CMO SMOH Weekly Notice for AHS Medical Staff

May 14, 2021

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- Guidance for the Management of Symptomatic Persons who Received a Viral Vector COVID-19 Vaccine
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Highlighted Resource

- Antimicrobial Management for Adult Patients with COVID-19 Created and maintained by the AHS COVID-19 Therapeutics Working Group, these resources provide recommendations for adult patients 18 years of age and older:
 - Recommendations for Antimicrobial Management of COVID-19 Adult Hospitalized Patients
 - Antimicrobial and Immunomodulatory Therapy in Adult Patients with COVID-19:

New Masking Restrictions Announced

Effective May 13, 2021, any Albertan seeking a medical exemption from mask use due to a verified health condition must have an exemption letter from a physician, nurse practitioner or psychologist.

Masks are a critical public health measure and only certain health conditions exempt Albertans from wearing a mask in indoor, public settings, including:

- Sensory processing disorders
- Developmental delay
- Cognitive impairment
- Mental illnesses including:
 - o anxiety disorders
 - o psychotic disorders
 - o dissociative identity disorder
 - o depressive disorders
- Facial trauma or recent oral maxillofacial surgery
- Contact dermatitis or allergic reactions to mask components

Clinically significant acute respiratory distress

Physicians are asked to use Alberta Health's templated letter if their clinical judgement indicates a patient meets this criteria. For more information and templates, please see the <u>College of Physicians and Surgeons of Alberta webpage</u>.

Guidance for the Management of Symptomatic Persons who Received a Viral Vector COVID-19 Vaccine

<u>This guidance</u> is intended to assist in the diagnosis and management of Vaccine-induced Immune Thrombotic Thrombocytopenia (VITT).

Health practitioners are urged to be on alert for possible cases of thromboembolism, disseminated intravascular coagulopathy (DIC) or cerebral venous sinus thrombosis (CVST) occurring within 4 to 28 days after receiving a viral vector COVID-19 vaccine (AstraZeneca/COVISHIELD or Janssen/Johnson & Johnson), in association with a low platelet count.

Treatment for this condition requires specialized medical attention, and an urgent hematology consult should be initiated if a patient has a clinical presentation compatible with the possibility of thrombosis and thrombocytopenia in the 4 to 28 day period after receiving a viral vector COVID-19 vaccine.

Please review the guidance for advice for patients, when to suspect VITT, symptoms, diagnosing, reporting, clinical work up and treatment.

Geographic Risk Factors

There are several geographic areas within the province with very high case numbers of COVID-19. As a result of this, AHS is taking additional steps to prevent further spread of illness.

A temporary new acute care risk factor has been introduced for assessing patients who live in, or have returned from, a municipality where the active case rate was greater than 1,000 cases per 100,000 population at any point in the last 14 days. Any patient with this new risk factor who is admitted to a hospital either for a scheduled procedure or surgery, through an emergency department visit or urgent care will be placed on contact and droplet precautions for 14 days since their last exposure to the high risk geographic area.

Patients who reside in these areas will still be able to proceed with scheduled or elective surgeries, procedures, and clinical visits with the usual careful evaluation for COVID-19 symptoms and risk factors.

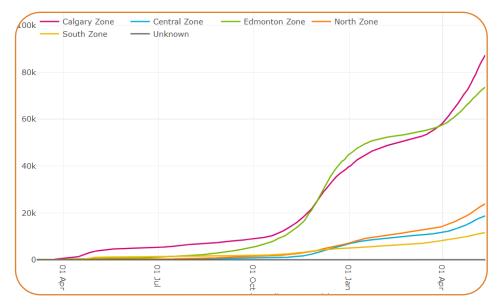
This currently involves:

- The Regional Municipality of Wood Buffalo including the City of Fort McMurray
- Lac La Biche County
- Municipal District of Bighorn No. 8
- County of Warner No. 5

Areas are reassessed regularly as the number of cases change. Updates will be provided here.

Our goal with these added preventative measures is to prevent hospital transmission and outbreaks due to pre-symptomatic COVID-19 infection, and the risk of transmission when the patient is unaware that they are in the early stages of infection. This is an added measure to keep our patients, families and staff safe in our facilities.

