

CMO SMOH Notice for AHS Medical Staff

October 8, 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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Now is the time to Submit Your Proof of Immunization for COVID-19

All physicians, nurse practitioners, medical and midwifery staff, students, volunteers and contracted healthcare providers must be fully immunized by Oct. 31, 2021, to comply with the [Immunization of Workers for COVID-19 Policy](#).

The policy applies to the workforce broadly, including AHS medical staff with privileges in AHS facilities and programs, and AHS midwifery staff.

You must receive the final dose of your vaccine series no later than Oct. 16, 2021, to be considered fully immunized by Oct. 31, 2021. It's essential to ensure the safety of our people, patients and communities. Healthcare workers have an [ethical and professional](#) responsibility to protect others. Immunization helps us meet this standard.

If you are fully immunized, please don't wait until the Oct. 16, 2021, deadline to submit your proof of immunization, as this information is needed for planning purposes.

See the [Got My COVID-19 Immunization Form](#) for instructions on how to submit your record today.

Please note:

- **If you are both an employee of AHS and AHS Medical Staff, please submit the form twice: once noting your employee number and once without, but including your CPSA number.**

- If you submitted the form before the policy was announced on Sept. 14, you need to re-submit using the new form issued the day the policy came into effect.

Except where a [workplace accommodation](#) is approved, those who are not fully immunized by Oct. 31, 2021, will be placed on an unpaid leave of absence.

If you are not an AHS, Alberta Precision Laboratories 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.

The AHS [staff FAQ](#) is available for more information. Additional supports and resources can be found on [Insite](#). If you have questions, contact AHSVaccineTaskForce@ahs.ca.

The CPSA also has the following resources for guidance on exemption requests for patients' vaccination and mask use:

- [Guidance for physicians: requests for COVID-19 vaccination exemptions](#)
- [Patient FAQ: Exemption Requests for Vaccination](#)
- [FAQ: Mask Use Exemption Letters](#)
- [Patient FAQ: Exemption Requests for Mandatory Masking](#)

Support for Physicians

If you are struggling and feel you need support, there are resources available through the [Physician & Family Support Program \(PFSP\)](#).



I (Francois) welcome any feedback by email to cmo@ahs.ca, and am always open to a chat.

Common Questions about COVID-19 Immunization

Q: Why is this policy necessary when we have PPE and other safety measures in place?

A: While PPE used diligently is highly effective in preventing virus transmission, there is always the potential for equipment failure and human error. Unfortunately, a large portion of the healthcare worker cases determined to be occupationally acquired are attributable to these causes.

Additionally, vaccines are an important tool within a larger system of measures – the strongest line of defense against the transmission of COVID-19 is immunization in conjunction with appropriate use of PPE, hand hygiene, physical distancing and other measures.

Q: Why isn't rapid testing an alternative to immunization?

A: There are significant safety and efficacy concerns with rapid testing. Current rapid testing technology is designed for those experiencing symptoms, which creates a large risk of false positives (up to 30 per cent), and this could lead to workers being unnecessarily restricted from work. The occurrence of false negatives is even more significant (reported as high as up to 50 per cent) where workers may be entering care environments infected with COVID-19.

New Sessions Added – Mandatory Vaccination: An Ethics Perspective

Due to growing demand, the Clinical Ethics Service is offering more live sessions for staff to learn about the ethics of mandatory vaccination.

The session sheds light on how healthcare workers have additional obligations, how there will be times when prevention of harm to others can justify curtailing individual liberties, and how those liberties should be curtailed as little as possible when trying to achieve public health goals.

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|-----------------------|--|
| Tues, Oct. 12 | 10 a.m. to 11 a.m. (Edmonton Zone)
Zoom Meeting (or call in by phone 1 587 328 1099 Meeting ID: 984 6758 4999, passcode: 879213) |
| Wed, Oct. 13 | 7 a.m. to 8 a.m. (All zones)
Zoom Meeting (call in by phone 1 587 328 1099 Meeting ID: 979 8995 6422, passcode: 503864) |
| | 11 a.m. to noon (Calgary Zone)
Zoom Meeting (call in by phone 1 587 328 1099 Meeting ID: 954 8795 1036, passcode: 316905) |
| Thurs, Oct. 14 | 9 a.m. to 10 a.m. (South Zone)
Zoom Meeting (call in by phone 1 587 328 1099 Meeting ID: 915 4812 6999, passcode: 042489) |
| | 5 p.m. to 6 p.m. (All zones)
Zoom Meeting (call in by phone 1 587 328 1099 Meeting ID: 943 0572 8996, passcode: 890573) |

