

# COVID-19 Status

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## **APRIL 14, 2020**

We have confirmed 81 new cases of COVID-19 over the past 24 hours, bringing the provincial total to 1,732. Of the total cases, 254 are suspected to be through community transmission, 110 have been hospitalized and 34 have been in an Intensive Care Unit (ICU). Currently, there are 47 cases in hospital, with 14 in ICU. The number of recovered cases is now at 877. Tracking hospitalizations and ICU admissions is important in determining trends, as these numbers give us an indication of the severity of the illness in Alberta and its demand on the health system. In the coming days, hospitalization trends will be released by Alberta Health.

Today, we must report two deaths related to COVID-19 in the Calgary Zone – a woman in her 80s and a man in his 80s. We want to share our sincere condolences with the loved ones of these individuals, and to those impacted by the loss of every Albertan to COVID-19 to date. In total, 46 Albertans have now passed away from COVID-19.

The loss of these lives is a tragic reminder of why we must diligently adhere to the public health measures currently in place. Preventing the spread prevents deaths.

## Things You Need to Know

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### **Expanded Testing**

Effective today, the criteria for COVID-19 testing has again expanded in Alberta. This expansion reflects our enhanced lab testing capacity, and the evolving COVID-19 pandemic. These categories will continue to change in the coming weeks and months to reflect the evolving pandemic.

If any of the below outlined categories apply, please go to [ahs.ca/covid](https://ahs.ca/covid) and complete the online assessment, either for members of the public or for healthcare and shelter workers, enforcement personnel and first responders, as appropriate. The [online self-assessment](#) is a quick way to ensure you get the testing you may need.

[In addition to those already eligible for testing](#), individuals are now eligible for testing if they have symptoms of cough, fever, shortness of breath, runny nose or sore throat **and** reside anywhere in Alberta. This means that symptomatic residents of all zones are now eligible for testing.

Please note that anyone with a cough, fever, shortness of breath, runny nose, or sore throat not related to a pre-existing illness or health condition is legally required to self-isolate; however, these individuals ARE allowed to leave home to come for testing, [following the guidance outlined in this order](#).

Going forward, testing all symptomatic Albertans will give us a more complete picture of trending over time.

### **PPE Fit Testing and N95 Recycling**

#### *Securing supply of PPE*

AHS has successfully secured significant amounts of personal protective equipment (PPE) through contracts with global distributors. The additional orders will help ensure frontline healthcare providers have access to the appropriate PPE to respond to the anticipated surge in patients with COVID-19.

These shipments were secured outside of AHS' usual procurement channels, and are another example of AHS' commitment to the safety of our frontline providers, and the Albertans for whom they provide care.

Last week, Alberta Occupational Health and Safety also extended the expiry period of existing fit tests on the current respirator model to December 31, 2020. This applies to workers who have completed fit testing in the past two years, for which the fit test certificate expires on or after April 1, 2020. Those workers fit tested to a current respirator model (16,000 healthcare workers) will not need to renew fit testing until December 31, 2020.

#### *Collecting used N95 respirators*

Effective tomorrow, AHS will also begin collecting used N95 model 1870+ respirators from AHS Intensive Care Units in the Calgary and Edmonton Zones, for decontamination, a process of sterilization, and storing. This is a contingency plan that will allow us to preserve these used N95 respirators for potential reuse, if we require additional supply in the months ahead. As the process is refined, it will also be expanded to additional acute care facilities across Alberta.

The collected N95 1870+ respirators will not be circulated back to our sites; however, because emerging research has shown that reprocessing does not damage or reduce the effectiveness and safety of these particular N95 respirators, AHS is proactively collecting this supply of used 1870+ models, in the unlikely event that demand exceeds our supply of single-use N95 respirators, in the months ahead.

This initiative proactively positions us to ensure short- and long-term protection of our staff, and appropriately conserve the N95 respirator supply in Alberta. Safety of our staff is paramount to all initiatives that we undertake, particularly during this pandemic.

Appropriate and considered used of our PPE supply continues to be the single most important element to conserving our PPE supply in Alberta. We ask that you continue to use PPE according to guidelines. Please help us protect you. For detailed information about PPE guidance for COVID-19, visit [ahs.ca/covidppe](https://ahs.ca/covidppe).