Although these areas are high prevalence, COVID-19 case numbers remain high across the province. We encourage you to remain vigilant with wearing proper PPE and adhering to public health quidelines.



Information in image above current as of May 12, 2021.

Scientific Advisory Group Rapid Review: COVID-19 Immunization Strategies

Immunization is a critically important means of protecting yourself, your colleagues, loved ones and the greater community from COVID-19. Guidance for COVID-19 immunization in Canada has generally prioritized people based on a risk of severe outcomes, such as intensive care unit (ICU) admission, or death.

With the arrival of more contagious variants of concern (VOC), Alberta Health Services (AHS) Scientific Advisory Group (SAG) conducted a rapid review to assess whether immunizing people based on how likely they are to catch or pass on COVID-19, rather than individual risk of severe outcomes, may be helpful in pandemic control.

The rapid review found that evidence suggests once many people at high risk of severe outcomes have been immunized against COVID-19, shifting to immunizing people who live or work in areas where COVID-19 transmission is high, can reduce the overall number of infections and reduce severe outcomes.

Additionally, this strategy would help to protect the health care system capacity to provide care for all.

Based on these findings, the SAG committee suggests a strategy of directing more vaccine supply to areas with high levels of COVID-19 transmission for all ages eligible for the vaccine should be strongly considered.

For more information about this report, see the Rapid Review.

MD Culture Shift

MD Culture Shift Newsletter: Issue 03: May 2021.

Physician Wellness Zoom Rooms: On pause now and through the summer.

AHS resources supporting Psychological Health & Safety

- Our People Podcast
- Verna Vlog: Mental Health Week and Health and Safety Week
- <u>Safety Blogs</u> (Insite login required)
- Our People Strategy Webinar & Toolkit (Insite login required)

Equity in Medicine 2021 Virtual Conference: Overcoming Barriers in Medicine

Join a half-day virtual conference to hear from keynote speakers on overcoming barriers in medicine.

Date: June 12 Register: Here

Equity, Diversity and Inclusion (EDI)

Dr. Kim Kelly is hosting a <u>YEG Women in Health Networking</u> event with speaker Dr. Shannon Ruzycki presenting "Equity & Diversity in Research and Research in Equity & Diversity."

The objective of this session is to increase knowledge of EDI research findings to help us move the needle. Dr. Ruzycki's research focuses on equity, diversity and inclusion in the health workforce. She co-chairs the University of Calgary Department of Medicine's Anti-Racism and Equity and Diversity Working Groups.

Date: June 15 **Time**: 7 p.m.

Meeting Registration: Zoom

CMO Physician Conversation Series Save the Date: May 20

May 24-28 is Rural Health Week, and, our next CMO Physician Conversation Series discussion will be focused on rural health care in Alberta.

Date: May 20 Time: 5-6 p.m. MST

Register in advance for this meeting: <u>Here</u>

*After registering, you will receive a confirmation email containing information about joining the meeting.

This session is intended for all physicians working in rural and urban communities, medical students and residents and will feature physicians working in South, Central and North Zones.

- Dr. Kristy Penner, Community Medical Director, Crowsnest Pass, South Zone
- Dr. Jaco Hoffman, Central Zone Associate Zone Medical Director and Facility Medical Director, Olds Hospital and Care Centre, Central Zone
- Dr. Jane Ojedokun, Associate Zone Medical Director of Area 4 and Community Medical Director for Whitecourt, North Zone

We'll cover the following topics:

- What is a typical day like for physicians working in rural and remote areas?
- What should urban physicians know about rural physicians that would help them collaborate more effectively?
- What are the rewards and challenges for physicians working in rural and remote areas?
- How can AHS best support rural and remote physicians?

Following the presentation, there will be time for questions.

May 19 is World Family Doctor Day

First declared by WONCA (<u>World Organization of Family Doctors</u>) in 2010, this annual commemoration acknowledges the outstanding contributions of family doctors in health care systems around the world.

