nd affidavit of John Koopman in this proceeding and it was made on February 🤏 , 2021

> File No. S 210209 Vancouver Registry

In the Supreme Court of British Columbia

Between

ALAIN BEAUDOIN, BRENT SMITH, JOHN KOOPMAN, JOHN VAN MUYEN, RIVERSIDE CALVARY CHAPEL, IMMANUEL COVENANT REFORMED CHURCH, and FREE REFORMED CHURCH OF CHILLIWACK, B.C.

Petitioners

and

HER MAJESTY THE QUEEN IN RIGHT OF THE PROVINCE OF BRITISH COLUMBIA, and DR. BONNIE HENRY IN HER CAPACITY AS PROVINCIAL HEALTH OFFICER FOR THE PROVINCE OF BRITISH COLUMBIA

Respondents

AFFIDAVIT OF JOHN KOOPMAN

I, JOHN KOOPMAN, of Chilliwack, in the Province of British Columbia, MAKE OATH AND SAY AS FOLLOWS THAT:

- 1. I am one of the Petitioners herein and am the Pastor of the Free Reformed Church of Chilliwack, B.C. (the "Church"), and as such I have personal knowledge of the matters herein deposed to except where stated to be on information and belief and where so stated, I verily believe them to be true.
- 2. I have reviewed the Notice of Application filed by the Respondents on February 2, 2021, and the First and Second Affidavits of Dr. Brian Emmerson, and I provide this affidavit in reply thereto.
- 3. Attached as Exhibit 38 to the Dr. Emmerson's Affidavit #1 is the "British Columbia (BC) COVID-19 Situation Report, Week 1: January 3 - January 9, 2021". I attach as Exhibit "A" to this Affidavit the most recent available COVID-19 Situation Report for Week 3: January 27 - January 23, 2021.
- 4. Dr. Emerson at paragraphs 102-106 of his Affidavit #1 states that 180 Covid-19 cases are associated with places of worship. Dr. Bonnie Henry has offered further insight

- into transmissions linked to religious settings, and into the restrictions on religious settings more generally, in statements made at her press conferences.
- 5. In particular, on October 26, 2020, Dr. Henry commented on the effectiveness of following COVID guidelines, stating:

I'd like to remind everybody about our mass gathering order. That is, refers across the board to gatherings of no more than 50 people. But there are caveats to this order. It requires that every location must have sufficient space that people can maintain safe physical distancing between everyone. And we know that when these COVID safety plans are followed in settings like restaurants, event spaces, churches, temples, hotels, that we don't see transmission. But too often, over the last few weeks, we've been hearing stories where people are trying to put aside the safety plans, that feel it is okay to have a few additional people, or for people to mix and mingle. And, and unfortunately, we have seen spread in these environments.

I have reviewed the recorded statement at 5:29-6:27 on the YouTube video of the October 26, 2020 news conference, available on the Province of BC's YouTube channel at https://www.youtube.com/watch?v=i-o3E IO3G8.

- 6. In the Notice of Application and the Second Emmerson Affidavit, the Respondents reference COVID 19 outbreaks in religious settings in other jurisdictions. In the referenced outbreak from Saskatchewan, it has been reported to me, and I believe it to be true, that the gatherings at issue did not follow health guidelines, including physical distancing. See e.g. Prince Albert Daily Herald article dated October 12, 2020, attached as **Exhibit "B"** to this Affidavit.
- 7. In contrast, our Church has sought to act prudently and wisely responding to circumstances relating to COVID 19. There has never been a transmission of Covid in our worship service to my knowledge. The safety protocols described in my first affidavit meet and exceed those recommended by the BC Centre for Disease Control. See "Faith-based, Spiritual and Worship Practices", attached as **Exhibit "C"** to this Affidavit.
- 8. Further, our Church has taken decisive action, on three particular occasions described below, to address the threat of the spreading of the virus in our worship service.
- 9. The first occasion occurred in April 2020, when migrant workers employed by an individual who attends our Church tested positive for COVID 19. That individual and his family had attended our morning service on April 5, 2020, prior to being aware that

some of their employees had tested positive. Even though it wasn't a requirement from Fraser Health, our leadership determined that it was prudent to inform our members of this situation which we did by way of letter contained, which I attach as **Exhibit "D"** to this Affidavit. The employer and his family isolated and did not return to Church for over 14 days.

- 10. The second occasion when our Church acted to reduce a potential transmission risk was when one member actually tested positive for COVID 19 which she had contracted elsewhere. She tested positive on Wednesday, October 28th. She was not present in Church on Sunday, October 25th, but had been present on October 18th at the 11:00 AM morning service. She informed me of her positive test on October 28. She informed us that she had no close contact with anyone at the service. On October 30th we sent a letter out to the congregation describing the precise details of this incident including where she was seated in the sanctuary. The October 30th letter is attached as **Exhibit "E"** to this Affidavit. In contrast, she told me that Fraser Health took 2 weeks before they followed up with her about her close contacts. No other members of the congregation tested positive in the weeks following this incident.
- 11. The third occasion when our Church acted to reduce a potential transmission risk was when there were a few members of Church who tested positive to COVID 19 and other families who were sick or in isolation. These cases had come about because of contacts in schools, workplaces and other environments and were not linked to any of our worship services. There had been some schools where Church members' children attend which had outbreaks as well as some workplaces where our members work. As a result, our Church decided that to eliminate any possible risk of COVID-19 transmission, our services would be cancelled for one Sunday, meaning there were 14 days between our services. See letter to Church members sent December 31, 2020, attached Exhibit "F" to this Affidavit. We were also prepared to cancel for a second Sunday if sickness was still present in our Church. However, prior to the next Sunday after taking up contact with Church members, we confirmed that there were no new infections, that all who had been sick had recovered and no one was in isolation any longer.

