



Message from  
Dr. Verna Yiu &  
Dr. Laura McDougall

*AHS Update: Measures taken to add surge capacity  
as COVID-19 numbers continue to rise sharply*

*Please print and share with your teams as needed*

Dear staff, physicians and volunteers,

**Today's Update**

- Update on Health System Capacity
- COVID-19 Cases in Alberta
- COVID-19 Immunization During Pregnancy
- Government Brings in Provincial Mask Mandate, Other Measures
- Request for Remote Work Extended Until at Least Dec. 31
- Verna's Weekly Video Message — Immunization of Workers for COVID-19 Policy
- Alberta Adopts New Vaccine Booking Tool
- COVID-19 Testing for Healthcare Workers — The Latest Numbers
- COVID-19 Immunization Update
- Update on Aerosol Transmission and PPE
- Further Clarity on Continuous Eyewear Mandate
- Process for Requesting, Implementing Restrictions to Family Presence, Visitors
- Virtual Care Best Practice Guide Now Available
- Government Announces Investment in Home Care, Continuing Care
- Variant of Concern Testing Shifts to Targeted Screening
- Help Available for Those with Lingering COVID-19 Symptoms
- Staying Healthy During Change
- World Suicide Prevention Day — Creating Hope Through Action
- Mental Wellness Moment — Managing Stress Related to Being Unable to Vaccinate Children Under 12
- Gratitude from Albertans
- Wrapping Up — We Appreciate Everyone and Everything You Do

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.

We start today's all-staff email with an update on hospital capacity.

As most of you are surely aware, AHS is experiencing significant capacity challenges during this fourth wave of the COVID-19 pandemic. Through your efforts, we're continuing to do all we can to increase capacity, particularly in our ICUs, where pressure on our staff, physicians and resources is intense.

I (Verna) talked about this situation yesterday (Sept. 9) during a Government of Alberta press conference and you can see my comments [here](#).



Today (Sept. 10), our ICUs are at 86 per cent capacity, including the surge capacity we have created to date. There are 230 people in ICU. About 76 per cent of those are patients with COVID-19.

In the past seven days, we have added 59 ICU surge beds. We now have a total of 93 surge beds above our baseline of 173 ICU beds. So although we state that we are looking at capacity of 86 per cent — remember that this is including the surge beds. If we did not create the surge beds, we would be over 130 per cent capacity.

In the face of rising numbers of patients with COVID-19 needing hospital care and our concurrent efforts to meet the needs of patients who require other non-COVID

care, we have to continue to take every possible measure in order to maintain our ICU capacity, and increase it wherever possible.

And unfortunately, that means additional postponed surgeries.

On Wednesday, Calgary Zone made the difficult decision to postpone all scheduled elective surgeries and many outpatient procedures for the remainder of this week at our Calgary hospitals. This includes some non-urgent, scheduled pediatric surgeries.

We are also having to postpone some non-urgent transplant cases, and a small number of cancer surgeries that can safely be delayed for a period of time due to the stage and nature of the particular cancer.

Postponing elective surgeries allows us to deploy qualified staff to support intensive care and critical care beds. Still, our hearts go out to patients and their loved ones affected by these surgical postponements. The pandemic is having a significant impact on many Alberta patients, not just those with COVID-19.

Capacity will continue to be a huge challenge for us.

We'd also like to thank our nurses, physicians and all healthcare team members for creating these additional beds, which has given us some much-needed breathing room. Our deep gratitude also extends to all of you throughout AHS — those on the front lines and those supporting the front lines — who are keeping the health system functional, so we can continue to provide Albertans with the high-quality prevention services and care they require. We cannot overstate our gratitude for all of you who continue to work tirelessly 18 months into the pandemic.

If you are a clinician trained in critical care and have additional availability, please contact your immediate supervisor.

The situation is fluid and changing daily. We will aim to give you the most up-to-date information and, to that end, this all-staff email will once again move to weekly.

The numbers in the following item will help explain why extra capacity and resources are much needed now, and will continue to be needed in the weeks ahead.

