

Appendix A: Continuity with Primary Care Provider (Nursing Unit Role)

- **Supporting unattached patients in finding a Primary Care Provider (PCP) or if timely follow-up / safe handover with PCP is unavailable:**

During the COVID-19 crisis, each zone is working through additional processes to ensure patients are able to be attached to a PCP and a medical home and efficiently achieve safe handovers and transitions back into community. **Please follow your zonal / local processes and contact information.**

General attachment process across Alberta:

- Primary Care Networks “Alberta Find a Doctor” Website** – www.albertafindadoctor.ca

Managed by a committee of executive directors, physicians and communicators from the Care Networks (PCNs), this site is a tool that allows patients to key in an address, postal code or community to find out which PCN family doctors are accepting new patients in their area.

- If you are unaware of your zone’s alternate options for attaching patients, or for safe handover and timely follow-up with the PCP, or for more information on attachment needs, you can contact the PCN where the patient resides. This can be found via <https://albertafindadoctor.ca/pcn>. Please select the correct zone for the patient to search for their PCN.
- For persons identifying primary residence and being discharged to First Nation Community or Metis Settlement (FNC/MS), visit <https://albertafindadoctor.ca/pcn> to identify the nearest PCN
- If you are unaware of processes provided from your zone for additional ways to link with COVID-19 Primary Care supports and/or resources for attachment and/or safe handovers, see COVID/PCP website link in Appendix E. Further enquiries can be made to [PHC@ahs.ca email](mailto:PHC@ahs.ca) (Subject line: COVID Discharge Enquiry).

- **Admission Notification for COVID-19 to PCP and First Nation Inuit Health Branch (FNIHB) or Metis Settlements**

The admission notification will include the following at minimum:

- Patient’s identification (full name, personal health number, address, phone number, date of birth)
- Contact information for admitting physician (full name, telephone number, fax number)
- Hospital (name and location)
- Reason for hospital admission – COVID-19 and any other relevant information on the patient’s current condition (i.e. admitted to ICU, etc.)
- Any testing* being completed (i.e. COVID-19 test administered)
- Date/time of admission
- Approximate discharge date or hospital length of stay, if possible

***Note: Ensure the PCP and, if appropriate the FNHIB, is cc'd on COVID-19 test requisition so they also receive the result as soon as available.**

If you are unable to contact the PCP (i.e. phone lines are busy), please inform the PCN overseeing the patient's PCP so they can address. Details can be found through the search tool on <https://albertafindadoctor.ca/find-a-doc/directory>.

If when contacting the PCP they state that they are not that patient's PCP, please follow the process for **supporting unattached patients in finding a PCP (above)**.

Appendix B: Most Responsible Physician Roles: Continuity with Primary Care Provider

- **Safe handover for COVID-19 to Primary Care Provider (PCP)**

Safe handovers should ensure there is confirmed communication between the sending and receiving care providers to transfer the COVID-19 patient's care to the PCP (or alternate as per zonal process). The safe handovers can be initiated prior to the day of discharge. This allows the community provider and team to make appropriate arrangements to receive and follow-up with the patient within the timeline set by the MRP as per clinical assessment.

Safe handovers should include the following elements (whenever possible):

- A mutually agreed upon time to have the conversation
- Use of the Discharge Script (Appendix F) which portrays the discharge summary and transition plan information (Appendix A)
- Ensures confirmation of information received and that it's understood by receiver

***Note: further information can be found in the Home to Hospital to Home Transitions Guideline (Appendix E)**

- **Discharge notification for COVID-19 to PCP**

Send an immediate notification to the PCP and if appropriate, First Nations Community/Metis Settlement Home Care, to inform them that the patient will be discharged from hospital, including whether the patient is lab confirmed COVID-19-positive at point of transition.

