COVID-19 Update

MAY 13, 2021

Outline

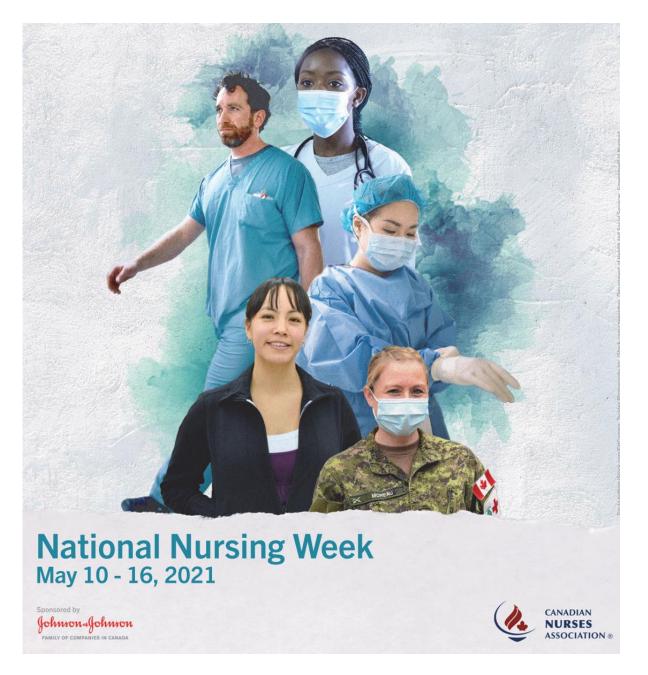
- 1. MOH Update Dr. Wadieh Yacoub & Dr. Chris Sarin
- 2. COVID-19 Vaccine Update Dr. Parminder Thiara
- 3. Questions

MOH Update

DR. WADIEH YACOUB, SENIOR MEDICAL OFFICER OF HEALTH

DR. CHRIS SARIN, DEPUTY MEDICAL OFFICER OF HEALTH

HAPPY NURSING WEEK 2021!

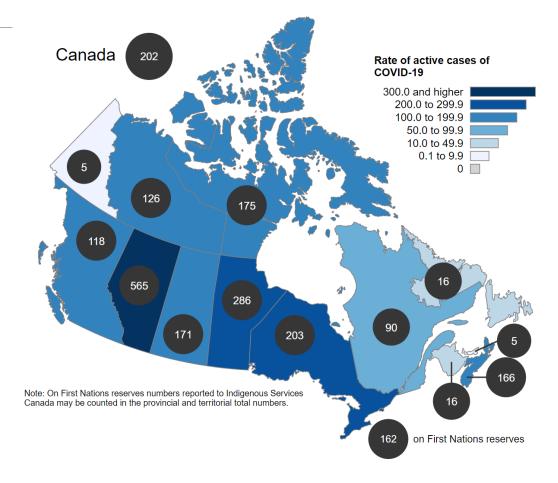


Reminder - Privacy

- 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 — Canada (as of May 12, 2021)

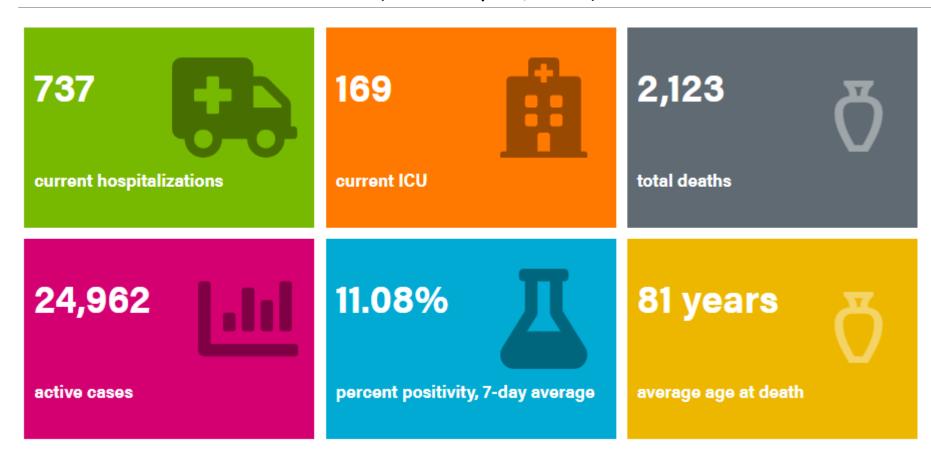
Total number of active cases in Canada: 76,676



