

CMO SMOH Notice for AHS Medical Staff

November 5, 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:

- Support for Physicians
- MD Culture Shift
- Provide Your Proof of Immunization
- University of Calgary COVID Corner: Mental Health in the Pandemic: Early Detection and Intervention
- Scientific Advisory Group Rapid Review: Post-COVID-19 Vaccination Transmission - Updated
- Doctor of the Week: Dr. Kelly Burak
- Highlights from the CEO All Staff Update
 - COVID-19 Case Status in Alberta
 - COVID-19 Immunization Update
 - Influenza Immunization Update
 - Verna's Weekly Message: the World of Allied Health
 - Safe Health Environments Team Responds to 100K Service Requests
- Beyond COVID-19
 - New Health Information Resource Library Now Available
 - Join a Special Practice Wise Session for Allied Health Week
- Additional Resources for Physicians

Support for Physicians

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



MD Culture Shift

Physician Wellness

Moral distress is a psychological response to an experience of moral conflict or moral constraint, which is especially likely to occur during public health emergencies and in other situations when there are extreme resource limitations affecting patient care and the safety of health care workers. (From the CMA document: COVID-19 and Moral Distress).

MD Culture Shift is looking for your help to proactively identify physicians on your teams who may be at an increased risk of experiencing moral distress, with a focus on providing emotional support. Five of the highest-risk groups currently identified include:

- 1) Emergency physicians
- 2) ICU physicians
- 3) STARS physicians,
- 4) Public Health physicians, and
- 5) Physicians working in COVID-19 wards.

However, during this time, all physicians may be at risk of moral distress.

The [Physician & Family Support Program \(PFSP\)](#) continues to offer services on an individual basis by calling the assistance line at 1-877-767-4637.

The Physician & Family Support Program

New: The PFSP is offering small group sessions with a qualified therapist. A group would consist of six to 12 physicians (e.g., from the same team or department) with a qualified therapist. Sessions could be virtual or in-person. Physician leaders interested in this option for their teams should call the PFSP assistance line at 1-877-767-4637 for further discussion.

Well Doc Alberta

New: Well Doc Alberta is offering an educational session of approximately 60 minutes in length. Questions about or requests for the session are submitted by the physician leader via email to welldocalberta@ucalgary.ca.

Before organizing an educational or small group session, we suggest that leaders communicate with their teams to provide direct support and to gauge interest in attending a session. We recognize that many physicians are experiencing fatigue and burnout and may not have the capacity for another time commitment.

Some additional resources:

- [Moral Distress](#) (Insite login required), AHS Change the Conversation resource
- [The Long Shadow of Covid](#), Well Doc Alberta
- [The Repair of Moral Injury](#), Cleveringa Dallaire [Critical Conversation Series](#)
- [Covid-19 and Moral Distress](#), Canadian Medical Association
- [Pandemic Wellness Toolkit](#), Canadian Medical Association

MD Culture Shift Events

- CMA Wellness Connection November Series
 - [Mindful Parenting - Getting Home Life Organized](#): Nov. 9, 12 p.m.
 - [Compassion Rounds - Blue Zones](#): Nov. 11, 7 a.m.
 - [Preventing and Overcoming Burnout - Bringing Back Social Connection](#): Nov. 18, 12 p.m.
- MST: MD Culture Shift Community of Practice (COP) Nov. 24: 7-8:30 p.m.
 - [Zoom link](#)
 - Passcode: 603079

This session will be focused on an introduction to the portfolio of diversity, wellness and leadership development with an introduction to trauma informed leadership. The additional topics will be determined by you, the leaders (formal and informal), in AHS who have an interest in shifting culture. These topics may include wellness initiatives, anti-racism initiatives, Equity, Diversity, and Inclusion, sense of belonging, psychological safety, anti-bullying, and metrics of culture.

MD Culture Shift Resources

- Check out our latest **MD Culture Shift newsletter** ([October edition](#))

Provide Your Proof of Immunization, If You Haven't Already

Thank you to the many of you who have chosen to be fully immunized and who have already submitted your proof of immunization. To date, more than 95 per cent of AHS and APL staff and 97 per cent of physicians have confirmed their full immunization status, as well as 98 per cent of ICU staff. Thank you for leading by example and for being there for your colleagues and patients. Your commitment to protecting our most vulnerable people is greatly appreciated.