***Note: Ensure the PCP, if appropriate the FNIHB, is cc'd on COVID-19 test requisition so they also receive the result as soon as available**

- **Discharge summary & transition plan for COVID-19 to PCP**

The discharge summary and transition care plan sent to the PCP (within 24 hours of discharge) will include the discharge notification (above) and the following information dictated, at minimum:

- If the patient is lab confirmed COVID-19-positive at point of transition to community; or has been tested as negative (or presumed negative) for COVID-19 at point of transition
- Whether the patient has come into contact with known COVID-19-positive patients in acute stay, if known
- Where that patient is being discharged to, what the circumstances are in the discharged location and what isolation precautions have been advised to the patient
- PCP follow-up appointment timeline based on clinical assessment (i.e. 1 – 3 days post-discharge)
- Verbally communicate with and send written orders to Home Care (HC) for patients FN community or Métis settlement in addition to discharge dictation

NOTE: Home Care is not available on weekends in First Nations Communities

- Any other main diagnosis (admission & discharge)

- Pertinent physical findings
 - Results of procedures and laboratory tests
 - Discharge medications with reasons for any changes to the previous medication regimen
 - Details of follow-up appointments made to primary care, specialty care and other post-discharge community supports, if applicable (Note: ensure PCP is cc'd on requisitions / referrals for continuity of care)
 - Outstanding investigations
 - Patient goals
 - Any other specific follow-up concerns (e.g. risk of readmission)
 - For persons who identify as Status First Nations or Inuit, and are being discharged to their home community refer to processes listed in Appendices H-1 and H-2
- *See Appendix F for the Discharge/Transfer Script**

Appendix C: Most Responsible Physician and Transition Services - Ability to Continue Self-Isolation at Home

From ANNEX B: Home Isolation Recommendations

<https://open.alberta.ca/publications/coronavirus-covid-19>)

The discharging facility must consider the risk to others in the home. The discharging facility must make reasonable efforts to assess for at-risk household members, specifically, those with conditions that put them at greater risk of complications of COVID-19 (e.g. underlying chronic or immunocompromising conditions, or the elderly). At risk household members **should not** provide care for the person being discharged and alternative arrangements may be necessary.

For more detailed information regarding the ability to support continued isolation in private homes, <https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-guidelines-transfers-discharges-admissions.pdf>

The following recommendations also apply (<https://open.alberta.ca/publications/coronavirus-covid-19>):

- Suitable home care environment. In the home, the COVID-19-positive individual should stay in a room of their own so that they can be isolated from other household members.
 - If a separate room is not feasible, ensure that shared spaces are well ventilated (e.g. windows open, as weather permits) and that there is sufficient room for other members of the home setting to maintain a 2 metres distance from the case whenever possible.
 - If it is difficult to separate the ill person physically in their own room, hanging a sheet from the ceiling to separate the ill person from others may be considered.
 - If the ill person is sleeping in the same room as other persons, it is important to maintain at least 2 metres of separation from others (e.g. separate beds and have people sleep head-to-toe, if possible).
 - If a separate bathroom is not available, the bathroom should be cleaned and disinfected frequently.
- Access to supplies and necessities: the COVID-19-positive individual should have access to food, running water, drinking water and supplies for the duration of the period of self-isolation.

Ability to support isolation in Supportive Living and Long Term Care

For the most current information on safe discharges to Supported Living, Long Term Care and other congregate settings, consult:

- **Client Admission/Discharge/Transfer Screening Questionnaire**
(<https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-cc-client-screening-questionnaire.pdf>)
- **Medical Officer of Health Guidelines for Transfers, Discharges and Admissions During COVID-19 Pandemic** (<https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-guidelines-transfers-discharges-admissions.pdf>)
- **Continuing Care and COVID-19 Resources and Frequently Asked Questions**
(<https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-cc-faq.pdf>)
- **Guidelines for COVID-19 Outbreak Prevention, Control and Management in Congregate**

Living Sites

<https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-outbreak-management-congregate-guidelines.pdf>

Additional Zone-specific resources supporting discharges to Continuing Care Facilities:

Zone	URL
Calgary	No online zone-specific resource available at time of publication
Edmonton	Risk Assessment Algorithm - Admission / Discharge / Transfer During Outbreaks Risk Assessment Worksheet
Central	https://www.albertahealthservices.ca/assets/info/hp/phys/cen/if-hp-phys-moh-cz-patient-transfer-algorithm.pdf https://www.albertahealthservices.ca/assets/info/hp/phys/cen/if-hp-phys-moh-cz-faq-transfers-admissions-discharges-outbreaks.pdf https://www.albertahealthservices.ca/frm-19669.pdf
South	https://www.albertahealthservices.ca/assets/healthinfo/ipc/hi-ipc-sz-process-transfer-discharge.pdf https://www.albertahealthservices.ca/frm-19669.pdf
North	No online zone-specific resource available at time of publication

Appendix D: Staff Script for the COVID-19: My Discharge Checklist

The COVID-19: My Discharge Checklist is available online at <https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-my-discharge-checklist.pdf>

Below is a suggested short script for the healthcare team member providing the COVID-19: My Discharge Checklist (hyperlinked here) to the patient:

“I have a discharge checklist to offer you that can help you feel confident to manage your health when you leave here. Can I show it to you now?”

