



Message from
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AHS Update: Integrated Operations Centre to open in Calgary, organ transplant programs set records, Pulse Survey coming

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 and we'll balance that with updates on the progress AHS is making

in our priority areas. We have much to accomplish together, so we want to make sure our teams have the most current information on the work underway and on the work ahead.

Priority: 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.

New initiative supports EMS, hospital capacity in Calgary

A new initiative is being implemented in Calgary next month as part of ongoing work by AHS to relieve system pressure, build capacity and continue to meet healthcare demand in Alberta.

Supporting the [AHS EMS 10-Point Plan](#), the new Calgary Integrated Operations Centre (IOC) team will work with Emergency Medical Services (EMS) crews on the ground, helping direct them to the most appropriate care facility for each specific patient, based on patient need and site capacity.

Comprised of specially trained paramedics and acute care inpatient capacity leads, IOC is an additional support for the existing experts who navigate patient flow challenges through the healthcare system. The IOC will help co-ordinate and support patients going into hospital, their stay in hospital and discharge to the community. This will occur through the IOC's co-ordinated, technology-enabled 'air-traffic control' perspective based on information provided by the paramedic crew on scene, as well as real-time data from the sites, including both emergency and acute care capacity.

The Calgary IOC has been modelled on the Edmonton IOC, which was launched in 2019. The Calgary IOC will not impact dispatch or 911 call processes currently in place.

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.

Connect Care's 30-day launch readiness assessment held this week

Launch 4 of Connect Care is now less than one month away, scheduled for the early morning hours of May 28. The 30-day launch readiness assessment meeting was held this week, where updates were provided by all launching sites and portfolios regarding preparations and activities leading up to the launch. This will be the third launch of Connect Care during the COVID-19 response, and we are so appreciative of the work teams have done to move this important project forward during challenging times.

A few locations will be launching earlier than May 28, including the laboratories at the Grey Nuns Community Hospital and the Misericordia Community Hospital in Edmonton on May 14. The full schedule of launches is available on [Insite](#).

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.

AHS performs record number of organ transplants

Even in the face of pandemic challenges, AHS' two transplant programs set records and achieved a number of firsts last year.

The Edmonton Kidney Transplant Program performed a record 49 living donor kidney transplants, breaking the previous record of 45 set in 2004. The program performed 34 living donor kidney transplants in 2020, 38 in 2019, and 29 in 2018.

The Southern Alberta Transplant Program also notched a record year for organ transplants, with 105 procedures in 2021 from 43 deceased and 25 living donors. Of these transplants, 103 were kidney and two were pancreas. The program reported 97 organ transplants in 2020, and 80 in 2019.

Collectively, AHS transplant teams performed 404 organ and tissue transplants last year. Even with some living donor programs temporarily paused at times, the total number of transplants in Alberta remained relatively on par with previous years: 395 in 2020 and 433 in 2019.

Priority: Rural Engagement and Rural Initiatives

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.

Albertans from across Calgary Zone joined the [Prairie Mountain Health Advisory Council](#) for their regular meeting on April 28. As well as engaging in a conversation with the Calgary Zone executive leadership team, participants received a presentation from the Alberta Cancer Screening Program, and an update on rural recruitment and retention efforts from the Rural Health Professions Action Plan.

Next week, Indigenous leaders from across northern Alberta will be meeting with the North Zone leadership team, Stacy Greening and Dr. Brian Muir. The meeting has been designed as an opportunity for the sharing of priorities and concerns, and for building relationships.

Over the coming weeks, several meetings are scheduled with rural MLAs, mayors and reeves across Alberta to discuss community-specific topics. To schedule a meeting in your community, please reach out to your zone leadership team or Community.Engagement@ahs.ca.

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 five-point plan to improve surgery in Alberta by shaping demand, managing capacity, and improving the patient's journey to receiving surgery.

AHS will do this by:

1. Enhancing collaboration between specialists and primary care providers so, together, they provide comprehensive, facility- and community-based supports for patients from pre- to post-surgery.
2. Providing Albertans with faster access and more choice. We'll use a centralized model to distribute referrals to the most appropriate surgeon or surgical team with a shorter wait list.
3. Improving access to surgery through expanded services and partnerships, including with chartered surgical facilities.