If you can't make the sessions, a recording has been posted on the [AHS website](#) for anyone interested. The Clinical Ethics Service also authored a guide to help us [navigate ethical challenges in the COVID-19 pandemic](#). If you have questions, contact clinicaethics@ahs.ca.

Verna's Weekly Video Message – Spotlight on Protective Services

[Protective Services](#) is an important part of our care team, dedicated to ensuring we can deliver safe, quality, patient- and family-centered care to Albertans. During the pandemic, their role has become even more important.

As you may have heard, and some of you experienced, many of our front-line teams are facing harassment from people who do not believe the COVID-19 pandemic is real. They fail or refuse to comprehend the realities AHS staff and physicians are experiencing every day. This harassment is

reprehensible and unsettling for all of us, and Protective Services has played a crucial role in responding to these incidents.

Protective Services has also created a new role for safety ambassadors, who are responsible for screening, greeting, wayfinding and educating visitors on current AHS visitation policies and COVID-19-related expectations or policies. And more recently, they were instrumental in keeping our people and patients safe during protests at our facilities.

We understand how challenging these protests were for some of our staff, and continue to be grateful for the support of Protective Services, who help guide us through these situations and ensure safety for all.

Joining Verna to tell us more about their role during the pandemic are:

- Simon Boutros, Site Manager of Protective Services for the Royal Alexandra Hospital and Glenrose Rehabilitation Hospital.
- Joseph Dickson, Protective Services Team Lead at the Rockyview General Hospital.
- Jerry Scott, Chief Protective Services Officer.

[Watch the conversation here.](#)

It is important to note that those individuals who are abusive represent only a small percentage of the hundreds of positive interactions that Protective Services has with patients and families every day.

No Change to Designated Support, Visitation Access for Thanksgiving

As we approach Thanksgiving weekend, many patients and families will want to connect in-person on- and off-site. However, given the current rate of COVID-19 transmission, the following applies:

- Off-site passes are not recommended for the Thanksgiving weekend unless essential to the patient's care plan. This includes day and overnight passes at any AHS acute care facility.
- If a pass is essential to support a patient's care plan, the care team must weigh the risks and benefits with the patient before the decision is made. Passes will not be considered strictly for the purposes of social visitation during Thanksgiving. Impacts include exposure to COVID-19 due to high rates of community transmission and the potential need to quarantine upon returning to the facility.
- Review AHS' [Thanksgiving weekend FAQ](#) for more information. This FAQ is written to be shared with patients and families.

Please refer to AHS' [guidance document](#) for more information on outdoor access and patient passes.

Highlights from the CEO All Staff Update

COVID-19 Status

ICU Capacity Update

As of around noon today (Oct. 8), we have 374 ICU beds open in Alberta, including 201 additional spaces (a 116 per cent increase over our baseline of 173). This is unchanged from last week.

On a daily and even hourly basis, we are monitoring our ICU numbers and hospital admissions. Because of the incredible efforts of teams across the province, we have not needed to implement the critical care triage protocol. Any patient who requires mechanical ventilation is currently able to receive it. We are doing all we can to avoid implementing the triage in our ICUs.

The Executive Leadership Team has decided **not** to activate pediatric triage should AHS reach the point of activating the critical care triage protocol. This is a shift in our approach that we wanted to update for all physicians and staff.

Again, triage will only be implemented if all efforts to increase ICU capacity are exhausted – and that has not happened yet.

As of midday today, there were 290 patients in ICU, 250 of whom were COVID-19 positive. Nearly 90 per cent of all COVID-19-positive patients in our ICUs are either unvaccinated or partially vaccinated (with only the first of the two-dose series administered).

