

COVID-19 MOH Update

CURRENT TOPIC, SCENARIOS, AND A COMMUNITY PROFILE

JUNE 11, 2020

QUESTIONS: VCHELP@FNTN.CA

Outline

1. Opening Prayer – Elder Jackson Wesley, Stoney Nation

2. MOH Update – Dr. Wadieh Yacoub & Dr. Chris Sarin

3. Current Topic – AHS Indigenous Health Task Force

David Turner – Emergency & Disaster Management Community Engagement Advisor - Population, Public & Indigenous Health

Nadine McRee - Executive Director, Indigenous Health Program

4. Scenarios - Dr. Chris Sarin and Simon Sihota

5. Community Profile – Sharon Courtoreille, Assistant Health Director - Swan River

6. Questions

Opening Prayer

ELDER JACKSON WESLEY, STONEY NATION

QUESTIONS: VCHELP@FNTN.CA

MOH Update

DR. WADIEH YACOUB, SENIOR MEDICAL OFFICER OF HEALTH

DR. CHRIS SARIN, DEPUTY MEDICAL OFFICER OF HEALTH

QUESTIONS: VCHELP@FNTN.CA

Reminder - Privacy

- All information related to an individual who is or was infected with a communicable disease shall be treated as private and confidential
- No information shall be published, released or disclosed in any manner that would be detrimental to the personal interest, reputation or privacy of that individual.

Current Situation (as of June 11)

The **global** numbers:

- 7 415 319 cases
- 417 546 deaths

The numbers in **Canada**:

- 97 328 cases
- 7 972 deaths

Source: World Health Organization <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/> and Public Health Agency of Canada <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection.html>

Current Situation in Alberta

Overview of COVID-19 in Alberta (as of June 10, 2020):



Interactive Alberta data can be found at: <https://covid19stats.alberta.ca/>

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Current Situation

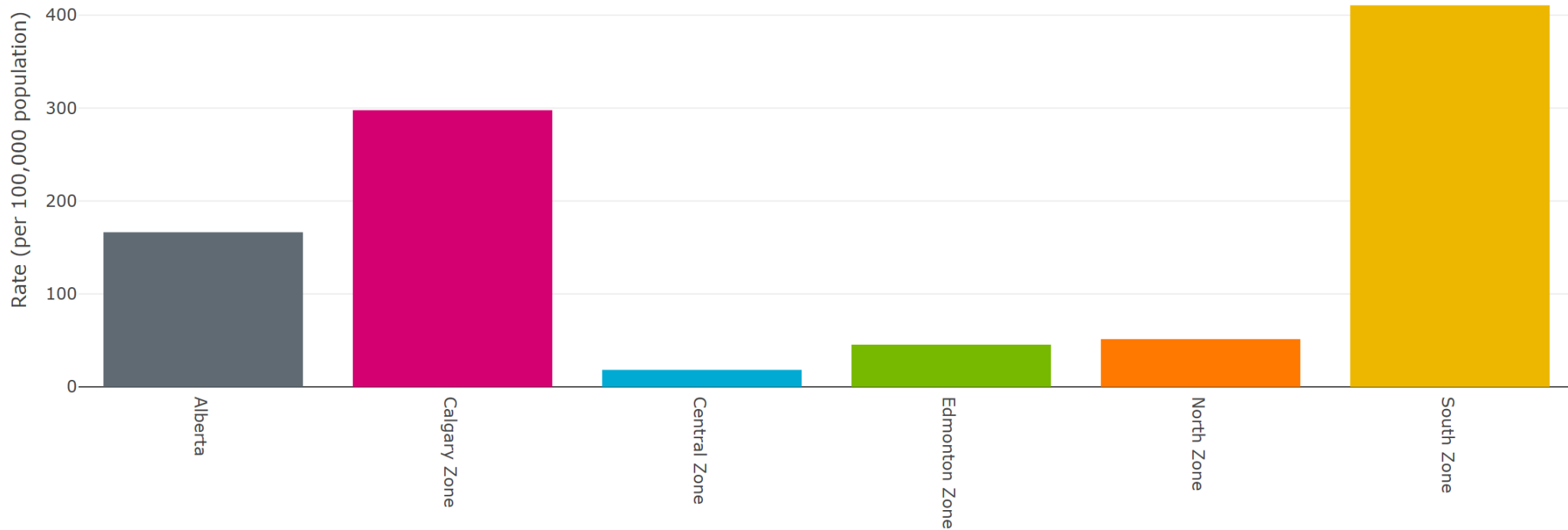
The numbers across Alberta as of June 11, 2020

Location	Total Confirmed Cases	Active Cases	In Hospital	In ICU	Deaths
First Nation Communities	56	19	2	2	1
First Nations People in AB*	188	n/a	24 (ever)	7 (ever)	4
Calgary Zone	5 016	203	30	4	111
South Zone	1 268	19	1	-	10
Edmonton Zone	645	134	6	2	13
North Zone	247	14	5	-	16
Central Zone	87	-	-	-	1
Unknown	13	1	-	-	-
TOTAL	7 276	371	42	6	151

