



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

*AHS Update: Province updates public health measures; impact on AHS staff, physicians and sites*

*Please print and share with your teams as needed*

**Dear staff, physicians and volunteers,**

### **Today's Update**

- **Province Updates COVID-19 Public Health Measures**
- **How Changes to Public Health Measures Affect Us**
- **COVID-19 Cases in Alberta**
- **COVID-19 Immunization Update**
- **COVID-19 Testing for Healthcare Workers — The Monthly Numbers**
- **Verna's Weekly Video Message — Supporting the Wellness of Albertans**
- **Updates to the Tobacco, Smoking and Vaping Reduction Act**
- **More Information on Orthopedic Chartered Surgical Facilities**
- **Change To Online Lab Results**
- **Tell Us What You Think about Virtual Care — Take the Survey by Aug. 11**
- **Take the PPE Safety Coach Program Survey**
- **Homewood Health Privacy Breach — No Impact to AHS**
- **Invest in Your Well-being**
- **Mental Wellness Moment — Coping with Anxiety over Reduction in Public Health Measures**
- **Sharing the Love — Kudos for Sterile Processing Teams**
- **Wrapping Up — Constants in a Week of Change**

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.

Dear all, we are changing up the order to address some important information for AHS staff right off the start of this update. The data about cases is still here, please keep reading.

## Things You Need to Know

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### **Province Updates COVID-19 Public Health Measures**

As announced by Alberta Health on Wednesday (July 28), many COVID-19 programs and policies have changed in an effort to bring Alberta's response in line with influenza and other respiratory viruses.

Alberta Health is taking a two-phased approach when implementing these changes, with Phase 1 starting yesterday (July 29), and Phase 2 beginning on Aug. 16.

Effective now:

- Quarantine for close contacts will shift from mandatory to recommended. (Please see How Changes to Public Health Measures Affect Us below for AHS-specific direction.) Isolation for anyone with COVID-19 symptoms and for confirmed cases is still required.
- All confirmed cases will continue to be notified. Contact tracers will no longer notify close contacts of exposure. Individuals are asked to inform their close contacts when informed of their positive result.
- Case investigators and contact tracers will continue to investigate cases that are in high-risk settings, such as acute and continuing care facilities.
- Outbreak management and identification will focus on high-risk locations, including continuing and acute care facilities and high-risk workplaces. Community outbreaks with a surge in cases leading to severe outcomes will also be addressed as needed.
- Asymptomatic testing is no longer recommended. Testing will continue to be available for individuals who are symptomatic.

- Mandatory masking remains in acute and continuing care facilities, publicly accessible transit, taxis and ride-share.

The following changes will take effect on Aug. 16:

- Provincial mandatory masking orders will be lifted. Masking in acute care and continuing care facilities is still required.
- Isolation following a positive COVID-19 test result will no longer be required but strongly recommended.
- Isolation hotels and quarantine support will no longer be available.
- Public health will focus on investigating severe cases that require hospitalization and any deaths due to COVID-19.
- Outbreak management and preventative measures will continue focusing on outbreaks in high-risk settings, such as continuing and acute care facilities.

More information about these changes can be found on the [Alberta Health website](#), or you can read [Alberta Health's news release](#) on Wednesday's announcement.

## How Changes to Public Health Measures Affect Us at AHS

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As COVID-19 restrictions and guidelines are reduced and rescinded, AHS must continue to keep the health and well-being of patients, families, staff, physicians, volunteers, and all Albertans at the forefront of everything we do.

As such, AHS will still require our people, designated support persons and visitors to continue to following many of the current guidelines and restrictions in place, including screening, continuous masking and physical distancing.

For details, see items below:

### *Continuous masking mandate still in effect at AHS, Covenant facilities*

A Chief Medical Officer of Health Order remains in effect that still requires continuous masking in AHS and Covenant facilities provincewide. This masking mandate remains in place at all acute care, continuing care and community sites, as well as in corporate and warehouse-type settings.

The AHS [masking directive](#) applies to all staff, physicians, volunteers, designated support persons and visitors provincewide. We will be tracking the status of the pandemic carefully as we move through a recovery phase and will continue to review our masking mandate.

