



Message from Dr. Verna Yiu & Dr. Laura McDougall

AHS Update: COVID-19 cases and hospitalizations continue to decline, government announces more major healthcare investments

Please print and share with your teams as needed

Dear staff, physicians and volunteers,

Today's Update

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- COVID-19 Cases in Alberta
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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.

Supports When You Need Them

Wellness Learning Available Online

We can all take steps to improve our mental and emotional well-being. You can access [Wellness Seminars](#); one-hour virtual sessions on a range of wellness-related topics, such as Building Resilience: Understanding Challenges, Learning Strategies and Accepting Change, and COVID-19: Self-Care Strategies. Wellness seminars are available year-round and you may register on [MyLearningLink](#). Managers may also schedule seminars for their teams and select from the topics available in the [catalogue](#).

If you feel overwhelmed about any issue, call the [Employee and Family Assistance Program](#) intake line any time at 1-877-273-3134. This service is confidential and available 24/7/365.

Physicians can contact the [AMA Physician and Family Support Program](#), also a confidential 24/7 support line, at 1-877-SOS-4MDS for options and support.

There are many ways we can support you through these challenging times no matter what your situation. See the [Resilience, Wellness and Mental Health Resource Guide](#) for a comprehensive list of health and wellness supports. You can also download [Headversity](#), the resilience app, to proactively build your mental health. Questions? Contact wellness@ahs.ca.

COVID-19 Status

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.

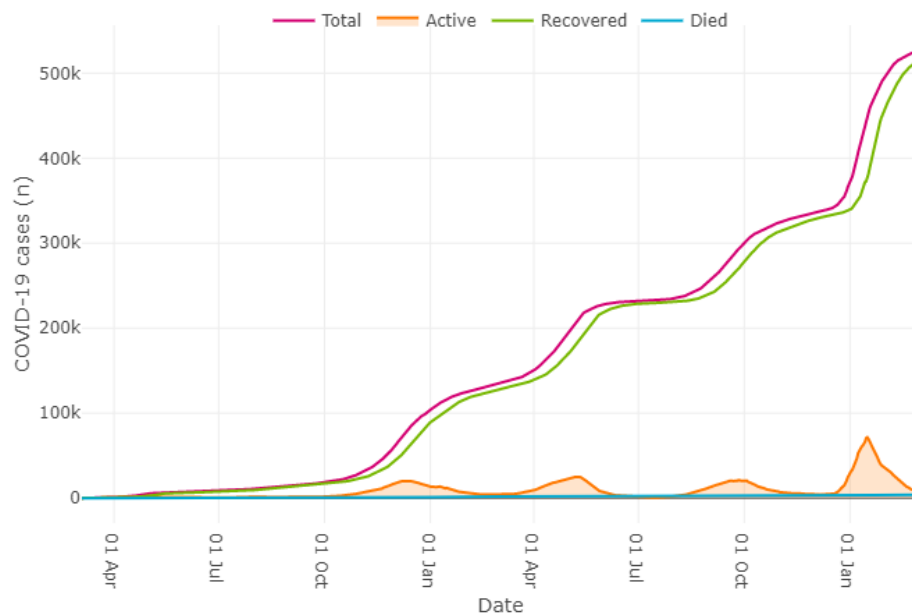
New and Active Cases

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

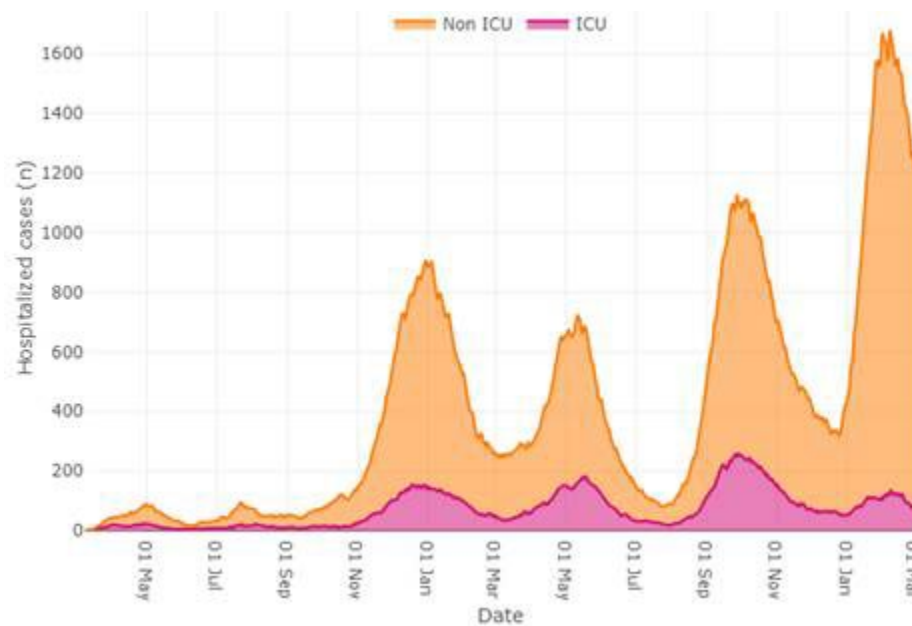
decrease. The Calgary Zone reported the highest total number of new cases with 1,192, an average of 170 new cases per day.