This checklist was created by patients for patients who have been in hospital for COVID-19 treatment. It can help you feel prepared for the conversation you’ll have with your circle of care in a few days’ time about your discharge home. You can take this document with you, and share it with your loved ones involved in your health care.

There are sections to help you think through:

- Different ways to have someone support you with your hospital discharge conversation
- The medications you will need and how you will get them
- Your follow up appointments and options to get medical advice
- Questions you may want to ask us before you leave
- And good sources of information about COVID-19

You’ll notice there is space for you to write down any question or concerns that you want to discuss before you leave hospital as well (*ensure patient has a pen*). This is your document, so you can write down any notes you think would be helpful for you and your loved ones.

I am giving this to you now so that you have a few days to go through it and fill it out as much as you wish. You can talk with a friend or family member (someone you trust) if you choose, before you discuss your discharge with the nurse/doctor. We also have a discharge checklist to make sure we have completed all of our tasks related to your discharge from hospital.

(Question to help build importance for the patient to complete/use the checklist): What benefit do you see this checklist having for you as you prepare for discharge?

(Questions to help assess readiness): How does that plan sound? Do you have any questions?”

Appendix E: Patient and Provider Resources

Resource title	Primary Audience	URL
COVID-19: My Discharge Checklist	Patient and family	https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-my-discharge-checklist.pdf
Prevent the Spread of Coronavirus	Patient and family	https://www.alberta.ca/assets/documents/covid-19-fact-sheet.pdf
How to care for a COVID-19 patient at home	Patient and family	https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-patient-at-home.pdf
Coronavirus Disease (COVID-19): Care Instructions	Patient and family	https://myhealth.alberta.ca/Alberta/Pages/Coronavirus-Disease-(COVID-19)-Care-Instructions.aspx
Coronavirus Disease (COVID-19): How to manage symptoms	Patient and family	https://myhealth.alberta.ca/Alberta/Pages/How-to-manage-symptoms.aspx
Isolation: learn what to do if you are exposed to an illness like coronavirus (COVID-19)	Patient and family	https://www.alberta.ca/isolation.aspx
Provincial COVID-19 Resource for all Primary Care Providers	Primary Care Providers	https://www.albertahealthservices.ca/topics/Page16956.aspx
COVID+ Primary Care pathway	Primary Care Providers	https://www.specialistlink.ca/covid19/covid19-resources.cfm
COVID+ Specialty advice lines	Primary Care Providers	North, Edmonton, Central Zones – Connect MD – Call or text: 1-844-633-2263 Calgary & South Zones – Specialist LINK Call: 1-844-962-5465 & ext. 8 https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-primary-care-tele-advice.pdf
Public health disease management guidelines : coronavirus – COVID-19	Public Health Professionals	https://open.alberta.ca/publications/coronavirus-covid-19
Home to Hospital to Home Transitions Guideline	All	https://www.albertahealthservices.ca/info/Page17125.aspx
Continuing Care and COVID-19 Resources and Frequently Asked Questions	All	https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-cc-faq.pdf
Medical Officer of Health Guidelines for Transfers, Discharges and Admissions During COVID-19 Pandemic	All	https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-guidelines-transfers-discharges-admissions.pdf

Resource title	Primary Audience	URL
Client Admission/Discharge/Transfer Screening Questionnaire	Physicians and Staff working in Acute Care LTC, and DSL	https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-cc-client-screening-questionnaire.pdf
Guidelines for COVID-19 Outbreak Prevention, Control and Management in Congregate Living Sites	Physicians and Staff working in Acute Care LTC, and DSL	https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-outbreak-management-congregate-guidelines.pdf
Rehabilitation Advice Line	All	1-833-379-0563
Seniors Stay Strong with Nutrition: Seniors and COVID-19	All	https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-stay-strong-with-nutrition-seniors.pdf
COVID-19: Nutrition for Recovery	All	https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-nutrition-for-recovery.pdf

