



## Message from Dr. Verna Yiu & Dr. Laura McDougall

*AHS Update: Expanded public health measures announced as new and active cases, ICU admissions reach record highs this week; vaccine eligibility expands*

*Please print and share with your teams as needed*

**Dear staff, physicians and volunteers,**

### **Today's Update**

- **COVID-19 Cases in Alberta**
- **Expanded Public Health Measures Announced**
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## COVID-19 Status

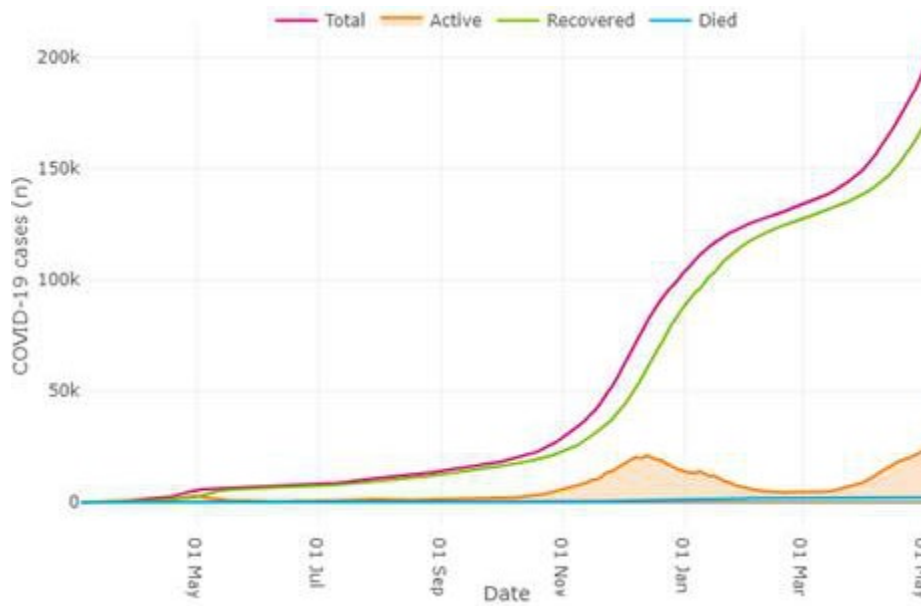
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This week Alberta set new records for most active cases of COVID-19, highest average daily new cases and most ICU admissions related to the virus. Meanwhile, expanded public health measures were announced by the provincial government in an effort to stop the current spike in cases (see Expanded Public Health Measures Announced below).

As of May 5, there was a record of 24,497 active cases in Alberta, an increase of 14.6 per cent (representing 3,112 additional active cases) than the previous week. AHS Calgary Zone reported the most active cases for the 17th week in a row with 10,639. The other four AHS zones also reported week-over-week increases, although Edmonton Zone remained relatively stable, as you can see in the table below.

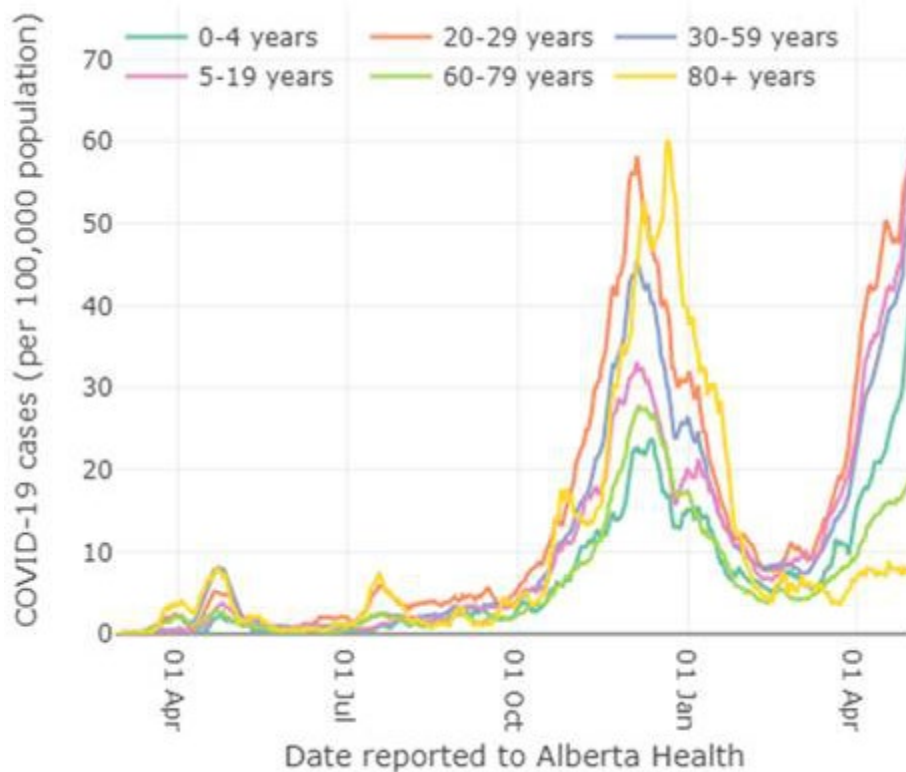
	<b>Active Cases (as of May 5)</b>	<b>Active Cases (as of April 28)</b>	<b>Per cent Change</b>
<b>Calgary</b>	10,639	8,962	+18.7%
<b>Edmonton</b>	5,979	5,916	+1.1%
<b>North</b>	3,616	2,994	+20.8%
<b>South</b>	1,321	1,064	+24.2%
<b>Central</b>	2,899	2,395	+21.0%
<b>Unknown</b>	43	54	-20.4%

