



NATIONAL CITIZENS INQUIRY

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EVIDENCE

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[00:00:00]

Geneviève Eliany

The next witness is Greg Hill. Great. Thank you for joining us and for your patience today. Could you state and spell your name for the record please?

Greg Hill

Greg Hill. G-R-E-G H-I-L-L

Geneviève Eliany

Do you promise to tell the truth today?

Greg Hill

I do.

Geneviève Eliany

Can you tell us a bit about your career, your profession, and explain what Free to Fly is?

Greg Hill

Sure, well thanks for having me on. It's an honour to be here with so many other courageous Canadians that have stepped up over the past couple of years.

I started my flying career in the military. I spent 20 years in the regular force and then roughly another 12 years in the reserves. That enabled me to see all sorts of parts of the world, oftentimes not at its best. But I did get deployed all over the place, including several tours to Afghanistan. And then I started with the airlines back in 2006. And I've been there ever since, aside from a year where I did not work due to the vaccine mandate. I assumed that would probably be the end of my career. But since the mandate was suspended last June, I've been back working since roughly September of last year.

So Free to Fly, I won't get into too much detail with it. But as we saw, the government started to talk—make noise about a vaccine mandate. I assumed it would probably be coming for aviation first of all, just given the nature of our travels about the world and otherwise. So it started with a handful of pilots and then morphed into— Now it's over 40,000 aviation professionals and passengers. Many of those are disaffected passengers that were unable to travel during the period of that vaccine passport.

And so we continue our work advocating for both the freedom to fly, of course, but also the freedoms more broadly of every Canadian coast to coast, as well as for safety within the aviation sector.

Geneviève Eliany

Can you tell us a bit about the health standards and the safety obsession of airlines before COVID?

Greg Hill

Sure. Aviation went through a difficult period, I would say, back in the '70s primarily. I won't get into all the nitty-gritty of it. Those of you who are familiar with aviation will know some of the details. But it went through a spate of crashes and otherwise—a lot of that coming out of just the way that we were operating. People in multi-crew aircraft acting like single pilots; single pilot commanders ignoring others in the flight deck. Things like attention-tunnelling, excessive professional courtesy, something we talk about where there's so much deference to those in authority—being the captain, typically—that people won't even speak up when things are going sideways. Overconfidence, et cetera, et cetera.

So the sector completely changed the way they did business through things like crew resource management, communication, enabling an environment where you could ask questions, where you could speak up when things were going sideways.

So that evolved and expanded into things like what we call SMS, which is safety management system. And that's become really a gold standard globally. And in their own words, it ensures the effectiveness of safety risk control. So it's an environment where you can identify hazard; you can report on that. It encourages input and response from those in positions of authority.

So even here in this country, we've got statements from some of our major airlines, one of which states: "For over 25 years, our culture has put safety at the forefront of every decision we make, and we're proud to continue that legacy." Another airline: "Safety first, always. In partnership with our employees, we'll conduct business in a manner that ensures the health and safety of employees, customers, the general public," on and on, "meeting our obligations under all applicable regulations."

So that's the industry as a whole. And then when we bring it down kind of to the grassroots—as far as pilots go, there's numerous things that have been in place, really, for decades. So when it comes to things like medicine: As pilots, when we fly in a crew environment, just to give you maybe some context, we're not even supposed to consume the same meal in flight for fear of—if the fish is bad—ending up incapacitated in flight. Or even over-the-counter medication when it comes to things like cold and flu and otherwise, we're supposed to check with a doctor before we do that.

Or on Transport Canada's website, there's been a statement that's been there for a very long time that said, "Medical trials are not compatible with aviation medical certification." So that's been there.

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And as far as our health on an ongoing basis, for decades, it has been in the Canadian Air Regulations section 404 that pilots are required annually to have a medical, or, if you're over a certain age—it used to be 40, now it's 60—every six months an in-person medical, which includes an ECG [electrocardiogram]. So that's a little bit of context. Obviously, it's not the full picture, but that gives you a baseline of where I would say we used to be.

Geneviève Eliany

What happened during the pandemic? Let's start with the medicals. How did the frequency of those medicals change?

