

AHS Update: Permanent ICU beds added, Calgary EMS IOC opens, Launch 4 of Connect Care approaches, many COVID-19 numbers decline

Please print and share with your teams as needed

Dear staff, physicians and volunteers,

Today's Update

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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.

Our Priorities

We are expanding the scope of our weekly AHS Update message. We will continue to provide the latest information on our COVID-19 response but we'll balance that with updates on the progress AHS is making on several priority areas. 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 on the work ahead.

Priority: Pandemic Response and Recovery

AHS will continue to provide access to vaccines and treatments, expand and enhance supports for long-COVID conditions, increase intensive care capacity, and return other services to pre-pandemic levels.

19 new ICU beds now open

As announced by Premier Jason Kenney today (May 13), the Government of Alberta is expanding healthcare capacity by investing \$100 million over each of the next three years to add up to 50 new and fully staffed intensive care unit (ICU) beds to Alberta's health system. As of this month, AHS has opened and staffed 19 of the 50 new permanent ICU beds. When the beds are not in use, staff will support other areas of the hospital, offering greater flexibility and overall capacity to the broader health system.

With the opening of the new beds, Alberta now has 192 adult general ICU beds across the province. With \$300 million over three years, AHS will boost its ICU capacity to 223 beds across all AHS zones.

Of the 19 new beds added:

- Five are in the Foothills Medical Centre (Calgary)
- Two are in Rockyview General Hospital (Calgary)
- Two are in South Health Campus (Calgary)
- Three are in the University of Alberta Hospital (Edmonton)
- Two are in the Royal Alexandra Hospital (Edmonton)
- One is in the Sturgeon Community Hospital (St. Albert)
- Two are in the Grande Prairie Regional Hospital
- Two are in the Chinook Regional Hospital (Lethbridge)

To date, AHS has filled 250 positions to support the new beds, including nurses, allied health professionals and pharmacists, as well as clinical support service positions, such as diagnostic imaging. AHS plans to open the remaining 31 of the 50 permanent beds by September, and continues to recruit to fill another 425 clinical and support service positions to support the total ICU bed numbers.

The full announcement is on the Government of Alberta website.

Priority: EMS 10-Point Plan

AHS EMS continues to address ongoing system pressures and create capacity within the system, working on the initiatives first outlined in the EMS 10-Point Plan. This work is focused on managing high volumes of EMS calls, freeing ambulances for urgent care needs, and ensuring our EMS workforce is robust and well supported.

Calgary IOC opens, Edmonton IOC to expand hours

EMS Integrated Operations Centres (IOC) provide a balanced, equitable distribution of patients to healthcare facilities, benefiting patients by expediting their care. This also decreases EMS offload delays.

In Calgary, a new IOC opened on Wednesday (May 11). Modelled on the Edmonton IOC, this will be EMS mission control for the zone, with real-time data feeds shown on screens around the room, much like an air traffic control centre. The IOC will be operational 24 hours a day, seven days a week.

Edmonton's IOC will expand coverage to 24/7 operations beginning May 24.

Priority: Digital Health Evolution and Innovation

This work involves the ongoing rollout of Connect Care; continued expansion of virtual health to support more community- and home-based care, programs and services; the rollout of the PRIHS digital health program, and continued work with provincial and federal governments and industry on bringing new health innovations to market.

Next Connect Care launch two weeks away

Connect Care teams are busy with final preparations for Launch 4 of Connect Care, which is now two weeks away — May 28.

This week, the laboratories at the Misericordia Community Hospital and the Grey Nuns Community Hospital are readying for an early launch tomorrow (May 14). We wish these teams well in their launch, knowing they will be supported by a skilled team of Connect Care experts and 'Super Users' during and beyond their launch day.

Super Users are individuals who, with some advanced knowledge and expertise, are available to help new users navigate the system. Keep an eye out for Super Users in the yellow smocks to ask questions and help you if you get stuck.

Training to work in Connect Care is critical to a launch. Additional training capacity, including some weekend training sessions, have been added in both Calgary and Edmonton to support staff in completing their training in time for Launch 4.

The remaining Launch 4 sites are also involved in many pre-launch activities. Long-term care, pharmacy and oncology are participating in conversion and cutover activities. Conversion is the process of transferring or transcribing patient-specific information from the legacy patient record into Connect Care. Cutover is the activity that moves workflow, data and users from legacy systems to Connect Care, specifically for active inpatients.

These are busy days for all Launch 4 teams, and we want to express our deep gratitude for all the hard work and dedication they have shown.

The full Connect Care implementation timeline is available on Insite.

Priority: Alberta Surgical Initiative (ASI)

AHS is dedicated to ensuring Albertans have access to high-quality and safe care. Timely access to surgeries is important to Albertans. No one should have to wait longer than clinically recommended for their surgery. In partnership with Alberta Health, AHS developed the Alberta Surgical Initiative (ASI), a plan to improve surgery in Alberta by shaping demand, managing capacity, and improving the patient's journey to receiving surgery.

