

CMO SMOH Notice for AHS Medical Staff

Sept. 17, 2021

We would like to recognize that our work takes place on historical and contemporary Indigenous lands, including the territories of Treaties 6, 7 & 8, and the homeland of the Métis. We also acknowledge the many Indigenous communities that have been forged in urban centres across Alberta.

This week:

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Positive Thoughts to Keep in Mind

We recognize the incredible work, dedication, professionalism and compassion that you have shown and continue to show as we work to treat patients and support the health of Albertans. Unfortunately, this week has seen pressures and emotions continue to mount. The protests that we saw outside some of our facilities can be very disheartening and discouraging. These events have been difficult for all of us, especially our staff who have been directly impacted. We won't tolerate any harassment, bullying, or violence directed towards patients, families, staff and physicians. We'd like to say thanks to our Protective Services teams around the province, who have stepped into heated situations outside some of our hospitals and worked to protect the safety of physicians, staff, patients, families — and even the protesters themselves.

Edmonton physician Dr. Raiyan Chowdhury wrote a [First Person article](#) for CBC, in which he says: "Let the protesters outside jeer and the haters online hate, and we'll meet them with a *Ted Lasso*-like kindness and unbreakable dedication to our patients — vaccinated or not." We recommend you find time to read Dr. Chowdhury's story, which is heartbreaking and yet somehow inspirational as well.

It is worth taking time to reflect on how we are feeling and how we are managing under stress. We need to attend to our own health and well-being to ensure that we can continue to function as individuals, in our families, in our communities, and as a team at work. Supporting each other through listening and checking in is important.

We know you continue to come to work every day to do your best for the people that we serve. The work that you do is critical to the health and well-being of Albertans.

As we implement strategies to increase ICU capacity, unfortunately, this has resulted in a significant reduction in surgical and other important clinical activity. Making these difficult decisions is deeply concerning and is causing moral distress.

Throughout the pandemic, physicians have been facing difficult decisions, every day. The Canadian Medical Association has [an article](#) helping physicians identify when they may be experiencing moral distress, and offers resources for support. We encourage you to read this and share it with your colleagues.

During this difficult time, connect with friends, colleagues and loved ones. If you are struggling and feel you need more support, there are resources available through the [Physician & Family Support Program \(PFSP\)](#).



I (Francois), thank you for your continued hard work, dedication, resilience and ongoing commitment to provide the highest-quality of care to each and every one of your patients. You are making a difference to Albertans every day, and you continue to do it, to show up for Albertans and for your colleagues. I value and appreciate you.

Please know that I am here for you. I welcome any feedback by email to cmo@ahs.ca and am also willing to chat with you.

Thank you.

Common Questions about COVID-19 Immunization

Q: Should I get vaccinated even if I've had COVID-19?

A: Yes. People with previous COVID-19 infection should continue to receive a complete vaccine series at the recommended intervals.

While having had the disease offers some protection against future infection, there's not enough data about that level of protection to know when it tapers off or how protective it is against new variants. Getting fully immunized offers the best protection possible from the virus.

Q: Is there a mandatory waiting period between recovering from COVID-19 and receiving the vaccine?

There is no mandatory waiting period between having COVID-19 illness and being immunized; however, if you develop a SARS-CoV-2 infection or have COVID-19 symptoms, you must wait until you have completed your required isolation period and are feeling better before being immunized.

For more information, see these [frequently asked questions](#).

Mandatory Immunization Policy

The [Immunization of Workers for COVID-19 Policy](#) went into effect on Sept. 14. It requires all employees, medical and midwifery staff, students, volunteers and contracted healthcare providers to be fully immunized for COVID-19 by Oct. 31.