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.

Things You Need to Know

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. Providing care closer to home so that continuing care clients can remain connected to their communities and their loved ones improves the quality of life and overall well-being for continuing care residents and that continues to be our priority. This additional funding 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

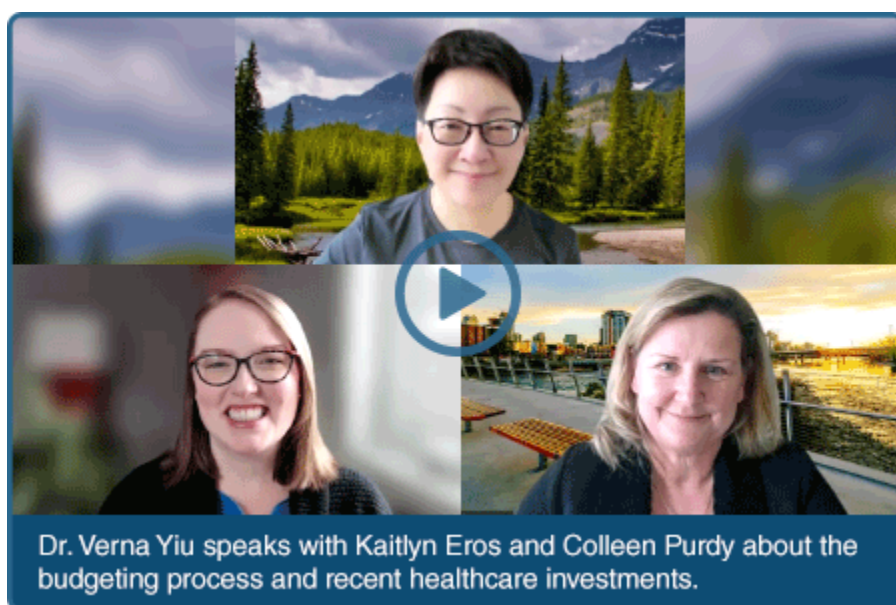
Over the past week, the provincial government has announced several other investments in healthcare; for example, a \$63-million investment will complete 11 new operating rooms and 17 additional recovery beds at Foothills Medical Centre in Calgary. As well, the Red Deer Regional Hospital Centre will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



Scientific Advisory Group Submits Rapid Review on Managing Healthcare Worker Burnout

Burnout is common among healthcare workers across all healthcare organizations. 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 healthcare worker 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 several 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](#).

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. The following measures were updated as part of this step:

- Remaining school requirements were removed.
- Youth screening activities for entertainment and sport activities were removed.
- Capacity restrictions on all large venues and entertainment venues were lifted.
- Indoor and outdoor social gathering limits were lifted.
- Indoor masking is no longer required except on municipal and intra-provincial public transit for Albertans 13 and older, and at AHS-operated and contracted facilities, and all continuing care settings.

Government also lifted its mandatory work-from-home requirements. AHS employees currently working remotely should confirm their longer-term work arrangements with their supervisor.

An implementation date for Step 3 is to be determined and will require a continued decline in hospitalization rates. More information, including details of Steps 2 and 3, is available on the [government's website](#).

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. 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

With restrictions lifting, and more Albertans gathering with family and friends, AHS is reminding Albertans about 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.