Current surgical status

We continue to work diligently to recover to pre-pandemic surgical status. Over the past four weeks, the average of weekly volumes for surgical activity is 91 per cent of our pre-pandemic surgical volumes. Our total surgical wait list for adults sits at approximately 72,800, compared to approximately 74,300 at the beginning of April. In February 2020, before the pandemic, our total wait list was 68,000.

Priority: Rural Initiatives and Engagement

This work is designed to strengthen partnerships with rural communities, to enhance and better support the rural healthcare workforce and to better meet the unique needs of Albertans living in non-urban communities.

Health Advisory Councils build community knowledge

The Peace and Lakeland Communities health advisory councils met last week when they participated in discussions about the <u>Alberta Healthy Living Program</u>. All health advisory councils are open to the public. The Alberta Healthy Living Program offers services in communities throughout Alberta to those living with chronic conditions.

The Palliser Triangle Health Advisory Council will meet Monday (May 16) between noon and 3 p.m. Council members will discuss quality virtual care following a presentation by Sarah Hall, Interim Provincial Medical Director, and Dr. Tafi Madzimure, Rural/Regional Medical Lead, both with the Virtual Health team.

The Oldman River Health Advisory Council meets Tuesday (May 17) between noon and 3 p.m. and will showcase a partner agency, Wellspring, which will provide an overview of its cancer resources and services, as well as work underway to expand into rural Alberta.

Yellowhead East and David Thompson Health Advisory Councils are co-hosting an information session on Connect Care in central Alberta. This event will be held Tuesday (May 17) between 5 p.m. and 6:30 p.m. Yellowhead East is also hosting a regular meeting Thursday (May 19) between 5 p.m. and 6 p.m.

Finally, the Wood Buffalo Health Advisory Council will participate in conversations about First Nations emergency care at its meeting on Wednesday (May 18) between 5 p.m. and 8 p.m.

You can learn more about <u>AHS advisory councils on the AHS website</u> or to register to attend these meetings, contact community.engagement@ahs.ca.

Indigenous support phone line launching

North Zone leadership is hosting two townhalls May 18 and 19 to share information on a new toll-free phone line for Indigenous individuals who need help navigating the healthcare system. This pilot roll outs across the North Zone beginning May 30 and provides a culturally safe 1-800 support line aimed at building relationships and trust, reducing challenges and barriers, and facilitating access to AHS-related programs and services and connections to social supports and external programs within the zone. The project has been informed through consultation with the AHS Wisdom Council & Elder Circle. Interested participants can contact community.engagement@ahs.ca for information.

Recruitment and retention

AHS continues to reach out to communities and to municipal leaders to share updates and identify opportunities to enhance and improve recruitment to rural Alberta. In Central Zone, leadership is meeting with key community leaders in the Drayton Valley area, including surrounding towns, villages and counties, to provide an update on efforts to resume operations at the community cancer centre. Central Zone leadership is also meeting with Red Deer MLAs and city council to discuss efforts to resolve the current general surgery diversion at Red Deer Regional Hospital Centre.

An information session is being held in Lethbridge Tuesday (May 17) to share an update on efforts to recruit physicians to that community. While Lethbridge is an urban centre, it serves a large rural and agricultural community. The information session will be held at the Lethbridge Senior Citizens Centre between 5 p.m. and 7 p.m. As space is limited, contact community.engagement@ahs.ca for information and to register.

Supports When You Need Them

Support and Resources for Stress

Stress is a normal reaction to situations that require a response or change, but prolonged periods of stress can impact your mental and physical well-being. It's important to seek support before it becomes too overwhelming. You can do so through Stress Solutions.

This program is offered over the phone and focuses on stress management techniques and exercises. To access Stress Solutions, contact the Employee and Family Assistance Program (EFAP) intake line at 1-877-273-3134. You will be asked a few questions to make sure you receive customized support. A stress specialist will contact you, and provide you with coaching, support and materials to help your specific situation. The specialist will stay in touch to ensure you have the supports you need.

For physicians, please contact the <u>AMA Physician and Family Support Program</u>, 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 <u>wellness@ahs.ca</u>.

COVID-19 Status

ICU Update

As of 10 a.m. today (May 13), AHS has 212 general adult ICU beds open in Alberta, including 20 additional spaces above our baseline of 192 general adult ICU beds. There are currently 160 patients in ICU. Provincially, ICU capacity (including additional surge beds) is currently at 76 per cent. Without the additional surge spaces, provincial ICU capacity would be at 83 per cent.