Provincewide, there was an average of 2,074 new cases per day for the seven-day period ending on May 5, compared to 1,672 cases the previous week, a 24 per cent increase. This is also a record, eclipsing an average of 1,729 new cases set during the Dec. 3-9 reporting period. The Calgary Zone had the highest total number of new cases this week with 6,553, an average of 936 cases per day and a 39.4 per cent increase from the previous week, when 4,702 new cases were reported.



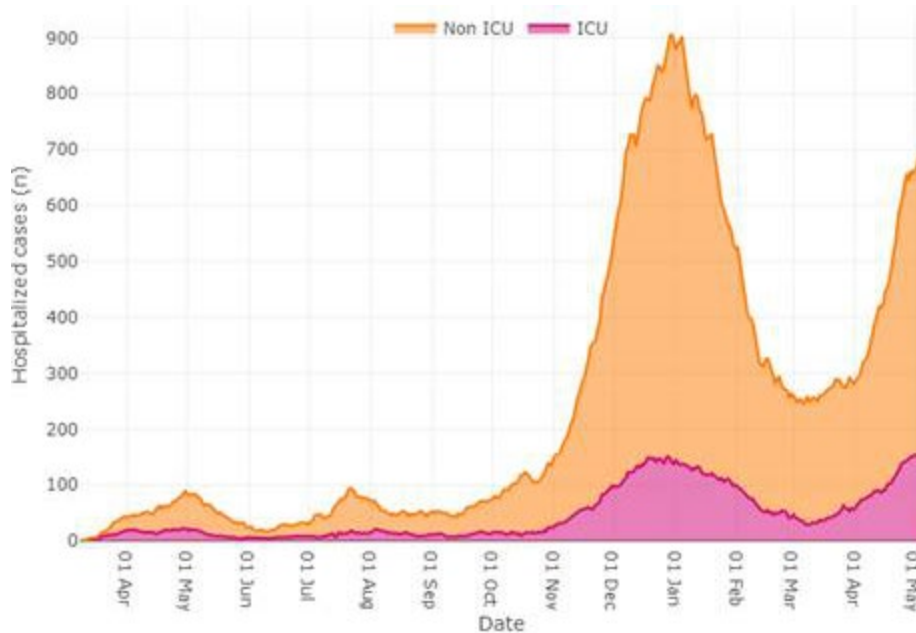
### Cases by age group

On May 2, the seven-day rolling average among school-aged children (5-19 years) was 60.1 cases per 100,000 people, the highest rate per age group, followed by the 20-29 years age group at 51.4 cases per 100,000 people. The rate for people 80+ years, the age group with the highest rate in Wave 2, was only 8.0 cases per 100,000 people. A visual representation of these trends in cases in Alberta by age group is provided in the figure below.



### Hospitalizations and ICU admissions

On May 1, there were 154 individuals with COVID-19 being treated in intensive care units (ICUs), eclipsing the previous record of 151 set on Dec.28, 2020. That number has since gone down. As of May 5, there were 146 individuals being treated in ICUs, a 3.3 per cent decrease in ICU admissions from the previous week when 151 individuals were in ICU on April 28. A total of 508 individuals were in non-ICU hospital beds on May 5 compared to 495 on April 28, a 2.6 per cent increase.