4. Providing patients clear direction to care with standardized, easily navigated surgical pathways and supporting resources.
5. Gaining greater understanding of root causes that delay access and increase wait times in surgery through a research review.

Ultimately, these strategies seek to:

- Reduce wait times for surgery for all Albertans, so every scheduled surgery is provided within clinically recommended targets.
- Support partnerships and collaboration between patients, primary care providers and specialists.
- Enable consistent and transparent measurement of wait times across the province.
- Ensure surgical care continues to be equitable, safe and high quality for all Albertans.
- Ensure long-term viability of Alberta's healthcare system.

Work is underway to create a central location for the ASI on the AHS website to share information, updates and progress. Stay tuned for more information on this webpage and other work of the ASI.

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 88 per cent of our pre-pandemic surgical volumes. Our total surgical wait list for adults sits at approximately 73,300, compared to approximately 76,600 at the beginning of March. In February 2020, before the pandemic, our total wait list was 68,000.

Supports When You Need Them

Boost your Mental Health with Compassion

We have all had a difficult time over the course of the pandemic but showing [empathy, sympathy and compassion](#) to ourselves and each other can help with moving forward. Demonstrating empathy and compassion can also help build trusting, inclusive, supportive and psychologically healthy and safe relationships.

You can contribute to a supportive workplace by attending an information session on trauma awareness. [Register online](#).

For support with any issue, you can call the [Employee and Family Assistance Program](#) (EFAP) intake line 24/7/365 at 1-877-273-3134. This service is confidential.

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

Support is available if you ever feel uncertain or overwhelmed. See the [Resilience, Wellness and Mental Health Resource Guide](#) for a comprehensive list of health and wellness supports. Questions? Contact wellness@ahs.ca.

COVID-19 Status

ICU Update

As of 11:45 a.m. today (April 29), AHS has 211 general adult ICU beds open in Alberta, including 35 additional spaces above our baseline of 176 general adult ICU beds. There are 173 patients in ICU. Provincially, ICU capacity (including additional surge beds) is currently at 82 per cent, up from 80 per cent a week ago. Without the additional surge spaces, provincial ICU capacity would be at 98 per cent, up from 97 per cent a week ago.

Hospitalizations

On April 25, 1,173 individuals were in non-ICU hospital beds with COVID-19, compared to 1,141 on April 18, a 2.8 per cent increase.

Variants of Concern

APL continues to closely monitor SARS-CoV-2 variants. From April 19-25, an average of 79 per cent of positive samples were strain-typed. Of those, the seven-day rolling average was 96 per cent Omicron BA.2 lineage, four per cent Omicron BA.1, and 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 very 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 April 25, there was an average of 942 new cases of COVID-19 per day, compared to 873 cases per day the previous reporting period (April 12 to April 18), a 7.9 per cent increase. The Calgary Zone reported the highest number of new cases with 2,750 (an average of 393 new cases per day). Four out of five zones reported an increase in the number of new cases this reporting period, compared to the previous week, as you can see in the table below:

Zone	New Cases (April 19-25)	New Cases (April 12-18)	Percent Change
Calgary	2,750	2,583	+6.5%
Edmonton	2,308	1,989	+16.0%
North	443	423	+4.7%
Central	615	718	-14.4%
South	456	395	+15.4%
Unknown	20	0	N/A
Total	6,592	6,108	+7.9%

Please note: We know these data underestimate the number of people with COVID-19 across the province, and changes in testing eligibility make it difficult to compare cases week over week. Alberta Health has stopped reporting the number of active COVID-19 cases.