Continued Engagement with the RCMP

- 12. The Chilliwack RCMP has continued to take action against our Church on the basis of Dr. Henry's "Gatherings and Events" order. Specifically, RCMP have continued to monitor our services and have issued me personally seven tickets, totalling \$16,100, for participating in Church services on December 6, 2020, December 13, 2020, December 27, 2020, January 10, 2021, January 17, 2021, January 24, 2021 and January 31, 2021.
- 13.On Friday, January 29th at 4:05 PM, Constable Rogers called my phone which I answered, and I made arrangement to meet with him. We met at the Church parking lot and he served me four tickets which were written by officer Bains which allege that I organized or hosted a non-compliant event. See tickets numbered AJ06520416, AJ0650424, AJ06520458 and AJ06521878 attached as **Exhibits "G," "H," "I,"** and "**J,"** respectively, to this Affidavit.
- 14. Two days later Constable Rogers urgently sought to issue me another ticket. He attended our residence again on Sunday, January 31, 2021 at 6:14 PM. He served me with another ticket again issued by officer Bains for allegedly hosting or organizing a non-compliant event that day. See ticket number AJ06521844 attached as **Exhibit** "**K**" to this Affidavit.
- 15.I am advised and do believe that on February 3, 2021, counsel for the petitioners emailed a letter to counsel for Dr. Bonnie Henry, attached as **Exhibit "L"** to this Affidavit, providing further responses related to the request that Dr. Henry reconsider her orders.
- 16. I swear this Affidavit bona fide in support and for no improper purpose.

SWORN BEFORE ME at the

on this _ & day of February, 2021.

A Commissioner for Taking Affidavits within the Province of British Columbia

JOHN KOOPMAN

This is Exhibit "A" referred to in the Affidavit of John Koopma	an
sworn before me, at	
this <u></u> day of Ja nuary, 2021.	
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A Commissioner for Taking Affidavits within the Province of British Columbia

British Columbia (BC) COVID-19 Situation Report Week 3: January 17 – January 23, 2021

Continued provincial decrease in COVID-19 cases, while severe outcomes remain elevated but stable **Table of Contents** Cumulatively, there have been 65,511 COVID-19 cases in BC to end of week 3 Epidemic curve and regional (1,272 per 100K population). 2 incidence In weeks 1 to 3, incidence decreased in Northern Health (124 to 78 per 100K) and Fraser Health (92 to 71 per 100K), while remaining stable in other health Likely sources of infection 3 authorities. Since week 53, there has been a decrease in incidence in all age groups, most notably in the 80+ year olds (95 to 40 per 100K, in week 3). The number of MSP specimens tested was stable from week 1 to 3, while 4 Test rates and % positive percent positivity decreased slightly from 8.2% to 7.4%. Since week 1, positivity has decreased in NHA and FHA, while remaining stable in IHA and Age profile, testing and cases 5 VCHA. VIHA percent positivity has been increasing since week 51. In week 3, percent positivity in all age groups was comparable to, or lower than prior 7 Severe outcome counts weeks in Phase 3c. Positivity was lowest in the 80+ year olds (4.5%) and highest in the 10-14 year olds at 9.0%. The number of hospital admissions decreased somewhat but remains elevated Age profile, severe outcomes 8 in weeks 52 to 3 (~200 per week). Cumulatively, there have been 3,626 cases hospitalized in BC to the end of week 3. One new case of Multi-system 9 Care facility outbreaks Inflammatory Syndrome in children and adolescents (MIS-C) was reported since the last report (total of 7). **Emerging respiratory** 9 The number of deaths per week has increased slightly since week 1. In weeks 1pathogens update to 3, 91% of deaths were among 70+ year olds and 67% were associated with care facility outbreaks. Cumulatively, there have been 1,149 deaths in BC. The number of care facility outbreaks has been declining since week 46. Cumulatively, there have been 269 care facility outbreaks. Recently, emerging COVID-19 variants have been reported in BC. To date, 14 cases have been identified with the B.1.1.7 variant and 4 cases with the

BELOW ARE IMPORTANT NOTES relevant to the interpretation of data displayed in this bulletin:

- The weekly tally by surveillance date (defined as laboratory result date, if unavailable, then report date) includes cases with illness onset date in preceding weeks. Analyses based on illness onset date (or episode date) may better represent the timing of epidemic evolution.
- Episode date is defined by dates of illness onset, hospital admission, or death. When those dates are unavailable, laboratory collection is used. If also unavailable, then surveillance date used. Episode-based tallies for recent weeks are expected to increase as case data, in particular onset dates, are more complete.
- Per capita rates/incidences are based on PEOPLE2020 population estimates (n=5,139,568 for BC overall).

B.1.351 variant.

• Laboratory data include Medical Service Plan (MSP) funded (e.g. clinical diagnostic tests) and non-MSP funded (e.g. screening tests) specimens.

Table of pandemic phases defined by implementation or relaxation of population-level mitigation measures in BC:

Pre-Phase 1	PHASE 1	Phase 2	Phase 3a	Phase 3в	Phase 3c
Pre-implementation	Implementation	Initial relaxation	Further relaxation	Start of school year	Re-implementation
lan 15 (wk 3) to	Mar 14 (wk 11) to	Viay 19 (wk 21) to	Jun 24 (wk 26) to	Sept 13 (wk 38) to	Nov 8 (wk 46) to
Mar 13 (wk 11) 2020	May 18 (wk 21) 2020	Jun 23 (wk 26) 2020	Sept 12 (wk 37) 2020	Nov 7 (wk 45) 2020	Current (wk 3) 2021
From earliest	Initial restrictions	Re-opening of services	Broader re-opening	From first complete	Core bubble
symptom onset date	•	, -		epidemiological week	interaction only
• ,				of 2020-21 school year	

A. COVID-19 case counts and epidemic curve

Provincially, between week 3 (mid-January 2020) and week 3 (mid-January 2021), there have been 65,511 cases, corresponding to a cumulative incidence of 1,272 per 100K (<u>Table 1, Figure 1</u>).

As shown in Figure 1, since the peak in week 47 (103 per 100K), there has been a general decline in cases reaching 3,020 (59 per 100K) in week 3. FHA residents represented 68% of cases in week 47; their contribution has decreased to 46% of cases in week 3. Episode-based rates in recent weeks are subject to change as data (notably onset dates) become more complete.