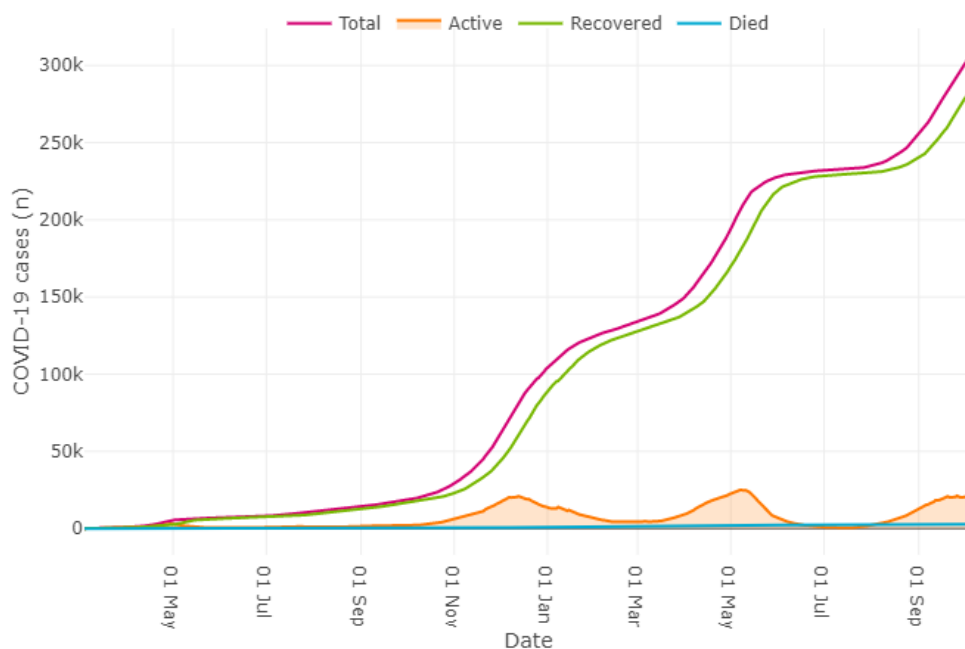
Provincially, ICU capacity (including additional surge beds) is currently at 78 per cent. Without the additional surge spaces, provincial ICU capacity would be 168 per cent.

The number of patients in ICU has decreased by 8.2 per cent compared to one week ago. There would be more people in our ICUs if not for the sobering reality that many patients have passed away. Over the past seven days, 97 Albertans with COVID-19 have died. We extend our condolences to the families of these individuals, and to all who have lost loved ones from any cause during this time.

New and Active Cases

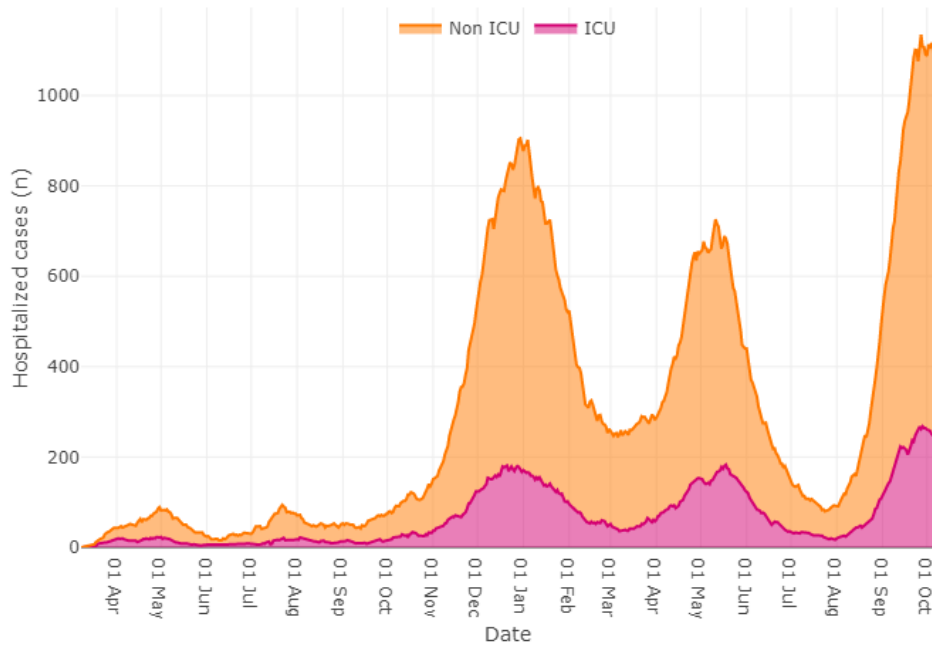
There are currently 17,839 active cases of COVID-19 in Alberta, an 11.7 per cent decrease compared to Oct. 1 when there were 20,215 active cases.