* Includes on and off reserve

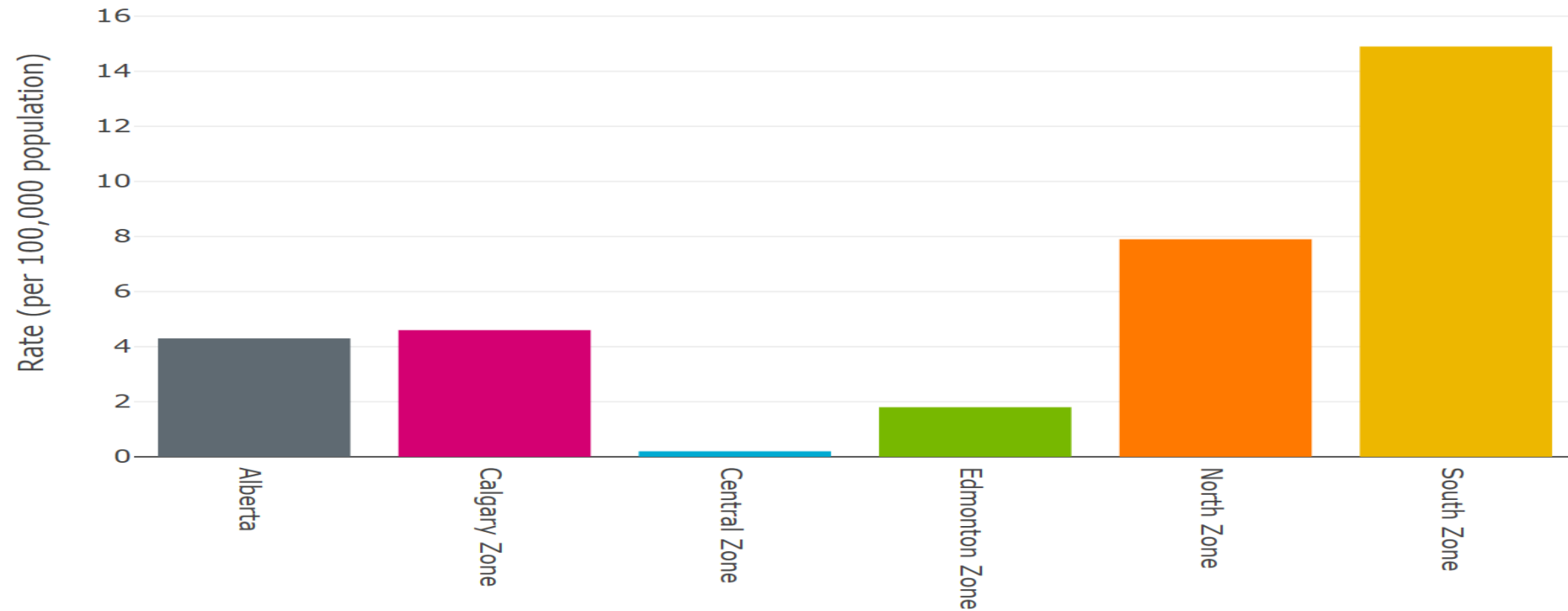
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Rate of COVID-19 cases (per 100,000 population) in Alberta and by zone



Source: AB Health

Rate of COVID-19 cases (per 100,000 population) in First Nations people and by zone



Source: AB Health

QUESTIONS: VCHELP@FNTN.CA

Alberta's Relaunch Strategy

Government of Alberta announced Stage 2 of the Relaunch Strategy will allow additional businesses and services to reopen starting **June 12**, with 2 metre physical distancing requirements and other public health guidelines in place.

Events and gatherings can be larger in Stage 2.

Still not approved in stage 2 includes:

- regular in-school classes for kindergarten to Grade 12
- vocal concerts (as singing carries a higher risk of transmission)
- major festivals and concerts, large conferences, events, and amusement parks
- major sporting events and tournaments
- non-essential travel outside the province is not recommended

More information at <https://www.alberta.ca/alberta-relaunch-strategy.aspx>

Guidance documents can be found at Alberta Biz Connect: <https://www.alberta.ca/biz-connect.aspx>

FNIHB Monitoring Metrics

Relaunch depends on our ability to keep infection numbers low.

