

CMO SMOH Weekly Notice for AHS Medical Staff

May 28, 2021

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MD Culture Shift

MD Culture Shift Newsletter: [Issue 03: May 2021](#).

Equity, Diversity and Inclusion

AHS Webinar: Pride Month

June is internationally recognized as [Pride Month](#) – a time to celebrate the LGBTQ2S+ community and the diversity our people bring to the organization. To mark Pride Month, you're invited to join us at an AHS webinar as we explore the history of Pride.

Date: June 3

Time: 12 – 1 p.m.

Register: [Here](#)

Equity in Medicine Virtual Conference

Date: June 12

Register: [Here](#)

Equity & Diversity in Research and Research in Equity & Diversity

Dr. Kim Kelly hosts a YEG Women in Health Networking event with speaker Dr. Shannon Ruzycski

Date: June 15

Time: 7 p.m.

Register: [Here](#)

University of Calgary COVID Corner: Management of Acute COVID-19 in the Hospital and Long COVID in the Community

COVID Corner, hosted by the University of Calgary, offers updates on various topics and aspects related to the COVID-19 pandemic.

Register [here](#) for the next session in the series, held on June 9 from 7-9 p.m. MST.

Doctor of the Week – Dr. Elizabeth Mackay



Dr. Elizabeth Mackay has many roles: General Internal Medicine Physician and Facility Medical Director at the Peter Lougheed Centre (PLC); Associate Zone Medical Director, Calgary Zone; Medical Director in Calgary Zone Anticoagulation Management Services; Clinical Associate Professor, Cummings School of Medicine and Community Health Sciences; and through all of these roles, she consistently refers to collaboration and community as significant highlights of her work.

When asked if anything has stood out for her during the pandemic, Dr. Mackay responded with, “How much everyone was willing to do to help each other at the PLC, and across the health system; especially in the diverse community in Northeast Calgary. It was amazing, how everyone showed up to help and that we would overcome it together.”

Dr. Mackay has a love of working with people, which is part of what drew her to being a physician. “I like hearing people’s stories and being able to help people understand and manage their health issues, and navigate the health system. My father was, and is a psychiatrist and a physician in the military, and, as a child, that planted a seed for me, but I also love science and solving challenging problems.”

“Although it can be challenging to help people overcome multiple obstacles to their wellness, with the complex systems, it’s great to be able to have ongoing opportunities to communicate and learn from each other.”

Outside of work, Dr. Mackay is married with three daughters – all who were born at the PLC – and spends as much time as possible with them, together as a family cooking and travelling. She has a love of comedy, podcasts, all things Brené Brown, paddle boarding, snowboarding, running, swimming, yoga and all forms of exercise, and is particularly enjoying the various programs offered by her new Peloton bike. Along with her love of solving challenging problems as a physician, personally, Dr. Mackay loves puzzles.

When asked if there was anything else that she wanted to share, she expressed a sincere gratitude for being part of such a great community at the PLC.

Thank you, Dr. Mackay, for your dedication and care for your colleagues and Albertans.