As we continue to monitor COVID-19 and the impact on our staff, we want to remind everyone that break rooms, charting areas and other common spaces present a risk for transmission of the virus. We ask our to staff remain vigilant, both within patient

care settings, but also while on breaks and during shift changes.

More information on masking can be found on our website: [AHS Guidelines for Continuous Masking](#)

#### *Work Restrictions for Positive, Exposed or Symptomatic Staff*

Although public health measures no longer require quarantine due to close contact, AHS will still require exposed staff to remain off work for a period of time, depending on immunization status. This will now be termed a 'work restriction' rather than 'quarantine' because staff are not legally required to remain at home but they will be restricted from working in an AHS setting.

Staff who have not been immunized, and who have had an unprotected exposure to COVID-19, are required to remain off work for 14 days from the date of their last exposure. AHS individuals who are [partially immunized](#) and had an unprotected exposure to COVID-19 are required to remain off work for 10 days from the date of their last exposure. [Fully immunized](#) individuals can remain at work, even if they had an unprotected exposure to COVID-19, provided they remain asymptomatic.

Until Aug. 16, those with core COVID-19 symptoms or a positive test will be required to isolate. AHS will continue to require all staff, regardless of immunization status, who test positive for COVID-19 or exhibit COVID-19 core symptoms to remain off work for 10 days after onset of symptoms, or until symptoms have improved, and the worker is fever-free for 24 hours (without the use of fever-reducing medications), whichever is longer.

It's also important to continue to self-monitor during shifts, and ensure you do not come to work if you feel unwell.

These guidelines apply to staff employed in all areas of AHS, including front-line workers, as well as those in corporate and warehouse settings.

Any AHS staff members who are unsure if they are considered a close contact are asked to talk to their leader or contact Workplace Health and Safety (WHS). Thank you to all healthcare workers for their willingness to comply with these guidelines as we navigate our COVID-19 recovery together.

We are currently working to update all supports and documents to reflect these changes, including the Fit for Work Screening and Return to Work Guidance. We appreciate your patience as we implement these changes over the coming weeks.

AHS continues to encourage all staff with any symptoms of illness to stay home from work, and away from others, especially those who are vulnerable to severe disease. This habit is an important way of protecting patients and other staff, not just from COVID-19 but from other respiratory viruses that we will see circulating again this

fall.

### *Please get immunized*

We continue to encourage all staff to get immunized as quickly as possible. While immunization is currently voluntary for any AHS employee, it is vitally important for all staff, regardless of where they work, to roll up their sleeve and get the vaccine to protect themselves, their loved ones, and the greater community.

While we understand that our employees, and all Albertans, want to ensure they make an informed choice about the vaccine, it is important for everyone to understand the risks of vaccine side-effects are much smaller and less severe than the risk of getting the virus. With the fall months soon approaching and the chances of transmitting the virus increasing, we all need to work together to ensure unimmunized healthcare workers have the information they need to make their decision.

Simply put, we know the COVID-19 vaccine works and is safe. We have seen the number of COVID-19 cases decrease worldwide in places with high vaccine uptake. The COVID-19 vaccine provides Albertans the opportunity to continue to lower case numbers and outbreaks.

We encourage everyone to continue booking first- and second-dose immunization appointments to ensure full effectiveness and long-lasting protection. Anyone who has not yet booked their vaccine can do so by visiting [ahs.ca/covidvaccine](https://ahs.ca/covidvaccine) to find available appointments across the province. For added convenience, drop-in clinics are also available in some locations.

Being fully immunized with two doses dramatically reduces the risk of severe outcomes and the risk of infection. Variants of concern are spread more easily and the second dose is critical for protection. For more information and updates about variants of concern in Alberta, visit the [Alberta Health webpage](#).

As many of the public health measures used over the last year are no longer in place, we expect to see higher levels of influenza and other respiratory viruses starting later this summer. As such, in addition to getting immunized, it is vitally important all of us continue to follow the AHS safety measures that remain in place to keep our teams, and our patients safe.

### *Finally, let's remember...*

COVID-19 continues to be part of our lives, and we need to ensure we remain cognizant of the risks, support each other and continue to keep our guard up for the foreseeable future. We each have a role to play in protecting each other — patients, staff, physicians, volunteers and visitors.