Public Health Agency of Canada https://health-infobase.canada.ca/covid-19/dashboard/?stat=rate&measure=total last14&map=hr&f=true#a2

Current Situation - Alberta

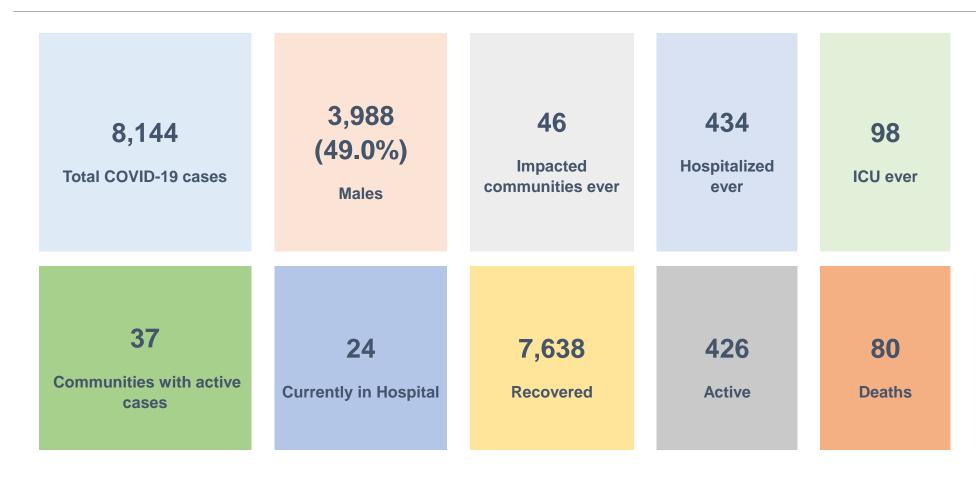
Overview of COVID-19 in Alberta (as of May 11, 2021):



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

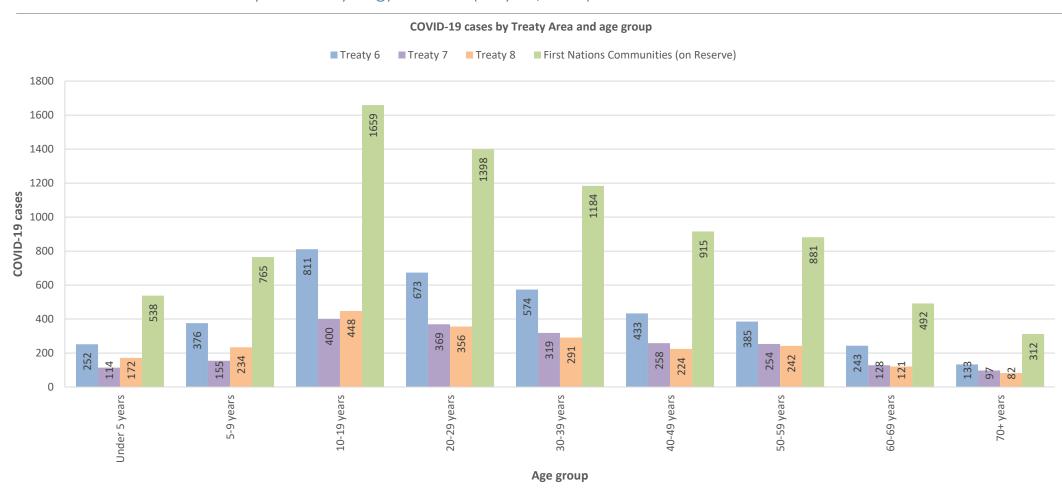
Overview of COVID-19 cases in First Nations communities on reserve in Alberta