Highlights from the CEO All Staff Update

COVID-19 Case Status in Alberta

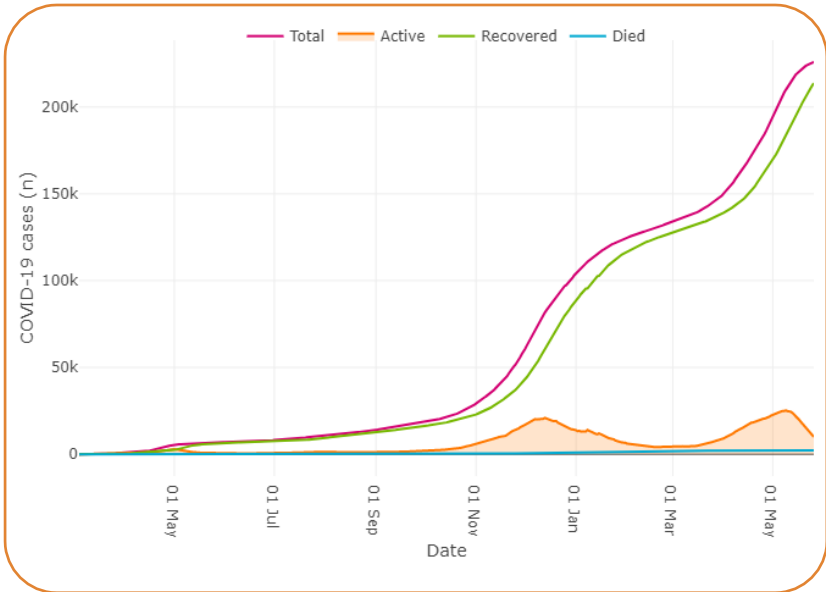
This past week, the number of new and active COVID-19 cases steeply declined, our hospitalization and ICU numbers also improved.

As of May 26, there are 10,017 active cases in Alberta, a 43.2 per cent decrease compared to May 19. Calgary Zone reported the most active cases for the 20th consecutive week. All five AHS zones reported a decrease in active cases, as you can see in the table below.

	Active Cases (as of May 26)	Active Cases (as of May 19)	Per cent Change
Calgary	4,150	8,132	-48.9%
Edmonton	2,616	4,195	-37.6%

North	1,511	2,657	-43.1%
South	591	871	-32.1%
Central	1,145	1,814	-36.9%
Unknown	4	6	-33.3%
Total	10,017	17,675	-43.2%

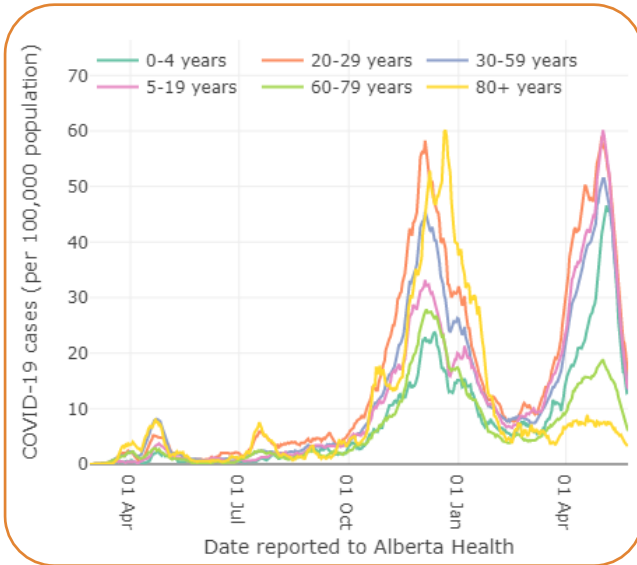
Meanwhile, the number of average daily new cases dropped to 537 for the seven-day period ending on May 26, compared to 1,043 the previous week (May 13 to May 19), a 48.5 per cent decrease.



Although Calgary Zone had the most new cases this week with 1,549, that still represents an almost 50 per cent decrease from 3,070 new cases reported in the zone between May 13 and May 19. North Zone reported the largest percentage decrease in new cases this past week with 551 new cases, compared to 1,201 the previous week, a 54.1 per cent decline.