## COVID-19 Status

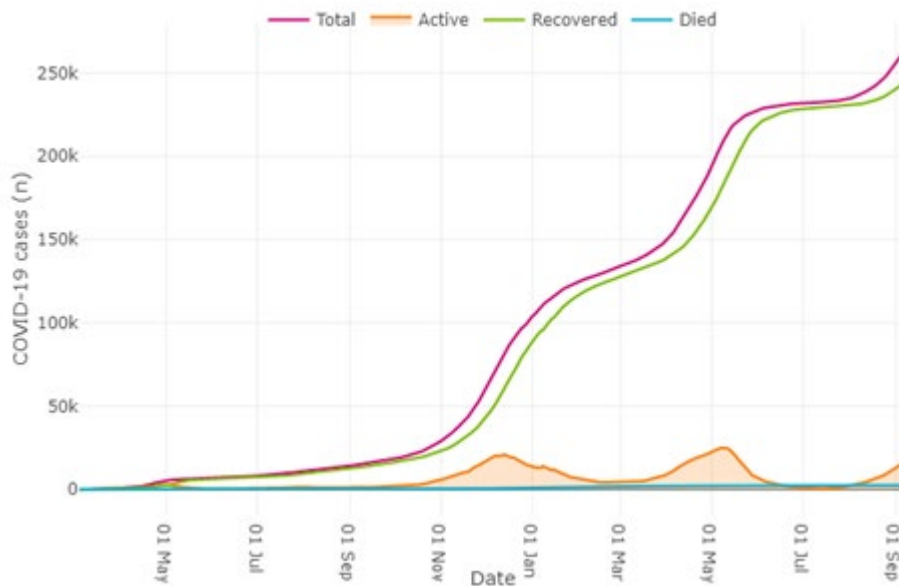
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New and active cases, hospitalizations and ICU admissions have continued to rise sharply over the past two weeks, prompting the Government of Alberta to bring in temporary measures in an effort to protect the healthcare system and safeguard the health of Albertans (see Things You Need to Know).

As of Sept. 8, there were 15,977 active cases of COVID-19 in Alberta, a 76.2 per cent increase compared to two weeks ago, with all five AHS zones reporting increases, as you can see in the table below.

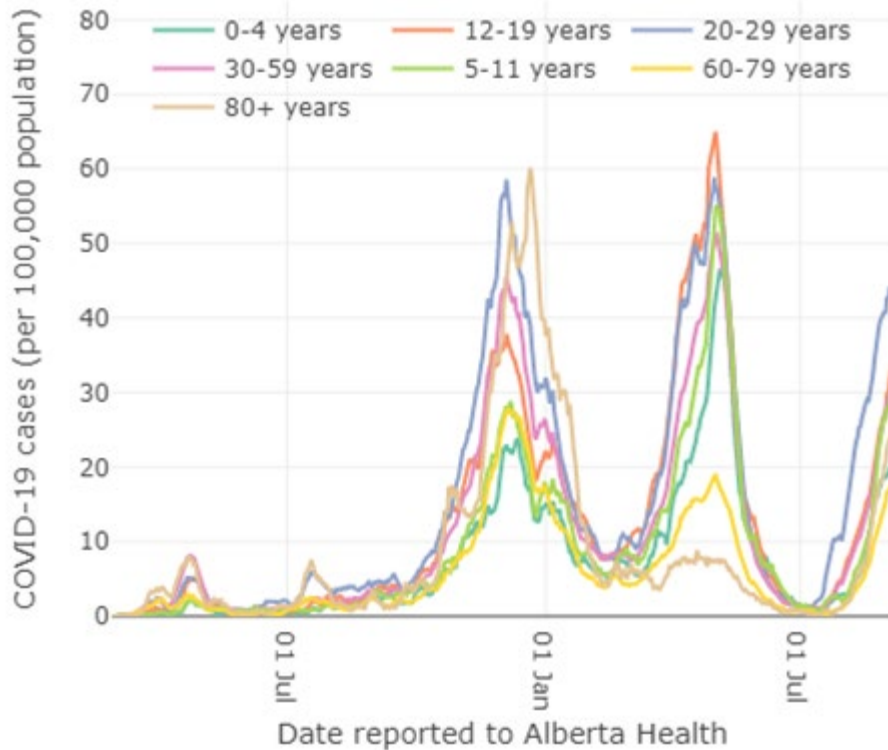
	Active Cases (as of Sept. 8)	Active Cases (as of Aug. 25)	Per cent Change
<b>Calgary</b>	4,417	2,673	+65.2%
<b>Edmonton</b>	4,783	2,857	+67.4%
<b>North</b>	2,900	1,491	+94.5%
<b>Central</b>	2,212	967	+128.7%
<b>South</b>	1,636	1,055	+55.1%
<b>Unknown</b>	29	23	+26.1%
<b>Total</b>	15,977	9,066	+76.2%

There was an average of 1,204 new daily cases for the 14-day period ending Sept. 8, compared to 672 new daily cases for the previous reporting period (Aug. 12-25), a 79.2 per cent increase.



