

# AHS Update: AHS prepared as Ukraine evacuees arrive in Alberta, new COVID-19 cases increase across all five zones

Please print and share with your teams as needed

Dear staff, physicians and volunteers,

# Today's Update

- AHS Prepared as Ukraine Evacuees Arrive
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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.

# **AHS Prepared as Ukraine Evacuees Arrive**

AHS is actively working to <u>prepare for the arrival</u> and subsequent healthcare needs of evacuees. As we have done and continue to do, AHS is always looking to ensure that everyone receives the healthcare support they need, regardless of where they are from or the circumstances that brought them to seek aide.

Last week, we shared a request for volunteers from staff who speak Ukrainian, Russian or both languages and received close to 90 responses. This is overwhelming and heartwarming, and we want to thank everyone who has offered their assistance. At this time, we have enough volunteers to meet our current demands and will reach out if additional support is needed.

We have also received offers to donate supplies or equipment; however, AHS is currently not collecting donations. We encourage you to review the <u>Government of Canada website</u> which provides information about how you can help during a disaster abroad or to reach out to your communities to find out how donations can support evacuees in need.

This past Monday (March 28), four AHS staff members from Edmonton Zone were on the ground at Edmonton International Airport to welcome a charter flight of Ukrainian evacuees, including three dogs. Our staff were there to support the evacuees' arrival, provide information about health services and respond to any urgent medical needs.

AHS is preparing for additional arrivals in the weeks to come and we will be ready to support the healthcare needs of any evacuees who stay in Alberta for the foreseeable future. This work involves several areas of AHS. We'd like to thank every staff member for stepping up to assist. Every evacuee will be given access to the healthcare support they require, and all facilities and providers are reminded to accept any requests for care free of charge.

Our thoughts remain with everyone impacted by the war in Ukraine. AHS has launched a webpage for those who are looking for <u>support or resources</u>, as well as a page with resources <u>translated in Ukrainian</u>.

If you have questions or comments, please email <u>Ukraine.Inquiries@ahs.ca</u>.



# Supports When You Need Them

# Supports Available to Help Manage Wartime and Pandemic Anxiety, Stress

If you have been struggling with stress, anxiety or grief in relation to the Ukraine crisis, please know there are resources to support you and your loved ones.

You may also be feeling the effects of the pandemic catching up to you in the form of stress, fatigue or burnout. Short-term, solution-focused <u>counselling</u> offers coping strategies and skills you need to help improve your well-being.

The Employee and Family Assistance Program (EFAP) is confidential and available 24/7 at 1-877-273-3134. EFAP is here to support you during this difficult time, including if you are coping with loss or need anything during or after traumatic news and events, including counselling services.

When you call the Employee and Family Assistance Program (EFAP) intake line, you will be asked for some basic information and will have an initial appointment set up at a convenient time. An expert counsellor will help determine the best service for you. Counselling is available online and over the phone or video for you and your immediate family members.

For support with any issue, you can call the <u>EFAP</u> intake line 24/7/365 at 1-877-273-3134. Physicians can contact the <u>AMA Physician and Family Support Program</u>, also a confidential 24/7 support line, at 1-877-SOS-4MDS for options and support.

Support is available if you ever feel uncertain or overwhelmed. See the <u>Resilience, Wellness and Mental Health Resource Guide</u> for a comprehensive list of health and wellness supports. You can also download <u>Headversity</u>, the resilience app, to learn skills to proactively build your mental health. Questions? Contact wellness@ahs.ca.

# COVID-19 Status

# **ICU Update**

As of 1 p.m. today (April 1), AHS has 217 general adult ICU beds open in Alberta, including 44 additional spaces above our baseline of 173 general adult ICU beds. There are currently 163 patients in ICU. Provincially, ICU capacity (including additional surge beds) is currently at 75 per cent, up from 71 per cent a week ago. Without the additional surge spaces, provincial ICU capacity would be at 94 per cent, up from 90 per cent a week ago.