The breakdown of hospitalizations by zone as of May 5 is as follows:

	Hospitalizations	ICUs
<b>Calgary</b>	243	58
<b>Edmonton</b>	228	56
<b>North</b>	85	17
<b>Central</b>	63	10
<b>South</b>	35	5

### Variants of concern

On May 1, due to the overwhelming proportion of variants of concern (VOCs), changes were made to the decision rules of when to screen, the process by which we determine if a COVID-19 case is a variant or not. As a result, any figures that report the overall number of VOC cases, or count, will indicate a decrease in VOC cases when the decrease is actually being driven by a decrease in screening.

Due to this change, moving forward, we will be reporting a proportion of samples that are a VOC. In addition, the U.K. variant, B.1.1.7 is the dominant strain in circulation, so reporting on this variant will be phased out in this update and the focus will shift to

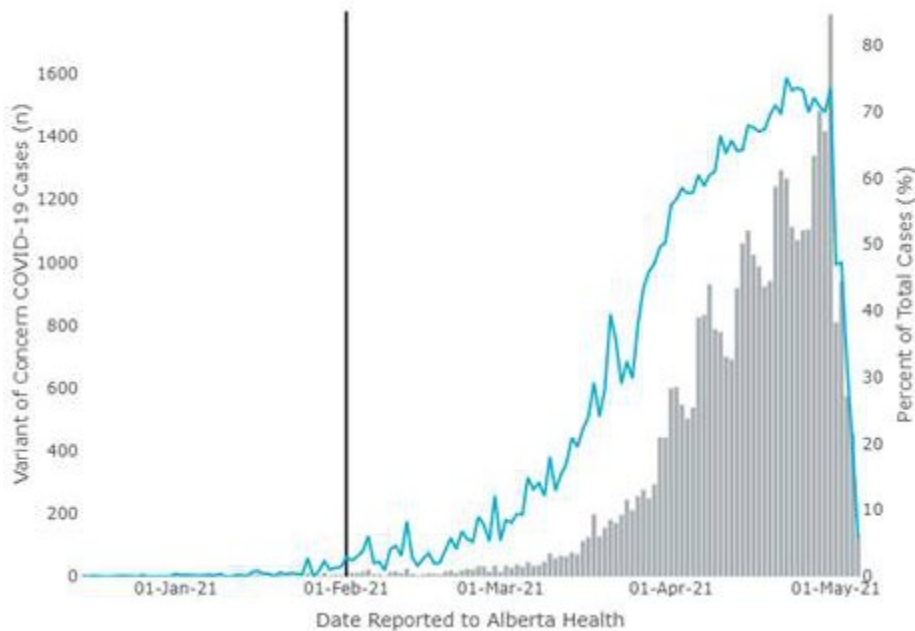
the remaining VOCs.

On May 5, averaged over the previous seven days:

- 82.0 per cent of total samples successfully screened was the B.1.1.7 (UK) variant
- 4.1 per cent of total samples successfully screened was the P.1 (Brazil) variant
- 0.4 per cent of total samples successfully screened was the B.1.351 (South Africa) variant

The remaining per cent of total samples successfully screened are either a presumptive variant, a presumptive variant of interest, or not a variant.

The figure below shows new VOC cases (grey bars) and the percentage of VOC cases identified compared to other cases of COVID-19 (blue line). You can see the effect of the changes in screening protocols with the sharp drop on May 1:



**Other notable COVID-19-related information:**

- As of May 5, a total of 203,135 cases of COVID-19 have been detected in Alberta and a total of 8,224 individuals have been hospitalized, which amounts to 4.0 individuals for every 100 cases. In all, 176,536 Albertans have recovered from COVID-19.
- As of May 5, 2,102 individuals have passed away from COVID-19, including 27 between April 29 and May 5. We extend our condolences to the families of these individuals, and to all who have lost loved ones from any cause during this time.
- From April 29 to May 5, 126,025 COVID-19 tests were completed, an average of 18,004 tests per day. During this period, the daily positivity ranged from 10.33 per cent to 13.2 per cent, the highest positivity seen in Alberta since the

beginning of the pandemic. As of May 5, a total of 4.26 million tests have been conducted and nearly 2.1 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 provincewide R value from April 26 to May 2 was 1.12, whereas R value the previous week was 1.04. However, R values vary by zone; while the Calgary Zone reported an R value of 1.16 and the Edmonton Zone reported an R of 0.99, the rest of Alberta had the highest R value: 1.18.
- For the winter school term, as of May 5, AHS has confirmed 7,586 individuals with COVID-19 were present at schools while infectious or acquired the disease in the school setting. A total of 1,284 out of 2,415 schools (53.2 per cent) in the province have reported an individual has attended their school while infectious or had in-school transmission.

