

CMO SMOH Notice for AHS Medical Staff

Sept. 9, 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.

Note: Recognizing some medical staff use an alternate email address instead of an AHS email address, some information is duplicated from the CEO Update to ensure all AHS medical staff have all up-to-date organizational information that may impact their practice.

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Medical Affairs

Congratulations to Dr. Alika Lafontaine

We are pleased to share the news that Dr. Alika Lafontaine has been named as the new President for the Canadian Medical Association (CMA). This award-winning physician is the youngest and first Indigenous president at CMA, and has served on the boards of several non-profits, including the Indigenous Physicians Association of Canada. Balancing the role of President at CMA, Dr. Lafontaine also continues to practice in Grande Prairie. For more information, please see the [CMA announcement](#).

Congratulations, Dr. Lafontaine!

Support for Physicians

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.

Commemorating National Day for Truth and Reconciliation

On September 30, we wear orange to recognize the history and truthful impacts of residential schools in Alberta. The Orange Shirt Day movement started in 2013 after a [Residential School Survivor spoke](#) about having the orange shirt her grandmother bought for her taken away on her first day of school when she was six years old.

In 2021, Orange Shirt Day became the **National Day for Truth and Reconciliation**. As September 30 will be a statutory holiday, AHS will be commemorating the day with reflective sessions on [Thursday, September 29](#). We encourage everyone to honour September 30 as a day of personal reflection or to take part in events in your community.

In the days leading up to the National Day for Truth and Reconciliation, we encourage you to put reconciliation into action. Join us on [Insite](#) and [Together4Health](#) throughout this month and take part in our online activities.

The AHS Indigenous Wellness Core has compiled a list of ideas to encourage you on your personal reconciliation journey. You can share what [allyship](#) means to you and how [your community](#) will be commemorating this day

Celebrate Healthcare Simulation Week

Join us in celebrating Healthcare Simulation Week from September 12 to 16.

By supporting our healthcare professionals in improving their skills, we are helping them deliver the best health outcomes for their patients. Simulation offers dynamic opportunities to improve education throughout the healthcare system. Learn more [here](#) and watch out for more stories to come next week.

Webinar: Learn How to Create Inclusive Spaces for Virtual Care

Inclusion is what we do and how we treat each other. It is our flexibility and willingness to listen, learn and collaborate to build safe places for everyone. [Virtual Health](#) is pleased to welcome the [Diversity & Inclusion](#) team to share what equity, diversity and inclusion considerations we should be making in the delivery of virtual care.

Date: Tuesday, Sept. 20

Time: Noon to 12:45 p.m.

[Register today.](#)

AHS Priorities

This message includes updates on the progress AHS is making on its [10 priority areas](#):

1. Alberta Surgical Initiative
2. Continuing Care
3. Digital Health Evolution & Innovation
4. EMS 10-Point Plan
5. Mental Health & Addiction Recovery
6. Public Health & Pandemic Response and Recovery
7. Quality & Patient Outcomes
8. Rural Initiatives & Engagement
9. Sustainability
10. Workforce Recruitment & Retention

Each week will include updates on specific initiatives connected to some of the 10 priorities. We have much to accomplish together in these areas, so we want to make sure our teams have the most current information on the work underway and the work ahead.

Priority: Alberta Surgical Initiative (ASI)

The ASI will improve timely access to surgical care in Alberta. The goal of ASI is to ensure adult and pediatric patients receive scheduled surgeries within clinically appropriate timeframes.

Surgical wait list status update

We continue to work diligently to recover to pre-pandemic surgical status. Over the past four weeks, the average weekly volume for surgical activity is 92 per cent of our pre-pandemic surgical volumes. The surgical wait list for adults sits at approximately 73,473, compared with about 68,000 in February 2020, before the pandemic.

Approximately 101,500 surgeries have been completed in the 2022/23 fiscal year.

AHS seeking to expand access to surgery in Central and South Zones

As [announced by the Government of Alberta](#) on Sept. 7, AHS is seeking to increase opportunities for Albertans to receive surgical care in their communities through requests for proposals (RFP) for chartered surgical facilities (CSF) in the Central and South zones. The RFPs seek a minimum of approximately 1,350 surgical procedures per year at CSFs in the Central Zone, and 1,250 in the South Zone.

These changes will improve access, reduce wait times for surgery for patients and help Albertans receive their procedure in their community. This work builds on an [earlier announcement](#) of over 30,000 contracted ophthalmology procedures launched in April 2022, and [over 6,000 orthopedic surgeries](#), as well as other strategies as part of the ASI.

AHS will provide more information on ahs.ca/asi as it is available.