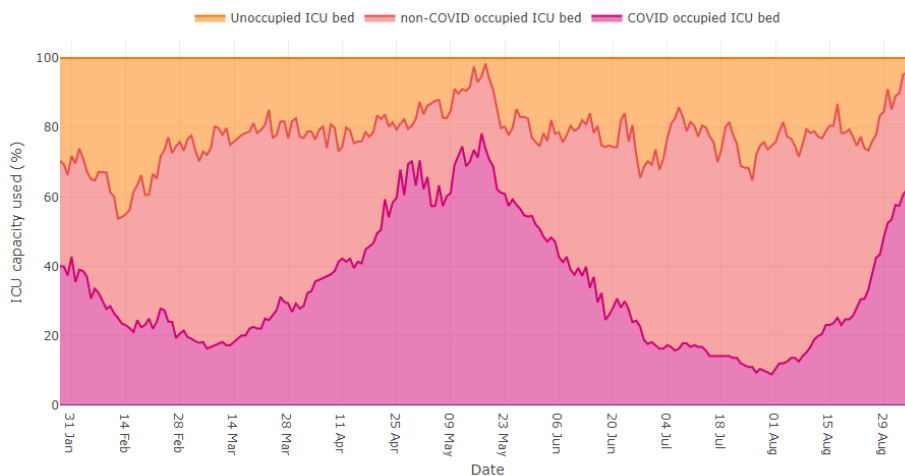
### Cases by age group

Albertans ages 20 to 29 years had the highest seven-day rolling average of daily COVID-19 cases, with a rate of 43.1 cases per 100,000 people. The rates for all other age groups ranged from 17.4 (ages 60-79) to 33.6 (ages 12-19). A visual representation of these trends in cases by age group can be seen in the figure below.



*Hospitalizations and ICUs*

On Sept. 8, 154 individuals with COVID-19 were in ICU, compared to 64 on Aug. 25, a 140.6 per cent increase. Today’s reporting (Sept. 10), shows ICU usage at 86 per cent, with 76 per cent of ICU beds occupied by a COVID-19 patient, compared to 33.3 per cent on Aug. 25. The figure below is a visual representation of ICU capacity in Alberta.



Also on Sept. 8, 525 individuals with COVID-19 were in non-ICU hospital beds, compared to 257 on Aug. 25, a 104.3 per cent increase. Hospitalizations by zone as of Sept. 8 are in the table below.

	Hospitalizations	ICUs
<b>Edmonton</b>	228	64
<b>Calgary</b>	192	43
<b>Central</b>	102	17
<b>South</b>	79	21
<b>North</b>	78	9

### *Variants of concern*

The table below shows the proportion of active cases that are known variants of concern on Sept. 8 compared to Aug. 25. Please note: following your feedback, we are now using the World Health Organization’s naming system to identify COVID-19 variants of concern.

COVID-19 Variant	Proportion of active cases (Sept. 8)	Proportion of active cases (Aug. 25)	Difference
<b>Alpha variant</b>	0.1%	0.1%	0%
<b>Beta variant</b>	0%	0%	0%
<b>Delta variant</b>	78.6%	78.3%	+0.3%
<b>Gamma variant</b>	0%	0.2%	-0.2%
<b>Overall</b>	78.7%	78.7%	0%

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

- As of Sept. 8, a total of 264,564 cases of COVID-19 have been detected in Alberta and a total of 10,994 individuals have been hospitalized, which amounts to 4.2 individuals for every 100 cases. In all, 246,153 Albertans have recovered from COVID-19.
- As of Sept. 8, 2,434 individuals have passed away from COVID-19, including 74 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 Aug. 26 to Sept. 8, 151,326 COVID-19 tests were completed, an average of 10,809 tests per day. During this period, the daily positivity ranged from 10.22 per cent to 12.82 per cent. As of Sept. 8, a total of 5.21 million tests have been conducted and 2.34 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 Aug. 30 to Sept. 5 was 1.12; the previously reported value was 1.19.

## Things You Need to Know

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### **COVID-19 Immunization During Pregnancy**

COVID-19, particularly the Delta variant, is highly infectious. Pregnant individuals are at a higher risk of getting severely ill from COVID-19. In August alone, six pregnant Albertans were admitted to ICU due to COVID-19. All of them were unimmunized. To put this into context, only seven pregnant Albertans were admitted to ICU for COVID-19 during the entire first year of the pandemic. In the six cases from last month, COVID-19 had severe impacts on the parent's health but also the child's. Five preterm births occurred as early as 29 weeks.