## Things You Need to Know

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### **Expanded Public Health Measures Announced**

The Government of Alberta earlier this week announced expanded COVID-19 public health measures to curtail the current spike of new and active cases in the province. These new measures will apply to all communities with more than 50 cases per 100,000 people and with 30 or more active cases.

You can see all the expanded measures, as well as the municipalities affected by them, on the [government website](#). The measures include but are not limited to:

#### *Outdoor social gatherings*

- All outside social gatherings must be limited to no more than five people, a decrease from the previous 10-person limit.
- Mandatory physical distancing must be maintained at all times between members of different households.
- All indoor social gatherings are still prohibited.

#### *Indoor fitness*

- All indoor fitness must close, including for one-on-one training.

#### *Funerals / wedding and funeral receptions*

- No more than 10 people can attend funeral services, including participants and guests. This is a decrease from the current limit of 20 people, and brings funerals in line with wedding services.
- Wedding and funeral receptions are still not permitted.

### *Retail*

- Retail services must limit customer capacity to 10 per cent of fire code occupancy (not including staff) or a minimum of five customers.
- The 10 per cent capacity limit at shopping malls will exclude common area square footage.
- Curbside pick-up, delivery and online services are encouraged.

### *Post-secondary institutions*

- All post-secondary learning must shift to online learning only.

### *Places of worship*

- Faith services are limited to in-person attendance of 15 people. This is a decrease from the previous 15 per cent capacity limit.
- Physical distancing between households must be maintained at all times.
- Virtual or online services are strongly recommended.
- Drive-in services where people do not leave their vehicles and adhere to guidance are allowed.

### *Hotels/motels*

- Hotels and motels can remain open but pools and recreation facilities must close.

### *Working from home*

- Working from home remains mandatory unless the employer requires the employee's physical presence to operate effectively.
- When at work, employees must mask for all indoor settings, except in work stations or where two-metre physical distancing or adequate physical barriers are in place.

### *Schools (K-12) – Effective today (May 7)*

- All kindergarten to Grade 12 students will temporarily shift to at-home learning, starting on May 7. Students will return to in-class learning on May 25. Exceptions will continue to be available for students with disabilities so they can continue to attend in-person classes as necessary.

### *Restaurants, bars, pubs, lounges and cafes – Effective at 11:59 p.m. on May 9*

- In-person dining on patios is prohibited. Only takeout or delivery services are allowed.

### *Personal and wellness services – Effective at 11:59 p.m. on May 9*

- Hair salons, barbers, nail salons, estheticians, tattoo and piercing businesses must close. Previously, these were allowed by appointment only.

### *Health, social and professional services – Effective at 11:59 p.m. on May 9*

- Regulated health services, such as physicians, dentists and chiropractors, can remain open by appointment only.
- Non-regulated health services, such as massage therapists and kinesiologists, can remain open by appointment only.
- Professional services, such as lawyers and photographers, can remain open by appointment only.
- Social services, such as shelters and not-for-profit community kitchens, can remain open.

*Sports, performance and recreation – Effective at 11:59 p.m. on May 9*

- All outdoor sports and recreation are now prohibited except with members of your household or, if living alone, two close contacts. This is a decrease from the current limit of 10 people. This includes:
  - All group physical activities, such as team sports, fitness classes, training sessions
  - All one-on-one lessons and training activities
  - All practices, training and games
- All indoor sport and recreation is prohibited, including youth sports.
- All indoor performance activity is prohibited, including youth performances.
- Professional sport organizations that have received an exemption can continue, provided protocols are strictly followed.

All other public health measures remain in place, including masking and physical distancing requirements.

Municipalities that have fewer than 50 cases per 100,000 people and/or fewer than 30 active cases will be required to return to Step 0 level restrictions, which are outlined on the [government website](#).

**Continuing Care Visitation Restrictions Being Eased by Alberta Health**

On Monday, changes are being made to the visitation restrictions in continuing care sites, allowing four designated family/support persons per resident instead of two, which has been the case since last summer. Alberta Health eased the restrictions because of the uptake of COVID-19 vaccinations among residents and staff in continuing care sites.