Health indicators FNIHB is watching include:

- Cases of Covid-19 in counties including First Nations communities and surrounding areas to ensure it is <50 per 100,000
- Hospitalization rates
- ICU admission rates
- Testing and Monitoring

Alberta COVID-19 Testing Criteria

Testing is available to:

- any person without symptoms who wants to be tested.
- The following groups will continue to receive priority for testing:
 - any person exhibiting any symptom of COVID-19
 - all close contacts of confirmed COVID-19 cases
 - all workers and/or residents at specific outbreak sites
 - all workers and residents at long-term care and level 4 supportive living facilities
 - all patients admitted to continuing care or transferred between continuing care and hospital settings

Online self assessment: <https://myhealth.alberta.ca/Journey/COVID-19/Pages/COVID-Self-Assessment.aspx>

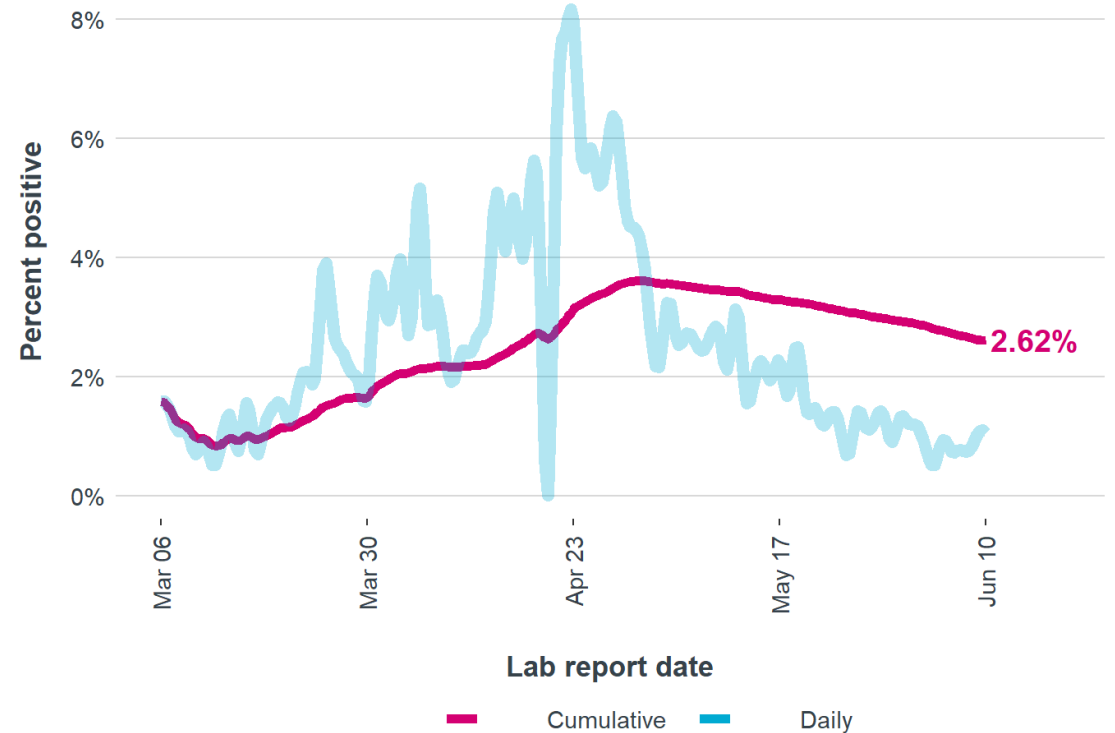
Online self assessment for HCWs/Shelter Workers/Enforcement/First Responders: <https://myhealth.alberta.ca/Journey/COVID-19/Pages/HWAssessLanding.aspx>

COVID-19 Testing

As of June 10, 278 556 people have been tested in Alberta.

Calgary Zone has completed 47% of the tests.

Overall provincial trend continues to decline for the percent positive tests.



Cumulative and daily test positivity rate for COVID-19 in Alberta.