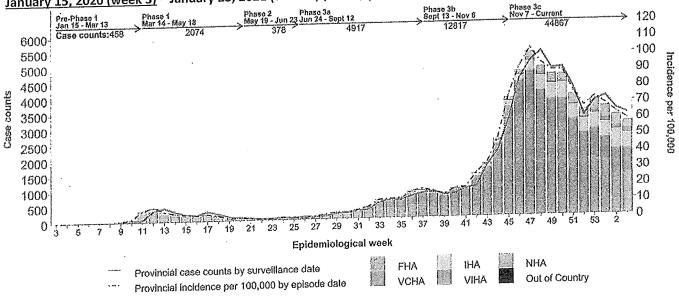
As shown in Figure 2, in recent weeks 1 to 3, incidence in Northern Health (NHA; 124 to 78 per 100K) and Fraser Health (FHA; 92 to 71 per 100K) showed decreasing trends, while incidence in the remaining health authorities (HAs) were stable. The health service delivery areas (HSDAs) experiencing recent increasing incidence rates are: Thompson Cariboo Shuswap, East Kootenay, North Shore/Coast Garibaldi, and Central Vancouver Island.

Table 1. Episode-based case tallies by health authority, British Columbia January 15, 2020 (week 3) – January 23, 2021 (week 3) (N= 65,511)

	H	Health Authority of Residence					T. A.I	
Case tallies by episode date	FHA	IHA	VIHA	NHA	VCHA	Outside Canada	Total	
	1,376	495	172	224	746	7	3,020	
Week 3, case counts	39.642	5.951	1.526	3.279	14,979	134	65,511	
Cumulative case counts	71	59	20	78	62	NA	59	
Week 3, cases per 100K population Cumulative cases per 100K population	2,044	713	176	1142	1,237	NA	1,272	

a. Displayed data extracted on February 1, 2021.

Figure 1. Episode-based epidemic curve (bars)^a, surveillance date (line) and health authority (HA), BC <u>January 15, 2020 (week 3)</u> – January 23, 2021 (week 3) (N= 65,511)

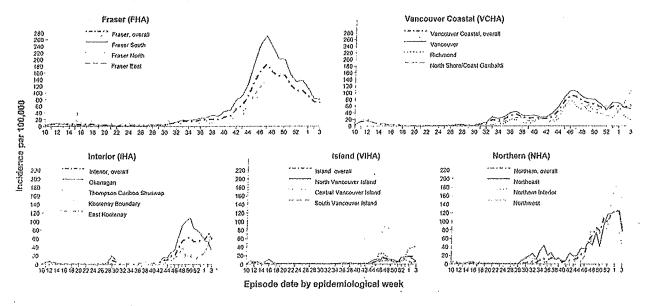


a. First onset date of a case in BC was January 15, 2020. Displayed data extracted on February 1, 2021.

C** VID-19 Situation Report

Provincial Health Services Authority

Figure 2. Weekly episode-based incidence rates by HA and health service delivery area (HSDA), BC March 1, 2020 (week 10) – January 23, 2021 (week 3)



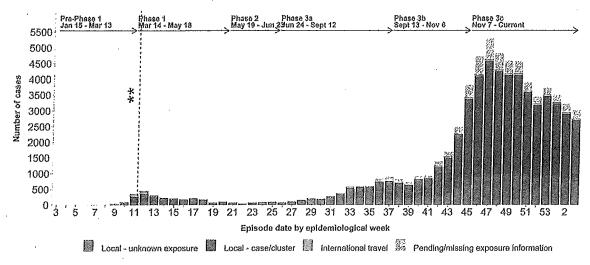
B. Likely sources of infection

As shown in <u>Table 4</u> and <u>Figure 10</u>, local contact with a known case or cluster has been the most commonly reported source of infection across all pandemic phases to date.

Table 4. Likely source of COVID-19 infection by episode date, BC <u>January 15, 2020 (week 3)</u> – January 23, 2021 (week 3)

Likely exposure (row %)	International travel	Local – case/cluster	Local - unknown	Pending/missing
Week 3, Exposures	33 (1)	1,956 (65)	743 (25)	288 (10)
Cumulative Exposures	1,052 (2)	43,911 (67)	14,606 (22)	5,942 (9)

Figure 10. Likely source of COVID-19 infection by episode date, BC <u>January 15, 2020 (week 3)</u> – January 23, 2021 (week 3)



^{**} March 16: Travel related restrictions introduced.

C. Test rates and percent positive

As shown by the bars in <u>Figure 3</u>, the weekly number of MSP only specimens tested was stable from week 1 to week 3 of 2021 at ~47,000 tests. Concurrently, positivity for MSP-funded specimens decreased slightly from week 1 to week 3 from 8.2% to 7.4%.

As shown in Panel A of Figure 4, the per capita testing rate in week 3 remains highest in FHA and VCHA. As shown in Panel B, week 3 percent positivity remains highest in NHA at 15.4% followed by IHA at 8.9%, FHA at 7.5% and VCHA at 6.8%, and lowest in VIHA at 3.8%. Since week 1, NHA and FHA positivity in MSP-funded specimens has decreased (from 17.0% and 9.0%, respectively), while remaining relatively stable in IHA (8.4%) and VCHA (7.3%). VIHA percent positivity has been on an upward trend since week 51 when it was t 1.0%.

Figure 3. Number of specimens tested and percent SARS-CoV-2 positive, by collection week, BC <u>March 15, 2020 (week 12)</u> – January 23, 2021 (week 3)^{a,b,c}

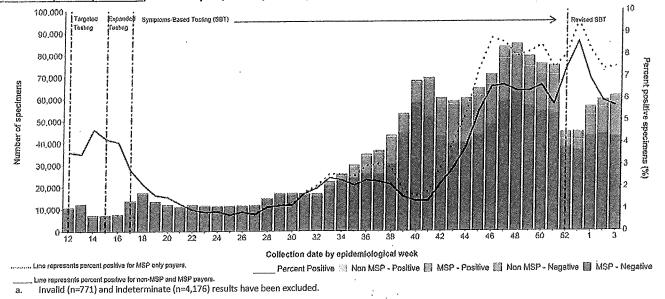
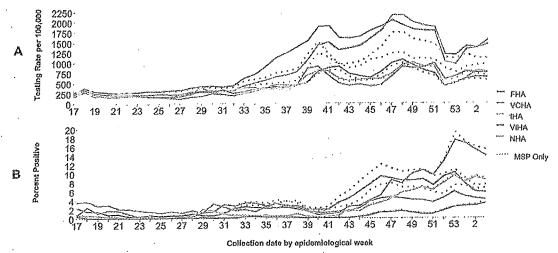


Figure 4. Testing rates and percent SARS-CoV-2 positive by health authority and collection week, BC <u>March 15, 2020 (week 12)</u> – January 23, 2021 (week 3)^{b,c}



b. PLOVER extract on Friday, January 29, 2021.

