

# COVID-19 Status

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## OCTOBER 23, 2020

This week brings more concerning numbers that show the continued spread of COVID-19 in the province, especially in our Edmonton and Calgary zones.

For the week ending on Oct. 21, the average number of daily new cases in the Calgary Zone was 130, up from 80 the previous week, a 63 per cent increase. In the Edmonton Zone, there was a 28 per cent increase in the average number of new daily cases — to 166, up from 130 the previous week. The Edmonton Zone now accounts for 48 per cent of all active cases in the province, a decrease from 55 per cent last week.

Provincewide, the average number of daily new cases for the week ending on Oct. 21 is 345, compared to 255 cases the previous week, a 35 per cent increase. On three days this week (Oct. 18, 20 and 21), new records were set for the highest number of daily cases in Alberta. Individuals ages 20 to 49 years accounted for more than half (53 per cent) of all new cases. Nearly half (45 per cent) of all cases had an unknown source of transmission; an increase of seven per cent from previous week and indicates more widespread community transmission. There are currently 3,519 active cases of COVID-19 in the province, a 29 per cent increase from the previous week and the most active cases Alberta has had since the beginning of the pandemic.

Currently, 112 people are being treated for COVID-19 in Alberta hospitals, with 18 of those in intensive care units (ICUs).

Other notable COVID-19-related information:

- As of Oct. 21, a total of 23,829 cases of COVID-19 have occurred in Alberta and a total of 1,040 individuals have been hospitalized, which is 4.4 individuals for every 100 cases. In all, 20,014 Albertans have recovered from COVID-19.
- Eight Albertans passed away between Oct. 15 and Oct. 21. We extend our 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, 296 Albertans have died from COVID-19.
- In the past week, 98,543 COVID-19 tests were completed, an average of 14,078 per day. Over the past week, the daily positivity rate was above two per cent for five of the seven days. On Oct. 21, the positivity rate reached three per cent, the highest value since mid-May. A total of 1,682,603 tests have been conducted as of Oct 21.
- As of Oct. 22, **AHS** has confirmed 701 individuals with COVID-19 were present at schools while infectious. Currently, 361 out of 2,415 schools in the province (or 15 per cent) have reported an individual has attended their school while infectious. So far, in-school transmission has likely occurred in 75 schools. Of these, 47 have had only one new case occur as a result.

## Things You Need to Know

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### COVID-19 Testing for Healthcare Workers — Delay in Reporting

Due to technical issues, an update of the [AHS Healthcare Worker COVID-19 Testing dashboard](#) was not available in time for this week's COVID-19 all-staff update. Please watch for an update next week or check the dashboard for future updates.

### **Edmonton Zone Implements Additional Surge Capacity Measures**

The Edmonton Zone has activated new surge capacity measures to support improved patient flow and ensure care is available to those who most need it.

The additional temporary measures will include postponing approximately 30 per cent of scheduled surgeries, effective today, and adjusting ambulatory visits as required. Urgent, emergent and cancer surgeries will continue. Edmonton Zone remains committed to meeting the established surgical targets for the year, and has plans in place to resume surgery and reschedule cancelled surgeries as soon as possible.

Edmonton Zone staffing and system capacity have been affected by isolation requirements, outbreaks, contact tracing, COVID-19 screening and testing.

### **Revised Testing Criteria for COVID-19 in Alberta**

On Tuesday, Alberta Health announced updated COVID-19 testing criteria for Albertans.

In an effort to reduce wait times and speed up access to results for those at greatest risk of illness, COVID-19 testing is currently offered only to Albertans in the following groups:

- Albertans with symptoms of COVID-19.
- Albertans who are close contacts of a confirmed case, whether symptomatic or not.
- Albertans who are linked to a known outbreak, whether symptomatic or not.

All Albertans in the above categories, including healthcare workers, will still receive testing.

As this new testing approach will support more rapid turnaround of test results, we anticipate healthcare workers will be better supported in effectively managing symptoms or potential exposures.

The [AHS](#) online testing tool has been updated to reflect this new criteria.

If you are identified as a close contact of a confirmed case or linked to an outbreak, whether you have symptoms or not, you will also need to follow all directions from [AHS](#) Public Health and Workplace Health & Safety.

If you had already booked an appointment with [AHS](#) for an asymptomatic test, prior to Tuesday's announcement, you will still be tested. Your appointment will be honoured.

### **Pilot Project to Launch Next Month, Giving Travellers Testing Options**

A pilot project between the Government of Alberta and the Government of Canada will launch on Nov. 2, providing an option for travellers entering Canada through our province to be tested for COVID-19 at both the Calgary International Airport and the Coutts Border Crossing.

[AHS](#) will work with the provincial and federal governments to support this project and, throughout this pilot, ensure routine contact tracing follow-up is completed for all positive cases.