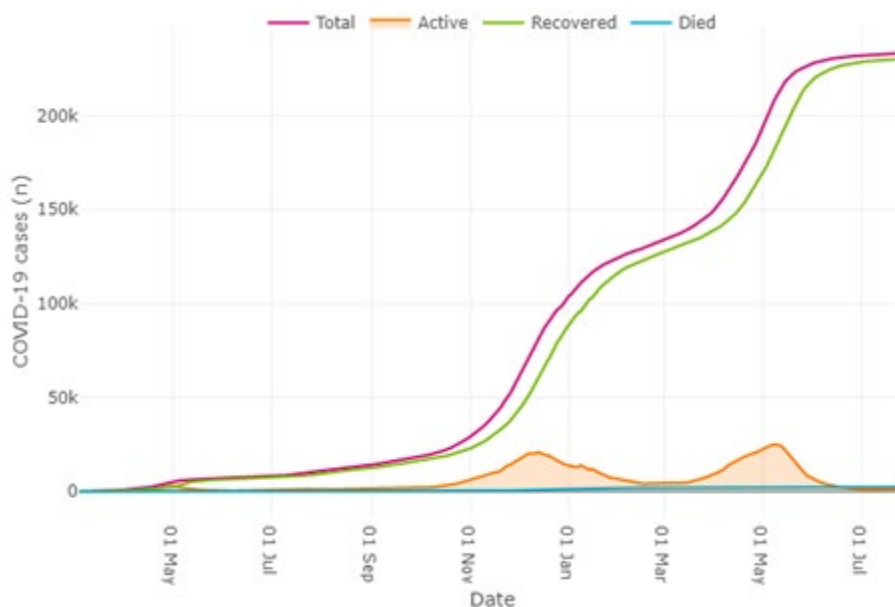
## COVID-19 Status

New and active cases of COVID-19 have increased sharply since our last message two weeks ago although, for now, our hospitalization and ICU numbers continue to decline.

As of July 28, there were 1,520 active cases of COVID-19 in the province, a 163 per cent increase compared to July 14. All five AHS zones reported increases, ranging from 10 per cent to nearly 550 per cent, as you can see in the table below.

	Active Cases (as of July 28)	Active Cases (as of July 14)	Per cent Change
<b>Calgary</b>	903	291	+210.3%
<b>Edmonton</b>	274	118	+132.2%
<b>North</b>	110	100	+10.0%
<b>Central</b>	80	44	+81.8%
<b>South</b>	149	23	+547.8%
<b>Unknown</b>	4	2	+100.0%
<b>Total</b>	1,520	578	+162.9%

Meanwhile, for the 14-day period ending July 28, there was an average of 111 new daily cases, compared to 42 for the previous two-week reporting period, an increase of 164.3 per cent.