Appendix F: Discharge/Transfer Script to PCP (or MRP) for COVID-19 Safe Handover

The facility discharging a COVID-19-positive patient to a home setting must provide specific guidance on discharge to PCP and state:

- The **DATE** of symptom onset
- The **patient must remain on isolation** until (10 days from onset of symptoms) or until symptoms resolve, whichever is longer, after arrival home.
- PCP follow-up appointment timeline based on clinical assessment (i.e. 1 - 3 days post-discharge)
- Discharge medications / changes and any pending referrals requiring follow up (home care or other specialties)
- Any outstanding labs or tests and/or results of procedures and lab tests done in hospital
- Condition of the patient (any risk assessments completed - e.g. risk of readmission)
- Patient goals and any other specific follow-up concerns
- After hours contact information if urgent issues arise
- The **SPECIFIC DATE** on which isolation can be discontinued

Where the discharge of a COVID-19-positive patient is to a **Long Term Care facility, Continuing Care facility, group home, or shelter** consider transportation guidelines listed in

- **Medical Officer of Health Guidelines for Transfers, Discharges and Admissions During COVID-19 Pandemic** (<https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-guidelines-transfers-discharges-admissions.pdf>)
- **Continuing Care and COVID-19 Resources and Frequently Asked Questions** (<https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-cc-faq.pdf>)

The discharging facility must provide specific guidance on discharge to PCP (or MRP) and state:

- The **DATE** of symptom onset
- The **patient must remain on Isolation** until (14 days from onset of symptoms) or until symptoms resolve, whichever is longer, after arrival home.
- The **SPECIFIC DATE** on which isolation can be discontinued

Appendix G: Safe Discharge Transportation Screening Questions and Safe transportation home

Transportation must be arranged before discharge/transfer is finalized and be done safely, limiting exposure to others

Transportation Screening Process

- The discharging facility/unit must phone the individual identified to pick up the patient and confirm the date the patient is being discharged
- Screen the individual for the symptoms listed at <https://www.albertahealthservices.ca/topics/Page16997.aspx#sign>
- Ask the individual if they:
 - Are immunocompromised?
 - Are on self-isolation for COVID-19 or being tested?
 - Have you travelled outside of Canada in the last 14 days?
 - Have you had close contact (face-to-face within 2 metres) with someone who is ill with cough and/or fever?
 - Have been in contact with someone being investigated or confirmed to be COVID-19 positive?

If the individual screens positive for any of the conditions or symptoms listed, they cannot provide safe transportation for the patient and alternate transportation must be arranged.

If no private vehicle available, consider a referral to ZEOC or use other supports within the zone. They must travel directly home with no stops in between.

<https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-guidelines-transfers-discharges-admissions.pdf>

Transportation coordination

If the individual screens negative for all conditions above, the discharging unit will arrange a specific discharge time and specific pick-up location at a designated facility entrance.

Unit staff to:

- Advise driver they should wear a mask. If the driver does not have access to a mask, the discharging unit will provide these supplies to the driver at the time of discharge.
- Provide unit phone number in case they arrive to the site prior to the designated time.
- Inform person picking up the patient that they will **not be** permitted in the hospital and they are to wait outside of the facility at the pre-determined facility location (i.e. outside the main entrance of the discharging facility)

For persons requiring transportation assistance home to a **First Nations Community** contact 1-800-514-7106 (24/7)

For persons requiring transportation assistance home to a **Metis Settlement**, notify the North Zone MOH:

- Weekdays 0800-1630h: 1-855-513-7530
- Weekdays 1630-0800h: 1-800-732-8981 and ask for Public Health on-call
- Weekends/stat holidays: 1-800-732-8981 and ask for Public Health on-call

Day of discharge safe transportation recommendations

At time of discharge:

- Unit staff dons PPE
- Patient performs hand hygiene, dons mask, and any other recommended PPE
- Unit staff escorts patient via wheelchair to facility-designated pick up location
- Unit staff escorts patient to waiting vehicle via wheelchair
- NOTE: Patient should wear a mask and sit in the back of the vehicle during transportation home
- Patient transferred to waiting non-exposed driver (Non-exposed family member should wear a mask).
- Patient and non-exposed family member reminded to maintain (droplet contact precautions) PPE for duration of transport home
- Advise non-exposed family member that vehicle must be cleaned adequately before further use.