We strongly urge those who are pregnant, trying to become pregnant, or have recently delivered, to get both doses of the COVID-19 vaccine as soon as possible.

The COVID-19 vaccine is safe and effective for pregnant individuals and their babies, with mRNA vaccines being the safest type of COVID-19 vaccine to get during pregnancy. Patients can get the vaccine at any time (any trimester) during pregnancy.

The COVID-19 vaccine is also safe, and recommended, for those who are trying to get pregnant. There is no evidence of harm from COVID-19 vaccines for those who are pregnant or breastfeeding. The National Advisory Committee on Immunization and the Society of Obstetricians and Gynecologists of Canada recommend that those who are pregnant get a complete series of vaccine.

The following resources are available to share with patients and clients and to support conversations with patients who are pregnant, or thinking of getting pregnant, to help them make an informed decision about getting the COVID-19 vaccine:

- [ahs.ca/vaccinepregnancy](https://ahs.ca/vaccinepregnancy)
- [Alberta COVID-19 Immunization in Pregnancy Factsheet for Practitioners](#)
- [COVID-19 Immunization in Pregnancy – What You Need to Know](#)
- [COVID-19 and Pregnancy, Birth, and Postpartum and Breastfeeding: Information for Expectant and New Parents Public Health](#)
- [Video: COVID-19 Vaccine and Pregnancy](#)

### **Government Brings in Provincial Mask Mandate, Other Measures**

On Sept. 3, the Government of Alberta announced [new temporary measures](#) to protect the health system from rising COVID-19 hospitalizations.

- Masks are now mandatory for all indoor public spaces and workplaces. Schools are not required to implement masking but school boards will continue to set COVID-19 management policies as they deem appropriate. Masks are not required while participating in a physical fitness activity, performance activity or a worship service.
- Restaurants, cafés, bars, pubs, nightclubs and other licensed establishments will be required to end alcohol service at 10 p.m.
- Albertans are encouraged to limit in-person contacts. The province strongly recommends that unvaccinated Albertans limit their indoor social

gatherings to close contacts of only two cohort families up to a maximum of 10 people.

- It is also recommended that plans for in-person return to work be paused, and that employers revert to work-from-home where possible. To see how this might affect you, see the next item: Request for Remote Work Extended.

A one-time incentive of \$100 is now available for all Albertans ages 18 or older who receive a first or second dose of vaccine between Sept. 3 and Oct. 14.

### **Request for Remote Work Extended Until at Least Dec. 31**

Earlier this year, AHS asked that all staff who can work remotely within their roles continue to do so until at least the end of September. Following the Government of Alberta's [recommendation](#) last week that all employers pause their plans to have staff return to the workplace, we are extending our request for staff to continue working remotely where operationally feasible until at least Dec. 31, 2021.

We appreciate your patience and co-operation as we continue to focus our resources on responding to the fourth wave of COVID-19. AHS is currently developing a strategy that would enable post-pandemic remote and hybrid work arrangements to continue for eligible staff. Leaders will be given more information and resources to engage in discussions about remote work options with eligible staff in the coming months.

If you have any questions, please reach out to your leader.

### **Verna's Weekly Video Message — Immunization of Workers for COVID-19 Policy**

Last week, we announced our policy on the immunization of workers for COVID-19.

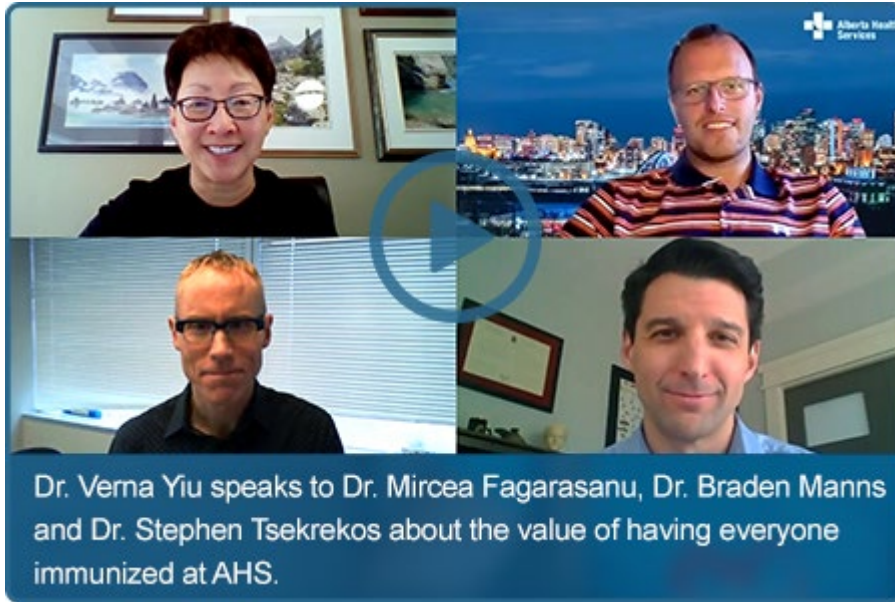
Immunization is the best way to prevent the spread of COVID-19 and outbreaks in AHS facilities, as well as protecting our patients, visitors, and each other.