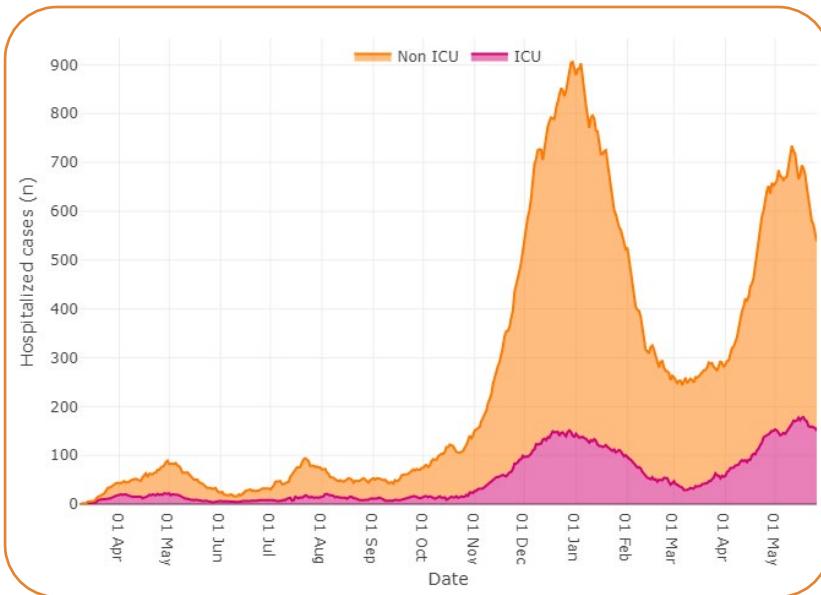
Cases by age group

On May 23, Albertans aged 20-29 had the highest seven-day rolling average of daily cases with 15.71 cases per 100,000 people. School-aged children (5-19 years) were second with 13.57 cases per 100,000 people. The rate for people 80+ years and those aged 60-79 years, was 3.57 and 6.00 cases per 100,000 people, respectively. A visual representation of these trends in cases in Alberta by age group is provided in the figure below.

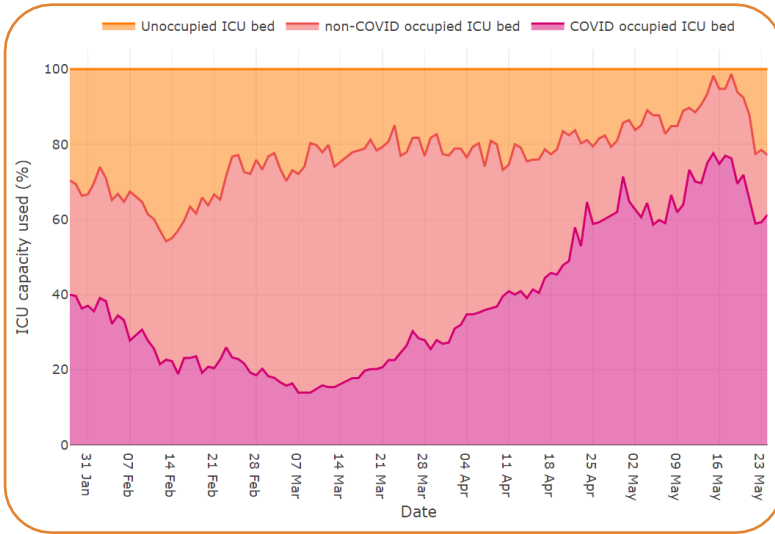


Hospitalizations and ICU admissions

Declining new and active cases are being reflected in our hospitalization and ICU admission numbers.



On May 26, 150 individuals were in ICUs compared to 172 individuals in ICUs on May 19, a 12.8 per cent decrease. The most recent reporting, May 24, puts our ICU usage at 77.1 per cent, with 61.2 per cent of ICU beds being occupied by a COVID-19 patient. The figure below is a visual representation of ICU capacity in Alberta.