Laboratory testing guidelines were updated on Dec 17 (week 51) to include new evidence of COVID-19 symptoms: https://www.healthlinkbc.ca/covid-19/testing

D. Age profile - Testing and cases

Testing rates and percent positivity by age group

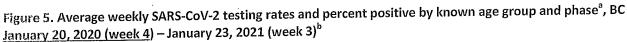
As shown by the coloured bars in Figure 5, compared to prior weeks of Phase 3c, testing rates in week 3 were lower in all age groups. The highest testing rates in week 3 were among adults 20-39 years of age, similar to weeks 46-2 of phase 3c.

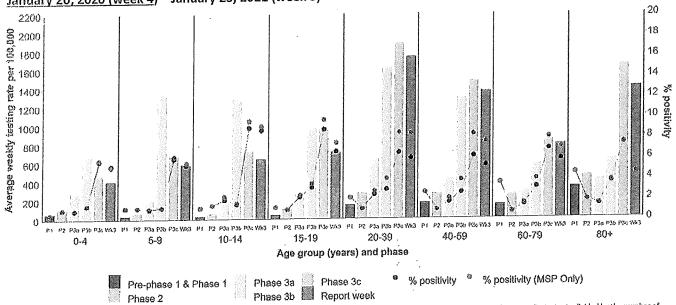
As shown by the grey dots in Figure 5, the percent positivity for MSP only specimens in week 3 is comparable or lower in all age groups than prior weeks in Phase 3c. The difference was most notable in the elderly adults ages 80+ where it dropped from 7.4% to 4.5% and in children 15-19 years, from 9.7% to 7.4%. Percent positivity in week 3 was lowest in the elderly 80+ years (4.5%), followed by children 0-4 year olds (5.1%) and 5-9 year olds (5.5%) and reaching 7.0% or higher in the remaining age groups (highest in the 10-14 year olds at 9.0%).

Case distribution and weekly incidence by age group

As shown in Figure 6, the percentage contribution decreased in the 80+ year olds from 6% in week 1 to 3% of all cases in week 3. This decrease was met with an increase in the proportion of the 20-49 year-old group, which represent 60% of all cases for report week 3.

As shown in Figure 7, since week 53, there has been a decrease in incidence in all age groups. The most substantial decrease in incidence was in the 80+ year olds, where incidence plummeted from 95 per 100K to 40 per 100K, in week 3. Children 15-19 years old have also shown a noticeable decrease in incidence from 82 per 100K to 44 per 100K. Incidence remained highest in the 20-29 year old group at 113 per 100K.





Phase based on specimen collection date, of which January 20 was the earliest. The average weekly rate by phase is derived as the phase-specific per capita test rate divided by the number of weeks for Pre-Phase 1+ Phase 1 (P1: 17 weeks), Phase 2 (P2: 5 weeks), Phase 3a (P3a: 11.5 weeks), Phase 3b (P3b: 8 weeks), and Phase 3c, excluding the current report week (P3c: 10 weeks). The current report week, although part of Phase 3c, is excluded from Phase 3c as displayed here to enable comparison.

Laboratory extract from PLOVER on January 29, 2021. Testing rates displayed are based on all specimens (MSP and non-MSP)

Figure 6. COVID-19 case distribution by known age group (years) and episode date, BC March 15, 2020 (week 12) – January 23, 2021 (week 3) (N= 64,976)

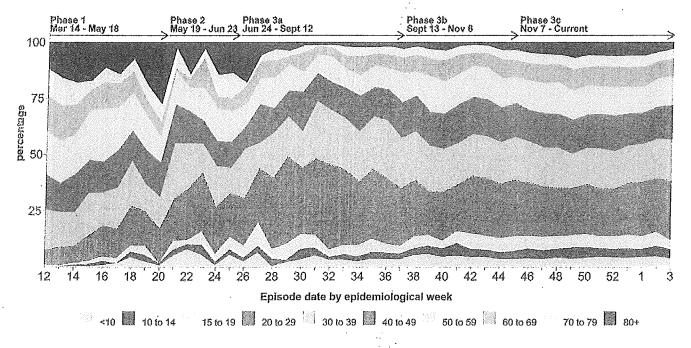
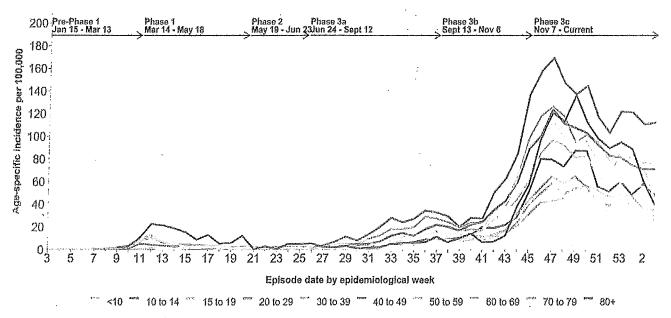


Figure 7. Weekly age-specific COVID-19 incidence per 100K population by epidemiological week, BC <u>January 15, 2020 (week 3)</u> – January 23, 2021 (week 3) (N= 65,489)



E. Severe outcome counts and epi-curve

The number of admissions has decreased somewhat but remained elevated and fluctuating in weeks 52 to 3, with an average of 203 hospitalizations per week. The number of deaths per week has increased slightly with an average of 63 deaths reported per week in weeks 1 to 3 (Table 2, Figure 8). Since week 1, 91% of deaths were among 70+ year olds, and 67% were associated with care facility outbreaks.

Cumulatively, there have been seven confirmed cases of Multi-system Inflammatory Syndrome in children and adolescents (MIS-C) in BC since January 1, 2020, with one new case reported since the last report. The median age of these cases is 10 (range 1-15) years.