Wastewater surveillance

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

- South Zone: Lethbridge and Brooks showed significant increases in COVID-19 RNA in its wastewater compared to the previous reported average. Medicine Hat is showing signs that it may be plateauing after about two months of trending upwards, although more data is needed before saying definitively.
- Calgary Zone: Four locations decreased by more than 25 per cent compared to the week before. One of these locations was Airdrie, where large increases were reported two weeks ago. The City of Calgary increased by 16 per cent.
- Central Zone: Lacombe had an 85 per cent increase and was the only location of the three zone sites that increased since the last report. Red Deer and Drumheller were stable.
- Edmonton Zone: Fort Saskatchewan and area increased by 49 per cent while the City of Edmonton decreased by 32 per cent.
- North Zone: Fort McMurray and Cold Lake reported increases of 43 and 59 per cent, respectively. Grande Prairie reported a 10 per cent decrease. An abnormally large spike was seen in Edson and is now trending downward. More time is needed to determine if there is a sustained trend.

Frequency of reporting updates vary by sampling site. The above interpretations were made from available data as of April 25 at noon. The Alberta Wastewater Surveillance Program is a collaboration between the University of Calgary, University of Alberta, Alberta Precision Laboratories and Alberta Health.

Other notable COVID-19-related information:

- Data from the last seven days indicate that 37.9 per cent of new admissions to non-ICU spaces are due to COVID-19 infection directly, 27.4 per cent had COVID-19 as a contributing cause, and 34.7 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 42.4 per cent, 33.3 per cent had COVID-19 as a contributing cause, and 24.2 per cent were incidental infections or unclear.
- As of April 25, 4,252 individuals have passed away from COVID-19, including 62 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 April 25, 565,052 cases of COVID-19 have been detected in Alberta and 24,729 individuals have been hospitalized, which amounts to 4.4 individuals for every 100 cases.
- From April 19 to April 25, 26,156 COVID-19 tests were completed, a seven-day average of 3,737 tests per day. During this period, the daily positivity ranged from 23.4 per cent to 30.6 per cent.

Things You Need to Know

Watch for Our People Pulse Survey Invite on May 2

We want to check in to see how you are doing, and give you the opportunity to provide feedback through this short five-question survey focusing on well-being and engagement.

Please share your perspectives and provide feedback on how you're doing and what you need to feel supported. Results will help leaders and their teams identify local priorities and take actions to support well-being and enable healthy workplaces.

Watch for your survey invitation email from Gallup on Monday, May 2. Please do not forward your link to others as everyone will receive their own.

See [Insite](#) for more information.

Interim CEO Video Message — More on Our People Pulse Survey

Joining the AHS Vlog to [tell us more about the upcoming Pulse Survey and how you can participate](#) are:

- Brad Dorohoy, Senior Program Director, Talent Management Strategies.
- Debra Scharff, Director, Patient Safety Learning and Improvement.



COVID-19 Immunization Update

AstraZeneca will no longer be available in Canada

As announced by [Alberta's Chief Medical Officer of Health](#), the AstraZeneca COVID-19 vaccine will no longer be available in Canada after this week. Several other vaccine options exist, including Moderna and Pfizer, which are the preferred options and of which there is ample supply. The Janssen and Novavax vaccines continue to be available for those who may need or prefer a non-mRNA vaccine.

Get immunized with whichever dose you are eligible for

Immunization remains the single most effective tool we have to reduce the risk of experiencing severe illness, hospitalization and death from COVID-19.

Vaccine effectiveness against infection declines over time and is lower with the highly transmissible Omicron variant. But additional doses can boost immunity to improve protection and limit spread.

Everyone five years of age and older can get immunized against COVID-19. Everyone 12 years of age and older can get a booster dose five months after their primary series. Fourth doses (second boosters) are available to [eligible groups](#).

We encourage everyone to get immunized with whichever dose they are eligible for, as soon as possible.

Complete your Fit for Work Screening

It's important that we continue to take preventive steps to reduce the spread of COVID-19 and other viruses.

Staff and physicians need to continue to monitor for COVID-19 symptoms, such as a sore throat or runny nose. While it may be tempting to dismiss these as seasonal allergies, to do so could risk the spread of infection. We cannot overstate the importance of staying home when sick.