#### **New Cases**

For the seven-day period ending on March 28, there was an average of 659 new cases of COVID-19 per day, compared to 519 daily new cases the previous reporting period (March 15-21), a 27 per cent increase. The Calgary Zone reported the highest total number of new cases with 1,842 (an average of 263 new cases per day). All five zones reported an increase in the number of new cases this reporting period, compared to the previous week as you can see in the table below:

Zone	New Cases (March 22-28)	New Cases (March 15-21)	Percent Change
Calgary	1,842	1,444	+27.6%
Edmonton	1,481	1,114	+32.9%
North	383	297	+29.0%
Central	538	419	+28.4%
South	358	352	+1.7%
Unknown	10	4	+150.0%
Total	4,612	3,630	+27.1%

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. Alberta Health has stopped reporting the number of active COVID-19 cases.

# Hospitalizations

On March 28, 917 individuals were in non-ICU hospital beds for COVID-19, compared to 930 on March 21, a 1.4 per cent decrease.

#### **Variants of Concern**

APL continues to closely monitor SARS-CoV-2 variants. From March 22-28, an average of 81 per cent of positive samples were strain-typed. Of those, the seven-day rolling average was 74 per cent Omicron BA.2 lineage, 26 per cent Omicron BA.1, and Delta was detected once. The BA.2 sub-lineage 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 36.9 per cent of new admissions to non-ICU spaces are
  due to COVID-19 infection directly, 32.5 per cent had COVID-19 as a contributing cause and 30.6
  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 29.2 per cent; 41.7 per cent had COVID-19 as a contributing cause and 29.1 per cent
  were incidental infections or unclear.
- As of March 28, 4,074 individuals have passed away from COVID-19, including 30 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 28, 540,733 cases of COVID-19 have been detected in Alberta and 22,561 individuals have been hospitalized, which amounts to 4.2 individuals for every 100 cases.
- From March 22-28, 19,036 COVID-19 tests were completed, a seven-day average of 2,719 tests per day. During this period, the daily positivity ranged from 21.7 per cent to 27.1 per cent.

# Things You Need to Know

#### **COVID-19 Immunization Update**

#### Federal travel changes now in place

Today (April 1), the Public Health Agency of Canada lifted the pre-arrival COVID-19 testing requirement for fully vaccinated travellers. Passengers might still be subjected to random PCR testing at the airport, and travellers will still be required to use the <a href="https://example.com/ArriveCAN">ArriveCAN</a> App to enter their proof of vaccination.

Requirements for unvaccinated or partially vaccinated travellers are not changing.

Unless otherwise exempt, all travellers five years of age or older who do not qualify as fully vaccinated must continue to provide proof of an accepted type of pre-entry <a href="COVID-19">COVID-19</a> test result.

For more information, please refer to the Government of <u>Canada's COVID-19: Travel, Testing and</u> Borders for current Canadian travel requirements.

### Moderna for Albertans aged six to 11 years

Following the Health Canada approval of the Moderna Spikevax vaccine for children six to 11 years old, Alberta Health continues to determine vaccine allocation and eligibility criteria within the province.

The mRNA COVID-19 vaccines for children use a smaller dose than for those who are 12 years of age and older. This is because, in clinical trials, lower doses provided children with excellent protection against COVID-19.

The National Advisory Committee on Immunization (NACI) recommends children five to 11 years old receive two doses of an mRNA vaccine with the second dose administered at least eight weeks after the first dose.

For children who are moderately to severely immunocompromised, the recommendation is three doses.

Please watch for further information from Alberta Health and AHS about when this vaccine might be available for Albertans aged six to 11 years of age.

## **Updates to Designated Support Person and Visitor Guidance**

The <u>Designated Support Person and Visitor Access Guidance</u> was updated earlier this week, and several changes have been made that ease restrictions on designated support persons (DSPs) and visitors.

#### These changes include:

- The addition of the CMOH exemption from isolation for individuals wishing to visit a patient who is at end of life.
- Accommodating two DSPs for maternity patients (an increase from one DSP previously).
- Accommodating two DSPs simultaneously in most inpatient care areas.
- Accommodating four DSPs to be designated for long-stay patients (a stay of 10 days or more) with two DSPs able to be present with the patient simultaneously.
- Updated guidance regarding DSP access during an outbreak.
- Removing limits on the frequency of sibling visits for pediatric patients (visits will still need to be
  pre-arranged and approved by site administration / designate and in consultation with Infection
  Prevention and Control).
- Expanding bedside access for critical care during potential loss of life and end-of-life situations to all identified support persons and visitors (as approved by site administration/designate).

All changes listed above are subject to the service area's ability and site configuration allowing for physical distancing between individuals not from the same household.