Here is what you need to know:

- It applies to the workforce broadly, including AHS medical staff with privileges in AHS facilities and programs, and AHS midwifery staff.
- Workers will need to provide proof of immunization no later than Oct. 16. This is done by submitting the "[Got My COVID-19 Immunization Form](#)" after their final dose. If you did this prior to September, you need to resubmit on the new form.
- Thank you to the more than 30,000 individuals who have already submitted their Got My COVID-19 Immunization Form. We are very grateful for the exceptional work and dedication of all healthcare workers and their key role in helping keep Albertans safe.
- [Frequently asked questions](#) and [additional resources](#) are available. For more information, contact AHSVaccineTaskForce@ahs.ca.

If you are not an AHS, Alberta Precision Laboratories (APL) or Covenant Health employee and you wish to submit a request for exception under the policy, please review the [exception request form](#) and submit to md.midwife.covidvacc@ahs.ca.

[MD Culture Shift](#)

MD Culture Shift Newsletter: [Issue 06: September 2021](#)

Reminder: Leadership Development

Provincial Medical Affairs is pleased to sponsor the following virtual Physician Leadership Institute (PLI) courses for 2021/2022:

- Coaching for Excellence – Nov. 8-10: 8 a.m.-12 p.m. MST each day
- Leading Change – Dec. 8-9: 9 a.m.-3:30 p.m. MST each day.
- Building and Leading Teams – Jan. 19-20, 2022: 9 a.m.-3:30 p.m. MST each day.
- Leadership Strategies for Sustainable Physician Engagement – Feb. 17 & 24, 2022 (two Thursdays) - Day 1, 9 a.m.-4 p.m. MST and Day 2, 9 a.m.-3:30 p.m. MST.
- Talent Management for Exceptional Leadership - TBA

To register, email: ProvMAProfDevelopment@ahs.ca

[Scientific Advisory Group Rapid Review: Masking Guidance for Healthcare Workers](#)

AHS' Scientific Advisory Group (SAG) conducted a rapid review to explore whether healthcare workers (HCW) get infected with COVID-19 at work at different rates when they wear N95 respirators compared to medical/surgical-type masks. At this time, there is insufficient evidence to support changes to the overarching AHS policies that guide PPE for staff.

Current measures (including current continuous masking recommendations) should be reinforced and supported regardless of HCW vaccination status, given the currently evolving understanding of variants of concern transmission. Currently AHS advises continuous masking with a medical / surgical mask; N95 use is advised in the setting of aerosol generating medical procedures and readily available for HCW conducting point of care assessment.

This [masking mandate](#) will remain in place at all acute care, continuing care and community sites, as well as in corporate and warehouse-type settings. More information on continuous masking can be found on AHS' [website](#).

For more information about this report, see the [Rapid Review](#).

[Doctor of the Week Call for Nominations](#)

Doctor of the Week shows the people, faces and stories of the physicians caring for patients across Alberta Health Services. Physicians for this feature are nominated by their colleagues. Contact cmo@ahs.ca to nominate a physician to be featured here.

Highlights from the CEO All Staff Update

COVID-19 Case Status in Alberta

Our severe capacity challenges have intensified over the past week, as more people are now being treated in ICU than at any time in Alberta Health Services' history. In response, the government announced Wednesday more public health measures aimed at reducing pressures on our hospitals while we're putting out a call for all critical care-trained clinicians.

There is also some heartening news to share: Yesterday (Sept. 16), there were 28,158 doses of vaccine administered across the province, a sharp rise from 9,750 the previous day.

Hospitalizations and ICUs

AHS currently has 322 ICU beds open in Alberta, including 149 additional 'surge' spaces. AHS has opened 49 additional ICU surge spaces in the past seven days.

There are currently 260 patients in ICU, the vast majority of whom are COVID-19 positive. Provincially, ICU capacity — including additional surge beds — is currently at 81 per cent. Without the additional surge spaces, provincial ICU capacity would be 150 per cent.