All AHS healthcare workers, including physicians, returning from travel outside of Canada are required to adhere to the AHS fit for work screening and the isolation requirements as determined by the return to work decision chart. AHS or Covenant workers — including staff, physicians, contractors, students and volunteers — would not be permitted to return to work at any AHS or Covenant facility or within the community until 14 days after returning from travel outside of Canada. Where feasible, AHS healthcare workers may work remotely while isolating, with leader approval.

For essential travel guidance, AHS will continue to follow the official directive of the Government of Alberta declared on March 12, which suspended all AHS business travel outside of the province and country until further notice.

Pilot participants who develop symptoms will be referred to [ahs.ca/covid](https://ahs.ca/covid) to book a test through AHS, and will be provided with automated options of receiving their test results through AHS.

For more information on this pilot project, visit [www.alberta.ca/international-border-pilot-project.aspx](https://www.alberta.ca/international-border-pilot-project.aspx)

Meanwhile, Albertans can access a new fee-for-service COVID-19 travel testing service, offered by Dynalife Medical Labs.

For \$150, travellers can be tested by appointment only and receive results that are valid within 72 hours of the arrival time at their destination. Tests must be booked at least 24 hours before departure.

To access this testing, Albertans should visit [ahs.ca/covid](https://ahs.ca/covid), and complete the self-assessment, indicating they require testing for their travel plans.

Albertans requiring COVID-19 testing for travel purposes will then be redirected to DynaLife's travel testing booking system. Clients will be able to book an appointment at the nearest available travel test collection site.

Initial travel test collection sites will be located in Calgary, Edmonton, Lethbridge, Medicine Hat, Red Deer, Grande Prairie and Fort McMurray.

### **New Acute Care Directive for Designated Family/Support Access & Visitation**

The [Designated Family/Support Access and Visitation in Acute Care, Ambulatory, and Emergency Sites Directive](#) came into effect on Oct. 21. All AHS employees, medical and midwifery staff and other persons acting on behalf of AHS must be familiar and comply with the directive.

As outlined in the directive, all acute care settings, including ambulatory clinics and emergency departments, must complete a [Safe Site Access Assessment](#) on a monthly basis to assess specific issues that might impact family/support and visitor access to a site. This assessment will ensure sites and staff identify any potential issues and mitigation strategies on a continuous basis. This is in alignment with what has already been done in continuing care sites across the province.

The directive also outlines the expectation that each AHS site is responsible for implementing the [COVID-19 Designated Family/Support and Visitation Guidance](#) to the furthest extent possible. We

recognize each site and each community is unique, so the extent of family support and visitor restrictions might vary from site to site depending on the Safe Site Access Assessment. AHS site managers may delegate the responsibilities for implementation but are ultimately accountable for implementing family/support and visitation practices.

A directive orientation video can be viewed [here](#).

To address questions, concerns and zone-specific circumstances, the Engagement and Patient Experience team will be hosting directive orientation sessions through Zoom next week.

### **Reminder: Please Stay Home When Sick and Stay Vigilant**

It is critical we all continue to take required precautions to reduce the spread of COVID-19 within AHS workplaces.

We cannot overstate the importance of **staying home when sick**. If you have new symptoms, or if your usual symptoms get worse, stay home, minimize contact with others and complete the [Self-Assessment Tool](#) to determine your need for COVID-19 testing. We each have a role to play in protecting each other — patients, staff, physicians and volunteers. We must all be diligent in modelling safe work practices. Simple actions — such as adhering to all [personal protective equipment \(PPE\)](#) measures, completing your [fit for work screening](#) every day, [washing your hands](#) regularly and [physically distancing](#) — can slow the spread of COVID-19. For more information, including the Online Fit for Work Screening Tool, visit [ahs.ca/fitforwork](https://ahs.ca/fitforwork). Talk to your leader if you have questions about fit for work screening at your site.

As we continue to monitor our COVID-19 response and the impact on AHS healthcare workers, we know employee-to-employee/provider-to-provider transmission is occurring. There is an extremely high risk for transmission of COVID-19 in small, enclosed spaces, such as break rooms, charting areas, open work spaces and other common areas if appropriate control measures are not followed. Avoiding crowded spaces is the first line of defence. Wearing a mask at all times can help keep everyone safe. This is not merely an expectation; this is a formal requirement — and applies to all zones and all AHS or subsidiary facilities (clinical and corporate).

Thank you for your continued support and dedication.

### **Verna's Weekly Video Message — Recognizing our Volunteers and Patient Advisors**

Day in and day out, we see and hear examples of the skill, compassion and dedication of our people.

We're so very grateful for the amazing work you do across the province. And that includes our 14,000-plus volunteers, who donate in the neighbourhood of one million hours of their time each year to support patient care.

