Health Canada Santé Canada

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March 18, 2026

Tara Bailey
Project Manager, Ontario Region
Impact Assessment Agency of Canada
600-55 York Street
Toronto, Ontario M5J 1R7

Subject: Health Canada's Technical Review of the Draft Environmental Assessment Report and Draft Potential Conditions for the Springpole Gold Project

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Dear Tara Bailey,

Thank you for your email on February 27, 2026, requesting Health Canada's review of the Draft Environmental Assessment Report and Draft Potential Conditions for the Springpole Gold Project.

Health Canada participates in environmental assessments as a federal authority under the *Canadian Environmental Assessment Act (CEAA), 2012*. The Department makes available specialist or expert information or knowledge in its possession to review panels and responsible authorities, among others.

Health Canada has reviewed the Impact Assessment Agency of Canada's (the Agency's) Draft Environmental Assessment Report and Draft Potential Conditions, and provides its comments for the Agency's consideration in the attachments below.

The Department remains available to support future document reviews and the development of project-related follow-up monitoring programs focused on Indigenous health at the request of the Agency. For additional information, please refer to Health Canada's Guidance Documents regarding Air Quality, Noise, Country Foods, Drinking and Recreational Water Quality, and Human Health Risk Assessment.

Should you have any questions concerning Health Canada's response, please contact the undersigned.

Sincerely,

<Original signed by>

Umme Akhtar
Impact Assessment Specialist, EHP – Ontario Region
ROEB, Health Canada
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Attachments:

Table 1: Health Canada's comments on the Draft Environmental Assessment Report for the Springpole Gold Project

Table 2: Health Canada's comments on the Draft Potential Conditions for the Springpole Gold Project

CC:

Aurelia Thevenot, A/Manager, Environmental Assessments and Contaminated Sites (EACS), Healthy Environments and Consumer Safety Branch (HECSB), Health Canada

Sue-Jin An, A/EHP Regional Manager – Ontario Region, ROEB, Health Canada

Julie Anderson, Senior Environmental Health Specialist, EACS, HECSB, Health Canada

Jordan Taylor, Environmental Officer, EACS, HECSB, Health Canada

Joel Kaushansky, Impact Assessment Specialist, EHP – Ontario Region, ROEB, Health Canada

Table 1: Health Canada's comments on the Draft Environmental Assessment Report for the Springpole Gold Project (CIAR 96)