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. 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 24.4 per cent) have tested positive.
- Of the 8,982 employees who have tested positive and whose source of infection has been determined, 733 (or 8.2 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, 1,044 (or 16 per cent) have tested positive.
- Of the 364 physicians who have tested positive and whose source of infection has been determined, 27 (or 7.4 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](#).

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](https://albertafluenzastatistics.ca). For more information on influenza, visit ahs.ca/influenza.

Staff, physicians 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). Staff using these options are reminded to submit their [Got My Flu Shot form](#). See [Insite](#) for more on the staff immunization campaign.

'Misinformation and the Pandemic' Presentation Available on Insite

On Monday, Prof. [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.



Be Well - Be Kind

Support Available to Help Staff Affected by Residential School Discovery, Ongoing War in Ukraine

There has been a lot of tragedy in the news this week.

We are deeply saddened to learn about the 169 potential unmarked graves found by Kapawe'no First Nation near the site of a former residential school in northern Alberta. This discovery, the first in Alberta, acts as another reminder of the atrocities that Indigenous people have endured in our country for generations. Sadly, we know these discoveries will continue and we will continue to be faced with the horrific reality of our history. Due to the courage of residential school survivors and their families, we have known of some of the horrors at residential schools; however, we can never be truly prepared for these types of heart-wrenching discoveries.

As we collectively grieve the losses and mourn with families and communities, please know there are supports available to you.

We express our deepest sympathies to everyone who has been impacted by the past and present and hope we can honour the memories of those lost and those still living with the trauma through truth and reconciliation. There is so much more work to do and we each have a role to play. Education, awareness, learning, and a commitment to do better can unite us on a path forward.

Meanwhile, the world continues to monitor the ongoing war in Ukraine. We know many of our people are of Ukrainian heritage, and have family and other loved ones in the country. If you need support to manage stress and anxiety arising from this or other news event, we have a few specific resources:

Confidential support services are available through the [Employee and Family Assistance Program](#) (EFAP) available 24/7 at 1-877-273-3134. EFAP is here for you if you are coping with loss or need anything during or after [traumatic news and events](#), including [counselling services](#).

Registered EFAP counsellors who have extensive experience in counselling people within the Indigenous community are ready and available. Additional support is available for those wishing to engage with Elders and/or Knowledge Keepers of their choosing. Please contact [EFAP](#) to access these supports anytime.

The [Help in Tough Times page](#) also offers quick access to important phone numbers, self-help resources and supports on handling stressful situations. Physicians can find support through the [Physician and Family Support Program](#) (PFSP) by the Alberta Medical Association. The support line at 1-877-SOS-4MDS (767-4637) is also available 24/7.

In addition, we have [Change the Conversation resources](#) to help as we process this news: [Intergenerational Trauma](#), [Being an Ally](#), [Fearing Differences – Xenophobia](#), and [Trauma Awareness](#).

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.

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](#).

I had a very scary emergency visit that ended with a five-day stay at the Leduc hospital. I will forever be grateful for the kindness and compassion that all of my nurses and doctors showed during my stay. Not only did they treat me with grace in a difficult time but I could hear the love, kindness and compassion that they treated every patient on my ward with. Thank you from the very bottom of my heart for the care you gave me. You are all angels.

— Amanda Booth

Wrapping Up

We all hope the worst of the pandemic is behind us but we continue to see an impact across all our sites. Immunization, public health measures and precautions in our facilities have helped reduce the risk of COVID-19.

When Omicron arrived in Alberta in late November, it was a reminder of how quickly this pandemic can change and how ready we need to be to respond to new risks. We will remain vigilant and ready to adapt our approaches to minimize risk for the vulnerable people we serve and for all of you who care for them.

The longer-term approach to managing COVID-19 will rely less on public health orders and more on individual action. Keeping vaccinations up to date will be important, as will assessing your personal risk. If you deem your risk, or the risk of people you interact with closely, to be high, then you may wish to tailor your own behaviours, such as continuing to wear a well-fitted mask in crowded places.

For all of us, this shared responsibility will mean committing to best practices, such as staying home when sick and frequent hand hygiene.

We are so grateful for everything you've done and continue to do to care for Albertans during all the changes and challenges.

With enduring gratitude and appreciation,

Dr. Verna Yiu

AHS President & CEO

Dr. Laura McDougall

Senior Medical Officer of Health



Healthy Albertans.
Healthy Communities.
Together.