A total of 388 individuals were in non-ICU hospital beds on May 26 compared to 504 individuals in non-ICU hospital beds on May 19, a 23.0 per cent decrease. The breakdown of hospitalizations by zone as of May 26 is as follows:

	Hospitalizations	ICUs
Calgary	218	57
Edmonton	185	61
Central	53	12
North	48	13
South	34	7

Variants of concern

For the seven-day period, ending May 26:

- 88.7 per cent of samples successfully screened were the B.1.1.7 (U.K.) variant
- 4.8 per cent of samples successfully screened were the P.1 (Brazil) variant
- 0.1 per cent of samples successfully screened were the B.1.351 (South Africa) variant

The remaining per cent of total samples successfully screened are either a presumptive variant, a presumptive variant of interest, or not a variant

Other notable COVID-19-related information:

As of May 26:

- A total of 225,937 cases of COVID-19 have been detected in Alberta and a total of 9,247 individuals have been hospitalized, which amounts to 4.1 individuals for every 100 cases. In all, 213,721 Albertans have recovered from COVID-19.
- 2,199 individuals have passed away from COVID-19, including 37 over a seven-day period from May 20 to May 26. We extend our condolences to the families of these individuals, and to all who have lost loved ones from any cause during this time.
- A total of 4.50 million tests have been conducted and 2.13 million individuals have been tested. From May 20 to May 26, 50,690 COVID-19 tests were completed, an average of 7,241 tests per day. During this period, the daily positivity ranged from 6.06 per cent to 9.95 per cent.
- For the winter school term, AHS has confirmed 8,947 individuals with COVID-19 were present at schools while infectious or acquired the disease in the school setting. A total of 1,352 out of 2,415 schools (56 per cent) in the province have reported an individual has attended their school while infectious or had in-school transmission.

The R value, also known as the reproduction number, describes the ability of a disease to spread. It tells us the average number of people that someone with COVID-19 will infect. An R value of 1 means an infected person will infect one other person on average. Values below 1 mean transmission is decreasing; above 1, transmission is increasing. The provincewide R value from May 17 to May 23 was 0.67 whereas R value the previous week was 0.84.

COVID-19 Immunization Updates

By the numbers

As of 8 a.m. today (May 28), more than 2.6 million total doses of COVID-19 vaccine have been administered in Alberta. More than 1.9 Albertans have received one dose of COVID-19 vaccine, and more than 350,000 have received both doses.

Cancel or change immunization appointment if you cannot attend

We want to remind everyone about the importance of cancelling or changing their immunization appointment if they are no longer able to attend. Cancelling or modifying an appointment is easy to do. You can cancel your appointment with AHS online by visiting ahs.ca/updatebooking or by calling Health Link at 811. Pharmacies can also be contacted online or by calling them directly.

When people do not cancel or change their scheduled appointment time, it takes an appointment from someone who wants it, and slows down our ability to immunize people as quickly as possible.

All vaccine options are good options

We have been hearing some Albertans are expressing a preference between the Pfizer and Moderna vaccines. All Albertans are encouraged to get immunized as soon as they are eligible, no matter what vaccine option is provided.

Based on current vaccine supply, at this time people are not able to choose which mRNA vaccine they receive at their appointment. Both Moderna and Pfizer are safe, effective vaccine products that provide protection from the COVID-19 virus, and will help make symptoms less severe for those who do contract the virus.

Pfizer and Moderna vaccines are approximately 95 per cent effective in preventing COVID-19 disease, and they also protect against severe COVID-19 illness, risk of hospitalization and death. They are both mRNA vaccines and function similarly in the body. These vaccines have similar side effects, with the most common being pain at the injection site, tiredness or headache.

The one-on-one conversation between immunizers and clients is an educational opportunity to answer any questions/concerns Albertans may have about the vaccine or specific vaccine products. This information is also being shared at clinics, through Health Link (811) and several other channels, including our [COVID-19 Vaccine FAQ](#).

Posters for immunization sites are available online: [Letter Size 8.5x11](#) | [Tabloid Size 11x17](#) | [Poster Size 24x36](#).

Albertans with a contraindication or allergy to a vaccine ingredient are advised to speak with their healthcare provider before receiving the COVID-19 vaccine.

Stick With The Facts, Stick Together

We should all have the same information and support each other to learn more. By continuing to build trust, sharing fact-based information and having ongoing conversations with each other about COVID-19 immunization, we can maintain a work environment that promotes worker and patient safety.