Key safety precautions remain in place. All DSPs and visitors will continue to be required to comply with AHS screening processes, continuous masking, minimizing movement within the site, hand hygiene and any other infection prevention and control measures as may be required to enter a site.

The Visitation Taskforce aims to balance the need for family presence with the protection of patients, residents, staff, sites and services. The taskforce will continue to monitor the status of COVID-19 in Alberta and adapt visitation guidelines accordingly.

For more information, visit <u>ahs.ca/visitation</u>.

Also related to family presence and visitation...

# Verna's Weekly Video Message — What We've Learned about Family Presence, Visitation

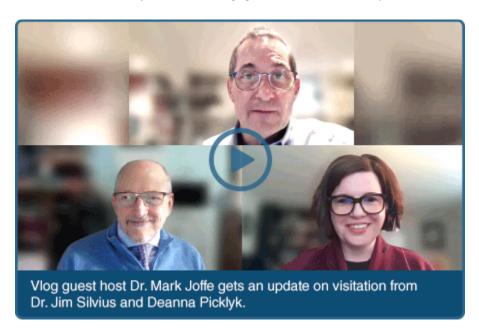
As we know, family and loved ones play an essential role in the emotional, physical and mental well-being of our patients and residents.

We continue to work with families and facilities to welcome family presence and visitation wherever we can, while looking after the safety of patients and staff throughout the COVID-19 pandemic.

Now that it's been more than two years since the pandemic began, we're looking at what we've learned and what visitation may look like as we move forward.

This week, vlog guest host Dr. Mark Joffe — Vice President & Medical Director, Cancer Care Alberta, Clinical Support Services and Provincial Clinical Excellence — <u>sits down with our interviewees to get their thoughts on this topic:</u>

- Dr. Jim Silvius, Senior Medical Director, Provincial Seniors Health and Continuing Care, and colead of the Family Presence and Visitation Taskforce
- Deanna Picklyk, Director, Engagement and Patient Experience



# PPE Question of the Week — Why Should Albertans Continue to Wear Masks at AHS Facilities?

With Alberta reducing many public health measures over the past several weeks, AHS needs to continue to ensure the safety of vulnerable patients and the healthcare teams that care for them. In this week's PPE video of the week, Dr. Mark Joffe — VP and Medical Director Cancer Care Alberta, Clinical Support Services and Provincial Clinical Excellence — <u>discusses why continuous masking remains an important health guideline in AHS facilities</u>.



#### Paxlovid Available at More Alberta Pharmacies

Paxlovid, a COVID-19 antiviral medication, is now available at more pharmacies across the province. Albertans who meet <u>eligibility criteria</u> must call Health Link at 1-844-343-0971. Health Link staff will ask screening questions to confirm eligibility and arrange for next steps. Paxlovid must be started within five days of the onset of COVID-19 symptoms. Albertans are asked to not call pharmacies or physician offices directly. Pharmacies providing Paxlovid in their communities can be <u>found online</u>.

#### **Expanded Continuing Care Facility Directory Now Online**

AHS has expanded the <u>Continuing Care Facility Directory</u> (CCFD) to be more inclusive of the types of continuing care accommodations that are available to Albertans.

AHS has worked with Alberta Health and service providers to improve information sharing about continuing care accommodations based on recommendations from the Facility-Based Continuing Care Review.

In addition to publicly funded designated supportive living and long-term care facilities currently listed in the CCFD, supportive living and seniors' lodges were added. The CCFD will enable Albertans to filter results by a variety of different data elements, including room type, common amenities and level of care.

Having a single, reliable source of information will help Albertans to make the right choice to suit their accommodation and healthcare needs.

Participation in the updated CCFD is voluntary for non-designated supportive living facilities. Any site owner/operator who wishes to be listed on the CCFD can email <a href="mailto:facility.directory@ahs.ca">facility.directory@ahs.ca</a>.

# **Remote Work Expectations**

Now that the remote work order is lifted, staff who were previously working remotely, and have approved hybrid or onsite arrangements in place, can begin to return to working on site when the site is ready and set up for their safe return. If you are eligible for a <u>remote or hybrid work arrangements</u> but do not yet have an agreement in place, please speak with your leader. For more information, please refer to the <u>Return & Reimagine FAQs</u>.