### **PPE - Safety of Healthcare Providers**

In a new [video](#), Alberta physicians from various AHS sites in the province have come together to talk about the safety of healthcare providers during the COVID-19 pandemic. These doctors say PPE, when used properly, protects both patients and those on the front lines. They also stress that healthcare providers should follow the same advice AHS is giving to all Albertans to lower the risk of infection: wash hands regularly, don't touch your face with unwashed hands, disinfect regularly touched surfaces and, if sick, stay home.



### **Update to Visitor Restriction Guidelines**

Residents and patients of all hospitals and continuing care facilities are at risk of being exposed to COVID-19, and staff are doing everything possible to ensure their safety. Given the increasing spread of COVID-19 in a number of acute and continuing care facilities, recently Alberta Health and Alberta Health Services made the difficult decision to enhance visiting restrictions in hospitals and continuing care facilities.

Currently, no visitors will be permitted in these facilities, however we recognize the need that in specific circumstances, there is a critical need to visit a loved one, and we understand that the care and support of a visitor/loved one is integral to the well-being of patient. This is why we are permitting exceptions to the “no visitor policy” and allowing one visitor at a time for maternity/postpartum, pediatrics and end-of-life patients.

Going forward, in some situations, special consideration will now be made in pediatric and maternity situations to allow for more than one visitor at a time. These decisions will be made by the patient’s care team.

In end-of-life situations, the patient’s care team will determine the appropriateness of one visitor at a time.

Emergency Department and Urgent Care patients may be accompanied by one visitor if they have specific challenges such as mobility, hearing, visual or memory impairment. Visitors who are permitted under exceptions must be verified and undergo a health screening prior to entering the facility.

We know this will be difficult news to families, patients and residents. Together, we continue to make these difficult decisions in order to keep our most vulnerable safe from illness.

### **Spartan Bioscience Tests Approved by Health Canada**

As we mentioned in an earlier update, AHS is partnering with a Canadian technology company with the goal to provide Albertans with faster, more convenient testing for COVID-19.

Spartan Bioscience has developed a COVID-19 test kit to be able to detect the virus using a platform that can be deployed in a variety of laboratory settings, without the sample needing to be transported to a central public health laboratory. This technology has now been given final approval by Health Canada and will provide additional, more expedient testing for COVID-19 in rural and remote communities - such as Indigenous communities - or in special clinical settings like ICUs. It will allow frontline providers to test for suspected COVID-19 outside of our two centralized provincial laboratories in Edmonton and Calgary. Upon receipt of our testing devices in Alberta, they will also be validated by AHS and APL.

Exactly which communities and patient populations this test would benefit the most is still under consideration and planning. This rapid testing option will not replace our current testing capacity, but will be in addition to our high-volume testing being undertaken at our Provincial Public Health Lab sites in Calgary and Edmonton. Adding this capacity will help guide appropriate care and isolation, speed up our contact tracing, and reduce the risk of further spread.

AHS has ordered 250 of the Spartan units and 100,000 test kits and we are considering an optional additional purchase of 50,000 more test kits. Our maximum testing capacity is currently approximately 7,000 samples per day, and we are continuing to work with our laboratory network to increase this capacity. Expanded testing criteria announced today will help ensure our APL labs are receiving enough samples (swabs) to run at full capacity.

Alberta has led the way nationally, and internationally, when it comes to testing for COVID-19. We have one of the highest rates of testing per capita in the world. In addition, Alberta was the first province in Canada to have an online assessment tool, which helps determine whether someone should be tested for COVID-19. This tool has been adopted in provinces across Canada and by other countries, and has been used more than 3.2 million times in Alberta.

### **Cohorting of Patients**

Accommodating patients in appropriate care environments in all AHS facilities will become a challenge as the need for care increases in response to COVID-19. Cohorting of COVID-19 probable and confirmed patients in acute care will be required to ensure patient and staff safety.

All AHS acute care and community sites are developing plans for patient cohorting, in consultation with Infection Prevention and Control (IPC). This may mean that some sites will have designated COVID-19 units, floors, or rooms.

Cohorting patients will provide the best protection for our patients and staff, and will help preserve personal protective equipment. All decisions to cohort patients will be done in consultation with Infection Prevention and Control, based on best evidence.

