

CMO SMOH Notice for AHS Medical Staff

March 4, 2022

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 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.

This week:

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Support for Physicians

Physician Wellness



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

The **PFSP** is also offering **small group support sessions** with a qualified therapist. A group would consist of six to 12 physicians (e.g., from the same team or department). 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.

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

[Scientific Advisory Group Rapid Review on Managing Healthcare Worker Burnout](#)

Burnout is common among healthcare workers across all health care organizations. In an effort to provide proactive supportive, evidence-informed recommendations for the care of AHS' healthcare workers and leaders, AHS' Scientific Advisory Group (SAG) conducted a rapid review of organizational strategies to mitigate healthcare worker burnout.

Many factors contribute to burnout as a response to workplace related stress, such as: unsustainable workload; perceived lack of control; insufficient rewards for effort; lack of a supportive community; lack of fairness and mismatched values and skills. Effective workplace practices can help reduce or control these factors,

The review recommended AHS prioritize development of a wellness strategy with a clear governance and accountability structure, and task a group with developing, implementing and monitoring an overall strategy to mitigate HCW burnout, led by an executive sponsor.

Our people are at the heart of everything we do. We want physicians and staff to feel good about coming to work and to be proud of the work they do. We know excellent patient and family-centred care and building healthy communities is only attainable when our people feel safe, healthy, valued and included in their work environment.

AHS has proactively implemented a number of programs to support staff and physicians:

- [Crisis Management Services](#)
- [Employee and Family Assistance Program \(EFAP\)](#)
- [Alberta Medical Association Physician and Family Support Program](#)
- [Creating a Psychologically Safe and Healthy Workplace, Together](#)

- [How to Support Someone Who May be Struggling](#)
- [Not Myself Today](#)
- [Resources to Support Mental Health](#)
- [Supporting someone who expresses suicidal ideation](#)
- [Resilience, Wellness and Mental Health Resource Guide](#)
- [Diversity and Inclusion resources](#)
- [Employee recognition](#)

AHS is dedicated to ensuring our people have the support they need, and work is underway to explore and action recommendations within the report. More information will be shared as this work progresses.

For more information, please see the [rapid review](#).

Blood Tube Shortage Update

AHS and Alberta Precision Laboratories (APL) continue to request physician assistance in limiting non-essential lab testing and delaying non-urgent blood testing when possible due to a temporary shortage of disposable test tubes used to collect the most common blood test samples across the province.

[Choosing Wisely Canada's recommendations](#) for appropriate lab testing are a helpful resource for primary care and hospital physicians to help conserve resources due to the global shortage of medical-grade plastics.

APL continues to work with vendors to stabilize inventory levels, but we anticipate supplies will be tight for the foreseeable future. For more information, please see APL's Feb. 16 [lab bulletin](#).

Therapeutic Guideline Updates

On Feb. 14, the COVID-19 Therapeutics Working Group (WG) updated guidelines for managing therapeutic treatments for COVID-19. Please see the following updated therapeutic guidelines:

- [Current Guidance for the Management of Adult Hospitalized Patients with COVID-19](#)
- [Therapeutic Management of Adult Patients with COVID-19](#)
- [Algorithm for Management of Hospitalized Adult Patients with COVID-19](#)

Sotrovimab and Paxlovid Treatment Update

AHS continues to offer outpatient treatments to eligible at-risk patients who test positive for COVID-19. Since November, more than 1,300 eligible patients have received Sotrovimab infusions, and since its Health Canada approval in January, about 200 patients have received the oral medication, Paxlovid.

Patients who test positive for COVID-19 who meet the eligibility criteria listed on the website, ahs.ca/covidopt, are asked to call the dedicated Health Link line at 1-844-343-0971 to be assessed.

Thanks to the many AHS staff and physicians who were instrumental in pulling this complex program together, including Drs. Cheri Nijssen-Jordan, Matt Hall, Lara Bani and Judson Barkhurst who have provided physician leadership.

University of Calgary COVID Corner: After Two Years on the COVID Roller Coaster

COVID Corner, hosted by the University of Calgary, offers updates on various topics and aspects related to the COVID-19 pandemic. The next session reflects on the past two years of the pandemic.