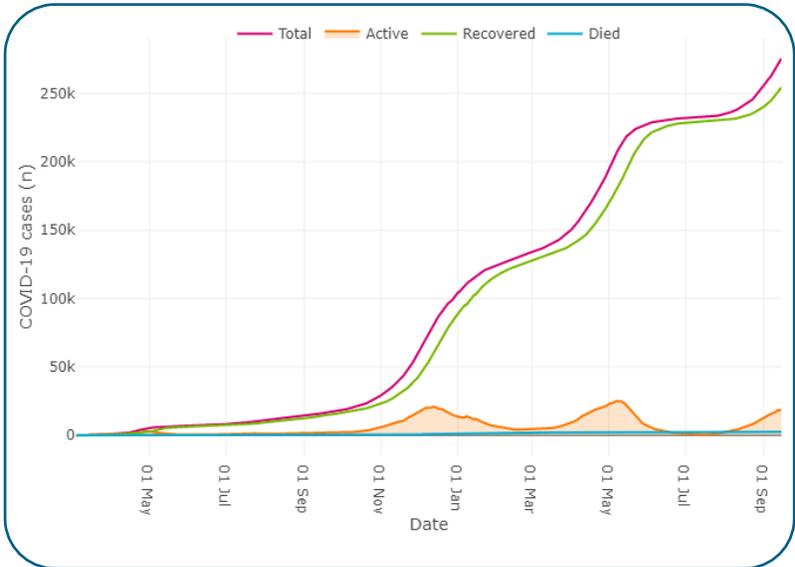
The number of patients in ICU has increased by 13 per cent in the past seven days.

There are currently 911 individuals with COVID-19 in hospital, compared to 555 on Sept. 8, an increase of 64.1 per cent.

New and active cases

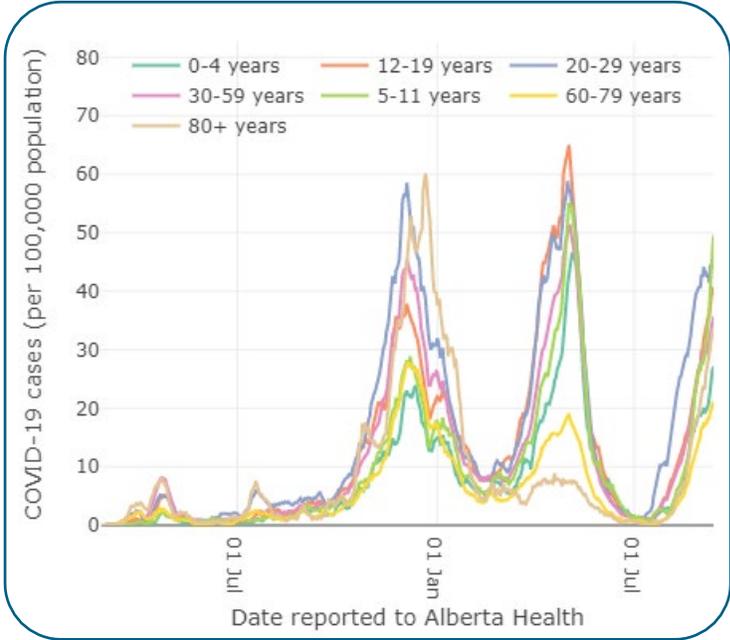
There are currently 19,201 active cases of COVID-19 in Alberta, a 20.2 per cent increase compared to Sept. 8 when there were 15,977 active cases. Today Alberta reported 2,020 new COVID-19 cases; the first time the province has exceeded 2,000 new daily cases since early May.

For the seven-day period ending Sept. 15, there was an average of 1,573 new daily cases of COVID-19, compared to 1,290 for the previous week (Sept. 2-8), a 21.9 per cent increase. The Calgary Zone reported the most new cases over that period, with 3,183, an increase of 25.7 per cent increase over the previous week when 2,533 cases were reported.



Cases by age group

Children ages 5 to 11 — who are currently ineligible for vaccination — now have the highest seven-day rolling average of new daily cases, with 49.6 cases per 100,000 people. A visual representation of trends in cases by age group can be seen in the figure below.



