

COVID-19 Status

OCTOBER 30, 2020

For the week ending Oct. 28, we've continued to see steep increases in the number of active cases of COVID-19 in the province — in our two biggest cities but also in the North, South and Central zones.

First let's look at the provincial picture. The average number of daily new cases is 459, compared to 344 cases the previous week, a 33 per cent increase. More than half of all new cases (53 per cent) are among individuals ages 20 to 49 years. Also concerning, more than half (52 per cent) of new cases had an unknown source of transmission, an increase of seven per cent from the previous week, indicating expanding community transmission. Records were set for the highest number of daily cases in Alberta on two of the past seven days: Oct. 21 (439 cases) and Oct. 24 (575 cases). Meanwhile, as of Oct. 28, 130 individuals were in hospital with COVID-19, an all-time high, with 18 of those in an intensive care unit. There is currently a record number of active COVID-19 cases in the province: 4,921, a 39 per cent increase from the previous week.

The Edmonton Zone reported an average of 203 new cases per day, up from 165 the previous week, a 23 per cent increase, while the Calgary Zone reported a 39 per cent increase, an average of 179 new cases per day, up from 129 the previous week. The Edmonton Zone has 46 per cent of all active cases in the province, with 2,277. Although the numbers of average daily new cases are lower in the North, Central and South zones, they had higher percentage increases for the week ending Oct. 28: a 57 per cent increase in the North and South, and a 60 per cent increase in Central.

Other notable COVID-19-related information:

- As of Oct. 28, a total of 27,042 cases of COVID-19 have occurred in Alberta and a total of 1,115 individuals have been hospitalized, which amounts to 4.1 individuals for every 100 cases. In all, 21,803 Albertans have recovered from COVID-19.
- Sadly, 22 Albertans passed away between Oct. 22 and Oct. 28. We extend our deepest condolences to the families of these individuals, and to all who have lost loved ones during this time. In total, since the start of the pandemic in this province, 318 Albertans have died from COVID-19.
- In the past week, 93,489 COVID-19 tests were completed, an average of 13,356 per day. The daily positivity rate was above three per cent for five of the seven days for the week of Oct. 22 to Oct. 28. A total of 1,776,206 tests have been conducted as of Oct 28.
- As of Oct. 29, **AHS** has confirmed 952 individuals with COVID-19 were present at schools while infectious. Currently, 451 out of 2,415 schools (about 19 per cent) in the province have reported an individual has attended their school while infectious.

Clearly, COVID-19 continues to spread throughout the province, posing a serious risk to public health and the healthcare system. To share this message with Albertans, [Dr. Neil Collins, a front-line emergency department physician, appears in a new, 30-second video that **AHS** is promoting through social media.](#) In it, Dr. Collins talks about the devastating effects of the pandemic and urges Albertans to adhere to public health measures. "Lives depend on it," he says. We encourage you to watch and share. **AHS** staff and physicians have been leaders throughout the pandemic. Now more than ever, it's important to lead by example with your peers and community to slow transmission and take the pressure off our services.



Things You Need to Know

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](#), Covenant Health 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 Oct. 28:

- 59,951 employees ([AHS](#), APL, and Covenant combined) have been tested for COVID-19 and, of those, 873 (or 1.46 per cent) have tested positive.
- Of the 495 employees who have tested positive and whose source of infection has been determined, 97 (or 19.6 per cent) acquired their infection through a workplace exposure. An additional 378 employees who have tested positive are still under investigation as to the source of infection.
- 3,869 physicians ([AHS](#), APL, and Covenant combined) have been tested for COVID-19 and, of those, 55 (or 1.42 per cent) have tested positive.

- Of the 37 physicians who have tested positive and whose source of infection has been determined, three (or 8.1 per cent) acquired their infection through a workplace exposure. An additional 18 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](#).

New COVID-19 Checklist for Children

Yesterday, Alberta Health announced a new COVID-19 daily checklist for children and youth under the age of 18 (as well as individuals 18 years of age and over attending high school), which will take effect on Monday, Nov. 2.

The new checklist will directly affect testing and isolation requirements for Albertans under 18 attending classes, daycare or recreational activities, as well as individuals 18 years and over attending high school.

The changes reflect current evidence on the symptoms associated with COVID-19 in children and youth, and will assist school administrators and parents/guardians with assessing students who may be symptomatic, or who may have been exposed to someone who is ill or has confirmed COVID-19. These assessments will determine if students are fit to attend school or participate in an activity or event.

Data shows some single symptoms (such as a runny nose, sore throat, diarrhea, etc.) are commonly associated with many other illnesses in children and are not a strong indicator of COVID-19 in youth, especially if they resolve quickly.