COVID-19 Testing Data (up to June 7): First Nations Communities in Alberta



Number of communities
doing testing

43



Number of swabs in stock

4981



Number swab samples
collected to date

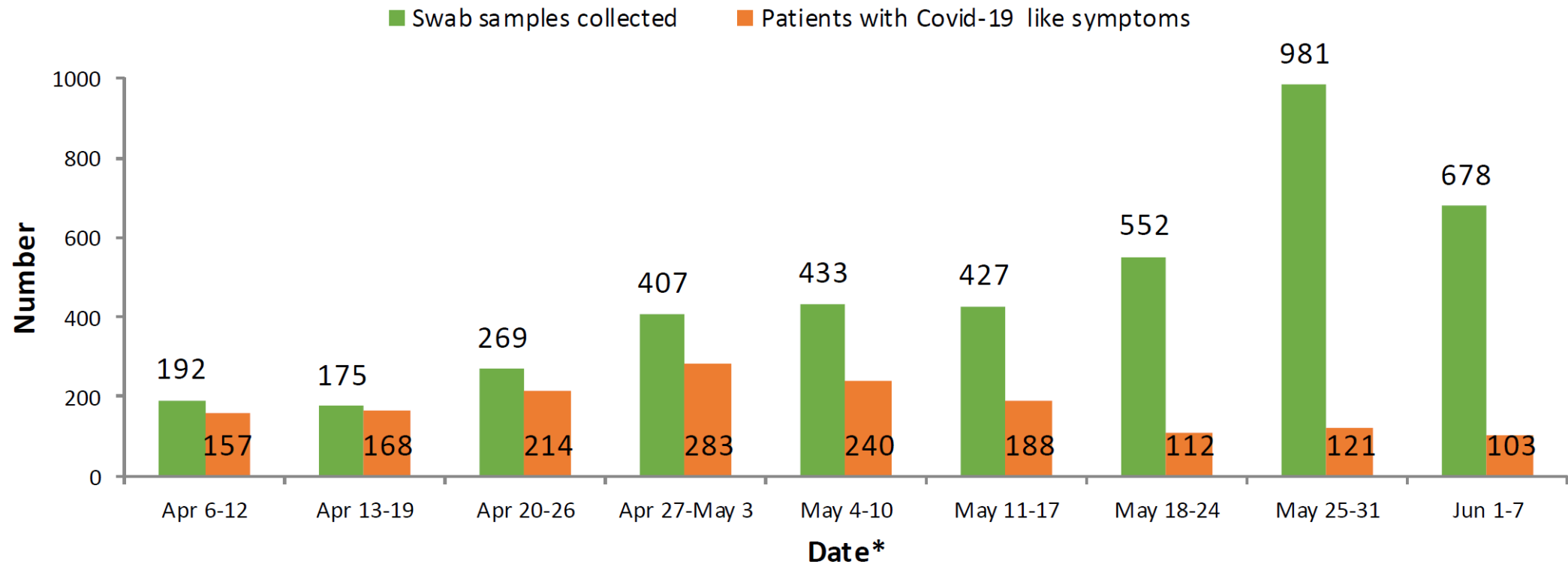
4114



Number of patients seen with
COVID-19 like symptoms to date

1586

First Nation Communities - number of swabs samples collected and number of patients seen with COVID-19 like symptoms by date*



Date*: Either the date report is received at FNIHB-AB or date reported by community

AHS Hospital Visitation Guidelines

Effective June 6, Alberta Health Services implemented enhanced visitation for all patients in both acute outpatient and inpatient settings. Existing visitation guidelines for continuing care environments will be maintained.

The enhanced visitation guidelines expand the allowance of some visitation.

Details can be found at on the Alberta Health Services website at <https://www.albertahealthservices.ca/topics/Page17001.aspx>

AHS-Indigenous Health Task Force

DAVID TURNER – COMMUNITY ENGAGEMENT ADVISOR

NADINE MCREE – EXECUTIVE DIRECTOR, INDIGENOUS HEALTH PROGRAM

QUESTIONS: VCHELP@FNTN.CA

COVID-19 Ongoing Response

IH Task Force - AHS

Ongoing Response Objectives

- Develop a process to provide expanded testing opportunities and support for isolation needs that are barrier free (accessible and culturally safe) for Indigenous populations in both rural and urban environments – **Immediate- Interim**
- To seek clarification on case identification and contact tracing process with off reserve First Nations peoples – **Immediate- Interim** – (current process has identified gaps in notification and tracking)
- To seek guidance and recommendations from Wisdom Council Elder’s Circle, traditional knowledge keepers and other key leads on traditional ceremonies (including funerals) guidelines that promote safe health practices in alignment with the Public Health Orders in place- **Interim- Long term**
- To continue communicating current and consistent messaging regarding public health orders and enforcement in alignment with, AH, and FNIHB – **Immediate** - Ongoing
- To develop an Indigenous specific testing advisory group that supports the serology advisory group and testing within rural and urban Indigenous communities- **Long Term**

Ongoing Response Objectives cont.