Variants of concern

The table below shows the proportion of active cases that are known variants of concern on Sept. 15 compared to Sept. 8.

COVID-19 Variant	Proportion of active cases (Sept. 15)	Proportion of active cases (Sept. 8)	Difference
Alpha variant	0%	0.1%	-0.1%
Beta variant	0%	0%	0%
Delta variant	60%	78.6%	-18.6%*

Gamma variant	0%	0 %	0%
Overall	60.1%	78.7%	-18.6%*

* The Delta variant is the dominant circulating strain. This decrease is likely not a result of another prominent strain but rather a decrease in strain typing of samples at the lab,

Other notable COVID-19-related information

As of Sept. 15:

- A total of 275,538 cases of COVID-19 have been detected in Alberta and a total of 11,551 individuals have been hospitalized, which amounts to 4.2 individuals for every 100 cases. In all, 254,327 Albertans have recovered from COVID-19.
- 2,505 individuals have passed away from COVID-19, including 71 deaths over the past week. 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 5.3 million tests have been conducted and 2.3 million individuals have been tested. From Sept. 9 to Sept. 16, 97,869 COVID-19 tests were completed, an average of 13,981 tests per day. During this period, the daily positivity ranged from 10.5 per cent to 12.2 per cent.

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 Aug. 30 to Sept. 5 was 1.12, the previously reported value was 1.19. COVID-19 R values are currently only being updated every two weeks.

Alberta Health has not resumed school reporting.

Government Introduces New Public Health Measures

On Wednesday, Sept. 15, the Government of Alberta updated COVID-19 public health measures for gatherings, places of worship, events and a variety of businesses. The measures are aimed at protecting Albertans and easing pressures on the health system.

Measures now in effect:

- Indoor private social gatherings are limited to a single household plus one other household to a maximum of 10 vaccinated people and no restrictions on children under 12. Indoor social gatherings are not permitted for vaccine-eligible people who are unvaccinated.
- Places of worship must limit attendance to one-third of fire code capacity, with mandatory masking and physical distancing between people of different households.
- Masks are mandatory for students in Grades 4 and up, plus staff and teachers in all grades except for schools that implement an alternate COVID-19 safety plan.
- Physical distancing and other measures apply to children’s sport, performance and recreation activities.

Effective Monday (Sept 20):

- Restaurants are limited to outdoor dining, six people per table (one household or two close contacts for those living alone).
- Capacity limits on weddings and funerals. Indoor receptions prohibited.
- Attendance limits and mandatory masking and physical distancing in place for retail, entertainment and recreation facilities.
- No indoor group sport, fitness, performance and recreation classes/activities permitted. One-on-one training and solo activities permitted with three metres physical distancing in place.
- Starting Sept 20, businesses, facilities and events that qualify may implement the Restrictions Exemption Program. These spaces can operate as they normally would.

- Customers will need to provide government-issued proof of vaccination, a medical exemption or proof of a negative, privately purchased COVID-19 test within the past 72 hours.

Those under 12 do not need to provide proof of vaccination or a negative test to enter a participating business.

If a business or service chooses not to require proof of vaccination, it must adhere to the new health measures instead.

More information is available on the [Government of Alberta website](#).

Printable Vaccination Records Coming

Starting on Sept. 19, Albertans will be able to print a copy of their card-sized COVID-19 proof of vaccination or show it on their phone or tablet.

Albertans can view and print this verified immunization health record through [MyHealth Records](#) from any computer, tablet or smartphone.

It is recommended Albertans plan ahead and save their proof of vaccination card on their phone or print it out before the needed date. Due to high traffic volumes, please access MyHealth Records during off peak times.

For instructions on how to sign up to get instant access to your immunization record, visit the [MyHealth Records homepage](#).

On MyHealth Records, you can:

- Print a hard copy of your immunization record.
- Use the MyHealth Records app.