While the response has been high, we would like to see everyone fully protected. If you haven't yet, now is the time to confirm your full immunization status or book appointments. It's not too late to get immunized. You have **until Nov. 15** to get your proof of immunization in, by using the [Got My COVID-19 Immunization Form](#) to submit. If you need more information about the policy, see the latest staff and leader FAQ [here](#).

As a reminder, a booster shot is not required to be considered fully immunized for the purpose of the AHS' Immunization of Workers for COVID 19 Policy, which is in alignment with Alberta Health's guidance at this time. You do not need to re-submit the Got my COVID-19 Immunization Form after receiving a booster.

University of Calgary COVID Corner: Mental Health in the Pandemic: Early Detection and Intervention

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

This next session, *Mental Health in the Pandemic: Early Detection and Intervention*, will:

- Describe the impact of the pandemic on mental health presentation in children and adolescents
- Recognize the importance of early screening and management of mental health disorders in children and adolescents
- Describe the impact of the pandemic on opioid and alcohol substance use disorders in the Alberta adult population
- Summarize key clinical tools and resources available for supporting mental health of patients and families

Date: Nov. 10

Time: 7-9 p.m. MST

For more information, including registration, visit the [website](#).

Scientific Advisory Group Rapid Review: Post-COVID-19 Vaccination Transmission - Updated

AHS Scientific Advisory Group (SAG) conducted a rapid review to explore and summarize scientific research about COVID-19 transmission following immunization.

The SAG found:

- All of the available vaccines have been highly protective against severe COVID-19.
- The risk of catching the virus, and either getting sick or just carrying the virus without symptoms, is much lower in immunized people than in unimmunized people.
- For people who do test positive without symptoms, the amount of virus appears to be lower in vaccinated persons (compared with unvaccinated), so asymptomatic people who are vaccinated may be less likely to transmit to others than asymptomatic unvaccinated people.

- Studies of households where one member is immunized and the others are unimmunized show that the unimmunized person's risk of getting COVID-19 is lower, starting from two weeks after the first dose of their housemate, and was reduced even further after their housemate's second dose of vaccine.

While vaccination has been shown to reduce transmission through fewer symptomatic and asymptomatic cases, and possibly related to lower amount of virus in the smaller number of vaccinated people who do develop COVID-19, it remains prudent to maintain current public health precautions during vaccine rollout and reassess the evidence frequently.

Although some individuals are at greater risk for severe illness and sickness if they get COVID-19 than others, without immunization even healthy Albertans are at much greater risk of severe illness and even death from this virus compared with those who are immunized.

For more information about the COVID-19 vaccine, please visit the [AHS COVID-19 Vaccine webpage](#).

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

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.



This week's Doctor of the Week is Dr. Kelly Burak, a hepatologist in the Division of Gastroenterology and Hepatology in the Department of Medicine in the Calgary Zone, who works at the Southern Alberta Liver Transplant Clinic (SALTC) and with the TBCC Multidisciplinary Hepatobiliary Tumour Group.

With a special interests in liver transplantation and liver cancer, Dr. Burak works in both clinical and academic roles. He was the founder of the SALTC, and serves as the Associate Dean of Continuing Medical Education & Professional Development (CME&PD) and head of the Physician Learning Program at the University of Calgary.

Dr. Burak was nominated for his outstanding contributions as both a physician and educator, providing compassionate care to his patients, as well as exceptional support to his fellow physicians and healthcare

professionals throughout the pandemic.

“After having COVID early in the pandemic, I realized how important it is for physicians and other healthcare providers to have a trusted source of information on all things related to it,” says Burak.

This inspired him to create the [COVID Corner](#), an online initiative offered through CME&PD at the University of Calgary that connects healthcare providers to new and emerging information on COVID-19 as well as other medical areas affected by the pandemic.

“I am very proud of COVID Corner and the success it has become, with more than 16,930 attendees to the 28 sessions delivered to date. A special thanks must go out to all the speakers and moderators who have volunteered their time to help deliver the programming.”

Initiatives such as COVID Corner stem from a deep interest in education and a passion for information sharing. In fact, it was these traits that drew Dr. Burak to a career as a physician from a young age.

“I have always had a keen interest in science and knowledge translation, perhaps because my parents were school teachers in small town Saskatchewan. I was drawn to medicine out of a desire to help others, and because of family members with GI cancers, I became interested in specializing in Gastroenterology.”

While the ability to provide guidance, special care and educational opportunities to others throughout the pandemic has been incredibly meaningful, the challenges of COVID-19 cannot be minimized.