Visit our [Stick With The Facts, Stick Together](#) page for resources about the COVID-19 vaccine and our Stick With The Facts, Stick Together campaign.

You can also keep up to date on the latest [staff immunization rates](#). Our goal is to have 100 per cent of our staff and physicians immunized.

Online COVID-19 visitation screening tool reaches nearly 600K+ users

Since the beginning of the pandemic, our teams have developed several innovative tools to improve our processes and provide high-quality patient care.

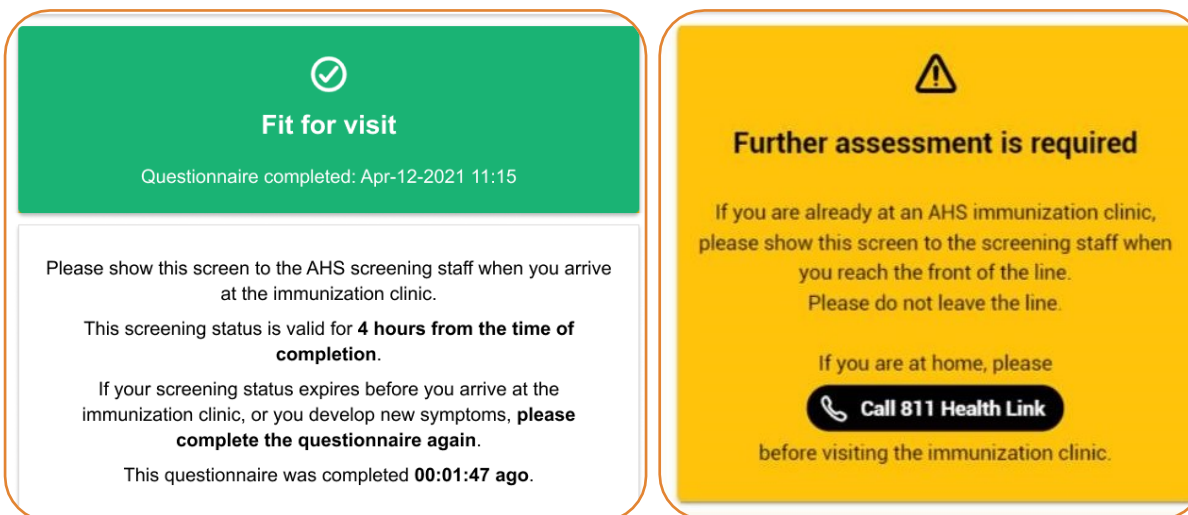
One of these tools is the online COVID-19 visitation screening (ahs.ca/visitscreen), launched last month at immunization clinics across the province. Before entering an AHS site or facility, everyone must complete COVID-19 symptom screening. Screening is done by site staff and consists of a series of questions. With this new tool, screening can be done online within four hours before the scheduled COVID-19 immunization appointment. People can complete the screening on their computer or mobile device before their appointment, or while they are waiting in their vehicles or in line at the clinic.

Over the course of a month, nearly 600,000 users have used the screening tool. Congratulations to our Information Technology and Innovation & Digital Solutions teams for successful development and implementation, as well as public health and immunization clinic staff for rolling it out across the province.

We are always looking to improve our processes and this online tool helps to:

- Reduce the amount of client contact with screeners.
- Improve efficiency and flow at screening stations.
- Reduce lineups and improve line management at immunization clinics.
- Provide a more flexible and convenient screening option for Albertans.

Click [here](#) to view and print screening posters to display on site, which includes the website URL and a QR code.



Depending on the answers to the screening questions, Albertans will either be “Fit to Visit” (green screen) or will require “Further Assessment” (yellow screen) by site screeners, if they are onsite at the clinic, or by Health Link if they are not onsite.

Participants sought for vaccine safety project

The Canadian National Vaccine Safety Network (CANVAS) COVID-19 Vaccine Safety Project is ongoing and needs your participation.