Their invaluable contributions make a difference to patients and their families every day, whether it's acting as a wayfinder, running a gift shop, providing pet therapy or any number of other activities.

Patient and family advisors are also key volunteers in the system and their input helps us ensure our health system meets the needs of the individuals we serve. They continue to find ways to help during the pandemic, including consulting on our virtual health strategy and practice guidance through the Patient and Family Advisory Group.

Joining me (Verna) to tell us more about the work of volunteers and patient and family advisors are:

- Dean Radbourne, Co-Chair, Patient and Family Advisory Group
- Michele Rondot, Manager, Volunteer Resources, Calgary Zone
- Stephanie Stock, South Zone Volunteer

Dean, Michelle and Stephanie discuss how [AHS resumed volunteer programs in June, the contributions of the Patient and Family Advisory Group, and how volunteering looks a bit different during a pandemic.](#)



**PPE Question of the Week — Appropriate Glove Use: When Are They Needed?**

Gloves are an important part of our personal protective equipment (PPE) supplies. In the latest [PPE Question of the Week video](#), Janet Barclay — Director of Infection Prevention and Control for [AHS](#) North Zone — provides a quick refresher on why we use gloves and when we should use gloves.

## PPE Question of the Week

Appropriate glove use:  
When are they needed?



Janet Barclay answers PPE question of the week.

### **National Infection Control Week Wraps Up**

Today wraps up [National Infection Control Week](#), a time for infection control professionals to educate staff and the community about the importance of infection prevention and to promote the important work that has and continues to be done by infection control professionals in a visible and fun way. If you didn't get a chance to play the interactive, virtual escape room – [The Hidden Risk](#) – try it now.

### **New Requirements for Cognitive Screening at AHS**

AHS is moving away from using the Montreal Cognitive Assessment (MoCA), which means a shift in practice for physicians and staff. This comes in response to a best-practices review following changes to MoCA requirements (paid user training and certification by Dec. 1, 2020). Based on this review and through extensive consultation, six screening tools have been identified as suitable alternatives.

[Learn more](#) about these alternatives and practice supports.

## Be Well - Be Kind

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### **Let's work together to protect against the flu**

This season, influenza immunization is more important than ever before. Influenza immunization will protect you and your loved ones, as well as vulnerable seniors, children and those with chronic health conditions. By keeping the number of influenza cases and outbreaks low, we can also do our part to help our teams focus on the COVID-19 response.

All Albertans are encouraged to get the flu shot from a:

- Pharmacy: Available for Albertans age five and older. Check to confirm vaccine availability.

Doctor: Some doctors are offering flu shots. Please check with your physician's office to check if they're participating in the influenza immunization program, whether vaccine is available and the age groups they are immunizing.

**AHS** Public Health Clinic: Available for children under five years of age and their immediate family or household members.

Immunized at a pharmacy, doctors' office or public health clinic? [Report your immunization status.](#)

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

#### *ICU and Unit 33 Staff at RAH*

*To ICU and Unit 33 staff at Royal Alexandra Hospital — Thank you for the amazing care you provided me during my month-long stay at your facility. Your dedication and compassion were truly appreciated, especially the 'spa day' provided by the ICU staff. You are a credit to the nursing profession!*

- Dawn S.

### **Wrapping up — Redeployments a Major Part of a True Team Effort**

Alberta's pandemic response has been a team effort, involving all of our **AHS** teams and many of our external partners. We know you, your colleagues and your families have made many sacrifices and adjusted to change throughout the year, which is never easy but has been necessary to effectively respond to this dynamic public health crisis. We'd like to wrap up this week's update with a message of recognition and appreciation for all of you who have been redeployed, sometimes with little advance notice due to rapidly changing circumstances, as well as for the teams affected by redeployments, especially in situations where there is no immediate backfill for a redeployed team member. Please know the work done by redeployed staff has been critical to our pandemic response efforts. For instance, this summer, redeployed staff helped bring an outbreak in a McLennan continuing care facility under control, protecting its residents and staff. Meanwhile, many of you have accepted roles outside of your scope of practice in order to fortify our contact tracing, swabbing, call centre and site screening efforts. This year we've seen how a global pandemic put pressures on all parts of the health system, clinical and non-clinical — and we're heartened to also see how all of you have stood by one another and worked together to do whatever needs to get done. We are grateful for your efforts, sacrifices and flexibility — thanks to you, together we make a great team.

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](mailto:ahs.ecc.operations.ih@ahs.ca) \*\*\***

**\*\*\*For Indigenous Services Canada please email [sac.cdemergenciesab-urgencesmtab.isc@canada.ca](mailto:sac.cdemergenciesab-urgencesmtab.isc@canada.ca) \*\*\***

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

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