This year's theme, *Building the Future with Family Doctors*, highlights the role that Family Medicine and Primary Care Community (family doctors, nurses, members of the primary care teams) play in our lives.

Three Easy Ways You Can Celebrate with the Alberta College of Family Physicians (ACFP)

- Add World Family Doctor Day (WFDD) to Your Calendar of Events
 Celebrate the progress being made in family medicine and the special contributions of
 primary care teams globally.
 - May 19, 2021 | www.familydocsrock.ca
- 2. Tell a Family Doctor They Rock

Tell a family doctor you know why they rock. Share your story and tag @ABFamDocs in your selfies on Twitter, IG, or FB. On the day of, add the <u>World Family Doctor Day Frame</u> to your Facebook profile.

#FamilyDocsRock #WFDD2021 #WorldFamilyDoctorDay

3. Help spread the word <u>Download the ACFP logo and web banners</u> and share it on your website.

Doctor of the Week - Call for Nominations

Do you know a physician who has gone above and beyond during the pandemic to shape and drive improvements for patients? Perhaps a physician colleague has gone above and beyond to help support others during a difficult day?

Each week, we would like to take a moment to celebrate and thank the amazing physicians working across the province to provide high-quality care to patients, staff and colleagues across the province. If you know someone who deserves to be celebrated, please email CMO@ahs.ca with your suggestion, and a brief description of why.

Highlights from the CEO All Staff Update

COVID-19 Case Status in Alberta

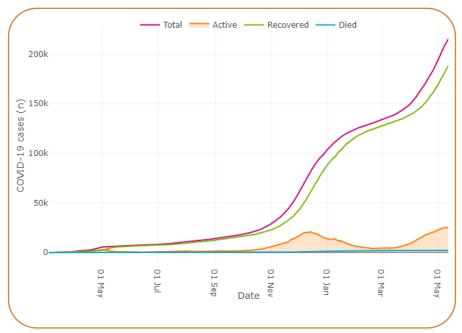
Despite the growth rate of COVID-19 cases levelling off this past week, new records were set for active cases and individuals needing ICU care.

Alberta reported a record of 25,283 active cases of COVID-19 on May 9. However, by May 12, that number had dropped to 24,586. This number, however, is still an increase of 0.8 per cent compared to May 5. Some good news: active case counts decreased in three of AHS' five zones. Calgary Zone reported the most active cases for the 18th week in a row, as well as the largest week-to-week increase, while AHS South Zone reported the largest percentage decrease in active cases, as you can see in the table below:

| | Active Cases | Active Cases | Per cent |
|----------|----------------|---------------|----------|
| | (as of May 12) | (as of May 5) | Change |
| Calgary | 11,584 | 10,639 | +8.9% |
| Edmonton | 5,470 | 5,979 | -8.5% |
| North | 3,618 | 3,616 | +0.1% |
| South | 1,255 | 1,321 | -5.0% |
| Central | 2,647 | 2,899 | -8.7% |
| Unknown | 12 | 43 | -72.1% |

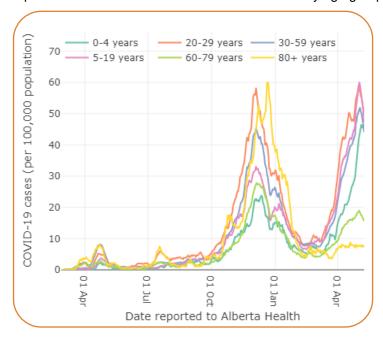
This week, Alberta also reported a decrease in the average number of daily new cases: 1,744 for the seven-day period ending on May 12, compared to 2,064 cases the previous week (April 29 to May 5), a 15.5 per cent decrease. Calgary Zone had the highest total number of new cases this week with 5,812, an average of 830 daily cases and an 11.2 per cent decrease from the previous week (when

6,544 new cases were reported between April 29 and May 5). South Zone reported the biggest decline in new cases this week, going from 762 new cases between April 29 to May 5, to 562 this past week; a 27.2 per cent decrease.