Please continue to complete your [Daily Fit for Work screening](#) and assess your own personal history of seasonal allergies. Also simple actions — such as adhering to all [personal protective equipment](#) (PPE) measures, [washing your hands](#) regularly and [physically distancing](#), where possible — can prevent the spread of COVID-19.

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 April 26:

- 94,881 employees (AHS and APL combined) have been tested for COVID-19 and, of those tested, 27,770 (or 29.3 per cent) have tested positive.
- Of the 11,314 employees who have tested positive and whose source of infection has been determined, 813 (or 7.2 per cent) acquired their infection through a workplace exposure. An additional 4,663 employees who have tested positive are still under investigation as to the source of infection.
- 6,670 physicians (AHS and APL combined) have been tested for COVID-19 and, of those tested, 1,414 (or 21.2 per cent) have tested positive.
- Of the 461 physicians who have tested positive and whose source of infection has been determined, 30 (or 6.5 per cent) acquired their infection through a workplace exposure. An additional 307 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](#).

Update on Eye Protection

This overview on current guidance is provided to ensure clarity, consistency of practice and understanding around the use of eye protection.

While continuous masking remains in place for now ([directive](#)), the PPE Task Force made the decision to provide some flexibility around eye protection.

Eye protection must be worn if you are within two metres of a patient with COVID-19, possible COVID-19, or if a patient is experiencing respiratory symptoms consistent with influenza-like illness, or a respiratory tract infection. Providing care to patients with these symptoms would require you to follow [Modified Respiratory Precautions](#), which include the use of eye protection.

Continuous [eye protection](#) must also be maintained in all AHS settings where frequent or unanticipated exposures to COVID-19 may occur.

[Eye protection](#) is now optional in other areas and situations. Making a decision on whether to wear eye protection in optional situations should be directed by your [Point of Care Risk Assessment](#) (PCRA) and your risk of exposure to COVID-19.

Workers may choose to not wear eye protection when the risk of exposure to COVID-19 is considered low based on the PCRA.

For congregate living (e.g. long-term care) and home care settings, staff should also continue to follow the [Guidelines for Continuous Mask and Eye Protection Use: Home Care & Congregate Living Settings](#). Guidance on eye protection for these settings is consistent with the direction for all staff in this memo.

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

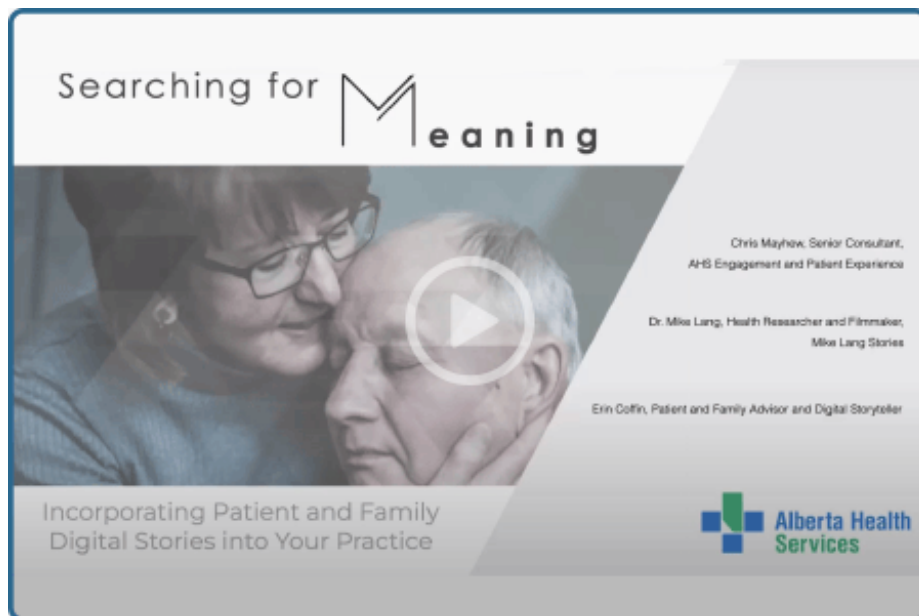
For more information about eye protection, or about bringing your own eye protection to work, please visit: [Use and Reuse of Eye Protection during the COVID-19 Pandemic](#)

Webinar Focuses on Patient, Family Digital Stories

Earlier this month, the Engagement and Patient Experience team hosted a special screening of Searching for Meaning: Incorporating Patient and Family Digital Stories in Your Practice.