Albertans who need support can contact the MyHealth Records [support line](#) at [1-844-401-4016](tel:1-844-401-4016) from 7 a.m. to 7 p.m. Monday to Friday, and weekends from 9 a.m. to 5 p.m.

If you received your vaccination from a pharmacy or physician's office, you can obtain a copy of your immunization record from that provider. If you received your immunization from an AHS clinic, you can call 811 to request that a copy of your record be mailed to you.

For more information, please refer to the [Proof of Vaccination FAQ](#) on alberta.ca.

AHS Ensures Pandemic Preparedness with Critical Care Triage Protocol

Earlier this year, AHS developed critical care triage protocols (adult and pediatric) as a planned and pre-determined provincewide approach to guide our response should the demand for life-sustaining critical care support become greater than the available resources either during the current COVID-19 pandemic, future pandemics, or other disasters. Resources can range from beds, ventilators, life-saving equipment, healthcare workers and medicines.

AHS is not currently implementing the critical care triage protocol, nor has the protocol been enacted during the COVID-19 pandemic. AHS is educating clinicians on its use and implementation given the rising numbers of Albertans with COVID-19 and the increasing number of Albertans requiring critical care.

The pressure on our ICUs is severe, and AHS is doing all it can to increase capacity so that all patients needing critical care will receive it. Given the significant pressure on our ICUs, we are providing education and training on the application of the protocol which is posted on the [critical care triage webpage](#).

The triage protocol would only be activated when all available resources for critical care have been utilized and all other mitigations have been exhausted.

It is important to be ready and AHS is taking steps to ensure we are prepared today and for the future. Critical care, emergency department, surgeons, COVID-19 ward physicians and staff will receive additional information about training sessions shortly. Education and resources are available on the [critical care triage protocol Insite page](#) and will continue to be updated.

Led and operationalized by highly-trained critical care physicians and staff, the protocols ensure a fair and equitable process is applied to all Albertans. Vaccine status does not impact access to critical care in the event of enacting the protocol. AHS values the lives of all Albertans and follows Canadian standards for healthcare to provide non-judgmental healthcare to all who are in need. AHS critical care triage protocol applies to all patients considered for ICU admission.

For more information, please see these [frequently asked questions](#).

Updated Acute Care Designated Support & Visitation Access Takes Effect Monday

As COVID-19 hospitalizations across the province rise and sites report capacity challenges, AHS has made the difficult decision to reduce family/designated support and visitation access at this time. We know the importance of family presence for patients and staff, and we understand this reduction in access is not ideal. We thank you for all you are doing, and continue to do, to support family presence during this difficult time.

The following applies for designated support person and visitor access effective Monday (Sept. 20):

- Inpatient services — Two designated support persons can be identified; however, only one at a time can be on site with the patient unless alternate arrangements have been made with the service area (e.g., personal support worker or care provider), or if requested by the service area.
- Maternity — Two designated support persons can be identified and be on-site with the patient if physical distancing can be maintained. One additional designated support person (for the infant) will be considered in cases of adoption/surrogacy if physical distancing permits.
- Emergency and urgent care — one designated support person if required to support the care of the patient and physical distancing from others (not from their immediate household) must be able to be maintained. Seniors, minors and patients with mobility and/or cognitive challenges should be given priority to have their designated support person remain with them in-person.
- End-of-life — Two designated support persons can be identified and be on-site with the patient.
- Pediatric inpatient and ambulatory — Two designated support persons can be identified and are welcome to be present with the patient at the same time.
- Ambulatory — One designated support person only if masking and physical distancing from others, not in their immediate household, can be maintained; two designated support persons when pre-arranged with the clinic area and in situations involving:
 - The need for assisting the patient and staff with patient care.
 - End-of-life care or goals-of-care designation discussions.
 - Significant diagnosis/change in medical status leading to poor prognosis.
 - Behaviour challenges requiring two caregivers.
 - Medical or equipment needs requiring two caregivers.
 - Involvement of social services.
 - When requested by the care team.
- Gifts, food and/or flowers — Designated support persons and visitors should check with the service area before bringing in gifts, food and/or flowers to confirm what is appropriate for the unit and how to bring items safely. Delivery services cannot bring gifts, food and flowers to patients or drop them off at site entrances.