Therefore, effective Nov. 2:

For a child with no known exposures to COVID-19 or international travel in the past 14 days, and has any of the following symptoms: fever, cough, shortness of breath or loss of sense of smell or taste:

- The child is to isolate for 10 days from onset of symptoms.
- Testing is recommended.
- If the child has a negative test result and is feeling better, normal activities can resume even before the 10-day isolation is complete.
- If a child has ONE of: chills; sore throat or painful swallowing; runny nose or congestion; feeling unwell or fatigue; nausea, vomiting, diarrhea; unexplained loss of appetite; muscle or joint aches; headache; conjunctivitis:
 - The child should stay home and monitor for 24 hours.
 - If their symptom is improving after 24 hours, they can return to school/activities when they feel well enough to go. Testing is not necessary.

- If the symptom worsens after 24 hours (or if additional symptoms emerge), testing is recommended but not required. The child can return to activities and school when:
 - Their symptoms have resolved AND it's been at least 24 hours since their symptoms started.
- If the child has any TWO of: chills; sore throat or painful swallowing; runny nose or congestion; feeling unwell or fatigue; nausea, vomiting, diarrhea; unexplained loss of appetite; muscle or joint aches; headache; conjunctivitis:
 - The child should stay home.
 - Testing is recommended but not required.
 - The child can attend school/daycare and other public places when their symptoms have resolved AND it's been 24 hours or more since their symptoms started.

Children with any symptoms should **not** visit a congregate living or acute care facility for 10 days from when symptom(s) started or until they go away (whichever is longer), unless they receive a negative COVID-19 test result and are feeling better.

A child who is a close contact of a confirmed COVID-19 case will still need to be home for 14 days.

The [AHS online assessment tool](#) will be updated with these new criteria for children effective Monday, and we ask Albertans of all ages to continue to use this tool to self-assess for isolation and testing requirements.

Updates to Visiting in Acute and Continuing Care with Rising COVID-19 Numbers

As we continue to see a rise in COVID-19 cases, staff at all acute and continuing care sites are asked to speak to designated/family support persons and have them evaluate their own need to be physically present based on patient or resident need. We also recommend only those individuals who are identified as designated family/support persons be permitted to visit at this time. We encourage the use of virtual options that will help keep visitors, staff, physicians, patients and residents safe.

As the circumstances continue to change throughout this pandemic, we encourage regular and ongoing communication with patients, residents and designated family/support persons to ensure their involvement in the planning and site policy re-assessment processes.

Compassionate Exemptions to Quarantine for Visitation Purposes

Alberta Health and [AHS](#) have established a process for individuals seeking exemption from federal and/or provincial quarantine to visit a patient, client or resident who is receiving critical care for a life-threatening illness or imminent end-of-life care. This exemption applies to all [AHS](#) facilities and other sites (including acute care, continuing care, hospice and home settings) where [AHS](#) staff, contractors or subcontractors are providing care.

There are three process options:

- Facility (acute care, continuing care, hospice)
- Non-facility (home setting)
- Coming from outside of Canada

For people travelling to Alberta from outside Canada for a compassionate reason, they will need both provincial and federal exemptions from mandatory quarantine.

More information about [compassionate exemptions](#) is available on the [AHS website](#).

Border Pilot Project Launches Monday

A [pilot project](#) between the Government of Alberta and the Government of Canada launches Monday, Nov. 2, providing a new option for travellers entering Alberta through either the Calgary International Airport or the Coutts Border Crossing.

Specifically, asymptomatic international travelers arriving at the Calgary International Airport or the Coutts Border Crossing (between 9 a.m. and 9 p.m.), and either residing in Alberta or staying within Alberta for the duration of their visit to Canada, will be provided with the opportunity to sign up for this pilot.

Participants in the pilot will be allowed to quarantine for less than 14 days, provided they test negative for COVID-19 and if they commit to following specific testing and public health measures, including: participants cannot enter a hospital or congregate or group living environment, be in contact with individuals who are at risk of more severe disease, or attend gatherings of more than 10 people, **until the full 14 days have passed**.

[AHS](#) and Covenant employees, members of the medical and midwifery staff, students, volunteers and contracted service providers will be permitted to participate in the pilot program; however, they will not be permitted to return to work at any [AHS](#), Covenant or community locations — including licensed supportive living facilities or any residential facility offering hospice services — until 14 days after returning from travel outside of Canada. These individuals must adhere to the [AHS](#) and employer [fit for work screening](#) and the isolation requirements as determined by the [return to work decision chart](#). Where feasible, working remotely while isolating may be permitted with leader approval.