Greg Hill

Well as far as the medicals go, when COVID hit, initially you had people that were starting to expire on their medicals. So initially, it was that they would extend the expiry date. Which, it's the cliché that we all say, "Well, you know, it made sense at the time. It was a confusing environment. We weren't too sure what to do." So that was the way it went for much of 2020.

And then as we moved into 2021, they brought about telemedicals, essentially. And so they exempted pilots from that section of the Canadian Air Regulations, enabling them to do two telemedicals in a row. So that means that you've got an ability for people to go 36 months without doing an in-person medical at all, including an ECG or otherwise.

There's been a fair bit of noise made about some of the things that are happening in the States with ECGs and the parameters widening. But I like to point out—well I don't like to point out, but I do point out—that here in Canada, unfortunately, during this COVID era, we pushed it to a worse scenario where we're not even required. And this was during the season when much of the nation had gone back to at least some semblance of normalcy, where you could go and sit and watch a Leafs game with 20,000 people—which I think is fantastic—but you weren't able to go and sit in a clean and quiet airline office with your doctor and make sure you're healthy. So I don't want to go on and on about that point. That's certainly one piece of it and I can speak to where we're at with that now, which I think is important as well.

But during the actual—I would call it during the "mandate era," we saw all sorts of things happen that were of great concern. And we tried to approach that as the calm professionals that we like to be as pilots, where we mainly are looking to mitigate risk and get people from point A to point B in a safe and calm manner.

Geneviève Eliany

How were your concerns received by Transport Canada and unions and airline management?

Greg Hill

Right. Well, stepping back to what I just said, we tried to approach this as professionally as possible. We wanted to ask good questions. We wanted to think ahead. We wanted to seek to mitigate risk. So we partnered at one point with the Canadian COVID Care Alliance, because I know as much about medicine and vaccines as some of these scientists would know about flying an instrument approach in an airline. And so we sought to bring in their expertise. So they very kindly prepared a document. We sat down and talked to them. And they said very clearly, “Of any profession in the country, flight crew are probably the ones we’re concerned about the most. Because you fly in a unique environment. You sit for long, long periods of time, which elevates some of these vascular and cardio type of risks.”

So we put together a document so that we weren’t just sitting down and talking to our managers or otherwise from what we gleaned ourselves on the internet, although I think there’s plenty of good information out there. But we presented this document to a couple of the largest pilot unions in the nation, a couple of the largest airlines in the nation. And here we are a couple years later, and I still haven’t heard anything back as far as this goes.

It really— And I’m sure you’ve heard this repeatedly as you’ve done all sorts of conversations along these lines: there wasn’t a willingness to listen. But the concern within the aviation environment is— One of the analogies I like to use is, we try to approach it the same way that we fly airplanes. So we queried, for instance, Transport Canada. We started talking about, “What happens if I lose my license?” Because if a pilot loses his ability to fly with his medical, it’s essentially the end of his career. So myself and a couple others started asking, “What happens?” And the answer, to make a long story short was, “Well, you’re at risk of COVID far more than you are from these vaccines.” To which I said, “Well, based on what long-term studies?” Because it’s been very clear—and this is from the manufacturer’s own FDA [Food and Drug Administration] briefings—that there was no proof of any help as far as transmission.

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That the long-term studies had not been done. And then people started asking about this line that I’d mentioned, about not participating in medical trials.

When we asked these questions, which was during the week of the 13th of July 2021, that statement had been on the internet for years and years. The very next week, if you use the Wayback Machine, it simply disappeared. There was a ton of activity on that particular page. And that inconvenient truth, to summon a little Al Gore, was simply removed. Which is greatly concerning. We have never in aviation simply ignored difficult circumstance.

This was when I pushed back with my managers and said, “If I was flying an airplane and I was running a little bit late, and I ran up to the aircraft, and I said, ‘Listen, the risk of a catastrophic engine failure on takeoff is sub, sub, sub 1 per cent’”—because it is—“so I’m not going to do a walk around; I’m not going to check the maintenance records; I’m not going to program the aircraft or brief. I’ve done this a bunch of times; I’m quite confident that we’re safe,’ and I just took off, it would very quickly be the end of my career.”