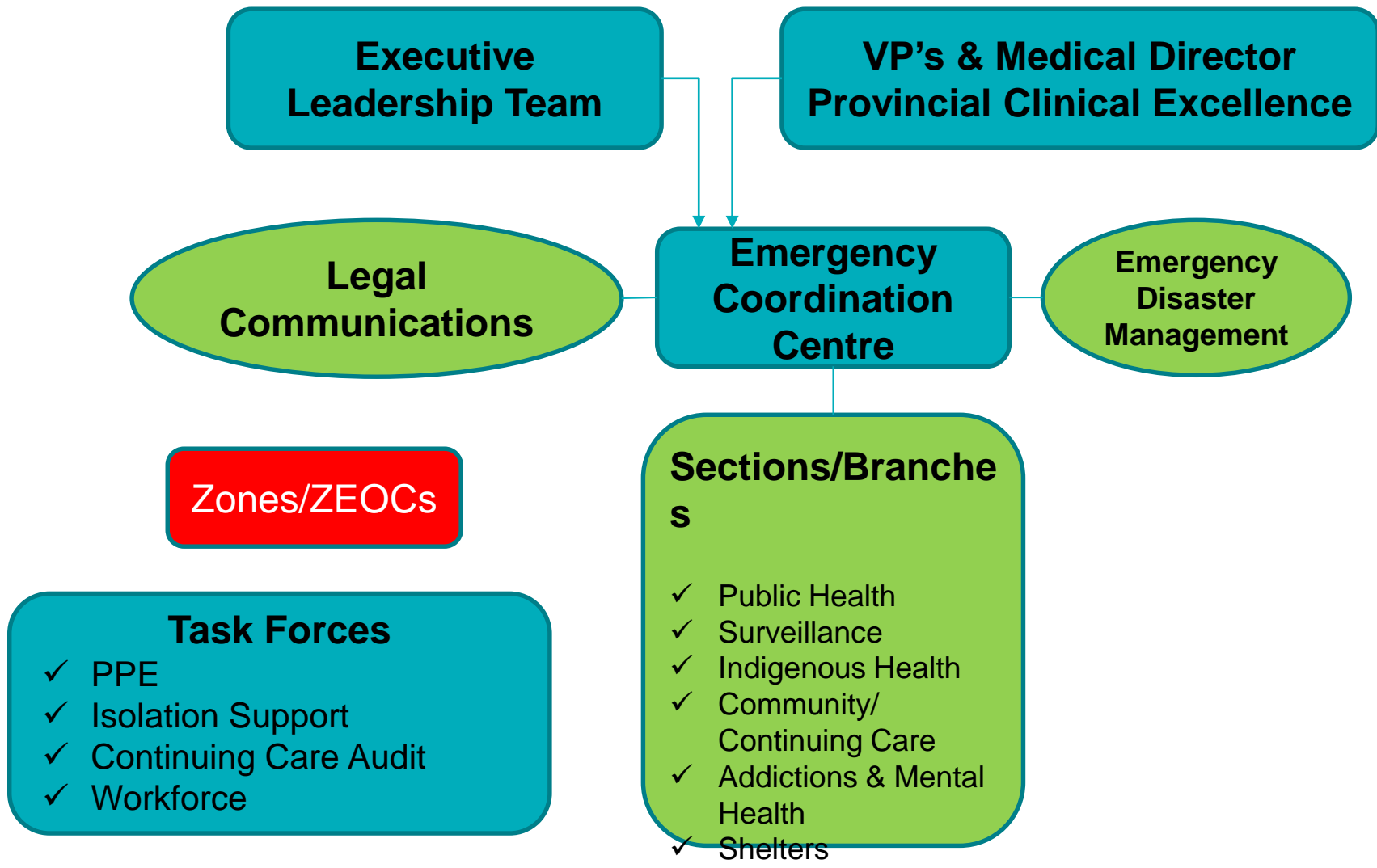
- To expand Indigenous medical leadership support within the Indigenous Health Program on all COVID specific matters, including addressing gaps in primary care pathways amongst Indigenous peoples – **Long Term**
- To continue to work on developing supports with Indigenous communities to enhance readiness and contribute to scenario planning exercises in collaboration with FNIHB- **Long Term**
- To ensure ongoing mental health and addictions concerns and gaps are understood and responded to with Indigenous peoples and communities- **Long Term**
- Provide regular communications on specific Indigenous community needs in partnership with respective zone operations and IHP **Immediate-Interim-Long Term**
- To continue supports to the Scientific Advisory Group in order to provide an Indigenous specific lens to the rapid reviews and other data and surveillance activities - **Interim**

Ongoing Response Objectives cont.