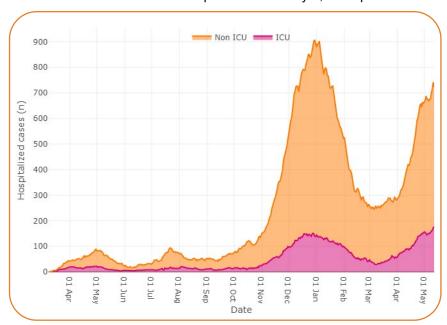
Cases by age group

On May 9, the seven-day rolling average among school-aged children (5-19 years) was 47.29 cases per 100,000 people, compared to 60.14 cases per 100,000 people reported on May 2. Individuals aged 20-29 had the highest rate: 49.14 cases per 100,000. The rate for people 80+ years and those aged 60-79 years, was 7.14 and 15.57 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

For the third consecutive week, Alberta set a new record for individuals being treated in intensive care units (ICUs) for COVID-19. As of May 12, 177 individuals are in ICUs compared to 148 on May 5, a 19.6 per cent increase. A total of 545 individuals were in non-ICU hospital beds on May 12 compared to 527 individuals in non-ICU hospital beds on May 5, a 3.4 per cent increase.



The breakdown of hospitalizations by zone as of May 12 is as follows:

| | Hospitalizations | ICUs |
|----------|------------------|------|
| Calgary | 263 | 61 |
| Edmonton | 255 | 77 |
| North | 95 | 16 |
| Central | 68 | 11 |
| South | 41 | 12 |

Variants of concern

For the seven-day period ending May 12:

- 84.5 per cent of total samples successfully screened was the B.1.1.7 (UK) variant.
- 4.6 per cent of total samples successfully screened was the P.1 (Brazil) variant.
- 0.1 per cent of total samples successfully screened was the B.1.351 (SA) variant.

The remaining percentage 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 12:

- A total of 215,193 cases of COVID-19 have been detected in Alberta and a total of 8,680 individuals have been hospitalized, which amounts to 4.0 individuals for every 100 cases. In all, 188,475 Albertans have recovered from COVID-19.
- 2,132 individuals have passed away from COVID-19, including 30 deaths over the seven-day period from May 6 to 12. 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 4.37 million tests have been conducted and 2.1 million individuals have been tested. From May 6 to May 12, 111,834 COVID-19 tests were completed, an average of 15,976 tests per day. During this period, the daily positivity ranged from 10.33 per cent to 12.78 per cent.

• For the winter school term, AHS has confirmed 8,617 individuals with COVID-19 were present at schools while infectious or acquired the disease in the school setting. A total of 1,344 out of 2,415 schools (55.7 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 3 to May 9 was 1.00 compared to 1.12 the previous week. R values vary by zone. Calgary Zone reported an R value of 1.06, Edmonton Zone an R value of 0.96, and the rest of Alberta an R value of 0.94.

COVID-19 Testing for Healthcare Workers — the Latest Numbers

We continue to update the testing data for healthcare workers in the <u>AHS Healthcare Worker COVID-19 Testing dashboard</u>. These statistics provide the total number of AHS and Alberta Precision Laboratories (APL) employees and physicians tested, including a breakdown of the number of positive tests and those who have been confirmed to have been exposed in the workplace.

As of May 11:

- 76,825 employees (AHS and APL combined) have been tested for COVID-19 and, of those tested, 5,527 (or 7.19 per cent) have tested positive.
- Of the 3,297 employees who have tested positive and whose source of infection has been determined, 540 (or 16.4 per cent) acquired their infection through a workplace exposure. An additional 2,230 employees who have tested positive are still under investigation as to the source of infection.
- 5,310 physicians (AHS and APL combined) have been tested for COVID-19 and, of those tested, 235 (or 4.4 per cent) have tested positive.
- Of the 146 physicians who have tested positive and whose source of infection has been determined, 18 (or 12.3 per cent) acquired their infection through a workplace exposure. An additional 89 physicians who have tested positive are still under investigation as to the source of infection.

For more information, see the AHS Healthcare Worker COVID-19 Testing infographic and dashboard.