Source: FNIHB COVID-19 ER System via Synergy in Action (May 12, 2021)



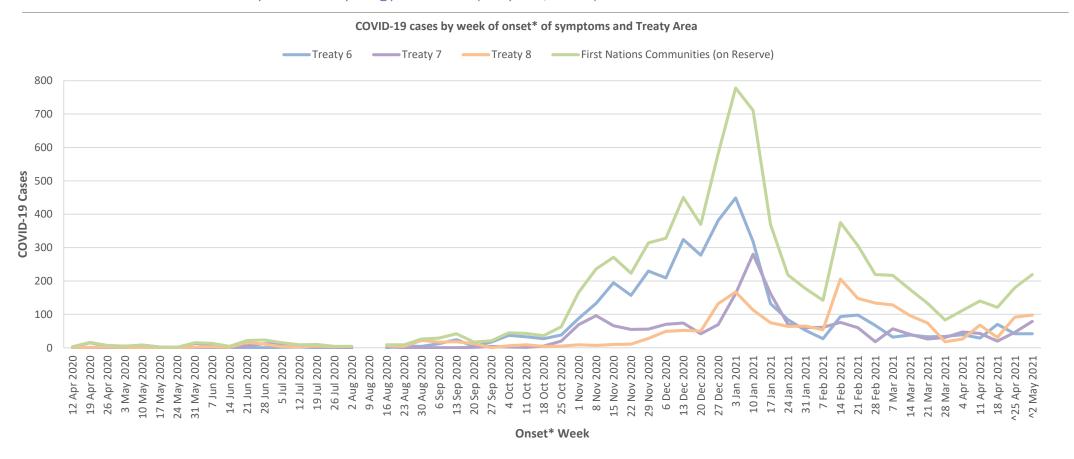
Age distribution of on-reserve COVID-19 cases in Alberta

Source: FNIHB COVID-19 ER System via Synergy in Action (May 12, 2021)



COVID-19 cases by week of onset* by Treaty Area

Source: FNIHB COVID-19 ER System via Synergy in Action (May 12, 2021)



^{*}Onset date is the earliest of the "date of onset of symptoms" and "specimen collection date"

[^]Data may be incomplete due to late receipt of lab reports

Severe Outcomes

Sources: FNIHB COVID-19 ER System via Synergy in Action (May 12, 2021) & https://www.alberta.ca/stats/covid-19-alberta-statistics.htm (May 10, 2021)

	Total Case Hospitalization Rate	Total Case ICU Rate	Case Fatality Rate
Treaty 6	4.7 per 100 Cases	1.0 per 100 Cases	0.9 per 100 Cases
Treaty 7	7.1 per 100 Cases	1.7 per 100 Cases	1.3 per 100 Cases
Treaty 8	4.7 per 100 Cases	1.1 per 100 Cases	0.9 per 100 Cases
First Nations Communities (on reserves)	5.3 per 100 Cases	1.2 per 100 Cases	1.0 per 100 Cases
Alberta (includes First Nations communities)	4.0 per 100 Cases	0.7 per 100 Cases	1.0 per 100 Cases