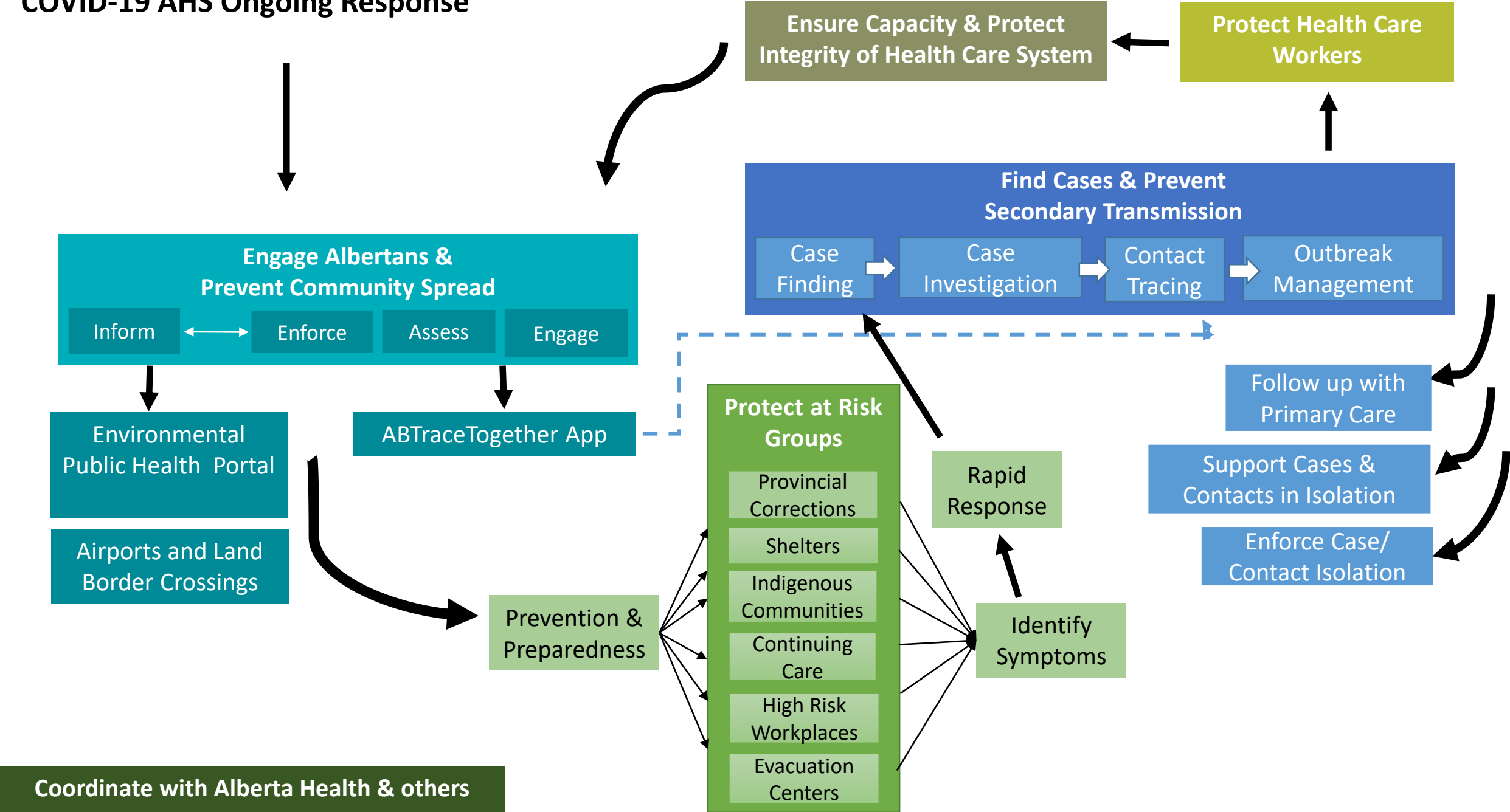
- To continue to support information management in Indigenous COVID-19 information in order to support operational service delivery, policy development, planning activities and decision-making – **Interim**
- Provide regular communications on specific Indigenous community needs in partnership with respective zone operations and IHP
Immediate-Interim-Long Term

Alberta Health Services COVID-19 Ongoing Response

- COVID Nodes**
- ✓ EMS
 - ✓ Primary Care
 - ✓ Health Link
 - ✓ Acute Care
 - ✓ Clinical Support Services
 - Pharmacy
 - Lab
 - DI
 - IPC
 - ✓ People
 - WHS
 - Protective Services
 - Deployment
 - ✓ HPSP
 - ✓ CPSM
 - ✓ IT
 - ✓ Finance
 - ✓ ZELS/ZEOCs/Zones
 - ✓ Medical Advisors
 - ✓ SCNs
 - ✓ Covenant Health



COVID-19 AHS Ongoing Response



Ongoing Response Functions

- Provides leadership and coordination at an AHS provincial level
- Maintains liaison with GoA
- Establishes priorities for resources and supports

Ongoing Response Functions

- Disseminates information; provincial and zone
- Collects and evaluates data to support response
- Coordinates and prioritizes level of response across programs/sectors
- Keeps ELT abreast of situation, activities, outcomes

Questions

- For any questions related to AHS COVID – 19
- Email – david.turner@ahs.ca or ahs.ecc.operations.ih@ahs.ca
- *Visit AHS' [COVID-19 page](https://www.albertahealthservices.ca/topics/Page16944.aspx) for the latest updates and accurate information
<https://www.albertahealthservices.ca/topics/Page16944.aspx>*

Scenarios

DR. CHRIS SARIN, DEPUTY MEDICAL OFFICER OF HEALTH

SIMON SIHOTA, REGIONAL ENVIRONMENTAL HEALTH MANAGER

QUESTIONS: VCHELP@FNTN.CA

Scenario #1

There is a death in a community and a funeral service is being planned.

There will be attendees from multiple neighbouring communities.

What can be done to decrease the risk of COVID 19 transmission?

Scenario #1 - Discussion

It is difficult to lose a loved one under normal circumstances, and is more difficult given the current COVID-19 pandemic situation. We understand that the need to gather, to recognize, to mourn, to support each other, is human. Not being able to have a funeral, memorial or other traditional/cultural ceremony following the death of a loved one, can be heartbreaking.

Funerals, however, like all other public gatherings, continue to be risky at this time. Gatherings can increase the possibility of spreading the COVID-19 virus. It can be particularly dangerous for Elders and people with pre-existing medical conditions to attend events such as funerals.

It is essential that public health directives regarding public gatherings and physical distancing continue to be followed to prevent transmission of communicable diseases and possible outbreaks.

Gatherings

A gathering is any event or assembly that brings people together in the same space at the same time.

Gatherings can contribute to the spread of COVID-19 within a community by bringing together individuals who are not regular household contacts, and via travelers who attend these events and introduce the virus to new communities.

Larger gatherings offer more opportunities for person-to-person contact and therefore pose greater risk of COVID-19 transmission.