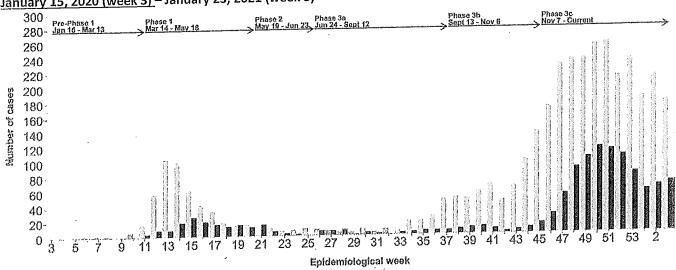
Table 2. COVID-19 severe outcomes by episode date, health authority of residence, BC

January 15. 2020 (week 3) – January 23. 2021 (week 3)

<u>anuary 15, 2020 (week 3)</u> – Janua		lealth a	uthority (of reside	nce	Residing	Total n/N (%)
Severe outcomes by episode date	FHA	IHA	VIHA	NHA	· VCHA	outside of Canada	
1 5 L Italians	82	25	11	37	22	. 0	177
Week 3, hospitalizations	2,062	298	88	301	868	9	3,626/65,511 (6)
Cumulative hospitalizations		8	E .	10	g	0	48
Week 3, ICU admissions	. 16		3		261	2	864/65,511 (1)
Cumulative ICU admissions	402	87	25	. 87			68
Neek 3, deaths	39	8	1	• 9	11	U	1,149/65,511 (2)
Cumulative deaths	645	60	18	61_	365	0	1,149/65,511 (2)

Cases with unknown outcome are included in the denominators (i.e. assumed not to have the specified severe outcome).

Figure 8. COVID-19 hospital admissions and deaths by episode date^a, BC <u>January 15, 2020 (week 3)</u> – January 23, 2021 (week 3)



Episode Deaths Episode Hospitalizations Data are displayed by episode date (i.e. date of hospital admission or date of death, and if those dates are missing, then surveillance date).

F. Age profile, severe outcomes

<u>Table 3</u> and <u>Figure 9</u> display the distribution of cases and severe outcomes as well as the BC population for each age group. The distribution has not changed substantially over time. In week 3, median age of hospitalization was 64 years, while median age of death was 87 years.

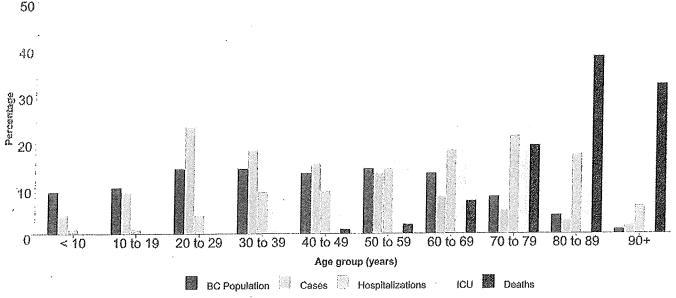
In week 3, 227/3,020 (8%) cases, 74/177 (42%) hospitalizations, 17/48 (35%) ICU admissions, and 61/68 (90%) deaths were in 70+ year olds (data not shown).

Overall, while males comprise 33,082/65,373 (51%) cases, they comprise 2,023/3,619 (56%) hospitalizations, 544/861 (63%) ICU admissions, and 616/1,149 (54%) deaths to date (data not shown).

Table 3: Age distribution: COVID-19 cases, hospitalizations, ICU admissions, deaths, and BC population by age group January 15, 2020 (week 3) – January 23, 2021 (week 3) (N=65,489)^a

Age group	Cases	Hospitalizations	ICU	Deaths	General BC population
(years)	n (%)	n (%)	n (%)	n (%)	n (%)
<10	2,736 (4)	38 (1)	2 (<1)	0 (0)	469,351 (9)
10-19	6,016 (9)	30 (1)	3 (<1)	0 (0)	527,805 (10)
20-29	14,973 (23)	162 (4)	22 (3)	0 (0)	697,691 (14)
30-39	11,790 (18)	324 (9)	68 (8)	4 (<1)	735,052 (14)
40-49	9,728 (15)	337 (9)	75 (9)	11 (1)	646,035 (13)
50-59	8,352 (13)	506 (14)	144 (17)	25 (2)	718,272 (14)
60-69	5,439 (8)	649 (18)	221 (26)	80 (7)	673,131 (13)
70-79	3,099 (5)	755 (21)	220 (25)	219 (19)	435,062 (8)
80-89	2,175 (3)	606 (17)	95 (11)	441 (38)	187,443 (4)
90+	1,181 (2)	219 (6)	14 (2)	. 369 (32)	49,726 (1)
Total	65,489	3,626	864	1,149	65,489
Median age	37	66	65	86	41

Figure 9. COVID-19 cases, hospitalizations, ICU admissions and deaths by age group, and BC population <u>January 15, 2020 (week 3)</u> – January 23, 2021 (week 3) (N=65,489)^a



G. Care facility outbreaks

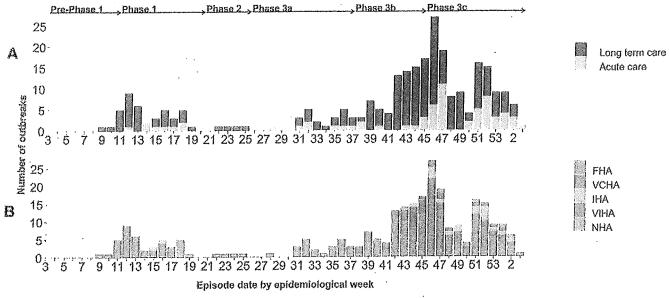
As shown in <u>Table 5</u> and <u>Figure 11</u>, 269 care facility outbreaks were reported in total in BC to the end of week 3. There has been a decreasing trend in care facility outbreaks since week 46, most notably in long-term care facility outbreaks and outbreaks in FHA. This may in part be associated with a decrease in reported care facility outbreaks with single cases.

Almost three-quarters of all COVID-19 deaths in BC have been associated with care facility outbreaks (826/1,149; 72%) of these care facility deaths 791 (96%) were 70+ years old. Of the 68 deaths in week 3, 48 (71%) were associated with care facility settings, and of those 48 deaths, 45 (94%) were elderly adults 70+ years (data not shown).

Table 5. COVID-19 care facility^a outbreaks by earliest case onset^b and associated cases and death by episode date, BC <u>January 15, 2020 (week 3)</u> – January 23, 2021 (week 3) (N=269)

Care facility outbreaks and cases		Cases				Deaths			
by episode date	Outbreaks	Residents	Staff/ other	Unknown	Total	Residents	Staff/ other	Unknown	Total
Week 3, Care Facility Outbreaks	1	105	86	1	192	48	0	0	48
Cumulative, Care Facility Outbreaks	269	3,035	2,038	6	5,079	826	0	0	826

Figure 11. COVID-19 care facility^a outbreaks by earliest case onset^b, facility type (A) and health authority (B), BC <u>January 15, 2020 (week 3)</u> – January 23, 2021 (week 3) (N=269)



- a. Care facility settings include acute care or long-term care settings (defined as long-term care facility or assisted living).
- b. Earliest dates of onset of outbreak cases are subject to change as investigations and data are updated.