Comment ID	Report Section	Context and Rationale	Health Canada Recommendation
HC-EA-01	Section 7 Effects to the health and socio-economic conditions of Indigenous Peoples PDF pg. 63	Biophysical pathways recognize the biological, physiological, and physical-environmental processes that shape health, in comparison to biomedical pathways that are primarily focused on disease pathology. Health Canada recommends replacing the term "biomedical' with "biophysical" to more accurately reflect the concept being described.	Health Canada recommends the following revision (deletion in ~~strikethrough~~ and addition in **bold**): Cat Lake First Nation and Lac Seul First Nation both noted that, by focusing on ~~biomedical~~ **biophysical** health pathways, the proponent failed to encapsulate Indigenous health perspectives, including physical, emotional, mental, and spiritual health.
HC-EA-02	7.1.1 Health Conditions Atmospheric Environment PDF pg. 64-67 Table 7-1, PDF pg. 76	To promote transparency in the final Environmental Assessment Report, Health Canada requests that a summary of its previously submitted project-specific advice (Table 1, HC-01, CIAR 33) related to potential effects on local air quality and Indigenous health be included in the Atmospheric Environment section.	Health Canada recommends the following revision within Section 7.1.1 (addition in **bold**): **Health Canada identified that project-related changes to local air quality could result in health impacts to Indigenous Peoples conducting traditional land resource use activities on Springpole Lake, Birch Lake, and surrounding lands. Health Canada recommended that monitored air quality parameters be evaluated against health-protective air quality criteria and that monitoring be conducted at locations that are representative of Indigenous land use.**
HC-EA-03	Table 7-1 PDF pg. 74	Based on expertise and mandate, Environment and Climate Change Canada should be consulted on appropriate implementation of dust suppression mitigation measures instead of Health Canada.	Health Canada recommends the following revision (deletion in ~~strikethrough~~ and addition in **bold**): Apply water, or any alternative dust suppressant determined in consultation with ~~Health Canada~~ **Environment and Climate Change Canada** and Indigenous communities, on project roads and other areas that may generate dust when dust generation is expected or occurring;
HC-EA-04	7.1.1 Health Conditions Country Foods PDF pg. 69-71	Although the Agency mentions that *"the assumptions in the human health risk assessment regarding country foods are conservative and protective of human health"*, Health Canada notes that its previously submitted project-specific advice (Table 2, HC-01, CIAR 33) related to potential effects on country foods and Indigenous remains outstanding. To promote transparency in the final Environmental Assessment Report, Health Canada requests that a summary of its previous comments be included in the Country Foods section.	Health Canada recommends the following revision within Section 7.1.1 (addition in **bold**): **Health Canada noted that project-related changes to concentrations of contaminants in country foods could result in health impacts to Indigenous Peoples and identified existing uncertainty in the assessment of country foods based on an absence of community-specific consumption data. Health Canada recommended that the Proponent undertake consultation and engagement activities with Indigenous communities to identify country food species for follow-up monitoring and develop a communication plan for sharing any identified risks to human health associated with country food consumption.**
HC-EA-05	7.1.1 Health Conditions PDF pg. 69-70	Health Canada's *Guidance for Evaluating Human Health Effects in Impact Assessment: Country Foods* does not provide contaminant "thresholds" for terrestrial or aquatic country foods. Therefore, including such references in the Environmental Assessment Report is inaccurate, and Health Canada recommends that they be removed.	Health Canada recommends the following revision (deletion in ~~strikethrough~~): The proponent's risk assessment predicted that the project would cause a negligible increase in COPC in terrestrial country foods, and a marginal increase in aquatic country foods. ~~These increases would be below the thresholds established in Health Canada's *Guidance for Human Health Effects in Impact Assessments: Country Foods (2023) and would not be expected to cause health impacts even in heavy consumers of country foods.*~~ IAAC understands that the assumptions in the human health risk assessment regarding country foods are conservative and protective of human health.~~, and that increases in COPC would be below the thresholds identified by Health Canada.~~

Table 2: Health Canada's comments on the Draft Potential Conditions for the Springpole Gold Project (CIAR 97)

Comment ID	Draft Condition Section	Context and Rationale	Health Canada Recommendation
General			
HC-01	2.4.5	While triggers and thresholds based on baseline or environmental assessment predictions support environmental protection, applying health-based criteria ensures that thresholds remain protective of human health.	Health Canada recommends condition 2.4.5 be edited as follows (addition in **bold**): the **thresholds based on** levels of environmental change relative to baseline, **predictions made in the environmental assessment, and applicable criteria for the protection of human health** that would require the Proponent to implement modified or additional mitigation measure(s), including instances where the Proponent may require Designated Project activities causing the environmental change to be stopped;
HC-02	2.4.7	The draft Environmental Assessment Report (CIAR 96, PDF pg. 116) indicates that Mishkeegogamang Ojibway Nation has *"concern[s] about effects to country foods and environmental quality in the LSA* [that] *could persist after mine abandonment and potentially affect consumption patterns."* It is uncertain what criteria would be used to determine that monitoring is no longer required for surface water and country foods (i.e., fish, vegetation, wildlife) during or after decommissioning. Health Canada recommends inclusion of criteria that specific and measurable endpoints must be met before a follow-up program ends (pursuant to condition 2.4.7), demonstrating how conditions remain protective of human health.	Health Canada recommend condition 2.4.7 be edited as follows (addition in **bold**): the specific and measurable end points that must be achieved before the follow-up program can end. Those end points should indicate that the accuracy of the environmental assessment has been verified**, that human health is protected,** and that the mitigation measures are effective; and
Water			
HC-03	3.7.1	The draft Environmental Assessment Report (CIAR 96, PDF pg. 110) mentions that " *(…) the Ministry of Environment, Conservation and Parks has identified risks that in foreseeable scenarios, discharges could exceed provincial and federal guidelines as well risks associated with the formation of methylmercury."* The Report also acknowledges that project-related activities could increase methylmercury concentrations in air, soil, water, and sediment. There is currently a fish consumption advisory for Birch Lake due to elevated methylmercury levels in fish. Consequently, Health Canada recommends that methylmercury be monitored as part of the surface water monitoring program to identify potential changes in fish and wildlife and associated implications for human health. In addition to monitoring at the seepage face in Birch Lake, Lake 16, and Springpole Lake, surface water monitoring is recommended at locations used by Indigenous groups for traditional purposes (e.g., fishing), as identified through consultation with Indigenous groups per condition 5.4.1, to ensure protection of human health.	Health Canada recommends condition 3.7.1 be edited as follows (addition in **bold**): monitor surface water quality for contaminants of potential concern, including aluminum, antimony, arsenic, cadmium, cobalt, mercury, **methylmercury,** selenium, silver, uranium and zinc at the seepage face in Birch Lake, Lake 16 and Springpole Lake and **at locations used by Indigenous groups for traditional purposes pursuant to condition 5.4.1;**
HC-04	New condition (as 5.3.3)	The draft Environmental Assessment Report (CIAR 96, PDF pg. 68) indicates that Indigenous communities relying on surface water from lakes within the Local Study Area, including Springpole Lake and Birch Lake, could be affected by project-related dust, effluent discharge, and seepage. In addition to meeting the Provincial and Federal effluent criteria, it is recommended to compare monitoring results to Health Canada's Guidelines for Canadian Drinking Water Quality to ensure that water quality remains safe for human consumption. If measured concentrations of contaminants of potential concern (COPCs) in surface water exceed applicable guidelines, and/or are greater than the predicted levels, it is recommended	Health Canada recommends a new sub condition be added to condition 5.3 as follows: **compare measured concentrations of contaminants in surface water to Health Canada's Guidelines for Canadian Drinking Water Quality, and predictions made in the environmental assessment and human health risk assessment. Should the concentrations exceed the guidelines or predictions using the results of monitoring, the Proponent shall update the human health risk assessment and implement modified or additional measures pursuant to condition 2.7.**