And yet those within the aviation community— And it’s not just my managers, I push this all the way back up to Transport Canada because these were the questions that were being asked. The statement was, basically, “It’s safe and effective. Just get it.” And the option was you either get it or you lose your job, similar to many others.

Stepping back to what I was talking about in the '70s, where we were crashing airplanes planes for operating in ways that were reckless and not really investigating, this was even some of the same sort of concerns. There's sort of a radical statement in aviation that if you start querying the guy you're flying with and things are starting to go sideways, it just seems like he's not listening, you say, "This is stupid!" to try and get their attention. And this was really what we were trying to do. But at the end of the day, it wasn't listened to.

And the part that I think was particularly frustrating for many of my colleagues as well is that, throughout this era, the airlines had put in writing, "Testing is an excellent option to keep you and your colleagues safe." Some of our guys and gals were flying back and forth to China and other places picking up PPE and otherwise. And they were told—along with the travelling public—and I do think it's true: "The risk of transmission is exceedingly low. It's very rare to contract COVID while flying. Keep flying, there's no need to quarantine or otherwise." And then, when the mandate came out, suddenly we were such a dire risk to our colleagues that when we had to turn back in our passes and our iPads and otherwise, when we were put out of work and expecting to be terminated, we weren't even allowed to walk in the building to truck them off. We had to leave them either curbside or mail them in. So there's a level of hypocrisy as well as just a complete decoupling of common sense from policy.

Geneviève Eliany

I understand that you've had a number of calls with pilots who are likely vaccine-injured. Can you tell us a bit about those calls?

Greg Hill

Right. So I guess this is where we are at this point. We're in what I would call the "post-mandate era." Some of us are back to work, there's others who did not get their job back. But as you mentioned, I personally first-hand spent hours on the phone with vaccine-injured Canadian airline pilots. Just based on my role, they feel comfortable calling and talking to me. They don't feel so comfortable raising their hand in other means because, again, that medical is the tenuous thread that keeps you in an airplane.

Some of these are more minor on the spectrum. Again, I'm not a doctor to speak to where they fall on the spectrum exactly, but things from issues with vision to hearing, you know, to feelings of paralysis in different parts of your body, to what seem to be symptomatic of something like myocarditis, chest pains, and otherwise.

And so we've tried to be very vocal with this but we've tried to do it in a way that's collaborative as well. And I brokered a coalition with a number of other groups similar to Free to Fly in the U.S., Australia, the U.K., Germany, Switzerland, various spots in Europe. And we put our signatures on a letter we sent to Transport Canada. We just said, "Listen, we want the safety of the travelling public. We want to collaborate with you." So we asked questions as far as: What was done to determine the safety and efficacy of these prior to rolling out the mandate? Are you tracking things like adverse reactions amongst crew? Are you tracking how many planes were flying around single-pilot versus multi-crew?

We sent that letter. We waited maybe a month. I think a month and a half. We sent a follow-up.

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It was over three months before Mr. Algahabra finally responded with a collection of speaking points, essentially saying, “Health Canada has approved these vaccines. They’re safe and effective.” And that was really as far as it went. So concerning for sure because the role of an organization like Transport Canada is to ensure the safety of the travelling public. And it does not appear that this is where we’re at.

When we talk about things like vaccine injury amongst flight crew, and this is pilots as well as flight attendants. You can go online and look this up in something called the CADORS: the Civil Aviation Daily Occurrence Reporting System. So it’s not me that’s picking it off the internet or otherwise, you can go and read the reports yourself. And pilot incapacitation has been an issue for years and years, but of course we’re concerned about where we’re going with these jabs.

So I like to be solution-focused. And then the concern here, stepping back to what you’d asked earlier, is: What can we do about this? What we can do? And the only backstop is properly screening pilots before they go flying or as part of their annual medicals. And I think this should go further, as far as things like D-dimer tests or even cardiac MRIs, which may be a pipe dream here in Canada. But instead, where we’re at now is Transport Canada just recently, March the 1st, unbelievably—and we’re the only nation I know of (and I’ve checked) globally that’s doing this—has now allowed telemedical to continue until 2025. A pilot can go—again—up to 36 months, the third medical they do have to do in-person, without doing an in-person medical.