As described by Dr. Burak, “this fourth wave has made it harder to get out of bed lately, particularly with this wave being predictable and largely preventable, it is has been more difficult for me to deal with things. I am fortunate to have the support of great friends and family. Recently, when I realized that I needed more help, I was grateful that the [Physician and Family Support Program \(PFSP\)](#) was there for me. Please know that it is ‘OK, not to be OK’ and if you need help, please reach out.”

In his spare time, Dr. Burak remains active in sports or by cheering on his favourite teams.

“I enjoy watching all professional sports, but especially golf and football (Go Riders). In the summer I enjoy golfing and my winter sport is curling. Despite curling giving me a severe concussion in 2017 and COVID in 2020, I have also been fortunate to win three Canadian Medical Curling championships!”

From us and your teams, thank you, Dr. Burak, for being an inspiration to your colleagues, students and patients.

Highlights from the CEO All Staff Update

[COVID-19 Case Status in Alberta](#)

ICU Capacity Update

AHS continues to do all it can to ensure we have enough ICU capacity to meet patient demand.

With pressure easing slightly on our ICUs, we are reducing the available surge beds so that we can redeploy staff back to caring for non-COVID patients who need surgeries and procedures completed.

We will ensure that we maintain ICU capacity above daily demand to a planned maximum of 380 beds as long as staff and physician availability allows, and will readjust our plans as needed if COVID-19 cases rise again.

We currently have 295 general adult ICU beds open in Alberta, including 122 additional spaces above our baseline of 173 general adult ICU beds.

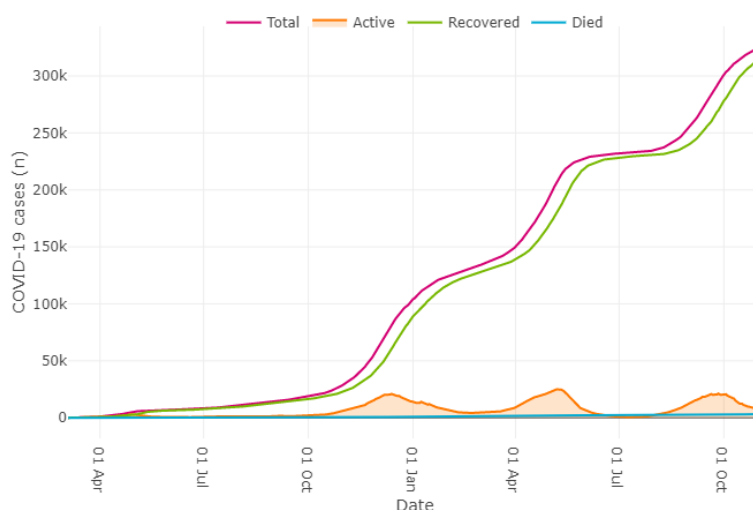
There are currently 229 patients in ICU, more than half of whom are COVID-19 positive.

Provincially, ICU capacity (including additional surge beds) is currently at 78 per cent. Without the additional surge spaces, provincial ICU capacity would be at 132 per cent.

New and Active Cases

As of November 3, there are 6,515 active cases in Alberta, a 22.3 per cent decrease compared to October 27. All zones reported a decrease in active cases: the zone with the largest reported decrease was the Central Zone, down 28.5 per cent from Oct. 27. For the fifth week in a row, the Calgary Zone reported the most active cases with 1,771.

There was an average of 456 new cases of COVID-19 per day this week, compared to 554 cases per day the previous week (Oct. 19 to Oct. 27), a 17.7 per cent decrease. For the fourth week in a row, all zones reported decreases in the number of new cases per day, ranging from a 12.8 per cent decrease in the North Zone to a 25.4 per cent decrease in the South Zone. Over the past week, the Calgary Zone reported the highest total number of new cases with 857 (an average of 122 cases per day), compared to 1,040 new cases the previous week (an average of 149 cases per day).