QUESTIONS: VCHELP@FNTN.CA

Severe Outcomes –Average Age

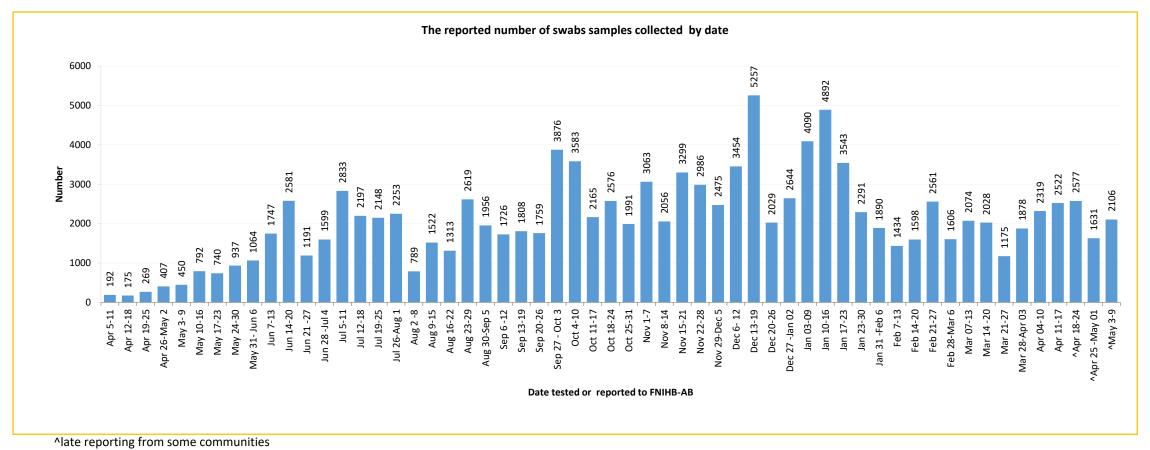
Sources: FNIHB COVID-19 ER System via Synergy in Action (May 12, 2021) & https://www.alberta.ca/stats/covid-19-alberta-statistics.htm (May 10, 2021)

	Average age of cases hospitalized	Average age of ICU cases	Average age of deceased cases	Average age of non-hospitalized cases
Treaty 6	52 years (range:14-88)	54 years (range:17-88)	66 years (range:23-88)	29 years (range:0-94)
Treaty 7	55 years (range:16-86)	57 years (range:21-78)	65 years (range:20-86)	31 years (range:0-87)
Treaty 8	57 years (range:1-93)	59 years (range:20-82)	72 years (range:48-93)	28 years (range:0-87)
First Nations Communities (on reserves)	54 years (range:1-93)	56 years (range:17-88)	67 years (range:20-93)	29 years (range:0-94)
Alberta (includes First Nations communities)	60 years (range:0-104)	57 years (range:0-90)	81 years (range:20-107)	35 years (range:0-108)

QUESTIONS: VCHELP@FNTN.CA

Test Volume

Sources: Community Reports to FNIHB-AB (May 12, 2021)



First Nations (on reserve)*
All Albertans

Test volume
Percent positive test
6.6%
4,343,100
4.9%

*some communities are not reporting testing data to FNIHB-AB, so percent positive test may be overestimated

Alberta COVID-19 Testing Criteria

Testing is available for:

- any person exhibiting any <u>symptoms of COVID-19</u>
- all close contacts of confirmed COVID-19 cases
- all workers and/or residents at specific outbreak sites

Asymptomatic testing has been paused for people who have no known exposure to COVID-19.

FNIHB MOHs will provide guidance to prioritize testing in First Nation communities with cases.

Changes to Variant of Concern Testing Strategy

Effective May 1, 2021, testing for COVID-19 variants of concern is only being completed for:

- Hospitalized and emergency room patients
- Patients involved in outbreaks
- Healthcare workers
- Recent international travelers

This change was needed to maintain laboratory capacity and turnaround times as positivity rates and overall test volumes have rapidly increased.

As variants have become dominant, recent COVID-19 cases are likely infected with a variant of concern.

Changes to COVID-19 Case Management and Contact Tracing

The following changes have been implemented:

FNIHB will no longer be relaying results of variant screening to community health nurses. Variant information for those screened will continue to be available on Netcare.

Public health follow-up will be the same for all positive COVID-19 cases – VOC or non-VOC

- ALL cases of COVID-19 (VOC or non-VOC) should isolate completely away from their household members to prevent ongoing exposure. If this cannot be accomplished at home, use of an isolation hotel or a different dwelling/isolation centre should be considered.
- One test is recommended for all close contacts during their quarantine period.
 - Arrangements for the first test should be when they are first notified they are a close contact.
 - Retesting should occur in the following circumstances:
 - If at any time during the quarantine period, the close contact becomes symptomatic, or
 - upon recommendation of the MOH
- For more information, refer to the <u>Public Health Disease Management Guidelines Coronavirus -</u> COVID-19

Rapid Testing Screening Program

Employers and service providers can apply to receive free rapid test kits through the Alberta Government's rapid testing screening program.