Based on site-specific capacity, facility design, and patient population, each site is developing its own cohorting plan, using the following guiding principles and considerations:

- The decision to cohort must be made in consultation with IPC.
- A staged approach to cohorting is based on minimizing risk to the most patients while adhering to IPC principles and practices.
- Strict adherence to IPC [point-of-care risk assessment](#), [hand hygiene](#), appropriate use of personal protective equipment (PPE), [donning](#) and [doffing](#) by healthcare providers, adequate [spatial separation](#) and [appropriate cleaning and disinfection](#) is required.
- When cohorting patients, consideration should also be given to:
  - underlying patient conditions (e.g., immune-compromised);
  - vaccination status, especially for influenza with respect to co-infection;
  - Co-infection with other diseases (e.g., influenza).
- Each zone shall develop decision trees/algorithms based on local infrastructure:
  - Decisions regarding the cohorting of suspect and confirmed patients versus COVID-19 only patients on a dedicated unit.

AHS is not considering dedicated COVID-19 hospitals due to the downstream impact to specialty care services and geographic considerations, including transport concerns, needing confirmed test results of individuals as COVID-19 positive versus having influenza-like-illness, and needing to maximize bed capacity across all sites.

### **Pan-Alberta Study to Test Hydroxychloroquine**

University researchers in Calgary and Edmonton – with the support of AHS and Alberta’s Strategic Clinical Networks – are launching a study to see if the drug hydroxychloroquine (HCQ) is effective as an early intervention against COVID-19.

[The Government of Alberta announced the clinical trial today](#), which is expected to begin this week enrolling the first of 1,600 Alberta patients who test positive for COVID-19. Called Alberta Hope COVID-19, the study aims to determine whether a prescribed five-day treatment of HCQ can prevent hospitalization for those with underlying medical conditions and at the highest risk of developing a severe illness.

AHS staff will obtain permission from individuals with positive COVID-19 tests to provide their contact information to the researchers. The study team will then screen participants for safety and eligibility.

Patients must be able to begin the treatment protocol within 96 hours (four days) of testing positive, and also be within a 12-day window of the first reported symptoms of the virus.

Patients will receive the study drug via courier and follow-up visits will take place through telephone interviews, making it accessible to rural patients. The study is a placebo-controlled clinical trial, meaning some of the patients will receive a placebo. In this case 560 out of 1,660 participants will receive the placebo.

Both the drug and placebo for the trial are being donated by the Canadian manufacturer Apotex.

Alberta Hope Covid-19 is supported by the Alberta Government, AHS and Alberta's Strategic Clinical Networks, the Calgary Health Trust, Alberta Innovates and the University of Calgary/Alberta Health Services Clinical Research Fund.

More information can be found at the study's website, [hopecovid.ca](https://hopecovid.ca). Information about other Alberta research studies focusing on COVID-19 can be found at [bethecure.ca](https://bethecure.ca). More studies will be posted there as they become available.

### **COVID-19 Simulation Training: Rural Preparedness – Register Now**

On Thursday, April 16, the AHS eSIM team will discuss the COVID-19 response in a rural setting, including best practices, risks, resources and more.

As we continue to evolve our understanding of COVID-19 best practices, recommendations will likely change. To be most up-to-date with current recommendations, please continue to find the latest information on [health professionals COVID-19 webpage](#) on [ahs.ca/covid](https://ahs.ca/covid).

### **RAAPID for Patient Transitions**

Because of the need for timely, safe transitions for patients during the COVID-19 pandemic response, AHS is utilizing RAAPID when seeking patient transfer or accessing services of providers in another facility in Alberta. During our COVID-19 crisis, RAAPID is an essential tool to use to access appropriate and timely advice, referral, admission, repatriation and consultation for patients.

## In the Zones

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### **Zone Emergency Operations Centre (ZEOC) Update – Calgary Zone**

Over the past few weeks, we have seen countless examples across the province of teams and individuals who have worked together and supported one another in ways both big and small, to help in the fight against COVID-19. In another example of this, the planning, execution and construction of an 8,250 square foot temporary patient treatment space at the Peter Lougheed Centre (PLC), slated to open at the end of April, is now underway.

Through a generous donation by Sprung Structures, work to fast-track construction - which will house approximately 70 patient care spaces, support space for staff and physicians, and public washrooms - has meant creative planning, hard work, and the collaborative efforts of many individuals, teams and partner organizations. Since the project was announced on April 9, the efforts from everyone involved have taken this project from a novel idea to being soon able to provide patient care, in just under three weeks. This [time-lapse video](#) provides a quick glimpse into the construction progress on the temporary structure at the PLC to date.

In addition, the structure is designed to allow maximum future reuse of the donated structure and also the building materials and equipment within the structure, once COVID-19 is behind us.