We recognize the importance and value of relationships between residents, their families and support persons, and encourage all opportunities to facilitate these connections. We will be supporting continuing care operators, residents and their families to ensure sites, with the approval of residents, are able to adopt the changes.

Starting May 10, the following changes will come into effect:

- Each resident may have up to four different people acting as their designated family/support persons. This is an increase from two, and can include minors.
- Where possible, and provided the majority of residents agree, indoor social



gatherings with visitors can now resume, as long as they are all from the same household and distancing, masking and other health measures remain in place.

- Outdoor social visits at these facilities can expand to up to 10 people. This is double the current limit of five.

These changes will vary by site. Each site must develop their own visiting approach that falls within the guidelines set out in [CMOH Order 16-2021](#), based upon the specific risks at that site, and reflects the risk tolerance as discussed with the residents who live at that site. This work is underway and will be communicated at the site level in the coming weeks.

Temporary limitations for visitors (i.e. non-designated family/support persons) may still occur in the event of a COVID-19 outbreak or where the risk tolerance of residents is low. All restrictions must be determined in collaboration with the care team, site, residents/legal decision makers and families. Visitation for residents at the end-of-life will continue to be supported. Immunization rates are a key factor in the revised visitation approach but designated family/support persons and visitors will not be required to disclose vaccination status.

Please ensure all communications are updated to reflect the current CMOH order. For more information, please visit [alberta.ca/covid19](https://alberta.ca/covid19).

## **COVID-19 Immunization Update**

### *By the Numbers*

As of 7 a.m. today (May 7), more than 1,729,300 total doses of COVID-19 vaccine have been administered by AHS. More than 1,125,100 Albertans have received at least one dose of COVID-19 vaccine and more than 302,000 have received both Dose 1 and Dose 2.

### *100,000+ appointments booked in five hours*

On Thursday, May 6, more than 100,000 immunization appointments were booked between 8 a.m. and 1 p.m., and the number of booked appointments continue to rise. Thank you to all the teams for your hard work and preparation for making this possible. Let's keep the momentum going!



*New cohorts added, eligibility expands again Monday*

Several new eligible cohorts opened over the past week and we'd like to thank all of the teams for your hard work and preparation for making this possible. Yesterday (May 6), eligibility for Pfizer or Moderna vaccine expanded to include all Albertans 30 or older. Meanwhile, starting Monday (May 10), Albertans born 2003 and earlier will be able to receive either Pfizer or Moderna, and those born between 2004 and 2009 will be eligible for Pfizer. Anyone in these cohorts can book their appointment through the [AHS online booking tool](#), by calling Health Link at 811, or through a [participating pharmacy](#).

*Milestone reached as more than 1 million shots administered*

This past week, immunizing teams hit the milestone of administering one million doses of COVID-19 vaccine — another milestone for the number of doses of COVID-19 vaccine administered by AHS. We are so grateful to all our dedicated immunizing teams who continue to work seven days a week to roll vaccine out as quickly as possible to Albertans provincewide. We appreciate and value all the work you have done and continue to do.



*Regional Municipality of Wood Buffalo and Town of Banff*

AHS deployed 20,000 additional doses of vaccine to support the Regional Municipality of Wood Buffalo and Town of Banff. The age group eligible for immunization in these communities was lowered to 18 years and older to encourage vaccine uptake. All eligible individuals in both communities are encouraged to book their immunization appointment by calling Health Link. For more information about who can book an immunization appointment and how, please continue to visit [ahs.ca/covidvaccine](https://ahs.ca/covidvaccine).

**COVID-19 Immunization Campaign – Stick with the Facts. Stick Together**

We know people will have different feelings and concerns about COVID-19 immunization and that's OK. But we should all have the same information and support each other to learn more. This is why AHS is launching an awareness campaign to help teams get the information they need to stay safe and address different feelings and concerns about COVID-19 immunization.

The 'Stick with the Facts. Stick Together' campaign is aimed to create a safe space to support staff who have questions about getting immunized. By continuing to build trust, sharing fact-based information and having ongoing conversations with each other about COVID-19 immunization, we can maintain a work environment that promotes worker and patient safety.