Date: March 23
Time: 7-9 p.m. MST

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

Highlights from the CEO All Staff Update

Note: Recognizing some medical staff use an alternate email address instead of an AHS email address, this section is included to ensure all AHS medical staff have all up-to-date organizational information that pertains to the pandemic and AHS medical staff practices.

COVID-19 Case Status in Alberta

ICU Update

As of 11 a.m. today (March 4), AHS has 233 general adult ICU beds open in Alberta, including 60 additional spaces above our baseline of 173 general adult ICU beds. There are currently 187 patients in ICU. Provincially, ICU capacity (including additional surge beds) is at 80 per cent. Without the additional surge spaces, provincial ICU capacity would be at 108 per cent, unchanged from one week ago.

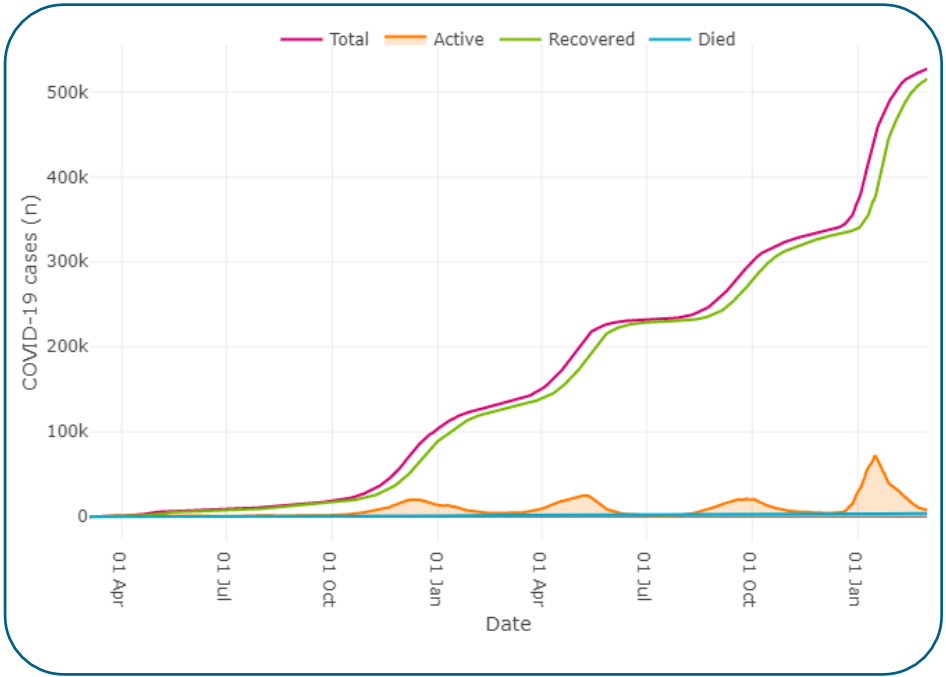
New and Active Cases

Note: Available data is only based on statistics gathered from testing.

As of March 2, there are 7,945 active cases in Alberta, a 25.2 per cent decrease compared to Feb. 23. All five zones reported a decrease in active cases compared to the last report, as you can see in the table below.

	Active Cases (as of March 2)	Active Cases (as of Feb. 23)	Per cent Change
Calgary	2,529	3,591	-29.6%
Edmonton	2,252	3,014	-25.3%
North	1,172	1,480	-20.8%
Central	1,106	1,413	-21.7%
South	878	1,064	-17.5%
Unknown	8	64	-87.5%
Overall	7,945	10,626	-25.2%