We have consulted with unions and other stakeholders to finalize the policy, which allows us to strengthen work we've done throughout the pandemic to keep hospitals and healthcare facilities safe.

I (Verna) received several questions from you this week about the policy, so [I've invited three guests to this week's vlog to help me answer them.](#)

- Dr. Mircea Fagarasanu, Senior Program Director, Workplace Health and Safety.
- Dr. Braden Manns, Associate Chief Medical Officer.
- Dr. Stephen Tsekrekos, Medical Director, Workplace Health & Safety.





You can book your COVID-19 immunization appointment through [ahs.ca/vaccine](https://ahs.ca/vaccine). More information will be shared in the coming days with the release of the final policy and FAQ. If you have questions or concerns about the policy in the meantime, please email [AHSVaccineTaskforce@ahs.ca](mailto:AHSVaccineTaskforce@ahs.ca).

### **Alberta Adopts New Vaccine Booking Tool**

On Sept. 6, the AHS COVID-19 online immunization booking tool was taken offline, after AHS joined the new [provincewide vaccine booking system](#) launched in August by Alberta Health. The new Alberta Vaccine Booking System provides Albertans the ability to book into both first- and second-dose appointments, including outstanding COVID-19 vaccinations, at either an AHS clinic or pharmacy of their choice.

All available appointments based on location are visible in the new system, allowing Albertans to choose the appointment location most convenient for them.

This new system will help prepare Alberta for future large-scale vaccination efforts, including potential COVID-19 booster shots and other vaccine campaigns, such as annual influenza.

AHS staff, physicians and volunteers can now book appointments through the new tool. The tool will provide email or text confirmation once an appointment is booked, which is presented as verification at each immunization appointment.

The AHS COVID-19 online booking tool has been critical in Alberta's response to COVID-19. A big 'thank you' to all the teams who collaborated to create the tool, and remained dedicated, and nimble throughout the vaccine rollout. The AHS online tool booked close to three million appointments.

Albertans from throughout the province were able to depend on this tool and the teams behind it through some of the most critical times our province has ever faced. We are so proud of the countless hours everyone has continued to dedicate, to help ensure the health and well-being of millions of Albertans.

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

We continue to update the testing data for healthcare workers in the [AHS Healthcare Worker COVID-19 Testing dashboard](#). These statistics provide the total number of AHS and Alberta Precision Laboratories (APL) employees and physicians tested, including a breakdown of the number of positive tests and those who have been confirmed to have been exposed in the workplace.

As of Sept. 7:

- 81,310 employees (AHS and APL combined) have been tested for COVID-19 and, of those tested, 6,747 (or 8.3 per cent) have tested positive.
- Of the 5,242 employees who have tested positive and whose source of infection has been determined, 608 (or 11.6 per cent) acquired their infection through a workplace exposure. An additional 1,505 employees who have tested positive are still under investigation as to the source of infection.
- 5,787 physicians (AHS and APL combined) have been tested for COVID-19 and, of those tested, 284 (or 4.9 per cent) have tested positive.
- Of the 228 physicians who have tested positive and whose source of infection has been determined, 21 (or 9.2 per cent) acquired their infection through a workplace exposure. An additional 56 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](#).

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

#### *Third / Additional Doses*

A reminder that, as of Sept. 1, third/additional doses of the COVID-19 vaccine are available for eligible groups, including:

- Immunocompromised individuals 12 years of age and older with specific conditions — recommended at a minimum of eight weeks after their second dose.
- Residents of seniors' supportive living facilities — recommended at a minimum of five months after their second dose.
- Travellers to jurisdictions where Covishield/AstraZeneca or mixed doses are not recognized — available four weeks after their second dose.