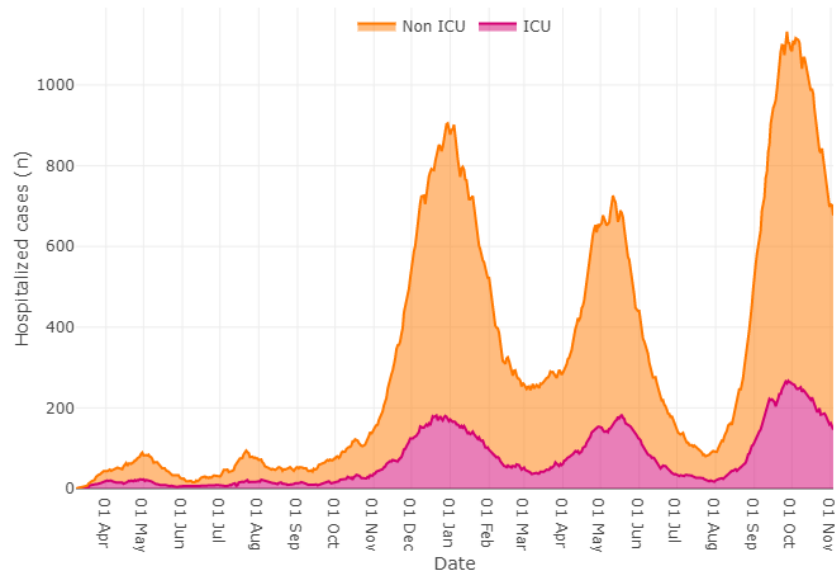


Hospitalizations

A total of 531 individuals were in non-ICU hospital beds for COVID-19 on Nov. 3, compared to 607 individuals in non-ICU hospital beds on Oct. 27, a 12.5 per cent decrease.

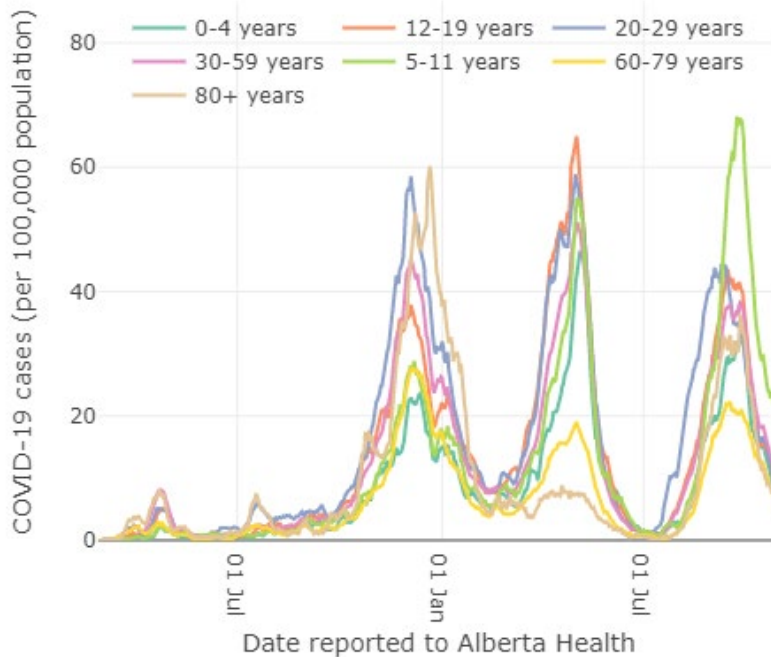
The breakdown of hospitalizations by zone as of Nov. 3 is as follows:

- 212 hospitalizations with 70 of those in ICUs in the Edmonton Zone,
- 153 hospitalizations with 39 of those in ICUs in the Calgary Zone,
- 141 hospitalizations with 16 of those in ICUs in the Central Zone,
- 99 hospitalizations with 8 of those in ICUs in the North Zone, and
- 72 hospitalizations with 13 of those in ICUs in the South Zone.



Cases by Age Group

As of Oct. 31, children ages five to 11 – who are currently ineligible to receive the COVID-19 vaccine – had the highest seven-day rolling average of new daily COVID-19 cases, with 20.71 cases per 100,000 children. Albertans ages 30 to 59 had the second-highest rate with 11.14 cases per 100,000 people. All age groups reported a decreased rate of COVID-19 cases, compared to the previous report. Trends in cases in Alberta by age group are shown below.



As of Nov. 3, 3,137 individuals have passed away from COVID-19 including 52 net new 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.