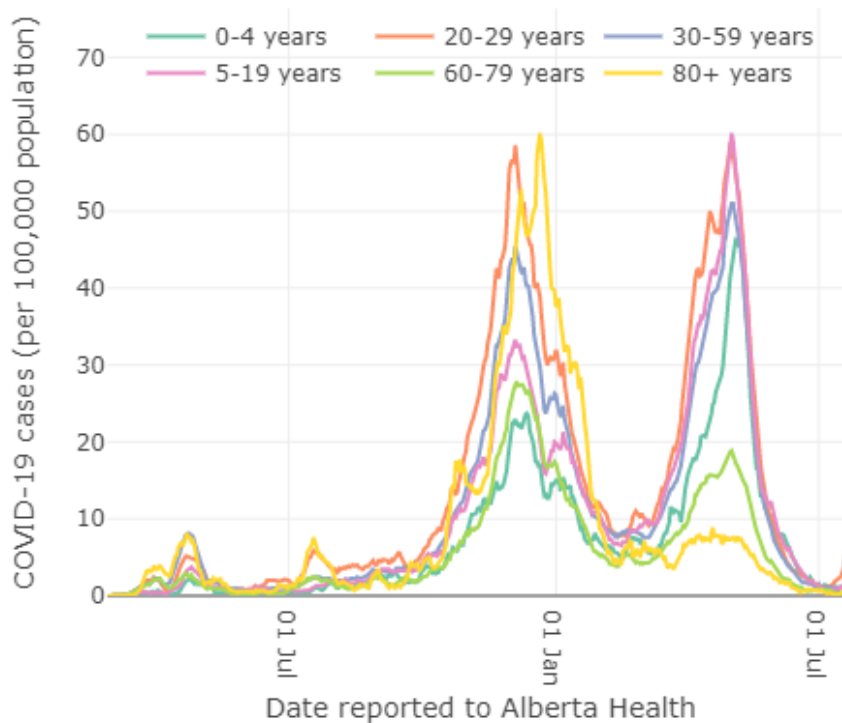


Over the past two weeks, the Calgary Zone had the highest total number of new cases with 941, an average of 67 cases per day. This is an increase of 254 per cent from the previous 14-day period when 266 new cases were reported, an average of 19 per day. Meanwhile, the South Zone reported the largest percentage increase in number of new cases compared to the previous reporting period. Over the past two

weeks, the South Zone reported 149 new cases, or an average of 11 new cases per day, which represents a 414 per cent increase from the previous reporting period when 29 new cases were reported, an average of two per day.

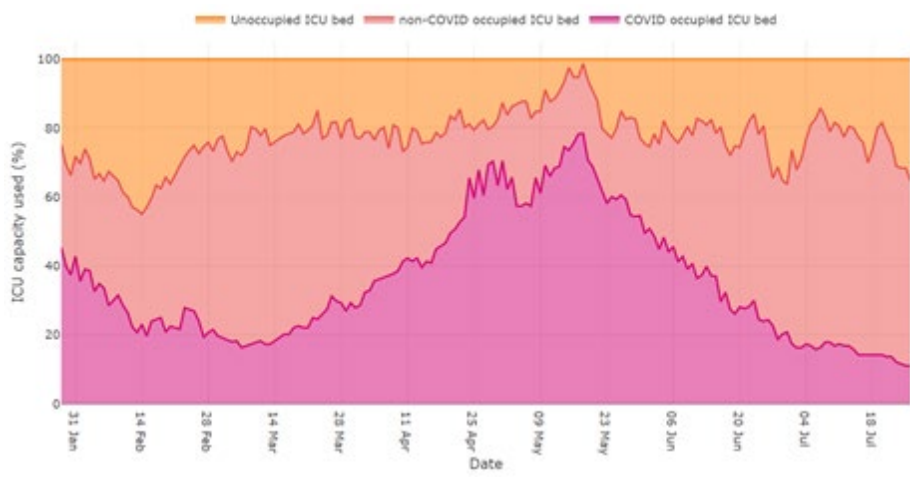
#### *Cases by age group*

On July 25, individuals aged 20 to 29 continued to have the highest seven-day rolling average of daily COVID-19 cases, with 10.57 cases per 100,000 people, up from 1.43 two weeks ago; while those 80 years and older had the lowest rate, at 0.43 cases per 100,000 people, up from 0.14. A visual representation of these trends is provided in the figure below.