- Pediatrics — Due to the increased prevalence and spread of COVID-19 variants, sibling visitation for inpatients is temporarily restricted to monthly visits for long-stay patients (admitted for a minimum of 30 days) and for patients who are at end of life. Sibling visitation must be approved by site command post and follow guidance from Infection Prevention and Control. An adult must accompany sibling(s) at all times if they are under the age of 14. Sibling(s) can no longer accompany a patient to an ambulatory appointment. Exceptional circumstances for sibling support may be considered through site command post.
- Volunteers — AHS volunteers are recognized as vital members of the AHS team and can support patients in addition to designated support persons and visitors.
- Designated support persons are strongly recommended to be fully immunized, and physically and mentally able to assist the patient and staff with patient care.
- Access for visitors, which is anyone not identified as a designated support person, continues to be limited to individuals with a scheduled appointment to see a patient who is at end of life, and outdoor visits.

Sites and service areas that have determined a need to restrict designated support persons and visitor access further than this guidance due to safety concerns (e.g. outbreaks, limited space preventing safe physical distancing, etc.) MUST follow the process outlined in Section 4.0 of the AHS COVID-19 [designated family/support access and visitation in acute care, ambulatory and emergency sites directive HCS-275](#).

The updated guidance is available on [Insite](#) and [ahs.ca/visitation](#).

Weekly Video Message: A Discussion on Vaccination

Last week, we addressed some questions about our [immunization policy](#) and touched a bit on vaccine hesitancy. Today, guest host Sean Chilton continues that discussion, as we know it's on the mind of many as of late.

Immunization against COVID-19 is the most effective means to prevent its spread, prevent outbreaks in our facilities, preserve our workforce capacity to support the healthcare system, and protect our workers, patients and visitors.

While COVID-19 vaccines have been proven safe and effective, many Albertans, including some of our staff and physicians, still have questions. Joining Sean to [answer some of those questions and discuss vaccine hesitancy](#) are:

- Dr. Cora Constantinescu, Pediatric Infectious Disease, Clinical Assistant Professor, University of Calgary
- Dr. Mark Joffe, Vice President and Medical Director, Cancer Care Alberta, Clinical Support Services and Provincial Clinical Excellence

Find answers to commonly asked questions about vaccine safety and effectiveness on the COVID-19 Immunization [Insite](#) page. You can book your COVID-19 immunization appointment through [ahs.ca/vaccine](#).

COVID-19 Testing for Healthcare Workers

Testing data for healthcare workers is reported every two weeks and will return next week.

Beyond COVID-19

Today, Sept. 17, is World Patient Safety Day

Today is [World Patient Safety Day](#), and AHS is pleased to participate.

World Patient Safety day was established by the World Health Assembly to increase public awareness and engagement, enhance understanding of patient safety risks and create a call to action

to promote patient safety. Whether you are delivering care on the frontlines, or working in a supporting role across AHS, we are all responsible for keeping our patients and families safe.

Each year, in celebration of World Patient Safety Day, a new theme is selected to raise awareness on a priority patient safety area where action is needed to reduce avoidable harm in health care. This year's theme is Safe Maternal and Newborn Care.

Share World Patient Safety Day messages on your social media channels – let's get #PatientSafety, #WorldPatientSafetyDay and #BuildingaSaferSystem trending around the world.

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.
- Additional updates and information are being shared through the [College of Physicians & Surgeons of Alberta \(CPSA\)](#).

This update 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 Vice President, Quality

Dr. Laura McDougall
Senior Medical Officer of Health