Our actions matter now more than ever. Here's how you can get involved:

- Check out the posters you will be seeing around your site shortly and feel free to put them up in your own work area:
  - [Team Up.](#)
  - [Stick Together.](#)
  - [Check Your Concerns.](#)
- Use our customized [Zoom background](#) to engage with each other and have conversations about COVID-19 immunization.
- Order and wear a [promotional button](#) to encourage people to get immunized.
- Check your concerns with the COVID-19 [Myth Busters information sheet](#).
- Use the [Worker Safety Moment](#) to spark a conversation at your next team meeting.
- Remember to check out [staff COVID-19 immunization rates](#) to support teams to get immunized.
- Post a comment on the [myth-busting tool](#) if you want to fact-check something you've heard about the vaccine. An AHS expert will validate the fact or debunk the myth.

Please visit the [COVID-19 Immunization Insite page](#) often for regular updates. We will continue to update and share campaign resources as they become available.

### **COVID-19 Testing for Healthcare Workers — The Latest Numbers**

We continue to update the testing data for healthcare workers in the [AHS Healthcare Worker COVID-19 Testing dashboard](#). 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. Please note that a new page has been added to the dashboard that provides more detailed information regarding test results for COVID-19 variants.

As of May 5:

- 76,240 employees (AHS and APL combined) have been tested for COVID-19 and, of those tested, 5,339 (or 7.0 per cent) have tested positive.
- Of the 3,241 employees who have tested positive and whose source of infection has been determined, 541 (or 16.7 per cent) acquired their infection through a workplace exposure. An additional 2,098 employees who have tested positive are still under investigation as to the source of infection.
- 5,278 physicians (AHS and APL combined) have been tested for COVID-19 and, of those tested, 229 (or 4.3 per cent) have tested positive.
- Of the 144 physicians who have tested positive and whose source of infection has been determined, 18 (or 12.5 per cent) acquired their infection through a workplace exposure. An additional 85 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](#) and [dashboard](#).

### **Child Care Arrangements for Staff**

We recognize suspension of in-person school attendance until May 25 has a significant impact on our workforce. Given the critical nature of health services, we want to work with our staff as they navigate this new situation so they can attend work as scheduled.

If a staff member is unable to attend work due to child-care issues, they should work with their manager to determine if there are other options, such as switching shifts or flexible hours. Otherwise, missed time should be coded in accordance with the applicable collective agreement or terms and conditions of employment (including special leave, personal leave, vacation, other banks as applicable, or unpaid leave).

### **Verna's Weekly Video Message – Mental Health Week; Health and Safety Week**

The daily demands of COVID-19 are taking a toll on mental health. We know this has not been easy. Many have had to deal with fatigue, stress and loss. And yet our people continue to do great work as we continue to protect the health of our communities, patients, families and each other.

As we come to the end of Mental Health Week and Health and Safety Week, we are reminded to continue to look after our physical and mental well-being all year round.

Joining me (Verna) this week [to offer helpful tips and to reinforce the importance of having both physically and psychologically safe work environments](#) are:

- Dr. Mircea Fagarasanu, Senior Program Director, Workplace Health and Safety.
- Dr. Jennifer Williams, Physician with Internal Medicine and South Sector Physician Lead in Wellness and Diversity.

- Mona Sikal, Executive Director, Employee Relations

We encourage you to take a few minutes to complete this [short survey](#) to help us understand what future resources you need to support your mental health at work.

If you or your loved ones are struggling, please remember confidential supports are always available through the [Employee and Family Assistance Program](#) (EFAP) by calling **1-877-273-3134** or visiting [insite.ahs.ca/efap](https://insite.ahs.ca/efap).



And on a related note...

### **Mental Wellness Moment — Dealing With COVID-19 Fatigue**

In the [latest Mental Wellness Moment](#), Dr. Nicholas Mitchell — AHS Provincial Medical Director for Addiction and Mental Health — talks about the many ways the pandemic has affected Albertans' mental health and identifies supports that can help people manage the stresses and anxieties they might be feeling during this global health crisis.



### **Always Practice Safe Online Surfing, Downloading**

Cybercriminals will look for any avenue to get malicious software (malware) onto your computer. Recently, AHS has noted an increasing number of cybercriminals creating fake websites that share documents (such as files ending in .pdf, .doc, .xls, etc.) or apps (.exe, .zip) that healthcare professionals would be interested in downloading.

If a user downloads these files from the cybercriminal's website, their computer will likely become infected by malware, which can destroy files, give the cybercriminal access to the user's computer and files, or infect the user's computer or the organization's full IT system.

Always practise safe surfing when browsing or downloading documents from the web. Read the [Malware FAQ & Tips for Safe Surfing](#) to help keep you and AHS safe from cybercriminals. And if you click on something or download a document that you are concerned about, contact the [IT Service Desk](#) immediately.