Centralized referrals launch in Alberta

As part of the ASI, a new central access and intake program for managing non-urgent referrals called Alberta Facilitated Access to Specialized Treatment (FAST) is rolling out across the province. FAST has launched for the following:

- [North Zone – Orthopaedics and urology](#)
- [Central Zone – Orthopaedics, urology and cataracts](#)
- [South Zone – Urology \(orthopaedics launch Oct. 19\)](#)

Calgary Zone will launch Oct. 11 for urology and orthopaedics. The existing Edmonton Zone FAST program continues to be the central intake for referrals to general surgery, plastics, ENT/otolaryngology, colposcopy, shoulder, upper limb, hand/wrist and elbow. Edmonton Zone FAST will expand to include all orthopaedic referrals on Oct. 31.

A few benefits of the program:

- One toll free fax number for non-urgent urology and orthopaedics referrals
- When referring, providers can choose:
 - Next available provider with the shortest waitlist
 - A specific provider by name
 - An out-of-Zone referral
- Each referral is checked for completeness before being sent to the specialist
- A more predictable and timely surgical journey for patients and providers

Referring providers, find out how you can start using FAST. It is as easy as changing a fax number: ahs.ca/specialtyaccess. Specialists in urology and orthopaedics, to start receiving referrals through FAST, email ABFAST@ahs.ca.

Surgical waitlist management

AHS is expanding a waitlist validation project initially piloted in Edmonton Zone to manage the surgical waitlist across the province. Over the next few months, patients listed for surgery in the South and Calgary zones will receive a phone call or voicemail from a member of the AHS Surgery Waitlist Management Team.

As part of the process to confirm wait list status, our team will ask for each patient's provincial personal health number and birthdate to confirm their identity. Patients who hang up or do not call the number back will not see their position on the waitlist affected.

Patients are reminded AHS will never ask for financial information or for any personal information other than your provincial personal health number or birthdate during these automated calls.

More information and a full script of the automated call is available on the AHS website ahs.ca/waitlist.

COVID-19 Updates

COVID-19 Case Status in Alberta

Hospitalizations and ICU Update

As of Sept. 5:

- 799 individuals were in non-ICU hospital beds with COVID-19 compared to 838 individuals in non-ICU hospital beds on August 23, a 4.7 per cent decrease
- 20 individuals were in ICU hospital beds with COVID-19 compared to 32 individuals in ICU hospital beds on August 23, a 37.5 per cent decrease

Variants of Concern

APL continues to closely monitor SARS-CoV-2 variants. From Aug. 30 – Sept. 5, an average of 67 per cent of positive samples were strain-typed. Of those, the seven-day rolling average was 2 per cent Omicron BA.2 lineage, 7 per cent Omicron BA.4 lineage, and 91 per cent Omicron BA.5 lineage. As global data is updated, sub-lineage designations are refined which may affect lineage calls in Alberta. We continue to monitor our data and adjust as information becomes available. While BA.4 and BA.5 appear to transmit more readily than BA.2 due to their ability to evade immunity from immunization or prior infection, there is no evidence that they cause more severe disease than other Omicron lineages.

Wastewater Surveillance

Wastewater can provide an early indication of infection trends in a community. For wastewater surveillance comparing weekly averages:

- Four sites increased by more than 25 percent compared to the weekly average two weeks ago. These sites were Taber, Airdrie, Lacombe and Fort McMurray. The other 16 sites decreased or had no significant changes. These observations were made on Sept. 6 at 8 a.m.

Frequency of reporting updates varies by sampling site. The Alberta Wastewater Surveillance Program is a collaboration between the University of Calgary, University of Alberta, APL and Alberta Health.

Other Notable COVID-19-related Information:

- As of Sept. 5, 4,832 individuals have passed away from COVID-19 including 84 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 Sept. 5, a total of 29,677 individuals have been hospitalized with COVID-19 in Alberta.
- From Aug. 23 - Sept. 5, 14,279 COVID-19 tests were completed, a 14-day average of 1,020 tests per day. During this period, the daily positivity ranged from 15.0 per cent to 21.5 per cent

PPE Question of the Week: What Criteria is Used When Making the Decision to Keep Continuous Masking in Place?

From wastewater data, to the positivity rate, to the number of inpatients in our beds and ICUs, many factors go into the decision of whether to keep continuous masking in place at AHS facilities. Dr. Mark Joffe [discusses some of these factors](#) and how this important decision is made.

Additional Resources for Physicians:

- [AHS Virtual Health](#)
- [COVID-19 Healthcare Professional information page](#)
- [COVID-19 Immunization Information](#)
- [COVID-19 Resources for Community Physicians](#)
- [CPSA's Physician Portal](#)
- [Cumming School of Medicine Continuing Medical Education \(CME\) Resources](#)
- [How to Access AHS Insite and Email](#)
- [IPC Emerging Issues](#)
- [MD News Digest](#)

- [Physician & Family Support Program](#) - 1-877-SOS-4MDS (767-4637)
- [Physician Wellness Educational Resources: Well Doc Alberta](#)

Sincerely,

Dr. Sharron Spicer on behalf of Dr. Francois Belanger
Associate Chief Medical Officer

Dr. Laura McDougall
Senior Medical Officer of Health



Healthy Albertans.
Healthy Communities.
Together.