For the seven-day period ending Oct. 6, there was an average of 1,275 new daily cases of COVID-19, compared to 1,646 for the previous week (Sept. 23-29), a 22.5 per cent decrease. This week, all zones reported decreases in the number of new cases per day, ranging from a 15.3 per cent decrease in the Calgary Zone to a 30.8 per cent decrease in the Edmonton Zone. Over the past week, the Calgary Zone reported the highest total number of new cases with 2,244, compared to 2,651 new cases the previous week, a 15.3 per cent decrease.



Hospitalizations

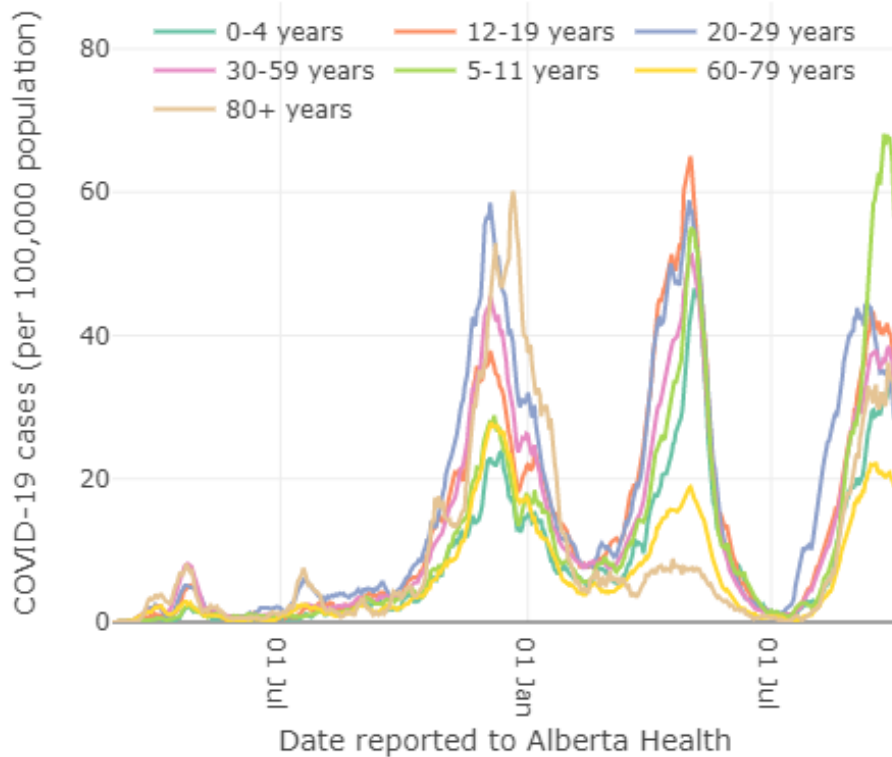
The number of individuals in non-ICU hospital beds with COVID-19 remained stable over the past week: 846 individuals on Oct. 6 compared to 843 on Sept. 29.



Cases by age group

As of Oct. 3, children ages five to 11 — who are currently ineligible to receive a COVID-19 vaccine — had the highest seven-day rolling average of new daily COVID-19 cases, with 52 cases per 100,000 children. Albertans ages 12 to 19 had the second-highest rate with 30.3 cases per 100,000 people.

Trends in COVID-19 cases by age group can be seen in the figure below.



Variants of Concern

The lab is still utilizing targeted screening of positive samples for strain-typing. From Sept. 28 to Oct. 4, the average proportion of positive samples that were strain-typed was 45 per cent. Of those strain-typed, the rolling average was 99.9 per cent Delta variant. Strain-typing takes a number of days and these numbers may change as lab data becomes available.