Variants of Concern

For variants of concern, the lab is utilizing targeted screening of positive samples for strain-typing. From Oct. 26 to Nov. 1, the average percent of positive samples that were strain-typed was 51 per cent. Of those strain-typed the rolling average was 99.4 per cent Delta variant. The remaining 0.6 per cent were a wild 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 Nov. 3, a total of 325,517 cases of COVID-19 have been detected in Alberta and a total of 14,483 individuals have ever been hospitalized, which amounts to 4.4 individuals for every 100 cases. In all, 315,865 Albertans have recovered from COVID-19, meaning they are no longer considered contagious.
- From Oct. 28 to Nov. 3, 65,160 COVID-19 tests were completed, an average of 9,309 tests per day. During this period, the daily positivity ranged from 4.07 per cent to 5.97 per cent. As of Nov. 3, a total of 5,912,074 tests have been conducted and 2,532,141 individuals have ever 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 Oct. 25 to Oct. 31 the province-wide R value was 0.87 and the previously reported value was 0.85.
- Public reporting of schools continues and you can find more information, [here](#).

COVID-19 Testing for Healthcare Workers — The Latest Numbers

We continue to update the testing data for healthcare workers. 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 Nov. 3:

- 85,274 employees (AHS and APL combined) have been tested for COVID-19 and, of those tested, 8,603 (or 10.09 per cent) have tested positive.
- Of the 6,272 employees who have tested positive and whose source of infection has been determined, 663 (or 10.57 per cent) acquired their infection through a workplace exposure. An additional 2,331 employees who have tested positive are still under investigation as to the source of infection.
- 6,004 physicians (AHS and APL combined) have been tested for COVID-19 and, of those tested, 354 (or 5.90 per cent) have tested positive.
- Of the 254 physicians who have tested positive and whose source of infection has been determined, 22 (or 8.66 per cent) acquired their infection through a workplace exposure. An additional 100 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](#).

COVID-19 Immunization Updates

Eligibility expanded for additional doses, including healthcare workers

As [announced by Alberta Health this week](#), third doses of COVID-19 vaccine will be available to additional Albertans, with bookings starting Monday, Nov. 8.

These individuals include:

- Frontline healthcare workers (HCWs) who provide direct patient care and who had their first two doses of vaccine less than eight weeks apart

- Adults 18 years of age and older who received two doses of the AstraZeneca/Covishield vaccine, or one dose of the Janssen vaccine, who have not already received a dose of an mRNA vaccine
- First Nations, Métis and Inuit (FNMI) adults 18 years of age and older regardless of where they live
- Adults aged 70 years and older

81,314 healthcare workers (HCWs) will be eligible for a booster on Monday including 39,000 AHS staff and 5,700 physicians. This includes HCWs who provide care in ICU, ED, COVID-19 units, medical and surgical units, OR, Long Term Care, Designated Supportive Living, Home Care, as well as Respiratory Therapists.

In the coming weeks, another 59,654 HCW will become eligible for an additional dose, including 28,682 AHS staff and 895 physicians.

These individuals are eligible for a third dose **at least six months** after their primary series.

As noted in the previous item, at this time, as per Alberta Health's guidance, the booster dose is not required to be considered fully immunized for the purpose of the AHS' Immunization of Workers for COVID 19 Policy.

AHS staff do not need to re-submit the Got my COVID-19 Immunization Form after receiving a booster.

Acting on the recommendations of the Alberta Advisory Committee on Immunization (AACI) and informed by the National Advisory Committee on Immunization (NACI), Alberta Health is recommending an additional dose to more populations whose level of protection may have decreased over time to help ensure robust protection. Evidence shows that shorter intervals between dose one and dose two may result in lower immune responses and more rapid waning of protection.

Additional doses are recommended for frontline healthcare workers with shorter intervals due to the potential for waning vaccine effectiveness in these individuals. While there is no evidence that HCWs are having an increase in severe outcomes due to COVID, preventing infection overall through immunization helps to maintain health system capacity and prevent transmission to vulnerable populations. HCWs should use their own discretion to determine if they provide direct patient care.

Those who have received a vaccine series with only viral vector vaccines (AstraZeneca/Covishield or Janssen) are also recommended for a booster dose, as [emerging evidence](#) indicates better protection in individuals with at least one dose of an mRNA vaccine.

In addition to the groups announced this week, those previously eligible for an additional dose continue to be eligible. For a full list, visit alberta.ca/vaccine.

Booking will be based on the honour system and appointments can be booked starting Nov. 8 through the [online booking tool](#), at participating pharmacies and doctor's office, or by calling Health Link at 811. COVID-19 vaccines are also available by walk-in at [participating clinics](#) and pharmacies. Individuals who live on a First Nations reserve can access third doses through local public health clinics on-reserve.