Visit the [Government of Alberta website](#) for more information and an overview of the Pilot Process from Alberta Health, including important information on quarantine requirements that must be followed for the duration of pilot participation.

PPE for Manual Chest Compressions

The health and safety of our front-line workers are critical to decisions made about our COVID-19 response. We continue to ensure staff have the personal protective equipment (PPE), guidance and supports they need to be protected while providing care to Albertans.

[AHS](#) has completed a thorough review of current practices in place across Canada, as well as scientific best practices, regarding the need for N95 respirator use by healthcare workers completing manual (hands-only) chest compressions. [AHS](#) has also sought the feedback of front-line providers.

This review has determined an N95 respirator is not required to initiate hands-only chest compressions.

Healthcare workers completing manual chest compressions are directed to continue to wear recommended PPE in alignment with our [continuous masking directive](#), the [point-of-care risk assessment](#), with the addition of [contact and droplet precautions](#) for patients with known or possible COVID-19.

Specifically, healthcare workers responding to a cardio-respiratory arrest should:

Call for help;

Place loose clothing/sheet over the mouth and nose of the patient, as airway source control while awaiting help; and,

Initiate hands-only chest compressions until you are relieved by individuals who are wearing PPE, including fit-tested N95 respirators.

Only these relief individuals, wearing N95 respirators, should manage the airway and complete full cardiopulmonary resuscitation (CPR).

This approach protects our front-line workers immediately responding to a cardio-respiratory event, allowing them to safely complete manual chest compressions while they await help from support teams who will have the time to [safely don all PPE](#) necessary to safely manage the airway, as well as chest compressions.

In alignment with the [Joint Statement](#), we continue to emphasize a point-of-care risk assessment should be completed for every patient, every time. Hands-only chest compressions are different than CPR. Fit-tested N95 respirators continue to be required for full CPR that includes management of the airway.

To find further support and information on PPE and aerosol-generating medical procedures, visit ahs.ca/covidppe

PPE Question of the Week — Twice-Daily Symptom Screening: What You Need to Know

All front-line healthcare workers are asked to perform twice-daily symptom screening for all inpatients at acute care facilities. This involves asking patients about any new, unexplained or worsening influenza-like illness or gastrointestinal symptoms. In this week's [PPE Question of the Week](#), Dr. Stephanie Smith — Director, Infection Prevention and Control at the University of Alberta Hospital — talks about why symptom screening is important to protect the safety of patients, visitors and healthcare workers.

PPE Question of the Week



Twice-Daily Symptom Screening: What You Need to Know

Dr. Stephanie Smith answers PPE question of the week.

Previous videos in PPE Question of the Week series are available on the PPE webpage as well at ahs.ca/covidppe.

First AHS Influenza Update for 2020/21

AHS' first weekly data update for the 2020/21 provincial influenza season is now online at www.ahs.ca/influenza (see Influenza Data tab). The report – which includes data for each of the five AHS zones, as well as provincial totals – shows more than 597,000 doses of influenza vaccine have been administered to Albertans, and only one case of influenza has been confirmed at this point in the influenza season. At the time of the first weekly report last season, fewer than 545,000 Albertans had been immunized and 95 cases of influenza had been confirmed.

Immunization options in the community have changed this year. All Albertans are encouraged to get the flu shot from a(n):

- Pharmacy or doctor's office. Check to confirm eligibility and vaccine availability.
 - o Pharmacists can offer the vaccine to Albertans five years of age and older.
 - o Many physicians offer the vaccine to Albertans nine years of age and older. Some physicians may be offering vaccines to children six months up to and including eight years of age as well. Please check with your physician's office.
- AHS public health clinic. Available for children under the age of five and their immediate family or household members. Find information on eligibility and how to book appointments [here](#). There will be no drop-in immunizations at any AHS clinic for influenza immunization this season.

AHS physicians and staff who get immunized at a pharmacy, doctors' office or public health clinic are reminded to [report their immunization status](#).

Speaking of influenza...

Verna's Weekly Video Message — The Importance of Influenza Immunization

By keeping the number of influenza cases and outbreaks low, we can help protect our patients as well as at-risk Albertans and seniors, who are more likely to need medical care and help our healthcare teams focus on the COVID-19 response. Immunization is the most effective way to prevent the flu, to reduce symptoms if you do get sick, and to limit the spread of the virus to those around you.