For more information, see [Third / Additional Doses](#). Additional information for healthcare providers on this topic can also be found [here](#).

*Proof of immunization & accessing records*

If you require proof of COVID-19 immunization for travel, or for access to certain business, workplaces, facilities or events, we encourage you to review local policies prior to your visit to ensure you have the appropriate documentation.

There are several ways to provide proof of your immunization status, including:

- The paper immunization record you receive at the time of your appointment.
- Print a copy of your immunization records from [MyHealth Records](#) (if you are 14 years of age and older). You can also download the [MyHealth Records App](#) to have your health records stored on your phone or handheld device for easy access.
- If you are unable to access MyHealth Records, you can request a copy through your immunization provider. For those immunized in AHS, you can call Health Link 811 for assistance or request a copy at your next immunization appointment.

More information, including how to submit out-of-province and out-of-country immunization records into AHS' web-based [vaccine registry](#), can be found at [Immunization Records](#). Additional information about vaccine records can be found at [Proof of Vaccination FAQ](#).

#### **Update on Aerosol Transmission and PPE**

There has been ongoing and increasing discussion recently on the possible role of aerosols in the transmission of SARS-CoV-2, the virus that causes COVID-19. AHS continues to monitor this very carefully through our ongoing COVID-19 response. We ensure the latest research, including the role of aerosols in transmission, from the Public Health Agency of Canada, the Centre for Disease Control, and the World Health Organization, is reflected in all guidelines, including the use of personal protective equipment (PPE).

These organizations, and our current guidelines, are aligned in concluding that aerosols are not considered the predominant mode of transmission of COVID-19. There are known exceptions to this, including where [aerosol-generating medical procedures \(AGMP\)](#) are performed and during indoor gatherings with limited or no ventilation, particularly where there is crowding or where activities such as singing, shouting or intense exercise occurs.

Throughout our COVID-19 response, our PPE guidance has emphasized that anyone present in a room where an AGMP is performed on a patient with COVID-19, suspected COVID-19, influenza-like illness (ILI) or with new or changing respiratory symptoms must don a fit-tested N95 respirator, together with eye protection, a gown and gloves.

As well, the [Joint Statement](#) with unions from this past February gives all front-line professionals the authority to make decisions regarding the choice of PPE necessary for their protection, based on their point-of-care risk/hazard assessment and professional judgment.

*What might staff consider in choosing PPE before caring for a patient with COVID-19?*

In following the [existing guidance](#), there may be situations where higher risk factors may come into play. This is the essence of a point-of-care risk assessment or hazard assessment.

For example, if healthcare workers are in a higher-risk situation, they may choose to don an N95 as an alternate form of respiratory protection. Factors contributing to this decision could include:

- Distance to the source individual: from lower risk (e.g., beyond two meters) to higher risk (e.g., "cheek to cheek").
- Duration of exposure: from lower risk (e.g., an interaction lasting 30 seconds) to higher risk (e.g., an interaction lasting 30 minutes).
- Surrounding environment: from lower risk (e.g., a large patient room) to higher risk (e.g., a small, confined bathroom space).
- Source symptoms: from lower risk (e.g., patient with muscle aches and fatigue only) to higher risk (e.g., a patient who is actively coughing).
- Timing: from lower risk (beyond Day 5 of infection) to higher risk (first five days of infection).

Thank you for continuing to implement the PPE guidelines currently in place to keep ourselves and each other healthy and safe.

For more information, please read the [Considerations for Aerosol Transmission PDF](#) on the Alberta Health website.

#### **Further Clarity on Continuous Eyewear Mandate**

As we move through the fourth wave of the pandemic, and to help ensure the health and safety of both patients and staff, several sites across the province have re-implemented continuous eyewear for healthcare workers.

Eye protection is always an important component of Contact and Droplet precautions, in addition to a medical mask, gloves and gown. As such, provincewide, continuous eye protection must be maintained for all staff and physicians:

- In COVID-19 units.
- In settings experiencing COVID-19 outbreaks.
- When providing care or services within two meters of a patient with COVID-19, suspected COVID-19 or who is experiencing symptoms consistent with a respiratory tract infection.

For those who are fully vaccinated, as updated in the eye protection guidelines in May 2021, [eye protection](#) may be discontinued in all other instances.

Those who are fully vaccinated will not be quarantined following contact with COVID-19, if not wearing eye protection (providing they remain asymptomatic).