CANVAS is working with acute care and public health organizations in several provinces, including Alberta, to determine the safety of COVID-19 vaccines. Led by the Alberta Children’s Hospital

Infectious Diseases, Epidemiology and Vaccine Evaluation (ACHIEVE) Research Team, in collaboration with AHS and Alberta Health, this project will collect information about health events after receiving COVID-19 vaccines using web-based surveys after each vaccine dose and six months after both doses. This information, as well as any reports to AHS' Adverse Event Following Immunization program, will provide detailed information to the province about the safety of COVID-19 vaccines and contribute to the national program.

An important component of all immunization programs is monitoring for safety of each vaccine.

Visit [their website](#) to sign up and take the COVID-19 Vaccine Safety Survey. Click [here](#) to view and print CANVAS survey posters to display on site, which includes the website URL and a QR code.

QR code posters at immunization clinics

It's important to display the [COVID-19 Visitation Screening Tool poster](#) and the [CANVAS COVID-19 Vaccine Safety Project](#) poster at immunization clinics. However, we are hearing some people get them confused, especially since they both have QR codes. Please show the Visitation Screening Tool poster at the entrance of the clinic, and the CANVAS COVID-19 Vaccine Safety Project poster/card with the immunizers and in the waiting room, to avoid confusion of the two.

COVID-19 Testing for Healthcare Workers — Returns Next Week

As mentioned in last week's message, updated testing numbers are not available this week but will return next week.

Designated Support & Visitation Guidance in Acute Care Remains the Same

Despite decreasing case numbers and the upcoming relaxation of public health measures, in-person access for designated support persons and visitors has not changed at this time. The pressure on our acute care system currently remains high and we must continue to do all we can to protect our staff, physicians and patients. This is an ongoing situation and will be adjusted accordingly.

The following continues to apply to in-person access across the province for acute, ambulatory and emergency/urgent care:

- Critical care, pediatrics and NICU: up to two designated support persons.
- End-of-life: one designated support person at all times in addition to scheduled visitation by other family and visitors.
- All other inpatient areas, including maternity: one designated support person.
- Ambulatory, emergency and urgent care: one designated support person. Patients should maintain the same designated support person for any reoccurring ambulatory appointments.

Please ensure patients and residents are aware they can have a designated support person available to them. For sites that feel the need to implement further restrictions, please follow [Section 3 of the Designated Family/Support Access and Visitation Directive](#). Review the current [Designated Support and Visitor Access Guidance](#).

New Quarantine Requirements, Vaccination Status When Entering a Site

The new quarantine requirements and vaccination status regarding [CMOH Order 26-2021](#) requires sites to update their screening process for designated support persons and visitors. The screening questionnaire for acute care is being updated and will be available on [Insite](#) in the coming days.

Quarantine Requirements and Vaccine Status for Inpatients

Due to the potential impact to inpatient populations, quarantine requirements will not change and remain at 14 days (not reduced to 10 days) for patients admitted to an acute care facility for more than 23 hours. Quarantine recommendations for patients in acute care will continue to be assessed.

Mask Exceptions in AHS Facilities

On May 13, the Chief Medical Officer of Health (CMOH) announced [Order 22-2021](#), which provides clarity related to mask exceptions for indoor public places.

We understand there may be questions about this order and mask exceptions, and want to clarify that possession of an exception letter does not allow individuals to access public spaces in AHS facilities without a face covering. It also does not exclude individuals from following additional safety measures.

Through respectful discussion, our goal is to work with patients, visitors seeing patients at the end of life, and designated support persons to accommodate their needs while ensuring staff and patients are protected.

View the [How to Support Mask Wearing](#) resource, which provides steps to engage in safe and respectful conversation. The following options may be explored with those who cannot or will not don a mask:

- Ask if they would be able use a mask for the brief period they are in public space.
- They may also be offered a choice of using a face shield, or facial covering for the mouth and nose.
- Masking or facial covering may be discontinued once in the private space of their room or of the individual's room for whom they are visiting and/or providing support.
- They are expected to use facial covering (mask/face shield) in all public spaces.
- If someone will not/cannot use a facial covering for any period of time, contact Protective Services to see if escort services are available to help ensure social distancing while in public spaces at the facility.