### **PPE Coach Program Celebrates 1,000 Participants**

Launched last November, AHS' Provincial PPE Safety Coach Program recently celebrated more than 1,000 participants across the province who have completed the program. It started as a local improvement initiative at the Alberta Children's Hospital in Calgary. Due to its success, it has spread to other sites and zones. The provincial program is for those areas that do not have pre-existing PPE coaching and mentoring programs in place. Coaching and mentoring can be used as a strategy to support staff and physicians in the appropriate selection and use of PPE and to address PPE fatigue.

The training is primarily self-directed and can be delivered virtually, so it is accessible to all interested staff. We'd like to thank everyone who's taken part so far and encourage anyone who hasn't signed up to do so. For more information go to [ahs.ca/ppesafetycoach](https://ahs.ca/ppesafetycoach).

### **You're Invited to Join Verna for Leadership Discussion**

You are invited to join me (Verna) and a panel of national healthcare leaders on Wednesday, May 12, from noon to 1:15 p.m., for a candid discussion about leadership during the COVID-19 pandemic. Titled Healthcare Under Siege: A Conversation on Leadership, this free, online event is presented by the Ivey Business School's Leadership Institute and open to everyone, although the discussion may be of particular interest to existing and emerging healthcare leaders.

Joining me on the panel are [Georgina Black](#), Managing Partner, Government & Public Services, Deloitte Canada; [Heather Chalmers](#), President and CEO, GE Canada; and [Melissa Farrell](#), President, St Joseph's Healthcare Hamilton. [Jon Hantho](#), President and CEO of CBI Health, will moderate. My fellow panellists and I will reflect on our personal leadership lessons, and share our thoughts on the future of health care in Canada and the critical role of character-based leadership in helping healthcare systems address post-pandemic challenges.

You can visit the [event webpage](#) for more information and/or to register.

Ivey Business School is the business school of the University of Western Ontario, located in London, Ont.

### **Clinician Volunteers, Donations Sought for India COVID-19 Aid Project**

India's healthcare system has collapsed with hundreds of thousands of cases and thousands of deaths daily from COVID-19. There are massive shortages of medications, oxygen, ventilators and staff.

In response, a group of Calgary doctors, nurses and lawyers are working together with the Child Foundation, a Canada Revenue Agency-registered non-government organization (NGO), to develop the COVID-19 India SOS project which aims to help at least 1,000 people in Delhi and a nearby rural area. They are fundraising for cash donations to purchase oxygen concentrators, medications and equipment. The group is also organizing virtual consultations, with Canadian physicians supporting on-the-ground nurses and doctors to keep lower-acuity patients out of hospital.

If you are interested in donating, go to the [Child Foundation website](#). If you are a clinician and able to volunteer some time to support your colleagues on the other side of the world, we will share information next week on how to sign up.

### **National Recognition for Lifetime's Work in Public Health**

We'd like to congratulate Dr. Brent Friesen with our Population, Public and Indigenous Health team for receiving the Honorary Life Membership award by the Canadian Public Health Association (CPHA).

The CPHA, the only Canadian non-governmental organization focused exclusively on



public health, recognizes Dr. Friesen for being “a remarkable physician who has made significant contributions to all facets of public health and, in particular, health promotion, disease and injury prevention, and environmental health.”

In awarding its Honorary Life Membership, the CPHA highlighted two nationally recognized health programs that Dr. Friesen supported: Best Practice - Best Beginnings, an outreach nursing service to marginalized pregnant and post-partum women and their infants, and Comprehensive School Health.

## Be Well - Be Kind

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### **May is Health Philanthropy Month**

May marks Health Philanthropy Month — and AHS is celebrating our philanthropic partners and their contributions throughout Alberta.

AHS is proud to work alongside our partners, including more than 50 auxiliaries and 69 foundations, to support the care we provide patients. Collectively, these organizations raise more than \$275 million each year toward healthcare priorities in their communities. Most recently, their contributions have helped our COVID-19 response by funding mental health programs such as [Text4Hope](#), laboratory equipment, research and much more.

Throughout May, we encourage you to stay tuned as we highlight our partners on AHS.ca, Insite and social media. To learn more about AHS’ philanthropic partners, please visit [ahs.ca/give](https://ahs.ca/give).

### **High River and Nanton Say Thanks on Health Care Heroes Day**

The High River District Health Care Foundation invited community members in High River and Nanton to celebrate their second annual Health Care Heroes Day yesterday (May 6).