Eligible employees in the HSAA bargaining unit are now able to be approved for hybrid or remote work arrangements if supported operationally. Leaders should review the existing HSAA Teleworking Letter of

Understanding (LOU) and apply payment for mileage and travel time under a hybrid arrangement as required. Bargaining continues with AUPE-GSS and employees in the AUPE-GSS bargaining unit must be allowed to continue in remote arrangements until AUPE-GSS LOUs are updated. Please visit <u>Insite</u> for further information.

### **AHS Staff Remote, Hybrid Parking Options**

Starting Monday (April 4), AHS staff who have chosen to work in a remote or hybrid model will have an option to pay for flexible hourly parking at sites where the AHS Parking mobile app is available.

Staff would pay through the app on an as-needed basis rather than through payroll deduction based on total paid hours. The hourly parking rate for staff will be \$1.50 per hour, with a \$14.25/day or 24-hour max rate.

Staff interested in using the AHS Parking App for hourly parking option can apply through Parking Services at <a href="mailto:ProvincialParking@ahs.ca">ProvincialParking@ahs.ca</a>. Instructions for downloading and using the AHS Parking App will also be provided once the parking request is submitted.

AHS employees with monthly parking privileges, who are still working from home or need more time to decide, can continue with the temporary parking suspension program. Parking charges will only be restarted as staff choose to reinstate their parking privileges.

Staff with parking privileges who want to return to work full time and reinstate their monthly parking must contact AHS Parking Services at <a href="mailto:ProvincialParking@ahs.ca">ProvincialParking@ahs.ca</a> to provide their name, site and date of return. Parking payments would be reinstated through payroll deduction.

For more information visit Parking Services on Insite.

#### **HQCA** Launches Campaign to Encourage Albertans to be Active in their Healthcare

The Health Quality Council of Alberta has launched a campaign to help increase awareness about the importance of being active participants in a healthcare team. The HQCA has developed several resources for individuals, such as tips for before, during and after a visit with a healthcare team, questions to ask, and a symptom tracker. AHS employees are encouraged to direct patients to hgca.ca/info.

#### Sudden Increase in Influenza Cases, Outbreaks in Alberta

While there were no reported influenza cases in Alberta in all of the 2020-21 season, and there have been only sporadic cases of influenza reported in the province since December 2021, we have seen a sudden spike in the past two weeks.

On March 13, the province had a total of 17 confirmed cases. As of March 26, a total of 124 laboratory-confirmed seasonal influenza cases were reported, including two Influenza A outbreaks reported this week. These are the first influenza outbreaks reported for this influenza season and both are in continuing care sites; one is in South Zone (Lethbridge) and the other is in Calgary Zone (Calgary). So far this season, nine hospitalizations have been reported due to influenza and no deaths.

These cases are a reminder that you can be contagious with influenza before you even feel sick. No one wants to be the reason someone else gets sick; and no one wants to get sick.

In addition to being immunized, wash your hands often, practise good respiratory etiquette, physical distancing and masking, and stay home when sick.

Please note, the 2020-2021 Alberta Influenza Immunization program has ended for the general public. March 31 was the last day for members of the general public to receive influenza immunization. Eligible children under the age of nine, who have received one dose of the influenza vaccine prior to March 31, will be offered their second dose until April 30, 2021. Click here for more information on how to book. And, if you got your influenza vaccine at a public health clinic, pharmacy or doctor's office, please remember to complete the Got My Flu Shot Form.

# Be Well - Be Kind

#### **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 and you can see them on our <a href="Sharing the Love webpage">Sharing the Love webpage</a>.

#### **Wrapping Up**

This week, as the conflict in Ukraine continued, we looked on as the AHS workforce and Albertans in general opened their hearts and their homes to welcome the first group of Ukraine evacuees to our province. Helping evacuees, refugees and any international visitors who seek our help during humanitarian crises has always been fundamental to how we operate, and the situation in Ukraine is no different. As we mentioned in this week's top item, our AHS family is ensuring the evacuees will get free-of-charge access to the healthcare supports they need. They need our help and we'll be here for them. We are among many helpers from across the province, across Canada and around the world, doing everything we can to shine the light of hope and humanity in these dark times. Thank you for everything you do for others and for each other.

With enduring gratitude and appreciation,

**Dr. Verna Yiu**AHS President & CEO

**Dr. Laura McDougall**Senior Medical Officer of Health



Healthy Albertans. Healthy Communities. Together.