Thank you to Sprung Structures for your incredibly generous donation that has allowed us to build this one-of-a-kind temporary facility. Thank you to the teams from CANA Construction, Falkbuilt Calgary,

Botting & Associates Alberta Ltd., Acutech Electrical Ltd., and Stantec Calgary, for hours of work and commitment to helping ensure this project is a success.

We also recognize the Alberta Government, Alberta Health, the City of Calgary and teams from throughout AHS who have worked tirelessly to ensure this project was completed in record time.



### **Shout Out**

Today, we successfully launched the new [COVID-19 Daily Fit for Work Screening Tool](#). This initiative was a very fast-paced one, which was a response to a direct need to the COVID-19 pandemic. There were a number of amazing professionals involved in the design and building of this new application, and as a large group, we were able to complete the build in less than two weeks. This tool can play a part in assisting our colleagues to reduce the spread of this virus. It's a great reminder that every one of us at AHS can have a direct impact on the care of Albertans, while protecting each other and our patients.

We also want to take a moment to recognize the hard work of our Emergency Medical Services (EMS) paramedics, staff and leadership. As members of our frontline of care, paramedics have been instrumental in our management of the COVID-19 pandemic. From the outset, EMS has been working to better serve patients during this challenging time. EMS Mobile Integrated Healthcare (MIH) paramedics, also known as Community Paramedics have been doing hundreds of in-home swabs when requested by Medical Officers of Health. Frontline paramedics continue to be on the leading edge of our contact with many patients, and these professionals are working hard to ensure the safety of patients and the EMS team at large. The recent introduction of the EMS COVID Assess, Treat and Refer tool is helping paramedics make decisions in the field. And at the end of what are often very long shifts, the EMS

Workforce Support Unit, in collaboration with EMS Health Wellness and Culture, has been working to ensure paramedics and staff are supported through initiatives like peer-to-peer support and psychological support webinars.

### Acts of Community Kindness

Near the beginning of March, the Manager of AHS Hospice Operations and Access received word of a generous donation of 12 refurbished iPads to a Calgary hospice. Recognizing the difficult circumstances COVID-19 has created to visitation in hospice care, these iPads were provide to hospice team for residents and families, to support ways to connect virtually with loved ones, when they are unable to be present at the end of a life.

In the words of the gracious donor, "the thought of people not being able to be with each other, especially during a time of serious illness or near the end of life, is absolutely heartbreaking. There is nothing that could ever replace the physical presence of having a loved one nearby, but my hope is that these iPads might give people the opportunity to hear each other's voices, to see each other's smiles, to look into each other's eyes, and perhaps bring a small bit of comfort during an incredibly difficult time".

On April 1, 2020, when the hospice had to close to visitors due to a facility outbreak, five of the iPads were delivered to Southwood Hospice through safe physical distancing.

This act of love reminds us that now, more than ever, we are all in this together.

Being united in this fight continues to give us hope and we see this solidarity reflected every day in gestures of all kinds. [Hope for the Future is a video](#) which pays tribute to the frontline heroes fighting this pandemic around the globe. Over 30 of the world's most accomplished trumpet players recorded themselves in isolation playing this inspirational song. Trumpeters from 14 countries, including classical, rock and jazz artists, military personnel and educators took part. It includes two Canadians with Alberta connections – Jens Lindemann, who taught at the Banff Centre for Performing Arts and Al Muirhead, who is an Albertan – both perform in this video. We are so grateful for these talented trumpet players for using music to inspire us and bring us light and hope.





This pandemic, and the measures we need in place to appropriately respond to this crisis are like no challenge we have ever faced. We know that each of you in some way is involved in this response and as we start a new week, we are truly grateful for your tireless efforts in helping ensure that Albertans get care and treatment, when and where they need it most.

You continue to demonstrate what you are made of as we ensure Albertans have the best care and supports possible during this difficult and uncertain time.

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**Diabetes support during COVID – 19:**

**Providers** can call our Diabetes Line #780-735-1050 for expert support in assisting patients.

In addition **patients** (not those with GDM) can be given the DIAL (Diabetes Information and Advice Line) to call anytime, calls are answered and responded to M-F, 9am-4pm #780-735-1051. This is an essential service and will continue throughout the COVID response.

NOTE: this does not include support for Gestational Diabetes.

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Thank you and stay safe.

**\*\*\*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 Nadine McRee*