Hospitalizations

On May 9, 1,188 individuals were in non-ICU hospital beds for COVID-19, compared to 1,280 individuals on May 2, a 17.2 per cent decrease.

Variants of Concern

Alberta Precision Laboratories (APL) continues to closely monitor SARS-CoV-2 variants. From May 3-9, an average of 79 per cent of positive samples were strain-typed. Of those, the seven-day rolling average was 98 per cent Omicron BA.2 lineage and two per cent Omicron BA.1. Delta was not detected during this period.

Recombinant SARS-CoV-2 strains have been detected and are circulating in Alberta, as well as across Canada and the world at low levels. The recombinants detected in Alberta are recombinants within the Omicron lineage and are not thought to be of any increased biological concern compared with the predominant BA.2 strain.

Recombinants occur as part of the evolution of SARS-CoV-2, and are being monitored as we remain in frequent communication with our provincial and national public health partners.

New Cases

For the seven-day period ending on May 9, there was an average of 650 new cases of COVID-19 per day, compared to 815 cases per day the previous reporting period (April 26 to May 2), a 20.2 per cent decrease.

The Calgary Zone reported the highest total number of new cases with 1,966 (an average of 281 new cases per day). All five zones reported a decrease 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 (May 3-May 9) | New Cases (April 26-May 2) | Percent Change |
|----------|----------------------------|-------------------------------|----------------|
| Calgary | 1,966 | 2,413 | -18.5% |
| Edmonton | 1,520 | 1,886 | -19.4% |
| North | 356 | 411 | -13.4% |
| Central | 406 | 593 | -31.5% |
| South | 296 | 403 | -26.6% |
| Unknown | 7 | 2 | +250.0% |
| Total | 4,551 | 5,708 | -20.3% |

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.

Wastewater Surveillance

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

- **South Zone:** The amount of COVID-19 RNA in Lethbridge wastewater nearly doubled this week, while Medicine Hat and Taber decreased by more than 40 per cent. Brooks remained stable.
- Calgary Zone: High River and Okotoks increased this week while the other five locations (Calgary, Airdrie, Banff, Strathmore and Canmore) decreased or remained stable.
- Central, North and Edmonton zones: All locations recorded decreases ranging from 24 to 68 per cent.

Frequency of reporting updates vary by sampling site. The above interpretations were made from available data as of May 9 at noon. 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:

- Data from the last seven days indicate that 34.6 per cent of new admissions to non-ICU spaces are due
 to COVID-19 infection directly, 29.1 per cent had COVID-19 as a contributing cause, and 36.3 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 41.4
 per cent; 37.9 per cent had COVID-19 as a contributing cause and 20.7 per cent were incidental
 infections or unclear.
- As of May 9, 4,391 individuals have passed away from COVID-19, including 70 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 May 9, 575,185 cases of COVID-19 have been detected in Alberta and 25,768 individuals have been hospitalized, which amounts to 4.5 individuals for every 100 cases.
- From May 3 to May 9, 21,906 COVID-19 tests were completed, a seven-day average of 3,129 tests per day. During this period, the daily positivity ranged from 16.8 per cent to 26.1 per cent.

Things You Need to Know

Interim CEO Video Message — Connect Care Launch 4 is Coming

Later this month, AHS will reach another milestone: Launch 4 of <u>Connect Care</u>. This is the largest launch yet, with 57 sites across the Edmonton and Calgary zones putting Connect Care in place on May 28.

The launch includes the Royal Alexandra Hospital and Glenrose Rehabilitation Hospital in Edmonton, and the Alberta Children's Hospital and Peter Lougheed Centre in Calgary. Also included are Calgary Zone rural and urgent care sites and the clinics and services aligned with them, the Southern Alberta Forensic Psychiatric Centre, Central Production Pharmacy, addiction and mental health facilities in Edmonton Zone, and all labs in the Edmonton Zone that have not already implemented Connect Care.

After Launch 4, there will be more than 60,000 staff and physicians using Connect Care to provide care to patients. Each launch is a huge amount of work, we would like to congratulate and thank everyone involved for the countless hours they've spent on this project.

Joining the AHS Vlog to tell us more about Connect Care and Launch 4 are:

- Debbie Pinter, Clinical Operations Informatics Officer.
- Penny Rae, Chief Information Officer.
- Dr. Jeremy Theal, Chief Medical Information Officer.



Severe, Acute Hepatitis of Unknown Origin in Children

Two possible cases of severe acute hepatitis have been reported in Alberta youth 16 years and younger.

As of May 10, 348 probable cases of acute hepatitis among children have been reported across five regions globally. In Canada, several cases are under investigation in Ontario.

The exact cause of this syndrome continues to be actively investigated.

Adenovirus has been detected in at least <u>74 cases</u> reported internationally. While adenovirus is currently one hypothesis as the underlying cause, it does not fully explain the severity of the clinical picture.