And sadly, two weeks after they did that the Transportation Safety Board, which is an independent organization, put out an accident report that happened in late 2021. A gentleman flying a private aircraft sadly crashed in Alberta. And it was determined that he’d had a heart attack as part of that crash. Now, the interesting and tragic part of all of that is the fact that he was an airline transport pilot, he was a commercial pilot. And he had attested his health earlier in the year.

And this is the thing: the justification now is flexibility. But we have never in aviation set flexibility on top of safety. We have preached against it for years and years. You’re told not to do things like “get-home-it is,” which is a word for, “it’s the last leg of being on the road for four days and you start rushing and forgetting things.” Safety always is paramount. And yet here we are permitting this telemedical business to continue.

So I feel it’s important— Not to keep hammering the same point over and over again but in order to be solution-focused, I think we’ve got to figure out, what do we do about it? We’ve got to screen people properly. And yet here we are with this past three years. And you and I have just discussed a trajectory of sorts where we started with one thing, and you would have thought, by 2023, when we’re at least ostensibly trying to get society back to some sense of normalcy—

We’re continuing with policies that are antithetical to everything we stand for in aviation. And so you have to ask yourself: What is really going on at the policy level with a lot of this?

Geneviève Eliany

Thank you. That completes my questions and I’ll see if the commissioners have any questions for you. There is one.

Commissioner Massie

Well, thank you very much for your very interesting testimony. I was wondering about the testing of the pilots. I think it makes sense that you would want to do in-person medical exams. What would be the consequences for pilots that undergo such an exam, would have conditions that would prevent them from further working as pilots because of disability that would disqualify them? What would be the consequence for them and for the— I guess, the vaccine mandate that actually put them in that situation?

Greg Hill

Well thanks for the question. The issue with all of this, and it's not unique to aviation of course, is trying to prove causality. And unless you baseline your health before taking the job, which I know a few people have done, it's difficult to prove that causality. Now, I know that sounds a little bit—

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I mean, we're all seeing massive amounts of things happening that we have not seen in the past. So it's very difficult with a straight face to try and claim that this is just a normal circumstance.

The unique thing, again like I said, with a pilot, is that— And pre-COVID, typically if you'd gone into your annual medical and said, "You know, Doc, I'm getting chest pains once or twice a week during the evenings," you'd be grounded pretty quickly while they at least investigated that. But folks that I've talked to have raised some concerns and they've really had to push to go and do things, like stress tests to try and— And when you've got a pilot that's essentially seeking to ground himself, you're living in an upside-down world, at least as far as aviation goes. Because it's very difficult to keep men and women who are passionate about flying out of an airplane. And particularly when their ability to pay their mortgage or otherwise is attached to it.

I'm not sure if that answers your question. But the long and short of it is— And if you go and read something like the civil aviation medical examiners' handbook, there's guidance there for the Transport Canada doctors. It says quite clearly that it's difficult sometimes to get pilots to be honest about their health. It's kind of laughable to read it because it says very clearly, "you're the last line of defence here with making sure these men and women are safe getting in an airplane." Because they're oftentimes not going to be super honest because they want to keep flying. Which again is an argument for ensuring that they are in an office and not doing a subjective, "I feel fine."

We have to go in a simulator at least two or three times a year to essentially make sure we're competent to fly an aircraft. And I said to managers and otherwise, "Why are we allowing what we're allowing with telemedicine?" I can't just phone in and say, "I'm a great pilot. If I lose an engine on takeoff, I can assure you 100 per cent it's going to go super well." I have to get in a simulator and prove that with my hands and my feet. And when it comes to the health aspect, I don't think we should be attesting to how we feel either. I think we should be ensuring that we've got that backstop for safety.

Commissioner Massie

Thank you very much.

Geneviève Eliany

Thank you so much for your testimony and all the work that you're doing with Free to Fly Canada. Have a great evening.

Greg Hill

Thanks so much for having me.

[00:22.39]



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The evidence offered in this transcript is a true and faithful record of witness testimony given during the National Citizens Inquiry (NCI) hearings. The transcript was prepared by members of a team of volunteers using an “intelligent verbatim” transcription method.

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