*Full vaccination is achieved two weeks following completion of a two-dose vaccine series.*

As always, healthcare workers may choose to use eye protection as directed by their point of care risk assessment or their assessment of all potential risks and hazards.

While eye protection is required in many situations, and while it is often more efficient to use eye protection continuously when caring for multiple patients or in less controlled circumstances (i.e., emergency departments), this guidance provides fully vaccinated staff and physicians with some situations where eye protection may not be required and can safely be removed.

As an added precaution, zone and site leadership may choose to mandate continuous eyewear during an outbreak situation, or based on local circumstances, as deemed appropriate.

All AHS healthcare workers must be fully immunized by Oct. 31, 2021. Until then, healthcare workers who are not yet fully vaccinated must maintain continuous eye protection as part of personal protection. Non-vaccinated healthcare workers will require assessment by WHS following exposure to COVID-19 and may require quarantine if eye protection is not worn.

We thank all staff, and physicians for continuing to follow this guidance, as we continue to provide exemplary care to all Albertans.

For more information about eye protection, visit: [Use and Reuse of Eye Protection during the COVID-19 Pandemic](#) on the AHS.ca website.

### **Process for Requesting, Implementing Restrictions to Family Presence, Visitors**

All sites requesting or implementing restrictions to family presence and visitors beyond what is already outlined in the [Provincial Guidance for Designated Support And Visitor Access in Acute, Ambulatory and Emergency/Urgent Care during COVID-19](#) must follow Section 4.0 of the [COVID-19 Designated Family/Support Access and Visitation in Acute, Ambulatory and Emergency Sites during COVID-19 Directive](#).

Learn more about the process involved by reviewing our [quick reference guide](#).

### **Virtual Care Best Practice Guide Now Available**

The provincial [Virtual Care Best Practice Guide](#) was developed in collaboration with Virtual Health and Health Professions Strategy and Practice. The guide provides AHS healthcare providers with a comprehensive, single point of access to discipline-specific guidance using virtual modalities for clinical care provision to AHS patients. The jurisdiction section addresses expectations for virtual care provision when AHS patients are located outside of Alberta.

### **Government Announces Investment in Home Care, Continuing Care**

Yesterday, the Government of Alberta announced [a \\$36-million investment in home care and continuing care](#), aimed at reducing pressure on all parts of the

healthcare system, especially acute care, during a time when hospitalizations are increasing due to COVID-19.

Contracted home care agencies will receive \$22 million over two years in additional funding to provide wage increases to their certified healthcare aides. An additional \$14 million is being provided to expand workforce capacity to support home care and continuing care facilities until March 31, 2022.

More than 400 Albertans are currently waiting in hospitals to move into continuing care facilities, with many more waiting to return to their homes outside of facility-based care with the support of home care services.

### **Variant of Concern Testing Shifts to Targeted Screening**

Alberta's COVID-19 testing program will no longer screen for variants of concern on all positive COVID-19 test samples, Alberta Precision Laboratories (APL) announced today (Sept. 10).

Instead, APL will begin screening for variants of concern only among targeted populations, including hospitalized and emergency department patients; patients involved in outbreaks; healthcare workers, and recent international travellers. These populations have a higher risk of being infected with a variant of concern or for spreading a variant of concern.

The change will free up lab capacity for general COVID-19 testing as case numbers continue to rise, ensuring Albertans continue accessing testing and receiving their test results in a timely manner.

Virtually all COVID-19 cases in Alberta are the Delta variant, and public health measures in place to prevent and manage spread of the virus are now based on the variants of concern being widespread in our community.

Alberta's testing program is currently completing approximately 10,000 tests per day, and most patients are receiving their results within 24 to 48 hours.

## Be Well - Be Kind

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### **Help Available for Those with Lingering COVID-19 Symptoms**

In-person, phone and online resources are available for those struggling with lingering symptoms of COVID-19 and can be found on [MyHealth.Alberta.ca](https://myhealth.alberta.ca) or [Getting Healthy after COVID-19](#).

They include:

- A [symptom self-management guide](#) to help patients recover after COVID-19.
- Information on COVID-19 Recovery Clinics.
- Alberta Healthy Living Program's [free classes](#) for patients.

- [Together4Health](#) – an online community where Long COVID patients can connect, share experiences, coping tools/mechanisms and where they could ask questions.
- Phone support available from: Health Link (811); Rehabilitation Advice Line (1-833-379-0563); and 24/7 support from the Addiction and Mental Health Helpline (1-866-332-2322).