HCWs will not be contacted by AHS if/when they are eligible to receive an additional dose. Please book your own appointment if/when you are eligible.

Considerations when booking your third dose of the COVID-19 vaccine

Option to combine appointments: Should you choose to receive a booster dose of COVID-19 vaccine, you are encouraged to [obtain your influenza vaccine](#) at the same time (if you have not already done so). Vaccine co-administration with the influenza vaccine can occur at the same appointment.

Timing your appointment: While rare, some individuals experience side effects [such as fatigue or fever](#) after receiving COVID-19 vaccine. Given this possibility, you may want to consider timing your vaccine booster dose (or primary series dose if you are choosing to become immunized for the first time) before a weekend or days off.

Obtaining your primary series is still your first line of defense

Whether or not you are eligible for a third dose of COVID-19 vaccine, obtaining your primary series (first two doses) has been proven extremely effective against severe disease, hospitalization and death, especially for individuals under the age of 70.

Pfizer vaccine for younger age group continues to be reviewed by Health Canada

Health Canada continues to review a submission from Pfizer-BioNTech to authorize use of its COVID-19 vaccine in children five to 11 years of age.

Health Canada will only authorize the use of Pfizer's COVID-19 vaccine if the independent scientific review of the submission shows that the vaccine benefits outweigh the potential risks in this age group. The assessment will include a review of evolving information about the health impacts of COVID-19 and variants of concern on children in Canada.

This week, the [U.S. Centers for Disease Control and Prevention](#) (CDC) recommended Pfizer's pediatric vaccine for children five to 11 years of age, allowing providers to begin vaccinating this age group as soon as possible. The CDC's endorsement follows the [U.S. Food and Drug Administration's](#) emergency use authorization of the pediatric vaccine last week. This is the first COVID-19 vaccine authorized for children younger than 12 in the U.S.

As we await approval from Health Canada and the Alberta Advisory Committee on Immunization, we are preparing our teams, as well as updating our policies, processes and resources, so AHS can support vaccine rollout in a child- and family-friendly manner. We will also ensure Alberta families have the relevant information they need to inform their decision about getting the COVID-19 vaccine.

Vaccine availability

Alberta has requested a small shipment of the Janssen vaccine from the National Operations Centre, which is expected to arrive in the next few weeks. More information will be available at that time.

Currently, there is no supply of AstraZeneca in the province, but supply is expected later this year. Those interested in getting this vaccine can call Health Link at 811 to be added to the waitlist.

The other COVID-19 vaccines – Pfizer and Moderna - continue to be available in Alberta, and are safe and effective. You can book an appointment online at [ahs.ca/vaccine](#), call Health Link at 811, or check with your local pharmacy or doctor's office. You can sign up to be notified when there are vaccine updates and timeline changes from Alberta Health at [alberta.ca/vaccine](#).

Travel and COVID-19 immunization

The U.S. will be reopening its borders to fully immunized travellers starting Monday, Nov. 8, and individuals immunized with [any combination of two doses of a COVID-19 vaccine \(or a single dose of Janssen\)](#) authorized by U.S. regulators or the World Health Organization – including AstraZeneca - will be considered fully immunized.

In Canada, new federal vaccine requirements to board a flight, train or ship were implemented last week. As of Oct. 30, if you are 12 years of age or older, you need to be COVID-19 symptom-free and fully vaccinated in order to board:

- domestic or international flights departing from airports in Canada
- VIA Rail and Rocky Mountaineer trains
- non-essential passenger vessels, such as cruise ships, on voyages of 24 hours or more departing from ports in Canada, once voyages resume.

From October 30 to November 29, there is a short transition period when travellers who don't yet qualify as fully vaccinated will be able to travel if they can show a valid COVID-19 molecular test taken within 72 hours of travel. More information is available at: [COVID-19 Boarding flights and trains in Canada](#).

The Government of Canada is engaging with Indigenous peoples, provinces and territories to ensure that travellers from remote communities who are not fully vaccinated are still able to travel for any reason. More information is available, here: [Proof of vaccination for Indigenous peoples and Northerners in remote communities \(sac-isc.gc.ca\)](#)

Influenza Immunization Update

As of Oct. 30, 770,739 doses of influenza vaccine have been administered across the province, and three cases of influenza have been confirmed so far this season.

Interactive aggregate data on seasonal influenza is now available online at: [Alberta influenza statistics](#).