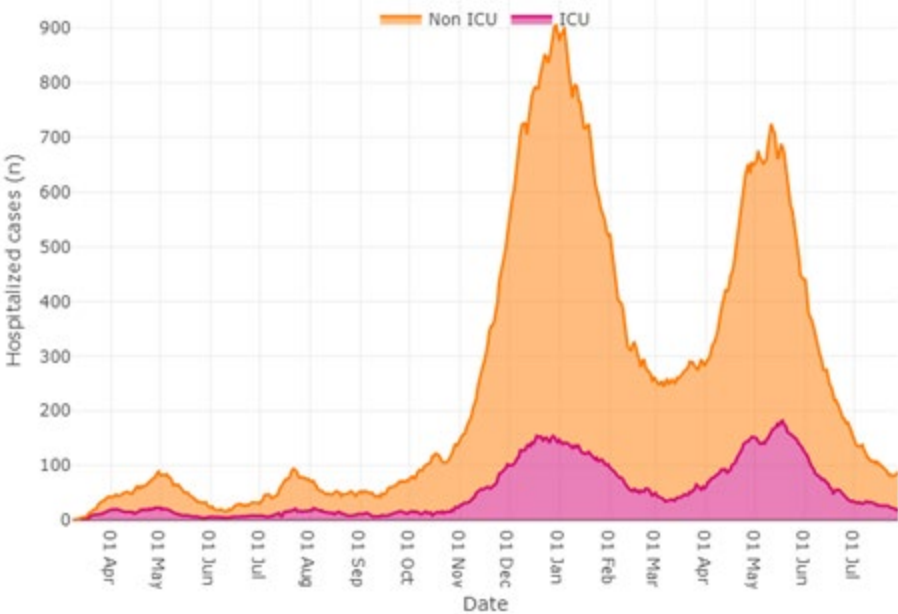


#### *Hospitalizations and ICUs*

On July 28, 20 individuals with COVID-19 were in ICUs compared to 30 on July 14, a 33.3 per cent decrease. The most recent reporting, on July 26, puts our ICU usage at 64.7 per cent, with 11.1 per cent of ICU beds being occupied by a patient with COVID-19. The figure below is a visual representation of ICU capacity in Alberta.



Also on July 28, there were 69 people with COVID-19 in non-ICU hospital beds compared to 74 on July 14, a 6.8 per cent decrease.



The table below shows hospitalization by zone as of July 28.

	Hospitalizations	ICUs
Calgary	45	14
Edmonton	27	6
North	7	0
Central	5	0
South	5	0

*Variants of concern*

The table below shows the proportion of active cases that were known variants of concern on July 28 compared to July 14. Please note: We are using the same variant of concern naming conventions used on the Government of Alberta website:



COVID-19 Variant	Proportion of active cases (July 28)	Proportion of active cases (July 14)	Difference
<b>B.1.1.7 (UK) variant</b>	3.7%	25.8%	-22.1%
<b>B.1.351 (South Africa) variant</b>	0.2%	1.7%	-1.5%
<b>B.1.617 (India) variant</b>	66.1%	24.6%	+41.5%
<b>P.1 (Brazil) variant</b>	2.6%	2.4%	+0.2%
<b>Overall</b>	72.6%	54.5%	+18.1%

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

- As of July 28, a total of 234,108 cases of COVID-19 have been detected in Alberta and a total of 9,716 individuals have been hospitalized, which amounts to 4.2 individuals for every 100 cases. In all, 230,263 Albertans have recovered from COVID-19.
- As of July 28, 2,325 individuals have passed away from COVID-19, including 13 deaths over the past two weeks. 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 July 15 to July 28, 85,457 COVID-19 tests were completed, an average of 6,104 tests per day. During this period, the daily positivity ranged from 0.82 per cent to 2.86 per cent. As of July 28, a total of 4.85 million tests have been conducted and 2.24 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 July 19 to July 25 was 1.48; the value reported in the previous all-staff update on July 16 was 0.84.

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

#### *Getting immunized before back-to-school*

As of July 29, about 63.5 per cent of Albertans between the ages of 12 and 29 have received their first dose of vaccine and 49 per cent of this population is fully immunized (having received both their first and second dose). This is much lower than the immunization rates for eligible Albertans overall.

With lower rates of immunization uptake, adolescents and young adults have a higher chance of getting the virus, including variant strains, and transmitting it to who are not immunized. AHS would like to ensure all eligible Albertans, 12 years of age and over, receive their COVID-19 immunization as soon as possible. We ask that you encourage those you know who are eligible to receive the vaccine to do so during the summer months to boost vaccination rates increase by September, which will enhance the safety of students, their families, teachers and school staff when

classes resume.

#### *COVID-19 immunization and travel*

In Canada, individuals who have had two doses of an approved vaccine are considered fully immunized, even if each dose is a different type. International travel requirements continue to evolve. It is recommended that individuals check the policies of individual countries, state/local governments, cruise lines and/or venues and events before travelling. You can find the most recent information and updates about travel guidance and immunization on the [Alberta Health website](#).

#### *Submitting out-of-province or out-of-country immunization records*

Anyone who received one or two doses of COVID-19 vaccine outside of Alberta are asked to submit their information to AHS' secure online portal at [ahs.ca/vaccineregistry](https://ahs.ca/vaccineregistry).