When deciding whether to have a gathering one of the considerations is the level of transmission in your local community and the level of transmission in the areas from which your attendees will travel.

- Consult with the MOH to better understand the level of transmission in your community.

Scenario #1

Be aware of public health restrictions around gatherings.

In Stage 2, with 2 metres of distance maintained between members of different households the following capacity restrictions apply:

- Funeral ceremonies (seated events) are limited to a **maximum of 100 people**,
- Indoor social gatherings are limited to a **maximum of 50 people** (e.g., wedding or funeral receptions).
- Outdoor gatherings are limited to a **maximum of 100 people**.

Scenario #1

Steps can be taken to mitigate risks:

- Consider limiting the number of people involved in the ceremony to only members of the immediate family.
- Consider virtual attendance, especially for people at greater risk, such as Elders, and those with chronic medical conditions.
- Make sure the space allows for physical distancing and keep 2 metres from others.
- Reduce the number of participants or change the venue to allow for physical distancing (ex. move to an outdoor location)
- Stagger the time of arrivals and departures from gatherings.

Scenario #1

Steps can be taken to mitigate risks (cont'd):

- Do not include any physical contact between people, such as hand shaking or the sharing of items, food, beverages or utensils.
- People who have any symptoms should not attend.
- Provide access to handwashing stations and/or alcohol-based hand sanitizer.
- Increase the frequency of cleaning of surfaces that are touched often. Promote personal protective practices (coughing and sneezing etiquette, hand hygiene)
- Encourage attendees to wear non-medical masks.

Resources available include:

FNIHB-AB Practical Guidance for Funerals, Wakes or Memorials During the Current COVID-19 Pandemic – available on the One Health website - <http://www.onehealth.ca/ab/ABCovid-19>

Alberta Biz Connect:

- [Guidance for Places of Worship](#)
- [Guidance for Funeral Homes](#)

Scenario #2

A community is planning a traditional event that is to take place outdoors over multiple days, and involves camping.

Planned activities include dancing, drumming, and singing.

Last year over 1000 people attended for at least a portion.

What public health measures can organizers implement to help prevent the transmission of COVID-19?

Gathering Restrictions

Consider public health restrictions around gatherings.

CMOH Order 20-2020 was revised June 12 to increase the maximum size of outdoor gatherings from 50 to 100.

FNIHB will continue to monitor changes to this order, if/when they occur.

Physical distancing and other hygiene guidance remains unchanged.

Establish relationships with partners

Organizers/hosts should include partners who can assist with advising on key public health measures.

- This can include the staff at the local Health Centre, as well FNIHB staff (MOH, Environmental Public Health Officer)

Organizers/hosts should be aware of local COVID-19 activity when planning an event.

- The MOH can assist with understanding COVID-19 activity in the area.

Promote the practice of everyday preventative actions

Use health messages and materials developed by credible public health sources such as Alberta Health, Alberta Health Services, Public Health Agency of Canada, Indigenous Services Canada, or the local Health Centre to encourage participants to practice good personal health habits.

Throughout the event area display signage that can be understood by all (consider language, graphics, etc). Signage should include messaging around:

- Staying home when sick
- Respiratory etiquette.
- Hand hygiene
- Avoiding touching your eyes, nose, and mouth
- Avoiding person to person contact, such as handshakes, hugging, etc, and maintaining physical distancing
- Frequent cleaning and disinfection of surfaces and objects
- Wearing a non-medical face mask

Provide COVID-19 prevention supplies

Ensure enough supplies for event organizers/hosts and participants, such as:

- Liquid hand soap and papertowels at all handwash stations
- Hand sanitizer that contains at least 60% alcohol
- Disposable tissues
- Touch free garbage bins lined with disposable garbage bags
- PPE (cleaning, first aid, etc)
- Masks
- Cleaning and disinfection supplies
 - Regular household cleaning and disinfecting products are effective against COVID-19 when used according to the directions on the label.
- Basic requirements such as an adequate potable water supply, services for waste water collection/disposal, and regular garbage collection.

Consider alternatives for attendees who are at increased risk for complications

People in higher-risk groups (elders or people who have pre-existing health conditions or are immunocompromised) should consult with their healthcare provider about attending gatherings.

Consider virtual attendance or “drive in” events for individuals who are at increased risk for more serious illness.

Consider setting aside a separate time for higher risk groups to participate

Plan ways to maintain physical distancing

Consider different methods to encourage physical distancing between attendees. Examples include:

- Markings/posters/decals to indicate 2 metre spacing
- Chairs and tables can be arranged to ensure two-metres of physical distancing can be maintained.
- Placing partitions between attendees.
- Closing toilets, urinals and showers that are less than 2 metres apart without barriers between them. Washroom capacity must allow for protection of guests.
- Placing additional hands-free garbage bins with removable linings at all entrances and exits.
- Marking out spaces for campers

Physical Distancing

Where physical controls are not possible or appropriate, the organizer should consider:

- Reducing the number of attendees at one time.
- Directing traffic flow within a site. This can be accomplished with signs, ropes, floor decals, etc.
- Staggered entry times.
- Dedicated entry and exit points.
- Attendees should be encouraged to wear non-medical masks when physical distance of two metres cannot be maintained.