H. Emerging respiratory pathogens update

BC has identified 18 cases infected with variants of concern. Of those, 14 were infected with variant B.1.1.7, 11 (79%) of whom reported travel outside of Canada and two (14%) who reported contact with travelers. Four cases were infected with variant B.1.351, none of whom reported travel outside of Canada. The range of episode dates is from week 51 to week 2.

This is Exhibit "B" referred to in the Affidavit of John Koopman
sworn before me, atChillwark,BC,
this 8 day of January, 2021
A Commissioner for Taking Affidavits

within the Province of British Columbia

outbreak fined \$14,000

By Peter Lozinski - October 12, 2020



A photo originally posted to Facebook has been digitally altered to blur the faces of attendees. The photo shows a religious gathering held at the Full Gospel Outreach Centre in Prince Albert. Photo by facebook /Regina Leader-Post

Prince Albert's Full Gospel Outreach Centre, which has been linked to a gospel revival outreach event tied to dozens of cases of COVID-19 in multiple communities, has been fined \$14,000.

The province announced a \$14,000 fine for a corporation for non-compliance with the public health act order and reopen Saskatchewan guidelines for places of worship Sunday. That amount includes a \$10,000 fine and a \$4,000 surcharge.

The province didn't provide the location or name of the business, but the centre's pastor, Vern Temple, confirmed over the phone that a fine had been levied against the centre. He declined to comment further.

He added that he felt his last comments, reported by CBC last week, had been taken out of context and that he didn't like the way he had been portrayed.

"They put words in my mouth and I didn't agree with what they wrote about me," he said.

The posts asked people to come together to help Temple pay the \$14,000.

Last Tuesday night, then again on Wednesday, the Saskatchewan Health Authority released a COVID-19 exposure alert about a business in Prince Albert — Prince Albert Gospel Outreach Church at 921 Central Ave. The exposure covers Sept. 14 to Oct. 4.

At least 25 cases have been tied to the event to date.

Last week the evangelist who presided over the services, Ian Lavallee, told CBC News when the outbreak was first announced that the church wasn't aware of provincial places of worship guidelines advising against singing and requiring those who do to wear masks.

Photos from the event show dozens of people worshipping in a small, enclosed space. Few are wearing masks.

Prince Albert Mayor Greg Dionne and Peter Ballantyne Cree Nation Chief Peter Beatty both called on the SHA to levy fines against the church.

"I'm very concerned," Dionne said told the Herald Thursday. "It's all over the province that we were the cause of a super spreader event. I will be demanding charges be laid. If we would have known about it, we would have taken immediate action and shut it down."

Dionne said he had reached out to Temple, who assured him the centre was shut down for the time being. Dionne said he physically checked himself, walking over to the Central Ave. location and ensuring the doors were locked.

"I'm going to be asking (SHA) to throw the book at it," Dionne said.

"The only way we're going to stop this is if people follow the rules. It's so disappointing. We were doing so well. Everyone was following the rules."

While much of the blame has been placed on organizers, Saskatchewan's Chief Medical Health Officer Dr. Saqib Shahab said last week that event attendees also bear some responsibility for failing to socially distance or wear masks.

"Everyone who attends also has to follow guidelines," he said.

"It is the responsibility of all of us to adhere to them, not just organizers of an event."

He added that places of worship, to this point, have not been linked to any major outbreaks of COVID-19.

"Places of worship have been open since March. We have not seen problems in places of worship because they have been very diligent and conscientious," Shahab said. "That has kept our case numbers low. This is a reminder for all of us that our guidelines have served us really well. COVID is still in Saskatchewan, in Canada and we have to do everything we can to keep our numbers low."

Peter Lozinski

https://paherald.sk.ca/author-peterlozinski/

Peter Lozinski is the editor of the Prince Albert Daily Herald. You can reach him at 306-764-4276 ext 242, by email at peter.lozinski@paherald.sk.ca or on Twitter @Peter_Lozinski. His latest posts can be found here: https://paherald.sk.ca/author-peterlozinski/



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within the Province of British Columbia



Faith-Based, Spiritual, and Worship Practices

Faith-based, spiritual, and worship practices are important to many people and offer opportunities to connect with communities. These practices also have a role to play in the prevention of COVID-19 transmission.

Last updated: February 5, 2021

All in-person religious gatherings and worship services are suspended. This means people should not attend in-person religious, spiritual, or faith-based practices. These practices may only continue using remote or virtual attendance options, like Zoom or Skype. **Learn more about the current province-wide restrictions**.

You can still visit places that host worship or spiritual practices for individual activities such as contemplation, meditation, personal prayer, or worship. All venues that host these practices must have a COVID-19 safety plan in accordance with <u>protocols set by WorkSafeBC</u>.

Venues that host worship, spiritual, or faith-based practices need to follow basic precautions to prevent the spread of COVID-19. When in attendance, follow these precautions:

- Assess yourself for <u>symptoms of COVID-19</u> and stay home if sick;
- Ensure you have access to <u>handwashing stations or hand sanitizing supplies</u>;
- Always maintain <u>physical distance</u> from others; and
- Check that the venue you attend is practicing routine <u>cleaning and disinfection</u>.

These measures are not forever, but they are very important for now, to protect the health of everyone in the community and in the province. Until practice and worship can continue in person, it's important that everyone follow the orders and participate safely to help prevent the spread of COVID-19 and protect those who are most vulnerable to complications of this disease.

It is also important to consider those who <u>have an increased chance of developing severe</u> <u>illness or complications from COVID-19</u>: people over the age of 65, as well as those with chronic health conditions, medical complexity or immune suppression. Work to support these people by participating remotely or virtually. <u>WorkSafeBC</u> has several suggestions for how to conduct different practices virtually.

Events and Gatherings

Some ceremonies (e.g., funerals) can go ahead with a limited number of people and a COVID-19 Safety Plan in place. You can have a maximum of 10 people attend, including the person organizing and/or officiants of the event.