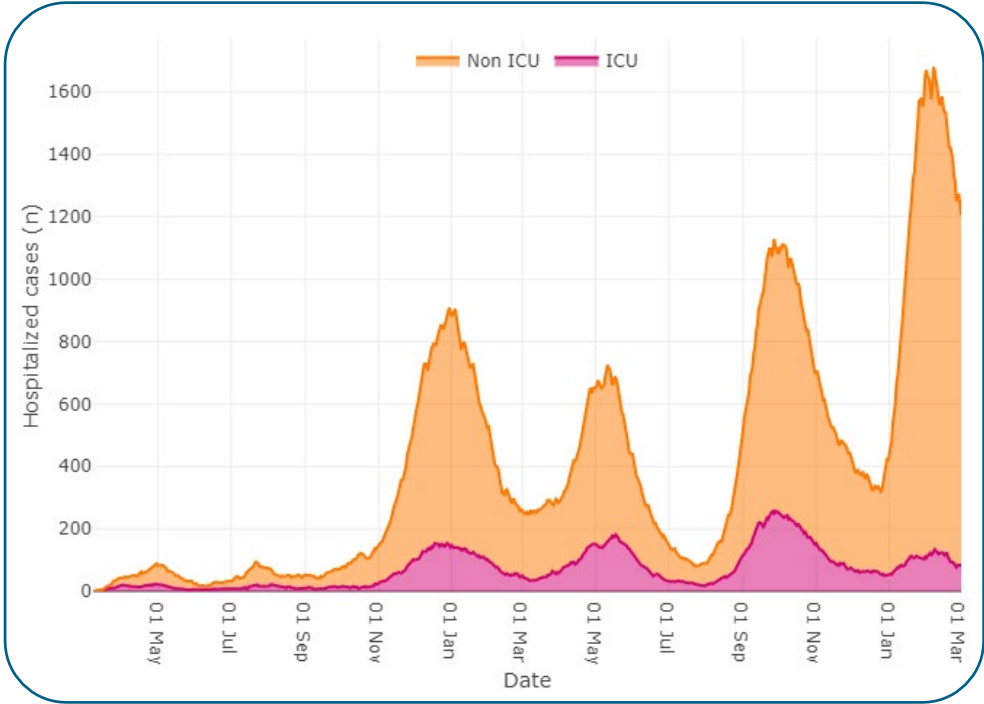
For the seven-day period ending on March 2, there was an average of 548 new cases of COVID-19 per day, compared to 634 cases per day the previous reporting period (Feb. 17-23), a 13.6 per cent decrease. The Calgary Zone reported the highest total number of new cases with 1,192, an average of 170 new cases per day.



Please note: We know these data underestimate the number of people with COVID-19 across the province, and changes in testing eligibility make it difficult to compare cases week over week.

Hospitalizations

On March 2, 1,124 individuals were in non-ICU hospital beds for COVID-19 compared to 1,293 on Feb. 23, a 13.1 per cent decrease.



Variants of Concern

Alberta Precision Laboratories (APL) continues to closely monitor SARS-CoV-2 variants. From Feb. 25 to March 2, an average of 72 per cent of positive samples were strain-typed. Of those, the seven-

day rolling average was 75 per cent Omicron BA.1 lineage, 23 per cent Omicron BA.2, and Delta is rarely detected. It appears the BA.2 is trending to higher proportions as has been seen in other countries where Omicron BA.2 is now the predominant strain. While viral recombinants between Omicron and Delta have been reported in several cases globally, no recombinant SARS-CoV-2 viruses have been detected in Alberta through our ongoing genomic sequencing.

Other notable COVID-19-related information:

- Data from the last seven days indicate that 36.8 per cent of new admissions to non-ICU spaces are due to COVID-19 infection directly, 30.9 per cent had COVID-19 as a contributing cause and 32.3 per cent are cases where the infection was not determined to be a cause of admission, or where it was not possible to determine. For ICU, the percentage of new admissions due to COVID-19 directly was 50 per cent; 30.8 per cent had COVID-19 as a contributing cause and 19.2 per cent were incidental infections or unclear.
- As of March 2, 3,946 individuals have passed away from COVID-19, including 61 deaths since the last report. We extend our condolences to the families of these individuals, and to all who have lost loved ones from any cause during this time.
- As of March 2, 527,102 cases of COVID-19 have been detected in Alberta and 21,333 individuals have been hospitalized, which amounts to 4.0 individuals for every 100 cases. In all, 515,211 Albertans have recovered from COVID-19, meaning they are no longer considered contagious. The number of Albertans who have recovered from COVID-19 does not reflect the recovery time from a COVID-19 infection that could last beyond the time in which people are contagious.
- From Feb. 24 to March 2, 18,404 COVID-19 tests were completed, a seven-day average of 2,629 tests per day. During this period, the daily positivity ranged from 18.9 per cent to 25.0 per cent. As of March 2, 6.86 million tests have been conducted and 2.72 million individuals have been tested. COVID-19 testing eligibility has changed recently to accommodate the demand due to the increase in cases.