After patient safely transferred to private vehicle, unit staff must ensure wheelchair is cleaned using approved equipment cleaning protocols.

Further information regarding safe transportation available at

<https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-guidelines-transfers-discharges-admissions.pdf>

Appendix H-1: Notifying Medical Officers of Health for Pending Discharges of COVID-19 Patients

Prior to discharging a COVID-19-positive or recovering patient from an acute care facility, it is recommended the unit, using the e-mail template below, contact the MOH via the Communicable Disease Nurses. The Communicable Disease Nurses serve as designates of the Medical Officers of Health.

Note: for persons identifying as First Nations or Inuit follow the Zone-specific processes outlined in Appendix H-2 below

Subject: Notification of Discharge of COVID+ve Patient

To: (select Zone)

Zone MOH	e-mail address
MOH.Calgary	CDCCOVID@ahs.ca
MOH.Edmonton	CDCCOVID@ahs.ca
MOH.Central	CDCCOVID@ahs.ca
MOH.South	CDCCOVID@ahs.ca
MOH.North	CDCCOVID@ahs.ca

Body: This message is to notify you of the imminent discharge of patient:

PATIENT NAME	
DISCHARGE ADDRESS	STREET ADDRESS: CITY/TOWN:
PATIENT'S PRIMARY TELEPHONE CONTACT	
NAME METIS SETTLEMENT	Complete only if patient being discharged home to Métis Settlement (all discharges to MS are directed to North Zone MOH)
ANTICIPATED DATE OF DISCHARGE	

Appendix H-2: Notifying Medical Officers of Health for Pending Discharges of COVID-19 Patients identifying as First Nations or Inuit

Prior to discharging a COVID-19-positive or recovering patient from an acute care facility, it is recommended the unit, using the e-mail template below, contact the **Medical Officers of Health, in First Nations and Inuit Health Branch** with copy to the MOH using the e-mail template below. In accordance with [AHS Policy 1113](#) (TRANSMISSION OF INFORMATION BY FACSIMILE OR ELECTRONIC MAIL), these messages must be encrypted. **To encrypt an email, and any attachments to the email, enter !Private in the subject line before pressing send.**

Subject: Notification of Discharge of First Nation/Inuit COVID+ve Patient

To: Medical Officers of Health, in First Nations and Inuit Health Branch
Wadieh.Yacoub@Canada.ca, Chris.Sarin@Canada.ca and Parminder.Thiara@Canada.ca

Copy to: (select Zone)

Zone MOH	e-mail address
MOH.Edmonton	MOH.Edmonton@albertahealthservices.ca
MOH.Central	MOH.Central@albertahealthservices.ca
MOH.South	MOH.South@albertahealthservices.ca
MOH.North	MOH.North@albertahealthservices.ca

PATIENT NAME	
DISCHARGE ADDRESS	STREET ADDRESS: CITY/TOWN:
PATIENT'S PRIMARY TELEPHONE CONTACT	
NAME OF FIRST or INUIT COMMUNITY	
ANTICIPATED DATE OF DISCHARGE	

Appendix I: Special Considerations

COVID-19-positive patient who leaves Against Medical Advice (AMA):

Unit charge nurse responsibility:

- If a COVID-19-positive patient, with **no fixed address**, wishes to leave AMA, contact the **most responsible physician** to discuss.
- If you have a patient admitted for potential COVID-19, who wants to leave AMA, but test is pending, contact the most responsible physician; notify the Medical Officer of Health and let them know (with patient demographics) so they can follow up with patient.

Assisted Self-Isolation for No Fixed Address Clients:

If you are discharging a patient within one of the following urban communities, an assisted self-isolation site may be available: Calgary, Edmonton, Red Deer, Grande Prairie, Lethbridge, Medicine Hat, Lloydminster and Fort McMurray. Ensure you reference the appropriate referral pathways to investigate if your patient may be appropriate for assisted self-isolation in your community.

Consider the following:

- 24 hours' worth of medication if possible, as stock medications are not necessarily available on site.
- Medication coverage initiation if possible.
- Complexity level of client in regards to risk of flight, mental health and addiction concerns, as well as behavioural concerns.
- Transportation arrangement between hospital site and assisted self-isolation site (varies from zone to zone).