Considerations for Shared Items and Food/Beverage

Discourage the sharing of food, beverages and items/objects between members of different household as this can increase of risk of transmission.

- Items/objects should not be shared/passed between attendees, unless they can be cleaning and disinfected after each person has touched it.
- Food and beverages should not be served potluck, family-style, or buffet
- Attendees should bring their own food and beverages. Food and beverages should not be shared between households.
- If food must be handed out, designate an individual to hand out the food. The person handing out food should follow good hand hygiene practices.
- Use disposable napkins, plates, glasses, utensils and cutlery, if possible

Considerations for Singing and Dancing

COVID-19 can be transmitted through saliva or respiratory droplets while singing, or when dancing in close proximity. As such, these activities should be considered to be higher-risk and either postponed or carefully managed with appropriate physical distancing.

Performances that include singing –soloists or in small groups –should take the following precautions:

- Keep singers completely separate from the audience and each other by livestreaming individuals singing separately.
- Limit the number of people singing in the same place to the fewest possible
- Have people sing facing away from others or otherwise creating separation using an acrylic barrier such as Plexiglas.
- Use pre-prepared audio or video recordings.
- Have singers wear face masks while singing.

Considerations for Singing and Dancing

Dancing should maintain physical distancing between attendees from different households.

- Use chalk lines on pavement, spray paint on grass, and tape on flooring to mark spaces for attendees.
- If attendees are unable to maintain physical distancing while dancing, non-medical face masks should be worn.

Develop a Response Plan

As this is a multi-day event, organizers/hosts should include appropriate policies and procedures within their emergency plan on what to do if an attendee develops COVID-19 symptoms. This should include:

- Immediately isolating the attendee from others. Identify a dedicated space for this.
- Cleaning and disinfecting all surfaces that may have come into contact with the symptomatic attendee.
- Requiring hand hygiene and masking of the attendee.
- The attendee must isolate as soon as possible.

Resources available include:

[Alberta One Health Portal](#)

Alberta Health website:

[Restrictions for Gatherings](#)

[Guidance for Outdoor Events](#)

[Guidance for Campgrounds](#)

Indigenous Services Canada website:

[Awareness Resources](#)

Scenario #3

What if a participant who attended the event develops symptoms and tests positive for COVID-19. This scenario is our biggest fear since we know contact tracing in a setting like this can be problematic.

What are some measures that Organizers can take to support contact tracing efforts?

Scenario #3 -Discussion

Advise participants that following attendance they should:

- Monitor themselves for symptoms (sore throat, cough and fever etc.)
- Self-isolate for 14 days and,
- get tested as mentioned by our CMOH.

Participants can be encouraged to download the ABTraceTogether mobile contact tracing app that will help to let you know if you've been exposed to COVID-19 or if you've exposed others – while protecting your privacy.

Further information can be found on the Alberta Health website at <https://www.alberta.ca/ab-trace-together.aspx>

Scenario #3

To support public health contact tracing efforts, organizers should consider collecting the names and contact information of attendees.

Keep in mind:

- Providing information is voluntary for attendees. An organization must obtain an individual's consent and notify them about the purpose and legal authority for the collection.
- Information about attendees will only be requested by if a potential exposure occurs onsite.
- For businesses/workplaces, this includes staff, workers and volunteers on shift. Where feasible to do so, and particularly for personal services and group events, it should also include patrons/customers/the general public.
- Records should only be kept for 2 weeks.
- Any personal information that is collected for COVID-19 contact tracing can only be used for this purpose, unless an individual provides their consent.

For further information FNIHB staff (MOH, Environmental Public Health Officers) can provide guidance when planning these events.



**SWAN RIVER
FIRST NATION**



Community COVID-19 Response Profile – Swan River

SHARON COURTOREILLE – ASSISTANT HEALTH DIRECTOR, SWAN
RIVER HEALTH CENTRE

QUESTIONS: VCHELP@FNTN.CA

Interested in presenting your community's COVID- 19 response/experience?

PLEASE LET US KNOW!

EMAIL: VCHelp@FNTN.ca OR SAC.CDEMERCENCIESAB-URGENCESTMtab.ISC@CANADA.ca

QUESTIONS: VCHelp@FNTN.ca

Acknowledgments

Elder Jackson Wesley - Stoney Nation

Dr. Wadieh Yacoub, Senior Medical Officer of Health

Dr. Chris Sarin, Deputy Medical Officer of Health

Simon Sihota, Regional Environmental Health Managers

Sharon Courtoreille, Assistant Health Director – Swan River

Dr. Richard Musto - AHS

David Turner - AHS

Nadine McRee - AHS

TSAG Telehealth Team (Michelle Hoeber, Brooke Hames and team)

Questions?

VCHELP@FNTN.CA

QUESTIONS: VCHELP@FNTN.CA