Throughout the day, area residents showed their appreciation for healthcare teams in High River and Nanton by putting up signs, posting on social media, and signing in-person and [virtual message boards](#). Local emergency services also led community members in a [drive-by parade](#) in front of the High River General Hospital to bring smiles to the faces of hospital patients, residents and staff.

We are truly grateful to the foundation for this remarkable gesture toward our staff, and to High River and Nanton residents for their ongoing support of healthcare in their communities.

### **Sharing the Love — We are Making a Difference**

*“We’re all in this together” is the mantra we’ve all heard these many months. Wearing masks, sanitizing our hands and social distancing have become*

*second nature as we go about our day. Our front-line staff are called on to support the pandemic response in so many ways, both on site and off, changing days, hours and the very nature of our work. Many have shared how the marathon of this experience has taken its toll. We all want to pitch in but can't help but wonder: Does it really make a difference in the lives of Albertans?*

*The answer is an overwhelming YES! I recently had the privilege of working alongside front-line staff at the Edmonton Expo's rapid flow vaccine clinic supporting screening and directing clients to the next available immunizer. I was overwhelmed, seeing over and over again the sheer joy and appreciation from clients who were so grateful for the opportunity to get their COVID-19 vaccine. I heard time and time again, "Wow, this process was so smooth; this is a really well-oiled machine," and "Everyone here is so nice," and "Thank you for doing this!" I have never been more proud to be part of this organization. We all came from different areas, different jobs and then contributed in small ways to support a logistical beast that provided not only a valued service but an amazing experience for clients, many of whom have been living in the shadow of fear for so many months.*

*When I look back at all the long hours and countless challenges that AHS staff face on a daily basis, it's easy to get lost in the minutia. I will be forever grateful for the experience of working alongside my AHS colleagues on the frontline, seeing firsthand the very real reminder of why we come to work every day and the real difference that everyone pitching in can make. It's not just lip service. We really are in this together. We really are making a difference.*

*— Christine Foisy, Manager of Physical Therapy  
Glenrose Rehabilitation Hospital*

### **Gratitude from Albertans**

Everything you and your colleagues do every day to provide safe quality care to all Albertans is being noticed. Messages of gratitude keep coming in from across the province and beyond during the COVID-19 pandemic. We want to share a recent message of gratitude with you — and you can see others on our [Sharing the Love](#) webpage.

*My father died at the end of January. He was a complex man and a complex patient, and this was reflected in his healthcare needs, which were equally complex. My father was recovering during the four months prior to his passing, thanks to the healthcare teams looking after him. And we had reconnected thanks to the insights, perspectives and capabilities introduced by these healthcare professionals. I am so grateful for this as now his death comes with sadness but also peace because things were not left undone. And very importantly, he passed away in the safety of their capable hands. I am sharing this because I wanted to take a moment to recognize the humanity that is still*

*an essence running through our healthcare system. What our healthcare professionals are doing — every day, all day long — for all patients. Our healthcare professionals are incredible not at being heroes but, in addition to their technical skills, at being human, compassionate, and present when we — as patients and families — are vulnerable, scared and teetering on the edge of life and death.*

— Ania

### **Wrapping Up — Be Proud of What We've Achieved**

We suspect that, like us, many of you hope the expanded public health measures announced this week are effective in bringing down the COVID-19 numbers. Also like us, you're likely assessing how these new measures will affect you and your families as you go about your day-to-day lives. It's never easy when public health measures impact what we enjoy doing, who we can see and how. It's OK to feel conflicted at this time. You can be happy about the measures professionally but find them disruptive personally. Likewise, you can feel hopeful because of expanding vaccine rollout but also feel disheartened by current spread of the virus throughout the province, coupled with news of some wilful non-compliance to health measures. So we end this week's message with a request. However you're feeling at this moment — hopeful or disheartened; both or neither — please try to find time to reflect on how far we've come, how resilient we've been and all that we've achieved throughout this pandemic. Remember, everything we've done as a health system, and everything you've done as a member of our AHS team, has been intended to protect the physical and mental wellbeing of Albertans and to minimize further loss of life as we try to bring this pandemic to an end. For that, we hope you feel proud — of yourselves and your colleagues. In our eyes, you are all amazing and we thank you for everything you do.

With enduring gratitude and appreciation,

#### **Dr. Verna Yiu**

AHS President & CEO

#### **Dr. Laura McDougall**

Senior Medical Officer of Health