Out-of-province or out-of-country immunization records can be submitted on behalf of yourself or your children under 18 years of age. Submitted records will be reviewed by AHS, and verified submission information will be available on your [MyHealth Records account](#) within two to three weeks.

Signing up and using your MyHealth Records account is a safe and efficient way to ensure you have access to your personal immunization records.

#### *Remember to submit your Got My COVID-19 Immunization Form*

If you have received your COVID-19 immunization, please fill out the "Got My COVID-19 Immunization Form" on [Insite](#). It's important that you report your immunization status after receiving your second dose of the COVID-19 vaccine. Immunization status is a crucial step in helping us to appropriately plan, manage and allocate resources in the event of a COVID-19 outbreak to protect patients, families and healthcare workers.

#### *Take our COVID-19 immunization clinic survey*

We want to hear from front-line staff and learn from their experience working in AHS COVID-19 immunization clinics. Participate in the [AHS COVID-19 Immunization Clinic Survey](#). All responses will remain anonymous and the survey takes five to 10 minutes to complete. Any AHS staff member who worked in a COVID-19 immunization clinic is invited to participate. The survey results will be used to inform the development of an evaluation report that the COVID-19 Vaccine Task Force Evaluation Unit will complete this fall. If you have any questions, please email [Christina.Loitz@ahs.ca](mailto:Christina.Loitz@ahs.ca). Thank you for your continued support.

#### **COVID-19 Testing for Healthcare Workers — The Monthly 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.

As of July 27:

- 79,259 employees (AHS and APL combined) have been tested for COVID-19 and, of those tested, 5,922 (or 7.5 per cent) have tested positive.
- Of the 4,962 employees who have tested positive and whose source of infection has been determined, 600 (or 12.1 per cent) acquired their infection through a workplace exposure. An additional 960 employees who have tested positive are still under investigation as to the source of infection.
- 5,543 physicians (AHS and APL combined) have been tested for COVID-19 and, of those tested, 245 (or 4.4 per cent) have tested positive.
- Of the 208 physicians who have tested positive and whose source of infection has been determined, 20 (or 9.6 per cent) acquired their infection through a workplace exposure. An additional 37 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](#).

### **Verna's Weekly Video Message: Supporting the Wellness of Albertans**

Supporting the wellness of our people and Albertans is something I (Verna) am passionate about, so I'm excited to share a new initiative: the Wellness Exchange.

This online, weekly drop-in wellness series offers one-hour sessions designed to build skills to help people cope with stress and adversity, while promoting positive mental health and well-being. Five different courses are available this summer and fall with topics, such as managing reactions, healthy thinking, increasing confidence and effective problem-solving.

Joining us today to tell us more [about the Wellness Exchange and ways we can improve our wellness](#) are:

- Colleen Pruden, Education Consultant, Mental Health Promotion and Illness Prevention.
- Jody Walker, Health Promotion Facilitator, Mental Health Promotion and Illness Prevention.

If you have any questions about these courses, please email [ahswellnessexchange@ahs.ca](mailto:ahswellnessexchange@ahs.ca). You can register by searching "Wellness Exchange" on [MyLearningLink](#).

For additional learning opportunities on mental health, please check out our [Wellness Seminar Series](#) for employees. More staff supports and resources can also be found on our [Health and Wellness webpage](#).



### **Updates to the Tobacco, Smoking and Vaping Reduction Act**

On July 31, the Government of Alberta will revise the Tobacco, Smoking and Vaping Reduction Act (TSVRA), making it illegal to smoke or vape anywhere on hospital property.

Tobacco, vaping and cannabis use has always been prohibited on AHS property, under the [Tobacco and Smoke-Free Environments Policy](#). This policy remains in effect. The updated act will allow AHS peace officers to take action against smoking or vaping anywhere on hospital property. Previously, peace officers were limited to enforcing against smoking within five meters of doors, windows and air intakes.

Under the revised legislation, AHS Protective Services will continue to take a progressive enforcement approach, focusing first on education, redirection and support before taking direct enforcement actions, such as fines. To learn more, visit Protective Services on [Insite](#).

AHS continues to encourage the use of [smoking cessation and addiction treatment](#) programs by patients and staff to reduce overall consumption of tobacco products and support abstinence on all AHS properties. To learn more about AHS provincial programs to help Albertans quit smoking, visit [albertaquits.ca](#).