COVID-19 Updates and New Information You Need to Know

Step 2 in reduction of pandemic health measures implemented March 1

Alberta entered Step 2 of the government's gradual reduction of pandemic health measures on March 1. More information, including details of Steps 2 and 3, is available on the [government's website](#).

Misinformation and the Pandemic Presentation Available on Insite

On Monday (Feb. 28), professor [Timothy Caulfield](#) delivered an excellent presentation about misinformation during the pandemic. A [recording](#) of this President's Speaker Series event has been posted for those unable to attend or who want to share with their AHS teams. In the video, Caulfield explores what the most recent evidence tells us about the nature and source of the current infodemic, and provides science-based recommendations about how to best engage with people who have been swayed by misinformation.

COVID-19 Testing for Healthcare Workers — the Latest Numbers

We continue to update the testing data for healthcare workers. These statistics provide the total numbers 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. The testing data does not include rapid antigen test results for healthcare workers.

As of March 1:

- 93,525 employees (AHS and APL combined) have been tested for COVID-19 and, of those tested, 22,794 (or 24.37 per cent) have tested positive.
- Of the 8,982 employees who have tested positive and whose source of infection has been determined, 733 (or 8.16 per cent) acquired their infection through a workplace exposure. An additional 14,292 employees who have tested positive are still under investigation as to the source of infection.

- 6,507 physicians (AHS and APL combined) have been tested for COVID-19 and, of those tested, 1044 (or 16.04 per cent) have tested positive.
- Of the 364 physicians who have tested positive and whose source of infection has been determined, 27 (or 7.42 per cent) acquired their infection through a workplace exposure. An additional 691 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](#).

Government Announces Continuing Care Investment

The [government announced yesterday](#) (March 3) \$204 million in capital funding over three years to modernize existing continuing care facilities across the province and develop new continuing care spaces for Indigenous Peoples and in priority communities. In addition, the government announced 1,515 new continuing care spaces will open across Alberta in 2022-23, with details to follow in the coming months.

This additional funding will enable AHS to enhance our commitment to modernize facilities for aging Albertans in high-priority areas and also ensures we can free up space within acute care, easing capacity strain on the system overall.

Verna's Weekly Video Message — Impact of the Provincial Budget

Over the past week, the provincial government has announced several other investments in healthcare; for example, a \$63-million investment will complete 11 new operating rooms and 17 additional recovery beds at Foothills Medical Centre in Calgary. As well, the Red Deer Regional Hospital Centre will undergo a \$1.8-billion expansion.

There is also continued investment in Connect Care, and a \$300-million investment over three years to create more critical care beds. In fact, 50 permanent, fully staffed ICU beds will be added this year, distributed in every zone across the province.

By 2024-25, government will add a total of \$1.8 billion in operating expense to the total healthcare budget, which means \$600 million more in 2022-23 than the previous year.

Joining Verna to [tell us more about the healthcare investments from provincial budget, our own budgeting process, and how these investments will affect AHS](#), are:

- Colleen Purdy, Vice President, Corporate Services and Chief Financial Officer.
- Kaitlyn Eros, Executive Director of Budgeting and Forecasting, Finance.

COVID-19 Immunization Update

Walk-in pediatric vaccine clinics available until March 16

Walk-in vaccine appointments continue to be available for children ages five to 11 at AHS COVID-19 vaccine clinics. AHS sites across the province are offering evening and weekend walk-in clinics to maximize the opportunities for eligible children to be immunized.