It is open to any public, private, or not-for-profit employer or service provider with an approved COVID-19 screening program. Successful applicants must ensure proper protocols are in place for COVID-19 screening, testing and reporting.

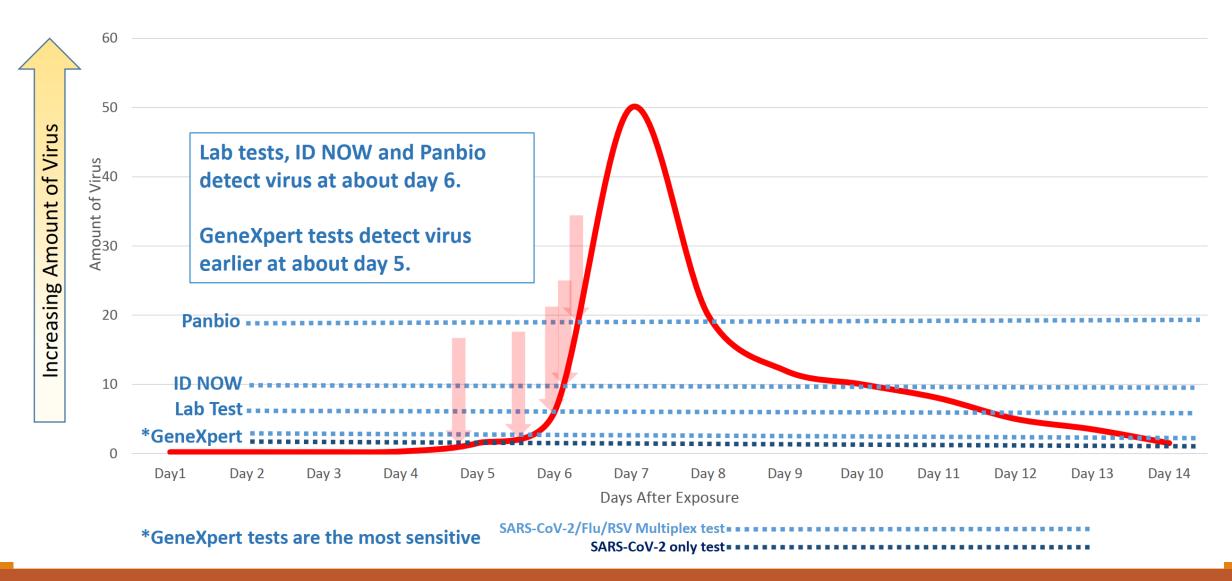
Rapid testing screening programs can identify pre-symptomatic and asymptomatic cases – people who don't know they're infected with COVID-19 so they can be isolated early to stop the spread.

People with symptoms or known exposure to a COVID-19 case must get tested at their local Health Centre, use the <u>online assessment tool</u>, or call 811 to book a COVID-19 test.

For more information, refer to: https://www.alberta.ca/rapid-testing-program.aspx



Different Tests Detect Different Amounts of Virus



PCR Testing Results: False Positives/Negatives

Although considered extremely rare, false positive results can happen because of non-specific PCR reactions. The proportion of false positive results increases as the prevalence of COVID-19 in the population decreases. If a test is thought to be a false positive, consult with the CDC case manager/MOH.

False negative tests in those with symptoms varies depending on timing and methodology of sampling and is estimated to be around 20% (range 10 - 30%).