Embracing patient stories can help us identify opportunities for growth and reflect on the experiences of the patients and families we serve. In this webinar, you will be introduced to the AHS Patient and Family Storytelling Platform and learn how to successfully incorporate digital stories into your work and practice.

A recording of the full session is now available [online](#).



Be Well - Be Kind

Health Philanthropy Month Starts Monday

This May, we will once again recognize Health Philanthropy Month to thank our philanthropic partners and their contributions in communities across Alberta.

AHS is proud to work with our 69 foundation and 48 auxiliary partners to advance patient care. Together, these organizations raise more than \$285 million annually toward local and system-wide healthcare priorities as well as health research throughout the province.

Over the next few weeks, we encourage you to check out the Faces of the Foundations story series on [AHS.ca](https://www.ahs.ca), [Insite](#) and social media. To learn more about our philanthropic partners and how to show your support, please visit [ahs.ca/give](https://www.ahs.ca/give).



Sunday is National Physicians' Day

Every day, physicians give so that their communities may be safe and healthy, consistently offering their time, expertise, care and emotional energy to serve others.

On Sunday, we celebrate National Physicians' Day to recognize the Canadian medical profession and its contributions to the country's history and national identity. In fact, May 1 was chosen to honour the birthday of Dr. Emily Stowe, the first woman to practice medicine in Canada and a founder of Canada's women's movement.

Watch a [special message](#) from Dr. Francois Belanger, Vice President, Quality, and Chief Medical Officer.

Celebrating the Important Role of Midwives

May 5 is International Day of the Midwife, and we would like to celebrate midwives and the role they play as part of our healthcare team. Registered midwives build meaningful and lasting relationships with the pregnant people and families they care for, with commitment to high-quality, patient-centred care both in AHS facilities and throughout the province. Thank you for everything you do as part of our healthcare team, and for those you care for.

— Sean Chilton, Vice President,
People, Health Professions and Information Technology

— Danica Sharp, Executive Director, Provincial Midwifery Services,
People, Health Professions and Information Technology

Gratitude from Albertans

Everything you and your colleagues do every day to provide safe quality care to all Albertans is being noticed. Messages of gratitude keep coming in from across the province and beyond during the COVID-19 pandemic. We want to share a couple recent Health Link-related messages of gratitude with you — and you can see others on our [Sharing the Love](#) webpage.

I spoke with Health Link during a moment (of crisis) and wanted to acknowledge the kindness and thoughtfulness I experienced. They stayed with me the whole time until help arrived. I want to thank you for your kindness.

— Anonymous

I wanted to leave a review about the wonderful nurses I spoke to at 811. They took the time to really understand how I was feeling and made me feel so comfortable. I have been miserable because I have COVID-19 right now. They put a smile on my face and made me laugh multiple times. They were knowledgeable, kind, compassionate and understanding. I've never had such an amazing healthcare experience over the phone or in person than I did today. Thank you to all the healthcare workers who deal with so much on a day-to-day basis while still treating patients with utmost respect and compassion. What an excellent experience.

— Anonymous

Wrapping Up

This has been a long weekly message with lots of information to absorb, so we'll keep our Wrapping Up message brief and direct. Thank you for your compassion and professionalism. Thank you for your dedication. Thank you for always going the extra mile for patients, families and your colleagues. Thank you for everything you do. And please, when you have a chance to do so (especially as the days get longer and warmer), take some time for yourself and your loved ones to rest and recharge. Always take care of yourselves as you take care of others. You are important.

Much enduring gratitude and appreciation,

Mauro Chies

Interim AHS President & CEO

Dr. Laura McDougall

Senior Medical Officer of Health



Healthy Albertans.
Healthy Communities.
Together.