[Resources for health professionals](#) are also available.

### **Staying Healthy During Change**

We know you may be feeling stressed and tired. Here are the many ways you can find support:

- If you need immediate support, call [Employee Family and Assistance Program](#) (EFAP) at 1-877-273-3134. If you are in crisis, dial 1 and be connected to a senior clinician for immediate intervention and crisis management.
- Use [EFAP counselling services](#), which are offered over the phone, through video, or online.
- Download the [EFAP Resilience App](#) which offers custom lessons and content to build skills that promote resilience. It's available through the app store and use code AHSHWH.
- Use [i-Volve](#), a web-based solution to treat employees struggling with mild depression and/or anxiety. This innovative treatment program will help to identify, challenge and overcome anxious and/or depressive thoughts, behaviours and emotions.
- Join a [wellness seminar](#) on a variety of health and wellness topics. Register on MyLearningLink by searching 'WHS Wellness Seminar Series' or 'wellness'. [Click here](#) to see the schedule.

Questions? Contact [wellness@ahs.ca](mailto:wellness@ahs.ca).

### **World Suicide Prevention Day — Creating Hope Through Action**

Today (Sept. 10), AHS supports World Suicide Prevention Day (WSPD), an annual Canadian Association for Suicide Prevention initiative. This year's theme is Creating Hope through Action. The following resources and messages are available to help promote WSPD and raise awareness of suicide prevention with clients, patients, partners, co-workers and stakeholders.

- [Suicide Prevention \(Insite\)](#)
- [Preventing Suicide: Injury Prevention & Safety, Information for Health Professionals \(External\)](#)
- [AHS SPEAKS: Suicide Prevention Education, Awareness, Knowledge & Skills](#)
- [Suicide Prevention Presentation](#)
- [WSPD Video](#)

The health, safety, and well-being of AHS workers are essential in our ability to provide high-quality healthcare in Alberta. Remember, the [Employee and Family](#)



[Assistance Program](#) is a free, flexible and confidential service available 24/7 at 1-877-273-3134.

In addition, if you or someone you know needs support, the Mental Help Line is a 24/7 confidential service that provides support, information and referrals to Albertans experiencing mental health concerns. Call 1-877-303-2642.

### **Mental Wellness Moment — Managing Stress Related to Being Unable to Vaccinate Children Under 12**

The ongoing pandemic continues to be a stressful time for everybody. Many parents and guardians could be feeling anxiety over the fact their children under 12 are currently ineligible to receive a COVID-19 vaccine. In this Mental Wellness Moment, Dr. Nicholas Mitchell — Provincial Medical Director for AHS Addiction and Mental Health — provides some [advice on how to manage this stress, and how to help unvaccinated children deal with any anxiety they might be feeling](#).



### **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 some recent messages of gratitude with you — and you can see others on our [Sharing the Love webpage](#).

*A heartfelt thank you to all healthcare workers in this province and this country who selflessly show up to work every day, knowing the risks, remain professional, compassionate and dedicated to helping the sick and injured. You continue to show strength and resolve through a very difficult and demanding time.*

— Anonymous



*I am blessed to have good health but I am concerned about the numbers. I just want to say that I support you. I am worried about what's going on with COVID-19. I am glad we will have a provincewide mask mandate. I hope more Albertans 12 and older will get vaccinated. In the meantime, I am so grateful to AHS.*

— Anonymous

*Thank you for all the incredible work that you have done, are doing and will do to keep us safe during this pandemic. You are our family's heroes. We love you and will never forget you.*

— Paolo Mussone

### **Wrapping Up — We Appreciate Everyone and Everything You Do**

It's been another difficult two weeks, no doubt. As you've seen in this email, we've added ICU capacity and that capacity is filling up. We've needed to postpone surgeries. We've redeployed staff. The numbers of new and active cases, of hospitalizations and, yes, of COVID-19-related deaths all continue to rise. We know that, in some cases, we've asked people to cancel their vacations. We know you have given and sacrificed so much. We know you're tired, and this fourth wave is taking a physical and emotional toll on all of us. And yet please know: we see that, faced with all this professional and personal pressure, you continue to show up and do the best you can every day for the Albertans we serve. We are so honoured to be your colleagues. We appreciate everyone and everything you do. And we cannot thank you enough.

With enduring gratitude and appreciation,

**Dr. Verna Yiu**

AHS President & CEO

**Dr. Laura McDougall**

Senior Medical Officer of Health