Joining me (Verna) on [my weekly vlog to talk about this year's influenza campaign](#) are:

- Dr. Kristin Klein, Medical Officer of Health for Provincial Population and Public Health.
- Dr. Stephen Tsekrekos, Medical Director, Workplace Health and Safety.
Dr. Mircea Fagarasanu, Senior Program Director, Workplace Health and Safety.

Kristin, Stephen and Mircea discuss why it's so important to get immunized, where you can get your flu shot, and the measures **AHS** has put in place to prevent the spread of COVID-19 at influenza immunization clinics.

You can also check out this [blog](#) by Dr. Tsekrekos, which highlights the impact of influenza on our people and in our communities.



Follow-up to Oct. 26 email on job action

On Monday, an unsigned memo was emailed to all staff and physicians in an effort to quickly provide accurate information related to the AUPE job action. We heard back from some staff and physicians concerned the email's message was intimidating — which, of course, contravenes the values of our organization. This was not the intent of the email but fault rests with the email, not its readers and was an oversight on our part. We apologize for this error and will ensure that all future communications will be clear as to whom it comes from. This is a challenging time for all and our efforts to share information with you should never add to feelings of concern or uncertainty. Please know we are here to support you and to keep you informed. We want you to feel safe, healthy and valued so you always feel empowered to deliver — or support the delivery of — safe, high-quality care to patients and families. I'd like to thank everybody who shared their concerns about Monday's email. It was an important learning moment for our organization.

Another Milestone for Connect Care

It has been nearly one week since Connect Care Wave 2 launched, and we want to congratulate teams on a smooth and successful transition. On Oct. 24 at 5 a.m., **AHS** reached another milestone in Alberta's and Canada's healthcare history, making Connect Care live at 13 sites, including seven suburban hospitals across the Edmonton Zone.

We know that while every launch is challenging, this one was achieved under more trying circumstances than we could have imagined before the pandemic. Once again, we have just witnessed the power and resiliency of our **AHS** teams with a launch that has exceeded expectations.

Our next wave launches in February and we know teams are already well into planning for Wave 3. Thank you for all you are doing to improve the healthcare we deliver to Albertans.

Be Well - Be Kind

Sharing the Love — Connect Care's Wave 2 Launch 'Incredibly Impressive'

A huge congratulations and thank you to all the staff who have worked so hard on preparing for the Wave 2 launch! The use of Connect Care will positively impact your clinical practice for years to come. The preparation efforts that you have all made while responding to the pandemic at the same time are so incredibly impressive. Thank you!

— Deb Gordon
Vice President and Chief Operating Officer, Clinical Operations

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 pouring in from across the province and beyond during the COVID-19 pandemic. We want to share a few recent messages of thanks with you — and you can see others on our [Sharing the Love webpage](#).

As COVID-19 continues, your dedication is tangible to us more than ever. Many of us would welcome being able to help as you have and do. Could we be as compassionate and resilient? I can only imagine. Especially now, it impressed me how meaningful it is that you have been able to sacrifice and perform with such conviction — every one of you — to the degree that's being asked of you. It must be a struggle sometimes. Know how much it is recognized! Keep safe, keep alert. Being a caregiver means also taking self-care. And we (outside your bubbles) can contribute to a small degree by following the 'rules' of self and community consideration within our bubbles. Thank you all!

- Judi M.

A huge thank you to all the doctors and staff in making my first surgery experience the best it could be. These are awesome people who love what they do and do it very well.

— John Petkau

Thank you very much to all staff that work at Leduc Community Hospital. They all treated me kindly and everyone with great care and respect; (they're the) hardest-working group of people I know. They will all always be in my heart for the care that was given to me. Thank you to all.

— Jason Nielsen

Wrapping Up — Let's Do Our Part to Make Halloween a Little Less Scary

We'd like to thank all of you on the front lines for being there for Albertans during this Halloween weekend. And if you're able to celebrate with the monsters and goblins — whether that means going trick-or-treating with the kids or getting together with a few friends — we urge you and your loved ones to follow the public health guidelines, including [public masking](#) and [gathering restrictions](#), to keep everyone safe and healthy. Let's get through Halloween 2020 with nothing more than a few sore tummies from a few too many treats. Thank you for everything you do at **AHS** and, in terms of public health, for leading by example in your households and communities.

As always, with gratitude and appreciation.

*****Please share this information as appropriate*****

*****For Alberta Health Services – Indigenous specific questions/concerns please**

email ahs.ecc.operations.ih@ahs.ca ***

*****For Indigenous Services Canada please email sac.cdemergenciesab-urgencesmtab.isc@canada.ca *****

*Josipa Pavicic on behalf of **AHS** - Provincial Indigenous Health Hub*

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