Faith-based, spiritual, and worship gatherings are considered "events" under the <u>Provincial Health Officer's Order on Gatherings and Events</u>. Under this Order, if you are the organizer you must collect the first and last names and email addresses or phone numbers of everyone who attends in person and keep this information for 30 days to help with contact tracing in case there is an exposure to COVID-19. If you are renting or using a space, you must also provide this information to the owner of the venue who must keep this information for 30 days.

Illness and Contact Tracing

If someone becomes ill

If someone develops <u>symptoms of COVID-19</u>, ask them to leave the venue and return home. Encourage them to use the Ministry of Health's online <u>self-assessment tool</u> or call 8-1-1 to determine if they need further assessment for COVID-19 testing by a health-care provider or at a local collection centre.

Safety Measures

Maintain physical distancing

Continue to use virtual or online gatherings when possible. In person, physical distance of two metres between people from different households must be maintained. Encourage participants to greet each other with a smile and a wave instead of direct person-to-person contact.

Reduce activities that increase the chances of spreading COVID-19

Although important to many practices, there are certain activities that are considered to increase the likelihood of COVID-19 transmission.

Examples of activities to reduce or alter include practices that involve person-to-person contact (such as the touching of hands and faces) and shared items (such as cups or prayer mats). Ensure all sanitary and safety measures are taken; minimize physical contact whenever possible and encourage hand washing or the use of a hand sanitizer with at least 60% alcohol after contact. For offerings, consider designating an area where participants can approach to provide offerings, or consider an online method of collection.

support participants to practice in different, safer ways. Different spiritual beliefs include different practices, and organizations should turn towards their communities for specific quidance.

Singing and music

Singing and music can be very important in faith-based, spiritual, and worship practices. Please see the BCCDC's on <u>Choirs and Bands</u> for more information on reducing risk during these activities.

Food and beverage services

Follow the protocols and guidance for routine practices as set out in the Food Safety Act and the Food Premises Regulation. For more information see the BCCDC page on <u>Food Safety</u>.

SOURCE: Faith-Based, Spiritual, and Worship Practices (http://www.bccdc.ca/health-info/diseases-conditions/covid-19/community-settings/faith-based-spiritual-and-worship-practices)

Page printed: 2021-02-07. Unofficial document if printed. Please refer to SOURCE for latest information.

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This is Exhibit "D" referred to in the Affidavit of John Koopman sworn before me, at ________,BC, this ______ day of day

A Commissioner for Taking Affidavits within the Province of British Columbia

From: John Koopman Sent: April 11, 2020 8:33 Pivi To: John Koopman

Dear Congregation,

Subject: Letter from Consistory

Tomorrow we serve our risen Saviour! He has conquered death meaning that sin and all the effects of sin will be destroyed! (Rev. 21:1-4) Hallelujah what a Saviour!

This letter is written to inform you that on April 5, 2020 during our morning service there were a couple members in attendance who were unknowingly exposed to someone who has COVID-19. They were not diagnosed with it themselves and are not displaying symptoms, but they were in contact with individuals who have since been diagnosed with it. As a result, these members have not returned to church, and will not return for at least 14 days. We are informing you so that you can continue to make informed decisions regarding whether you will worship at church or from home. Services will continue to happen with less than 50 people in attendance at this time as directed by our government. We ask that those who are elderly; weak; or compromised in any way would worship from home. Anyone who feels unwell, are also asked to worship from home.

We are incorporating a few other safeguards in order to do everything we can to prevent cross contamination.

- We want to remind you to allow at least one pew between your family and others. If necessary, use the seating in the wings to maintain this distancing.
- You are asked to only use the washroom by the gym. These doors will be kept open so you will not have to touch them when going through them.
- After using the Psalters and Bibles please place them on the pews when you leave. This will inform those attending in the afternoon service which pews & Psalters have been used in the morning allowing them to sit in a different pew. We also want to assure you that each week the building is thoroughly cleaned with door handles, handrails etc. wiped & disinfected.

Let us continue to pray earnestly for the eradication of this virus. We know that our God holds every cell and atom in His hands, and He being almighty God is able to do whatsoever He pleases. May it please Him to heal our land! In Christ,

Your Consistory

This is Exhibit "E" referred to in the Affidavit of John Koopman sworn before me, at,BC,	
this 8 day of January, 2021	
G.SC.	
A Commissioner for Taking Affidavits	

within the Province of British Columbia **J. SCOTT BIRCH**Barrister & Solicitor

9202 Young Road

P.O. Box 372

Chilliwack, BC V2P 6J4 From: Gary Kanis - Chilliwack FRC Clerk

Sent: October 30, 2020 3:24 PM

To: Erin

Subject: Letter From Consistory

Dear Congregation,

We confess that God as our Father has all creatures so completely in his hand that without his will they cannot so much as move. In addition, regarding the future we can have a firm confidence in our faithful God and Father that no creature shall separate us from his love (Lord's Day 10). Let us continue to trust in the Lord's care and provision (Psalm 91)

This letter is written to inform you that one of our members has tested positive for COVID 19. Her symptoms are very mild, and she is doing well. She tested positive on Wednesday, October 28th but was NOT present in church on Sunday, October 25th, but was present on October 18th only at the 11:00 AM morning service. She was seated in a side pew on the organ side of the church near the front of the main sanctuary. It appears quite likely she has contracted this virus from another function. If you were seated in that area during the 11:00 AM service on October 18th, you should self-monitor and self-isolate if you have any symptoms. Of course, she will not be attending church until she is cleared by Fraser Health. If you don't remember if you were present on that occasion, you can ask us since we do accurate contact tracing for each service.

At this time, we want to remind you of the safeguards we have put in place for your continued health and safety. By keeping these protocols, we hope to limit the threat of this virus and continue meeting for the worship of our God. Please review them with your family members before attending the worship services.

· If you are feeling ill in any way, we request that you join us through sermon audio from home until you are healthy again.

- by using the designated pew for the time of that particular worship service.
- · When entering and exiting the sanctuary, please keep physically distant from one another and quickly move to your vehicles avoiding any congestion.
- · Make frequent use of the hand sanitizer particularly when entering or exiting the building.

We also want to assure you that each week the building is thoroughly cleaned with door handles, handrails etc. wiped & disinfected.

Let us continue to pray earnestly for the eradication of this virus. We know that our God holds every cell and atom in His hands, and He being almighty God is able to do whatsoever He pleases. May it please Him to heal our land!