Care should never be denied to patients seeking help. There may be opportunities to defer or arrange virtual visits for elective outpatient care.

If staff safety is otherwise at risk (e.g. because of harassing or violent behaviours), get help and/or leave if possible. Engage your leader, Protective Services or activate the appropriate emergency response code.

AHS staff who have a medical exemption letter should follow the [workplace accommodation process](#).

For more information about AHS' Continuous Masking policy, as well as posters to display on site, please visit [Insite](#). Refer to the [Use of Masks During COVID-19 Directive](#) for more information about how to work with those unable or unwilling to don a mask in AHS facilities.

Masks should complement – not replace – other prevention measures. Please remember to wear appropriate PPE at all times, socially distance, practice frequent [hand hygiene](#), take your daily health screening seriously and pay attention to your physical health. Do not come to work sick.

As always, we thank you to all for your continued hard work in helping to stop the spread of COVID-19 and keep staff and patients safe.

Verna's Weekly Video Message – Legal and Privacy Protecting Our Safety

Today, Verna would like to talk to you about the work of our Legal and Privacy team. While some might consider them a behind-the-scenes team, they have played an important role during COVID-19.

Their work has certainly been in the spotlight as of late, with the restraining order against Kevin J. Johnston and the court order against all organizers of advertised illegal gatherings and rallies breaching COVID-19 public health measures.

Actions taken by our Legal and Privacy team support the safety of our people and protect the health of Albertans across the province.

Joining Verna to talk more about the work of our Legal and Privacy team are:

- Tina Giesbrecht, General Counsel, Legal and Privacy
- Shalee Kushnerick, Associate General Counsel, Legal & Privacy

Watch Verna's vlog [here](#).

Province Announces Multi-Stage Plan to Lift Health Measures

On Wednesday, May 26, the Government of Alberta announced [a three-stage plan](#) to lift health restrictions over the next few weeks. The stages are based on vaccination thresholds and hospitalizations:

- Stage 1 (to start June 1): Two weeks after 50 per cent of Albertans aged 12-plus have received at least one dose of vaccine and COVID-19 hospitalizations are below 800 and declining.
- Stage 2 (expected to start in mid-June): Two weeks after 60 per cent of Albertans aged 12-plus have received at least one dose of vaccine and COVID-19 hospitalizations are below 500 and declining.
- Stage 3 (expected to start in early July): Two weeks after 70 per cent of Albertans aged 12-plus have received at least one dose of vaccine.

Until June 1, all current provincewide [restrictions remain in place](#), with additional restrictions in high-case regions.

[More information on this plan](#) is available on the government website.

Continuing to Work Remotely

As part of its plan, the Government of Alberta also announced this week that the mandatory work-from-home order could be lifted early as mid-June.

However, remote work arrangements are still recommended to help limit the spread of COVID-19. AHS continues to ask staff who are able to work from home effectively within their role to continue to do so until at least the end of September.

Remote staff should only return to the workplace if they receive approval from their leader and are aware of the safety requirements for their site. The [Relaunch Playbook](#) offers resources to support leaders with remote staff, as well as information about proper safety, cleaning and physical distancing measures to protect staff who have remained on site.

AHS will provide an update on remote work expectations and the potential for post-pandemic remote work arrangements later this summer.

Beyond COVID-19

PARA Employees – Allocate Your Flex Credits June 3 - 16, 2021

The flex credit allocation period for Professional Association of Resident Physicians of Alberta (PARA) members will take place from June 3-16. Prior to the allocation period, please familiarize yourself with the allocation process as well as how Personal Spending Accounts are taxed. If you do not successfully allocate your flex credits by 11:59 p.m., June 16, 100 per cent of your new flex credits will default to your Health Spending Account.