COVID-19 Immunization Updates

By the Numbers

As of 8 a.m. today (May 14), more than two million total doses of COVID-19 vaccine have been administered in Alberta. More than 1,356,000 Albertans have received at least one dose of COVID-19 vaccine and more than 312,500 have received both Dose 1 and Dose 2.

Another record-setting day with the launch of 12-and-up bookings

Congratulations to everyone on another record setting day, with more than 157,000 appointments booked on Monday, May 10, when all Albertans ages 12+ became eligible for the COVID-19 vaccine. Good job, everyone!

Reminder to book your first-dose immunization appointment

We strongly encourage all healthcare workers to get the vaccine. The vaccine is important to help protect ourselves, our patients and our communities against COVID-19. Our goal is to have all healthcare workers immunized.

For more information, visit <u>Insite</u>. Thank you to everyone who has booked their appointment and who has been immunized.

Update on AstraZeneca

On Monday, May 11, the Government of Alberta announced that Alberta is holding the remaining supply of AstraZeneca for those who have a contraindication to an mRNA vaccine, and for second doses, recognizing that some Albertans will need a second dose beginning in early June.

All new first-dose appointments, unless there is a contraindication, are being booked with the mRNA vaccines, Pfizer and Moderna.

This means, based on current vaccine supply, Albertans are not currently able to choose which vaccine they receive at an immunization appointment unless they have a contraindication to an mRNA vaccine.

It is important for Albertans to know both Moderna and Pfizer are safe, effective 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 about 95 per cent effective in preventing COVID-19 disease, and they also protect against severe COVID-19 illness, risk of hospitalization and death. These vaccines have similar side effects, with the most common being pain at the injection site, tiredness or headache.

We encourage anyone with a contraindication or allergy to a vaccine ingredient to speak with their healthcare provider before receiving the COVID-19 vaccine.

Verna's Weekly Video Message – COVID-19 Immunization Awareness Campaign

Getting immunized is crucial to making our workplaces safe and healthy for our patients and each other. We know vaccination is one of the most effective ways to protect our health and we strongly encourage everyone to get the vaccine once they are eligible to receive it.

We recognize different people have different feelings and concerns about COVID-19 immunization — and that's OK. But it's important we have the same information. We need to support each other through this process to learn as much as we can to make an informed choice about getting vaccinated.

Joining Verna this week to talk about vaccine hesitancy are:

- Dr. Kristin Klein, Medical Officer of Health, Provincial Population and Public Health.
- Dr. Lynora Saxinger, Physician and Medical Lead, AHS Antimicrobial Stewardship, North, and co-chair of the COVID-19 Scientific Advisory Group.
- Dr. Stephen Tsekrekos, Medical Director, Workplace Health and Safety.

By continuing to build trust, encouraging each other to find 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.

Through our Stick with the Facts. Stick Together campaign, we can create a safe space to support staff and patients who may have questions about COVID-19 immunization. Check out insite.ahs.ca/sticktogether to find out how you can get involved with the campaign.

Mental Wellness Moment — Dealing with COVID-19 Conflict

Within families and friendships, as well as online, there is robust debate about many aspects of the pandemic, especially related to public health measures and COVID-19 vaccines. In the latest Mental Wellness Moment, Dr. Nicholas Mitchell — Provincial Medical Director for Addiction and Mental Health — provides advice on how to engage in such debates without escalating into heated conflicts that could damage relationships or your own mental health.

PPE Question of the Week — Are PPE Guidelines Changing Now That We Have a Vaccine?

In the latest <u>PPE Question of the Week video</u>, Dr. Mark Joffe — Chair of the AHS PPE Task Force — reminds everyone about the importance of continuing to follow PPE guidelines and ensuring meticulous hand hygiene occurs with every patient encounter, even as COVID-19 immunizations roll out.

The PPE Task Force has also created a signage campaign to encourage adherence of proper PPE. You can order the signage package for your site at no cost. To order, site leaders can visit the <u>DATA Communications Management</u> website and enter the username AHSsigns and password signs2019. Click on 'Catalogue' and scroll down on the left side of the page to find 'PPE Make Your First Step.' (order #1203694).