In Christ,

Your Consistory

P.S. if you know someone who doesn't have email perhaps you can provide them with a copy.

This is Exhibit "F" referred to in the Affidavit of John Koopman
BC.
this day of January, 2021.
<u> </u>
A Commissioner for Taking Affidavits

J. SCOTT BIRCH
Barrister & Solicitor
9202 Young Road
P.O. Box 372
Chilliwack, BC V2P 6J4

within the Province of British Columbia

From: Gary Kanis - Chilliwack FRC Clerk Sent: December 31, 2020 9:33 AM

To:

Subject: Jan. 3 Church Services Cancelled

Dear Congregation,

As a society we have been dealing with the COVID-19 virus for over 9 months.

We have been extremely blessed until recently with very few cases in our church family. This situation has now changed with several families having positive test results.

These cases seem to have come about because of contacts in schools, work places and other environments and are not linked to any of our worship services as far as we know.

In light of this new development, the consistory feels it prudent to act wisely and cancel our church services for this coming Sunday, January 3rd. We encourage you to use Sermon Audio and listen to Abbotsford or Langley who will broadcast their services (details below). We also will delay the start of catechism & youth until Tuesday, January 19.

May God grant healing to our members and to our society. If any of you are sick and need help with groceries, medications, etc. please let us know.

From the Consistory

Live Stream Details

Abbotsford FRC's live stream can be found by clicking here. Their services are at

10:00am and 5:00pm.

Langley FRC's live stream can be found by <u>clicking here</u>. Their services are at 10:00am and 4:00pm.

This is Exhibit "G" referred to in the Affidavit of John Koopman
sworn before me, at
this <u>&</u> day of January , 2021.
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A Commissioner for Taking Affidavits

within the Province of British Columbia

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sworn before me, at	
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A Commissioner for Taking Affidavits within the Province of British Columbia

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A Commissioner for Taking Affidavits within the Province of British Columbia

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This is Exhibit "J" referred to in the Affidavit of John Koopmar	1
sworn before me, at,BC,	
this day of January, 2021.	

A Commissioner for Taking Affidavits within the Province of British Columbia

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This is Exhibit "K" referred to in the Affidavit of John Koopman
sworn before me, atBC,
this day of January, 2021. CS
4.7.

A Commissioner for Taking Affidavits within the Province of British Columbia

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ALLEGED OFFENDER'S SIGNATURE

This is Exhibit "L" referred to in the Affidavit of John Koopman

sworn before me, at _

this _ 8 day of January, 2021. S

A Commissioner for Taking Affidavits within the Province of British Columbia

From:

Paul Jaffe

To:

Morley, Gareth AG:EX

Cc:

Emerson, Brian P HLTH:EX; Lapper, Emlly AG:EX

Subject:

Re: s. 43 letter

Date: Attachments: February 3, 2021 8:39:24 PM s. 43 exemption03022021.pdf

Hi Gareth et al.

Please find enclosed my letter of today responding to yours of January 29, 2021 in this matter.

Regards, PJ

Paul Jaffe, Barrister and Solicitor,

West Vancouver, B.C., V7T 1A2

On Jan 29, 2021, at 5:17 PM, Morley, Gareth AG:EX wrote:

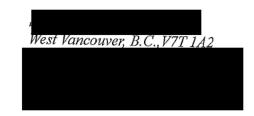
Paul,

Please find enclosed a letter to your attention in response to yours earlier today.

J. Gareth Morley
Constitutional and Administrative Law
Legal Services Branch, Ministry of Attorney General
Pronouns: he/him/his

This communication (both the message and any attachments) is confidential and may be protected by solicitor-client privilege. It is intended only for the use of the person or persons to whom it is addressed. Distribution, copying, or other use by anyone else is prohibited. If you have received this communication in error, please destroy the email message and any attachments immediately and notify me by telephone or by email. Thank you very much. My apologies for any inconvenience.

<Lt Jaffe s.43(1) request.pdf>



February 3, 2021

J. Gareth Morley Constitutional and Administrative Law Legal Services Branch, Ministry of Attorney General

Via email to

Dear Mr. Morely,

Re: Reconsideration of orders / religious services / SCBC No. S210209

Further to your letter of January 29, 2021, your questions are set out below with the following responses given by my clients:

<><>

1. In the material provided, what, if anything, is a proposal that if implemented would meet the objectives of the January 8 order and is suitable to a written agreement under section 38 of the Public Health Act? Please respond for each of Mr. Beaudoin and the three churches. If you wish to provide draft agreements under s. 38, that would be of assistance.

Answer: The three specific churches propose that, for their in-person worship gatherings, they continue to:

- maintain physical distancing of at least 2 metres between members of different households;
- maintain contact tracing;
- maintain the use of hand sanitizer and at all times of ingress and egress from the buildings; and
- maintain the use of masks as Dr. Henry directed.

In addition, these churches also propose to continue to maintain their present practice of not having before and after worship coffee and other such social events until such time as PHO orders permit and/or this litigation is decided on the merits.

<><>

2. For each of these proposals, if the request is for a class of persons, please identify the class under s. 43(7) of the Act.

Answer: Not a class of persons but rather for the specific Pastors, Church Officials and Churches who are parties in this litigation.

<><>

3. What material should the Provincial Health Officer look to as, in your clients' view, additional relevant information that was not reasonably available to her on January 8, 2021?

Answer: The affidavits delivered to Dr. Henry in this matter have set out in detail the steps that these churches have taken to conduct their activities safely and, as above proposed, will continue as a condition of a section 43 exemption.

<><>

4. Can you confirm that you are not asking for more time to comply with the order under s. 43(1)(c)?

Answer: Correct.

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5. I draw your attention to s. 43(6) of the Public Health Act, which provides that an order is not suspended unless the health officer agrees, in writing, to suspend it. If you are asking for suspension, please do that and provide your justification in writing.

N/A

<><>

6. If you are not asking for a suspension, please confirm that your clients will abide by the order until the reconsideration process is complete. If you are asking for a suspension, please confirm that your clients will comply with the order while the suspension request is considered N/A

Thank you for your cooperation in this respect and we look forward to an early response with respect to the requested section 43 exemptions.

Yours truly,

Paul Jaffe Paul Jaffe

cc. Petitioners in SCBC No. S210209

E. Lapper at

J. Hughes at