Symptoms of hepatitis (inflammation of the liver) include fever, fatigue, nausea, vomiting, jaundice (skin and eyes turning yellow), dark urine, abdominal pain, loss of appetite, and light-coloured stools. Parents and caregivers should contact their child's healthcare provider with any concerns they may have.

If there is an infectious cause of these hepatitis cases, precautions such as regular hand-washing and staying away from anyone who is sick, will be helpful. These precautions are also important to curb the spread of other respiratory viruses, such as late-season influenza.

Alberta continues to work closely with federal, provincial and territorial partners to monitor emerging information.

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 May 10:

- 95,439 employees (AHS and APL combined) have been tested for COVID-19 and, of those tested, 29,004 (or 30.4 per cent) have tested positive.
- Of the 12,289 employees who have tested positive and whose source of infection has been determined, 851 (or 6.9 per cent) acquired their infection through a workplace exposure. An additional 4,396 employees who have tested positive are still under investigation as to the source of infection.
- 6,703 physicians (AHS and APL combined) have been tested for COVID-19 and, of those tested, 1,501 (or 22.4 per cent) have tested positive.
- Of the 509 physicians who have tested positive and whose source of infection has been determined, 32 (or 6.3 per cent) acquired their infection through a workplace exposure. An additional 287 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.

New Collective Agreement Struck Between AHS, AUPE-AN

Yesterday (May 12), AHS and Alberta Union of Public Employees - Auxiliary Nursing (AUPE-AN) ratified a <u>new collective agreement</u>.

The four-year agreement expires on March 31, 2024, and sets out the terms and conditions for our auxiliary nursing staff.

The new collective agreement includes increases totaling 4.25 per cent over the length of the agreement and a one per cent COVID-19 recognition payment for the calendar year of 2021. In addition, AHS and AUPE-AN have agreed to partner in our work to address recruitment and retention of auxiliary nursing staff to remote and rural communities in Alberta through a Rural Capacity Investment Fund.

Be Heard Through Our People Pulse Survey

Take a few minutes to complete the five-question Our People Pulse Survey and let us know how you are doing and what you need to feel supported. Teams will discuss their own results and choose actions to improve.

Check your inbox for an email invitation from Gallup Inc., then click on your personalized survey link to begin. If you haven't received your email invitation yet, please check your junk email folder.

The survey closes at midnight Monday, May 23. Questions? Visit Insite.

Run for Women Coming Up in Edmonton, Calgary

The annual, nationwide <u>2022 Run for Women</u> in support of women's mental health is coming up. Individuals and teams can take part in-person in Edmonton on May 28 and Calgary on June 12, or virtually between May 5 and June 30.

All funds raised in Alberta from this year's events will support women's mental health programs at the Lois Hole Hospital for Women in Edmonton through the Royal Alexandra Hospital Foundation, and the Women's Mental Health Clinic in Calgary through the Calgary Health Foundation.

If you're interested in taking part, we encourage you to sign up individually or as a team at <u>runforwomen.ca</u>. When you register for the Edmonton or Calgary run, you can also enter the special discount code WEAREAHS to receive \$5 off registration. Please note: the code is only valid for the 5K or 10K in-person registration.

Be Well - Be Kind

National Nursing Week — May 9-15

We would like to thank all our nurses for their dedication in providing outstanding care to patients every day. The last two years of the COVID-19 pandemic have pushed us further than we ever thought possible and, despite these challenges, nurses continue to answer the call. They are a critical member of the AHS team and are foundational to healthcare service delivery and the patient experience.

Thank you again to all our nurses for everything they do. <u>During National Nursing Week</u>, please take a moment to thank a nurse for their continued commitment to providing safe, quality care.

Sean Chilton,
 Vice President, People, Health Professions and Information Technology,
 and Fadumo Robinson,
 Associate Chief Nursing Officer

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. You can see recent messages of gratitude on our Sharing the Love webpage.

Wrapping Up

Every week, we want to use this space to thank you for your efforts in dealing with the many immediate pressures and demands on your teams and on the health system. However, while we all manage day-to-day challenges, we are also keeping an eye on the future and working to make sustainable, long-term improvements. This week, for instance, your efforts enabled us to open an EMS Integrated Operations Centre in Calgary with the aim of improving EMS responsiveness and health system capacity. Many of you were involved in today's announcement of additional, permanent ICU beds in the province. And, of course, a big part of our workforce will be involved in our largest Connect Care launch to date. So, this week, we want to end our message with a note of gratitude — not just for your efforts in managing today's challenges but also finding opportunities to improve care for Albertans in the weeks, months and years ahead. Thank you for everything you do, each and every day.

With enduring appreciation,

Mauro Chies

Interim AHS President & CEO

Dr. Laura McDougall

Senior Medical Officer of Health