		that the human health risk assessment be updated to re-assess the potential risk to human health and inform adaptive management strategies.	
Air			
HC-05	5.2	Health Canada recommends that relevant authorities be involved in developing the air quality monitoring program, consistent with conditions 5.3 and 5.4.	Health Canada recommends condition 5.2 be edited as follows (addition in **bold**): The Proponent shall develop, prior to construction and in consultation with Indigenous groups **and relevant authorities,** and implement during all phases of the Designated Project (…).
HC-06	5.2.1	The draft Environmental Assessment Report (CIAR 96, PDF pg. 65) indicates that nitrogen dioxide (NO_2) concentrations are predicted to exceed the 1-hr standard during all phases of the project. While the Report (PDF pg. 66) references a commitment to monitoring of metals and NO_2 in addition to total suspended particulates, PM_{10}, and $PM_{2.5}$, metals and NO_2 are not identified as parameters to be monitored under the proposed condition.	Health Canada recommends condition 5.2.1 be edited as follows (deletion in ~~strikethrough~~ and addition in **bold**): Identify, prior to construction, contaminants of potential concern to be monitored, including total suspended particulates, PM10, ~~and~~ PM2.5, **metals,** and **nitrogen dioxide.**
HC-07	New condition (as 5.2.2)	The draft Environmental Assessment Report (CIAR 96, PDF pg. 66) notes that NO_2 would be monitored at locations determined in accordance with the Ontario Ministry of the Environment, Conservation and Park's *Operations manual for air quality monitoring in Ontario*. However, monitoring locations for other COPCs are not identified in the Report or in Section 12 (Follow-Up and Monitoring, EIS) (CIAR 22). Health Canada recommends monitoring air pollutants at locations where uncertainties remain in the air quality assessment, and where exceedances or near-exceedances of air quality criteria, standards, or guidance values are predicted, to verify model predictions. Monitoring locations are recommended to reflect areas where populations and individuals are most likely to be exposed, under both current and reasonably foreseeable future use scenarios, across all phases of the Project to ensure that air quality remains protective of human health.	Health Canada recommends a new sub condition be added to condition 5.2 as follows: **determine the locations where parameters will be monitored, including the locations that are predicted to exceed the standards and criteria set out in the Canadian Council of Ministers of the Environment's *Canadian Ambient Air Quality Standards,* Ontario's *Ambient Air Quality Criteria*, and locations within areas used by Indigenous groups for traditional purposes;**
HC-08	New condition (as 5.2.4)	If measured concentrations of COPCs in the ambient air exceed applicable guidelines, and/or are greater than the predicted levels, it is recommended that the human health risk assessment be updated to re-assess the potential risk to human health and inform adaptive management strategies.	Health Canada recommends a new sub condition be added to condition 5.2 as follows: **compare measured concentrations of contaminants in air to Canadian Council of Ministers of the Environment's *Canadian Ambient Air Quality Standards*, Ontario's *Ambient Air Quality Criteria*, and predictions made in the environmental assessment and human health risk assessment. Should the concentrations exceed the guidelines or predictions, the Proponent shall update the human health risk assessment using the results of monitoring and implement modified or additional measures pursuant to condition 2.7.**
Country Foods			
HC-09	5.4.1	The draft Environmental Assessment Report (CIAR 96, PDF pg. 70) acknowledges that the Proponent would develop a country foods monitoring program to monitor COPCs in species that are relevant to consumers. However, it is uncertain what COPCs will be monitored. Section 12 Follow Up Monitoring (Table 12-1, PDF pg. 40, EIS, CIAR 22) only mentions sampling fish tissues for metal concentrations. Health Canada recommends that the sample analysis consider the COPCs identified in other environmental media (e.g., air, surface water, soil) during the environmental assessment. Additionally, Health Canada reiterates its previous recommendation (Table 2, HC-01, CIAR 33) to incorporate Indigenous groups' country food consumption patterns into the human	Health Canada recommends condition 5.4.1 be edited as follows (addition in **bold**): identify, prior to construction, **contaminants of potential concern to be monitored,** the species of fish, vegetation, and wildlife consumed as country foods, **current and predicted community-specific consumption patterns,** and the locations where these species shall be monitored;