To find an AHS clinic with extended hours and walk-in appointments, visit ahs.ca/vaccine#walkin. Parents and guardians can also continue to book appointments for children age five and over through the [Alberta vaccine booking system](#) or by calling Health Link at 811.

Some Alberta pharmacies are also offering pediatric vaccines until March 16. Some pharmacies may also offer pediatric vaccines on a walk-in basis. To find a pharmacy offering pediatric COVID-19 immunization, visit ab.bluecross.ca.

The importance of a booster dose

An additional dose is recommended for all Albertans 18 years of age and older, as well for adolescents ages 12 to 17 years of age who are First Nations, Métis or Inuit, or who have underlying health conditions. For populations at higher risk — such as the elderly, immunocompromised or those in seniors living facilities — receiving a booster dose is particularly important with Omicron BA.1 and BA.2 continuing to circulate.

Preliminary studies indicate a potential for reduced protection in individuals with a two-dose COVID vaccine series, and additional protection with the addition of a booster dose.

We encourage all eligible Albertans to bolster their protection and get a booster dose as soon as possible.

Beyond COVID-19

Influenza Immunization Update

As of Feb. 26, 1.2 million doses of influenza vaccine have been administered, which is approximately 27 per cent of the population. A total of 43 influenza cases have been confirmed this season.

Interactive aggregate data is available online at [Alberta influenza statistics](#). For more information on influenza, visit [ahs.ca/influenza](#).

Physicians, staff and volunteers can choose to be immunized at a pharmacy, doctor's office or public health clinic (for children under five years of age and their family and household members). Physicians and staff using these options are reminded to submit their [Got My Flu Shot form](#). See [Insite](#) for more on the immunization campaign.

Join a Virtual Town Hall on the AHS Physician Overhead Framework

At the direction of Alberta Health and recommendation of the AHS Review Report, AHS developed the overhead framework for assessing and recovering physician overhead costs in ambulatory clinics in AHS spaces. The focus of this work was to provide a balanced and equitable framework for all physicians practicing in AHS spaces.

On July 1, AHS is implementing a clear, principle-based framework for assessing and recovering physician overhead costs that will be a consistent approach for AHS physician overhead across all zones, and in all facilities; urban, regional and rural. Note: Timelines are subject to pandemic response.

The first phase of the AHS physician overhead approach will apply to new agreements, including fee for service and clinical alternative relationship physicians who have outpatient clinics in AHS space; existing agreements will expire and be phased into the new process.

AHS continues to engage with physicians and medical leadership across the province, and incorporate feedback provided through the development of the framework and the subsidy calculator.

To learn more:

- [Join a virtual town hall](#)
 - We will be offering three sessions. Please register for the one that works best with your schedule:
 - Wednesday, March 9 from 5-6:30 p.m.
 - Monday, March 14 from 2-3:30 p.m.
 - Wednesday, March 16 from 5-6:30 p.m.
- Read these [frequently asked questions](#)
- Visit the [Medical Affairs Insite page](#)

If you have additional questions or concerns, please reach out to your respective zone medical leader.

MD Culture Shift

NEW – March MD Culture Shift Newsletter

Check out the March edition of the [MD Culture Shift Newsletter](#).

Upcoming events:

PLI course: Talent Management for Exceptional Leadership

March 30-31 and April 1, 8 a.m. to 12:15 p.m. each of the three days

Spots will be filled on a first email basis: jodi.ploquin@ahs.ca

Sponsored by Provincial Medical Affairs.

MD Culture Shift Community of Practice

The MD Culture Shift Community of Practice is resuming, bringing together Alberta physicians interested in advancing wellness and diversity. These monthly sessions invite physicians to join a community to share ideas and experiences, celebrate successes, and foster learnings through collective knowledge and wisdom.

Join the next session beginning March 30 to review [an article](#), Physician Well-being 2.0: Where Are We and Where Are We Going? (Shanafelt, TD. 2021. Mayo Clinic Proceedings. 96(10):2682-2693), and engage in dialogue about physician wellness.

Dates: Wednesdays March 30, April 27, May 25 from 8-9

Register [here](#).