Previous videos in the PPE Question of the Week series are available on the PPE webpage at ahs.ca/covidppe.

Beyond COVID-19

Water Immersion During Labour and Birth Policy and Guideline

The new Water Immersion During Labour and Birth Policy and Guideline are now in effect. The policy and guideline support sites currently offering water immersion practices or considering offering them. In either situation, the documents are intended to ensure families feel safe and supported before, during and after labour.

Physicians and other care providers are invited to use the policy and guideline if they feel competent in supporting water births.

Water immersion will continue to be implemented locally with support available from the Provincial Midwifery Services Program as needed.

View the resources on <u>Insite</u> (login required). Questions? Contact <u>policy@ahs.ca</u> or <u>midwives@ahs.ca</u>.

Canadian Society of Physician Leaders (CSPL) Leadership Award

Congratulations to Dr. Neil Gibson for winning the <u>CSPL Leadership Award</u>. The CSPL presents this award annually to a physician who has made an outstanding contribution to the development and mentorship of medical leaders in the field of health services leadership and management.

Serving for 32 years as a military officer, Dr. Gibson held numerous leadership positions within the Canadian Armed Forces, eventually retiring at the rank of Colonel. Dr. Gibson is currently the Associate Dean, Clinical Faculty at the University of Alberta, and is also a full Clinical Professor of Medicine. His clinical teaching awards indicate the importance he places on preparing the next generation of physicians.

One excerpt from the letters of recommendation:

In my observation of "The Colonel's" leadership style, I characterize him as the rarest of medical leaders: a physician with a consistent "can-do" attitude. I learned from him not to be deterred by perceived organizational barriers, but rather to embrace hidden opportunities. He demonstrates innovation, flexibility, and broadmindedness to evolving medical practice and healthcare system

dynamics. Nevertheless, he is principled and resolute, when required. These insights continue to guide my approach to medical leadership. ~ Gurmeet Singh, MD, Medical Director, Adult ECMO Program. Mazankowski Alberta Heart Institute

Congratulations, Dr. Gibson, on this well-deserved award.

2021 Patient Experience Awards

Four initiatives involving Alberta Health Services (AHS) teams received Patient Experience Awards this week from the Health Quality Council of Alberta (HQCA).

This year's recipients:

- The Patient- and Family-Centred Care team at Stollery Children's Hospital in Edmonton was recognized for facilitating conversations with families of medically complex children to understand how they were uniquely impacted by the COVID-19 restrictions and quarantine, leading to the development of a series of virtual caregiver support sessions. This AHS initiative created a virtual community to help families cope and navigate challenges with supportive peers and providers through the pandemic.
- Two adolescent mental health units at Foothills Medical Centre in Calgary were recognized
 for collaborating with patients, family, staff, and community artists to design and create the
 Hope Hallway. This project, which you can see in this video, transforms the traditional,
 institutionalized feel of the hospital to one that is teen-friendly, hopeful, comforting, and
 engaging.
- The Life Medical Clinic and McLeod River Primary Care Network in Whitecourt are working together to reduce the impact of financial strain on their patients. This is part of an initiative being led by AHS Provincial Population and Public Health in partnership with AHS provincial Primary Health Care and the Alberta Medical Association. Financial strain is one of the most important risk factors for poor health outcomes. The care team implemented a process to identify patients with financial strain and worked with partners to map local agencies that could provide appropriate supports for each patient.
- The medical assistance in dying (MAID) program at AgeCare provides residents with compassionate end-of-life care in a peaceful and supportive space. During the COVID-19 pandemic, AgeCare worked with the MAID navigation team at AHS to continue to accept transfers for MAID by providing a dedicated space for transfers, ensuring the safety and comfort of all involved.

The Patient Experience Awards were established by the HQCA and its Patient and Family Advisory Committee to recognize and spread knowledge about initiatives that improve the patient's overall experience in accessing and receiving healthcare services.

Congratulations to the teams awarded for their outstanding work, and to everyone at AHS who seeks to advance patient- and family-centred care.

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

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



Physical distancing works