Although the Tobacco and Smoke-Free Environments Policy remains in effect, implementation may be impacted by the amended legislation. Sites are encouraged to contact the [Tobacco, Vaping and Cannabis Program](#) to discuss how the TSVRA may affect current practices.

### **More Information on Orthopedic Chartered Surgical Facilities**

On July 22, AHS issued a request for proposals (RFP) for orthopedic chartered surgical facilities (CSF), seeking an expansion of day and overnight orthopedic

procedures in the Edmonton and Calgary zones that will help provide publicly funded surgeries in particularly high-needs areas, including hip and knee surgeries.

Timely access to surgeries is important to Albertans. There are long wait times for many orthopedic surgeries, with many Albertans waiting longer than experts determine is clinically appropriate.

AHS is implementing the Alberta Surgical Initiative (ASI) in order to ensure Albertans receive scheduled surgeries within clinically appropriate wait times, and enhance the entire surgical journey. CSFs are one way to support added capacity for publicly funded surgeries as part of the ASI.

Typical day procedures that will be considered include knee arthroscopy, shoulder arthroscopy, wrist repair, and foot and ankle fusions. Some overnight or extended-stay procedures are also being considered, including hip and knee arthroplasty and shoulder arthroplasty.

This surgical expansion will improve access, reduce wait times for surgery for patients and provide capacity for procedures requiring in-hospital and acute surgical care.

We already collaborate with partners to perform a number of publicly funded surgical procedures at CSFs, with these independent facilities providing safe, low-risk surgeries without cost to patients, allowing hospitals to focus on urgent, emergent and more complex surgeries. High-quality, safe care for Albertans is always our top priority. Each facility, accredited by the College of Physicians and Surgeons of Alberta, is required to follow AHS policies and procedures, ensuring Albertans continue to receive consistent, safe, high-quality care.

There will continue to be work on a central access and intake wait list, and patients will receive their surgery at the site where they can receive services the quickest. For patients who are already on the waitlist and have a surgeon, they will have the choice of staying with this surgeon.

No Albertan will have to pay out of pocket for scheduled publicly funded surgeries, whether they have their surgery in a hospital or a chartered surgical facility.

For more information, please see these [FAQs](#).

### **Change To Online Lab Results**

As you may be aware, more lab test results were made available last February in My Personal Records (MPR), found in MyHealth Records (MHR), the single access point for Albertans' personal health information. These lab results are viewable through the MPR application. Making more results available online provides Albertans with more access to their health information and acts as an additional safety net for

patient care within the system.

Through a series of rollouts, additional results are being added to MPR through to September. To date, the following results are now viewable as soon as they are released by the lab:

- About 95 per cent of the most commonly ordered (by volume) lab test results were viewable as of Feb 1.
- More complex results in pathology and other areas are being included in MPR on Aug. 23.

Providers may notice some changes in their patterns of work, and may wish to consider giving patients more information about the implications of different results at the time of ordering a test. Physicians and other providers will continue to have access to results through their usual delivery channels.

For more information about lab results online, please visit [FAQs for healthcare providers](#).

For more information about the Aug. 23 rollout, AHS will be hosting an information webinar:

**Webinar:** Complex lab results in patient portals

**Date:** Wednesday, Aug. 18

**Time:** 10 a.m. to 11 a.m.

**Meeting information:** Please add this [link](#) to your calendars and join the Zoom meeting.

**Dial by your location:** 1 587 328 1099

**Meeting ID:** 980 6212 9635

**Passcode:** 884504

### **Tell Us What You Think about Virtual Care: Take the Survey by Aug. 11**

The AHS Virtual Health Program is currently conducting a [survey](#) to better understand what staff and providers know about virtual care and to help us improve it moving forward.

The survey is voluntary and takes about 10 to 15 minutes to complete. It's open until end of day on Aug. 11.

Anyone involved in AHS healthcare services can take part in the survey. Previous experience with virtual care is not required.

This survey is hosted on our Together4Health platform. If you have a Together4Health account, please ensure you are logged out before beginning this survey, so your responses remain anonymous.

Thank you for your participation.