Early allocation is recommended to ensure sufficient time is available should you require assistance. Please visit [Insite](#) (login required) to view Allocation Instructions and FAQs. Allocation will open at 12:01 a.m. on June 3, 2021.

If you have questions, or require assistance allocating, please contact the HR Contact Centre at 1-877-511-4455 or through the [online portal](#).

Alberta Rural Health Week, National Paramedic Services Week Conclude

Today marks the final day of Alberta Rural Health Week, and we'd like to say thank you to everyone who delivers or promotes the delivery of healthcare services in rural and remote communities. You are helping AHS fulfil its promise to Albertans that we will deliver as much care as possible, as close to home as possible. We can do that thanks to physicians, healthcare providers, administrators and support staff who have a passion for rural healthcare and a desire to work in communities where they are often supporting friends, neighbours and colleagues.

Meanwhile, tomorrow is the final day of National Paramedics Services Week. The theme for this year's week has been "Paramedic as Educator – Citizen Ready" and it's been a pleasure to see how EMS has been leveraging its role to create awareness on many top-of-mind healthcare topics this year, including performing CPR, and what to know about some common first-aid procedures in the COVID era. EMS paramedics are valued members of our healthcare community and while they are one of the faces the public sees on the frontlines, behind the scenes, there is a strong system of support that citizens may never see: those who keep equipment running, vehicles serviced and uniforms and PPE in supply, members of the learning and development team, workforce planning, and emergency communication officers all work as a team with our paramedics.

To our rural healthcare workers, and to our EMS staff, thank you for all you do

Additional Resources for Physicians:

- [Acute Care Outbreak Prevention & Management Task Force](#)
- [AHS Immunization Information](#)
- [AHS Virtual Health](#)
- [COVID-19 FAQ for Clinicians](#)
- [COVID-19 Resources for Community Physicians](#)
- [COVID-19 Testing and Self-Isolation Criteria](#)
- [CPSA's Physician Portal](#)
- [Cumming School of Medicine Continuing Medical Education \(CME\) Resources](#)
- [Government of Alberta Vaccination Updates](#)
- [How to Access AHS Insite and Email](#)
- [How to do a Nasopharyngeal \(NP\) Swab](#) (New England Journal of Medicine)
- [IPC Emerging Issues](#)
- [Online Healthcare Worker Self-Assessment Tool](#)
- [Physician & Family Support Program](#) - 1-877-SOS-4MDS (767-4637)
- [Physician Wellness Educational Resources: Well Doc Alberta](#)
- [Spectrum](#): A mobile app customized to deliver local antimicrobial stewardship guidelines, resistance data, dosing information, and AHS COVID-19 related content.
- COVID-19 Questions? Contact your local Zone Emergency Operations Centre (ZEOC):
 - ZEOC.South@ahs.ca
 - ZEOC.Calgary@ahs.ca
 - ZEOC.Central@ahs.ca
 - ZEOC.Edmonton@ahs.ca
 - PCH.ZEOCNorth@ahs.ca

For more information

- Visit the [COVID-19 Healthcare Professional information page](#) on the AHS website for more information or contact AHS.ECC@ahs.ca.
- Additional updates and information are being shared through the [College of Physicians & Surgeons of Alberta \(CPSA\)](#).

This update, provided every Friday, is intended to provide a summary of the key action items, information and decisions for AHS Medical Staff in relation to clinical policies and practices, and for the COVID-19 pandemic response. It is forwarded to physicians' preferred email inbox.

Do you have COVID-19 questions, information, or a physician or team who have gone above and beyond during the pandemic, that you would like to see covered in an upcoming edition of the COVID-19 CMO update? Let us know at CMO@ahs.ca.

Sincerely,

Dr. Francois Belanger

Chief Medical Officer and VP, Quality

Dr. Laura McDougall

Senior Medical Officer of Health