The following factors may lead to false negative results:

- insufficient virus at the site of specimen collection
- insufficient virus at the time of specimen collection
- incorrect specimen collection

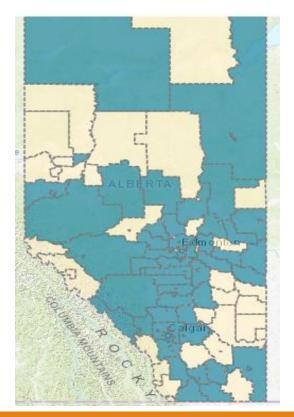
False negative results pose a challenge in public health management of COVID-19 cases as an individual may still be infected and be infectious to others. If the clinical index of suspicion is high, a negative result should not rule out disease and the test should be repeated.

Regions in Alberta with High Case Numbers

Starting May 5, additional restrictions came into effect for regions in Alberta with at least 50 cases per 100,000 people, and at least 30 active cases.

Lower case area restrictions

High case area restrictions



Expanded Restrictions for High Case Regions

The following restrictions are in effect in these regions:

- All outdoor social gatherings must be limited to no more than 5 people and a maximum of 2 household cohorts.
- •All outdoor sports and recreation activities are prohibited, except with members of your household, or your two close contacts if you live alone.
- Retail services must limit customer capacity to 10% of fire code occupancy (not including staff) or a minimum of 5 customers.
- Personal and wellness services, including hair salons, barbers, nail salons, estheticians, tattoos and piercing, must close (starting May 10th).

Expanded Restrictions for High Case Regions

- Faith services are limited to 15 in-person attendees.
- 10 people maximum for funerals, including participants and guests.
- Any workplace, except work camps and essential and critical services, with transmission of 3 or more cases will be required by health officials to close for 10 days.

The restrictions will be in place for at least 3 weeks and will be extended, if necessary.

To view the current number of active cases in your region, refer to: https://www.alberta.ca/maps/covid-19-status-map.htm

Expanded Provincewide Restrictions

- Kindergarten to Grade 12 schools transitioned to online learning, effective May
- Post-secondary schools transitioned to online learning, effective May 5.
- Indoor fitness all facilities must close, including for one-on-one training.
- All indoor sport, performance and recreation activities for youth and adults are prohibited.

For further information on public health restrictions, refer to: https://www.alberta.ca/enhanced-public-health-measures.aspx

COVID-19 Vaccine Update

DR. PARMINDER THIARA, DEPUTY MEDICAL OFFICER OF HEALTH / REGIONAL DIRECTOR OF PRIMARY AND POPULATION HEALTH

Authorized Vaccines for COVID-19: Canada

Moderna – approved December 23, 2020

Pfizer-BioNTech – approved December 9, 2020

AstraZeneca – approved February 26, 2021

Janssen – approved March 5, 2021

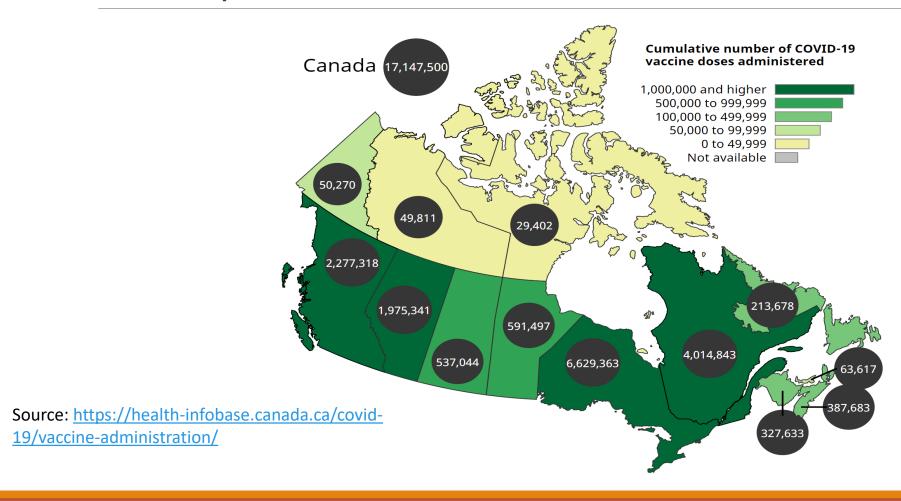
Vaccine Phases - Alberta

Early Phase: December 2020	+
Phase 1: Started January	+
Phase 2A: Started March 15	+
Phase 2B: Started March 30	+
Phase 2C: Started April 12	+
Phase 2D: Started April 30	+
Phase 2 (AstraZeneca): Started April 6	+
Phase 3: General Public - Started May 6	_