Alberta Precision Laboratories (APL) has tested 16,249 respiratory specimens for influenza, from Aug. 29, 2021 to the end of day Oct. 30, 2021. This does not include a small number of tests completed at regional hospitals.

Although the influenza activity we are seeing right now is less than we would see in a typical season, with changes to public health restrictions and more people travelling, we expect to see influenza and other respiratory viruses circulate in our communities this year.

Now more than ever, we need Albertans to get immunized against influenza, to protect themselves, their families and community. Our healthcare system has been significantly impacted by COVID-19. By keeping the number of influenza cases and outbreaks low, we can protect at-risk Albertans, and reduce the pressure on our healthcare system.

Influenza Immunization information for staff, physicians & volunteers

Staff, physicians and volunteers can also choose to be immunized through a site champion at their facility, a roving cart at their site, or a Workplace Health and Safety drop-in clinic.

Immunization appointments are available at some sites. Book your appointment using the [AHS Influenza Immunization booking tool](#) or call Health Link at 811. See [Insite](#) for more on the staff immunization campaign.

Verna's Weekly Message: the World of Allied Health

It goes without saying that COVID-19 has impacted all of us in some form. It has challenged the way we live, the way we think, and even the way we work. These are all factors that can influence the outcomes and experiences of our patients and families. So how do we, as a workforce, consider these challenges in the care we provide?

In addition to our doctors, nurses, and many other healthcare providers, we are fortunate to have almost 7,800 dedicated allied health professionals at AHS.

This diverse group includes several health disciplines, each of which bring a unique set of skills - creating a holistic approach for Albertans to recover sooner and live more meaningful lives. They have proven to be very skilled at adapting their practice to meet the challenges of COVID-19.

As it is [Allied Health week](#), Verna has invited three people to [the vlog today to tell us more about their respective Allied Health professions, and how they have adapted during COVID-19](#):

- Dr. Stewart Longman, Rehabilitation Psychologist, Foothills Medical Centre
- Dr Jaeun Macen, Spiritual Health Consultant, Palliative Home Care, Sheldon M. Chumir Health Centre
- Lindsay Storm, Social Worker III, South Health Campus.

Safe Healthy Environments Team Responds to 100K Service Requests

As of Oct. 26, the AHS Safe Healthy Environments (SHE) team has responded to more than 100,000 COVID-19 related complaints and service requests since the beginning of the pandemic.

This is a significant milestone – 100,000 requests over the course of 19 months is an unprecedented volume for the SHE team.

SHE staff are often the first point of contact for many Albertans. They respond to requests related to compliance with current public health measures, masking, capacity and gathering limits, and concerns about people that are not following isolation or other requirements.

Despite the changing needs of the pandemic, the team has stepped up again and again to respond when Albertans have needed them most.

This achievement represents contributions from across SHE - including administrative staff who log the requests, public health inspectors who investigate and resolve/refer complaints, provincial strategy staff who handle system logistics and reporting, and management and leadership staff who guide and support the overall effort.

Thank you to all SHE staff for your dedication, compassion and professionalism during these difficult times. Thank you for keeping our communities healthy and safe.

Beyond COVID-19

New Health Information Resource Library Now Available

Health Information Management (HIM) has launched an easy-to-use [online health information resource library](#). Similar to the Connect Care Knowledge Library, the HIM resource library pulls resource documents from the HIM Team Insite pages so all HIM users can easily access resources in one central location. Using the search tab and keyword tags, users can easily and efficiently find the health information resources they are looking for.

For more information, please see the [resource library](#).

Join a Special Practice Wise Session for Allied Health Week

Join us in celebrating Allied Health Week with a special Practice Wise session on Nov. 4 from 12 to 1 p.m.

In the session, [Jeremie Saunders](#), co-host of CBC's Sickboy podcast and TEDx speaker, will share what he has learned through conversations with hundreds of podcast guests about their health issues and their most uncomfortable realities. He will also share how, by allowing himself to feel uncomfortable, he has become a more compassionate, empathetic person and a stronger leader.

Nov. 4 from 12 to 1 p.m. | Join by [Zoom](#)

Can't make the session? A recording will be available after. See the Practice Wise [archives](#) (Insite login required).

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.

Dr. Francois Belanger

Chief Medical Officer and Vice President, Quality

Dr. Laura McDougall

Senior Medical Officer of Health



**Alberta Health
Services**

Physical
distancing
works