### **Take the PPE Safety Coach Program Survey**

Since launching last November, the Provincial PPE Safety Coach Program is gaining momentum, with more than 1,200 people taking part. The program is a peer-to-peer program aimed at increasing the proper selection and safe use of PPE in front-line settings to reduce the spread of COVID-19 and other respiratory viruses, such as influenza. This program is meant to be permanent and will be supported beyond the pandemic response.

AHS is launching a [survey](#) to evaluate the effectiveness of the Provincial PPE Safety Coach Program and to see if there are ways to improve the program and uptake. Site leadership and unit management are encouraged to participate in the survey.

The survey takes five to 15 minutes to complete and will be open until Aug. 15. Participation is voluntary. All responses will remain anonymous.

Site leadership and unit management are encouraged to share the survey with AHS staff and physicians to participate.

As a friendly reminder, as part of the provincial program, we encourage site leadership and unit management to identify a minimum of two coaches per unit or program area with the intent of having a coach available and accessible on every shift.

If you are interested in participating in the program or have questions about the [survey](#), please reach out to [ppesafetycoach@ahs.ca](mailto:ppesafetycoach@ahs.ca) or visit [ahs.ca/ppesafetycoach](https://ahs.ca/ppesafetycoach).

### **Homewood Health Privacy Breach: No Impact to AHS**

We recently learned that Homewood Health, AHS' contracted service provider for our Employee and Family Assistance Program (EFAP), experienced a privacy breach in which some of its customers' data was illegally obtained. We have been assured by Homewood that this breach did not affect AHS or our staff.

We remain confident in Homewood Health's ability to protect the privacy of our staff and appreciate that breaches and illegal acquisition or sharing of data can impact any organization. Like AHS, Homewood Health is committed to protecting the privacy of its patients and staff. Personal information is kept secure, and steps are taken to protect data from theft, loss, unauthorized access, copying, modification, use, disclosure and disposal.

Our EFAP with Homewood Health continues to operate and we encourage you to reach out if you need support. See more information on the program on [Insite](#).



## Be Well - Be Kind

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### Invest in Your Well-being

Summer is a great time to focus on your wellness. You can [get outdoors](#), challenge yourself to set [wellness goals](#), or check out seminars on Establishing Work-Life Harmony, Building Resilience and Getting to Know Your Employee and Family Assistance Program (EFAP). See the full [wellness seminar schedule](#) and the [Resilience, Wellness and Mental Health Resource Guide](#) for a full list of wellness resources. Questions? Contact [wellness@ahs.ca](mailto:wellness@ahs.ca).

### Mental Wellness Moment — Coping with Anxiety over Reduction in Public Health Measures

Albertans have spent most of the past 18 months learning to live with public health measures — and now that these measures are being reduced, we're learning how to once again go out in public and interact with others, which can cause stress and anxiety. In his latest Mental Wellness Moment, Dr. Nick Mitchell — AHS Provincial Medical Director for Addiction and Mental Health — [provides advice on how to handle this new kind of COVID-19-related stress and where to find supports](#), if needed.



### Sharing the Love — Kudos for Sterile Processing Teams

This week we share a note that we received recently from a member of the AHS Family who wishes to 'share the love' with some of her colleagues.

*Thank you to the many sterile processing teams/technicians in every zone for keeping all Albertans safe through this pandemic. Your work often goes unrecognized and it is vital to the safety and protection of all patients and staff in all facilities provincially. Every sterile processing technician should be so proud of the work that they do and thank you to each and every one of*



*you from anyone that has received a surgery, or a staff member that has used a sterile medical device. We see you and your work is important. Thank you!*

*— Nicole*

### **Wrapping Up — Constants in a Week of Change**

We've shared a lot of information in this email, and we recognize there were many changes to Alberta's pandemic response announced earlier this week. It can be a lot to take in. So allow us to end this message with a single, simple thought:

Much can change around us. But our duties to ourselves, to our loved ones, to our colleagues, and to patients and their families remain constant. Let's keep taking care of each other. Let's keep doing everything we can to keep one another safe. And let's always lead with kindness. Those things should never change.

With enduring gratitude and appreciation,

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

AHS President & CEO

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

Senior Medical Officer of Health



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