Other notable COVID-19-related information:

- As of Oct. 6, a total of 307,019 cases of COVID-19 have been detected in Alberta and a total of 13,286 individuals have been hospitalized, which amounts to 4.3 individuals for every 100 cases. In all, 285,794 Albertans have recovered from COVID-19.
- From Sept. 30 to Oct. 6, 94,178 COVID-19 tests were completed, an average of 13,454 tests per day. During this period, the daily positivity ranged from 8.1 per cent to 11.2 per cent. As of Oct. 6, a total of 5.6 million tests have been conducted and 2.4 million individuals have been tested.
- 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 R value is updated every two weeks. From Sept. 27 to Oct. 3, the provincewide R value was 0.92 and the previously reported value was 1.04.

COVID-19 Immunization Update

Eligibility expands for additional COVID-19 vaccine doses

Eligibility for third doses of the COVID-19 vaccine has expanded to include Albertans age 75 and older (born in 1946 or before) and First Nations, Inuit and Métis people age 65 and older (born in 1956 or before).

These newly eligible populations can book a third dose at least six months after their second dose. Appointments can be booked [online](#) at AHS clinics, participating pharmacies and physician clinics, or by calling Health Link at 811. COVID-19 vaccines are also available by walk-in at participating [clinics](#) and pharmacies. Individuals aged 65 and older who live on a First Nations reserve will be able to access third doses through local public health clinics on-reserve.

Those deemed ineligible due to age, or six months have not yet passed since receiving their second dose, are asked to re-book when eligible.

In addition to these newly eligible populations, third doses continue to be available for seniors living in congregate care, for immunocompromised individuals 12 years of age and older with specific conditions, and for travellers going to jurisdictions where Covishield/AstraZeneca or mixed doses are not recognized.

For more information on eligibility, go to alberta.ca/vaccine.

Update on additional COVID-19 vaccine doses for healthcare workers

We've received questions about third doses shots for healthcare workers. Alberta Health continues to follow recommendations from the Alberta Advisory Committee on Immunization and the National Advisory Committee on Immunization.

Current evidence shows two doses of vaccine provide good protection against severe outcomes for all those younger than 75 years old in the general population. At this time, the provincial committee has only recommended adding third doses for this older group and for First Nations, Inuit and Métis people age 65 and older. No decisions have been made on expanding third doses to healthcare workers. We will continue to keep you updated on Alberta Health decisions in this area.

COVID-19 vaccines and fertility

There is no evidence that COVID-19 vaccines cause fertility problems. Studies evaluating male and female fertility metrics after COVID-19 immunization have not identified any harms to reproductive health.

For females, research shows the COVID-19 vaccine is safe for those who are trying to get pregnant and does not increase the risk of miscarriage.

No evidence shows any vaccines, including COVID-19 vaccines, cause fertility problems in males. A [recent small study of 45 healthy men](#) who received an mRNA COVID-19 vaccine (i.e., Pfizer-BioNTech or Moderna) looked at sperm characteristics, such as quantity and movement, before and after vaccination. Researchers found no significant changes in these sperm characteristics after vaccination.

Although fever from illness has been associated with a short-term decrease in sperm production in healthy men, there is no current evidence fever after COVID-19 vaccination affects sperm production. Fever can be a side effect of COVID-19 vaccination, as well as a common symptom of COVID-19.

The COVID-19 vaccines are safe and effective, and prevent serious illness from COVID-19.

For reliable, evidence-based information, refer to the [Alberta COVID-19 Immunization in Pregnancy Factsheet for Practitioners](#) and vaccine and fertility information from the [Centers for Disease Control and Prevention](#).

Reminder: Get \$100 if you receive your first or second dose by Oct. 14

If you receive your first or second dose of an approved COVID-19 vaccine between Sept. 3 and Oct. 14, you may be eligible to receive a \$100 debit card. After vaccination, register online at alberta.ca/VaccineDebitCard.

Changes to School Outbreak Reporting, Contact Notification

This past Tuesday (Oct. 5), the province implemented further measures to protect students, parents, teachers and staff during the fourth wave of the pandemic.

[Public reporting](#) of COVID-19 cases in schools resumed this week and will include the name of each school with at least two COVID-19 cases. An outbreak investigation will be completed by AHS when 10 or more COVID-19 cases, infectious while at school, are recorded within a 14-day period.