Trauma Informed Leadership Workshops

A compassionate and trauma-informed approach to leadership is essential for creating healthy workplace cultures. The Physician Wellness, Diversity and Development portfolio is offering a 15-minute introduction to Trauma Informed Leadership, and three hour workshops delivered by trainers certified through the Crisis and Trauma Resource Institute.

- Tues. March 22, 8–11 a.m. (virtual)
- Wed. March 30, 5:30–8:30 p.m. (virtual)

To book a 15 minute presentation or register for an upcoming workshop, email jodi.ploquin@ahs.ca.

Equity in Medicine Conference

In partnership with Canadian Women in Medicine (CWIM), Equity in Medicine will be hosting a half-day conference June 2, in Victoria, BC. Keynote speakers are:

- Dr. Renée Fernandez, “Not Like Other Women”: Challenging Internalized Sexism to Create Meaningful Change
- Dr. Mojola Omole, “Lady” Surgeons Disrupting Gender Bias

This will be followed by a panel discussion by current and past members of the Equity in Medicine leadership team on the multiple actions necessary to advance equity, diversity and inclusion in our healthcare environments.

For more information, including speaker bios and session objectives, please visit the [CWIM conference page](#).

Dr. Pauline Alakija Trailblazer Award

An Alberta physician is receiving national recognition as a trailblazer. Equity in Medicine has created the Dr. Pauline Alakija Trailblazer Award that will be celebrated at their in-person conference in Victoria June 2-4, 2022.

To learn more about this award and nominate a physician for the Dr. Pauline Alakija Trailblazer Award, visit the [Equity in Medicine webpage](#).

National Kudos for Grande Prairie Physician

Congratulations to Dr. Alika Lafontaine, who has been named to the Financial Post's list of [Top 40 under 40](#), which honours visionaries and innovators who are exceptional leaders. In addition to practising anesthesia at Grande Prairie Regional Hospital, last August he became the first Indigenous and Pacific Islander physician to be confirmed President-Elect of the Canadian Medical Association in its 154-year history.

March 11 is Canadian Women Physicians' Day

March 11, 2022, marks the second ever Canadian Women Physicians Day.

Canadian Women in Medicine will be hosting a virtual event discussing the challenges of the last two years and opportunities for meaningful change with guest speakers, Drs Aimée Bouka, Daisy Fung, Courtney Howard and Lisa Richardson. This event is open to physicians of all genders. A valid college ID is needed.

Date: March 11
Time: 6 p.m. MST
Register: [Here](#)

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. Please provide the nominee's full name and email address.

New Physician Recruitment Website and Platform Coming March 31

To streamline recruitment processes and comply with potential changes to legislation impacting physician recruitment, AHS is moving its physician career site to a new website and platform on March 31. As we move to the new platform, users will notice the following changes:

- **New website address:** The recruitment site's web address will change from <https://www.doctorjobsalberta.com> to a new web address. Visitors to the old web address will be redirected to the new recruitment platform once it launches.
- **Change to website look and feel:** The new website will function similarly to the current site and will still be called "Doctor Jobs Alberta," but it will have a different look and feel.
- **One central location for AHS physician job opportunities:** All physician job opportunities associated with AHS, including those for Alberta Precision Laboratories and Cancer Care, will be posted on this site.

This change will not impact AHS' staff career site (<https://albertahealthservices.ca/careers/>), and the role of medical leaders in recruitment is not expected to change. Updates will be posted on the current Doctor Jobs Alberta website (<https://www.doctorjobsalberta.com>) in advance of the launch.

Please email DrJobs.AB@ahs.ca with any questions.

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](#)
- [MD News Digest](#)
- [Online Healthcare Worker Self-Assessment Tool](#)
- [Physician & Family Support Program](#) - 1-877-SOS-4MDS (767-4637)
- [Physician Wellness Educational Resources: Well Doc Alberta](#)
- [Sotrovimab Easy Reference Guide](#)
- [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 \(CPSA\)](#).

Dr. Francois Belanger

Chief Medical Officer and Vice President, Quality

Dr. Laura McDougall

Senior Medical Officer of Health