		health risk assessment, which would enhance confidence in the assessment's conclusions regarding the Project's environmental and human health impacts: The Impact Assessment Agency of Canada verify through its Crown Consultation process the representativeness and accuracy of the Proponent's country food assessment (e.g., consumption practices and consumption rates among all age groups) of the Indigenous communities associated with the Project.	
HC-10	5.4.2	Health Canada recommends that the sample analysis include arsenic, cobalt, and methylmercury, since the human health risk assessment predicted elevated risks associated with these COPCs via country food consumption during operations and closure (Appendix R, PDF pg. 102, EIS, CIAR 22).	Health Canada recommends condition 5.4.2 be edited as follows (addition in **bold**): monitor, during all phases of the Designated Project, changes in concentrations of contaminants of potential concern **(including arsenic, cobalt, and methylmercury)** in species and at the locations identified pursuant to condition 5.4.1, using sampling methods that are non-lethal unless non-lethal methods are not technically feasible.
HC-11	New condition (as 5.4.3)	If measured concentrations of COPCs in country foods are greater than the predicted levels, it is recommended that the human health risk assessment be updated to re-assess the potential risk to human health and inform adaptive management strategies.	Health Canada recommends a new sub condition be added to condition 5.4 as follows: **compare measured concentrations of contaminants in country foods to predictions made in the environmental assessment and human health risk assessment. Should the concentrations exceed the predictions, the Proponent shall update the human health risk assessment based on the result of monitoring, and current and predicted community-specific consumption patterns, and implement modified or additional measures pursuant to condition 2.7.**
Noise			
HC-12	New condition (as 5.5)	The draft Environmental Assessment Report (CIAR 96, PDF pg. 101) indicates a commitment by the Proponent to establish a mechanism for land users to file noise complaints. However, no such condition is included in the draft Conditions. Health Canada recommends that a condition be introduced requiring the development of a noise complaint and resolution mechanism for Indigenous land users. The inclusion of this measure would support effective and efficient communication between the Proponent and Indigenous communities.	Health Canada recommends a new sub condition be added to condition 5.5 as follows: **The Proponent shall develop, prior to construction and in consultation with Indigenous groups and relevant authorities, procedures for Indigenous groups to provide feedback to the Proponent about adverse environmental effects on current use of lands and resources for traditional purposes related to noise caused by the Designated Project, and procedures for the Proponent to document and respond in a timely manner to the feedback received and demonstrate how issues have been addressed, including through the implementation of additional or modified mitigation measures. The Proponent shall acknowledge receipt of any complaints within 48 hours.**