Starting Oct. 12, parents will be informed if their child may have been exposed to a COVID-19 case who was infectious while at school. On an interim basis, school authorities will determine close contacts for students in schools using criteria provided by AHS and will notify families of close contacts in a school setting only.

AHS will take over the lead on contact notification in schools within the next several weeks. Once AHS-led contact notification is in place, parents will be able to check an online map to view alerts and outbreaks at schools.

Students in kindergarten to Grade 6 will shift to learning at home if there are three or more students, teachers or staff who were infectious in the class in a five-day period. Families will be asked to avoid other public places, monitor for symptoms and get tested if the student becomes symptomatic but will not be required to quarantine.

The Government of Alberta will be offering a targeted rapid testing program for kindergarten to Grade 6 schools experiencing outbreaks, as vaccines are not yet available to this age group.

Tests will initially be provided for distribution to parents and staff starting in late October, and will begin with schools that are on outbreak status with 10 or more cases of COVID-19 who were infectious while in school over a 14-day period. Rapid testing will be voluntary and tests will be administered at home by parents as a screening tool only for students who are asymptomatic.

New Outdoor Gathering Restrictions

Outdoor private social gatherings are now limited to a maximum of 20 people, with two-metre physical distancing between households at all times. This is a decrease from the previous limit of 200 attendees. This new measure has been implemented to reduce the spread of COVID-19. All other public health measures remain in place at this time. For more information, visit alberta.ca/covid19.

Canadian Armed Forces Land in Edmonton

This past Wednesday (Oct. 6), eight Canadian Armed Forces (CAF) critical care nursing officers and a CAF senior nursing officer arrived at the Royal Alexandra Hospital for an orientation session with AHS staff. By the afternoon, four of the military nurses were paired with a buddy for their first shift on the intensive care unit, with the remaining four providing immediate patient care yesterday (Oct. 7). The critical care nurses, deployed from Ontario and Nova Scotia, have been brought in to help alleviate pressure on a critical care unit at overcapacity due to COVID-19 patients.



Fort McMurray Prepares for Arrival of Newfoundland Healthcare Team

The Northern Lights Regional Health Centre has raised the Newfoundland and Labrador flag in anticipation for the arrival of a healthcare team from the Atlantic province. A team of seven healthcare workers — nurses, physicians and a nurse practitioner — is expected to arrive this weekend in Fort McMurray and will help with staffing pressures and increasing capacity at the hospital. Their arrival will enable the Northern Lights Regional Health Centre to increase ICU capacity from eight ICU beds and one overflow bed to 10 ICU beds and one overflow bed.

MD Culture Shift

MD Culture Shift Newsletter: [October edition](#)

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

Doctor of the Week

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.

Beyond COVID-19

The Patient as Content: A closer look at sharing patient stories on social media

The COVID-19 pandemic has moved physicians to the forefront of the cultural mainstream. As the public craves information on the pandemic, many physicians have seen their social media following grow substantially. This article from Healthy Debate takes a closer look at sharing patient stories on social media and the impact it can have on patient trust and the doctor-patient relationship.

Read more [here](#).

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.

Wrapping Up – Let's Celebrate Thanksgiving Safely

It's difficult to believe that we're heading into another long weekend, and a Thanksgiving weekend, while still dealing with very high cases of COVID-19.

Last year there was a spike in cases after Thanksgiving, largely caused by people coming together to mark the holiday. This is understandable. We yearn for human contact, particularly during this difficult time when case numbers are so high and necessary restrictions are in place.

We all need to ensure this doesn't happen this year. As you're surely aware, we do not have the capacity to handle another significant spike in cases. If you have a chance to celebrate Thanksgiving this year, please follow the public health restrictions, limit contact with people outside of your household, don't socialize if you are feeling unwell and wear a mask. And please encourage others to do so, too.

We have made some progress in reducing pressure on our healthcare system but that was not without a price. We thank all of you for your sacrifices. Let's make Thanksgiving a safe holiday and let's all continue to support one another.

With enduring gratitude and appreciation,

Dr. Francois Belanger

Chief Medical Officer and Vice President, Quality

Dr. Laura McDougall

Senior Medical Officer of Health