Who's eligible in Phase 3

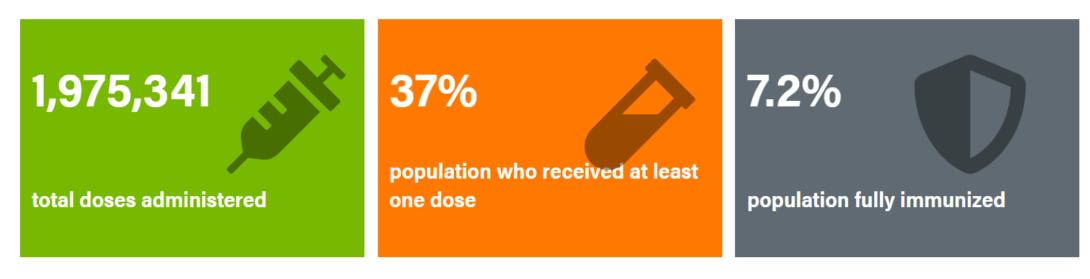
- Every Albertan born in 1991 or earlier (30+), starting May 6
- Every Albertan born in 2009 or earlier (12+), starting May 10

Cumulative Number of COVID-19 Vaccine Doses Administered in Canada by Jurisdiction as of May 13, 2021



COVID-19 Vaccine Data — Provincial

As of May 11th in Alberta:

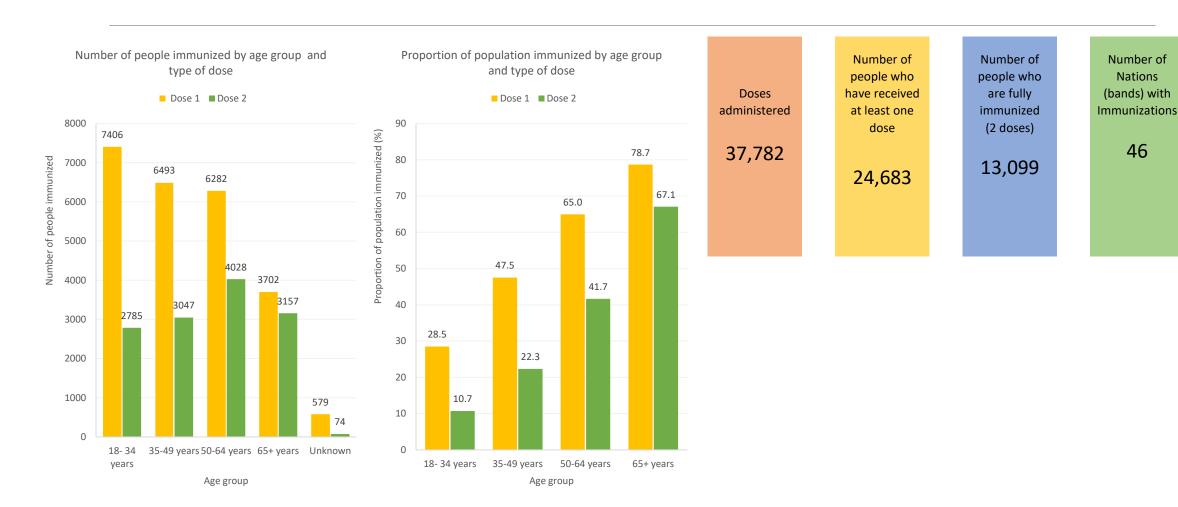


Up to date information can be found at https://www.alberta.ca/covid19-vaccine.aspx

COVID Immunization Activity – On Reserve in Alberta

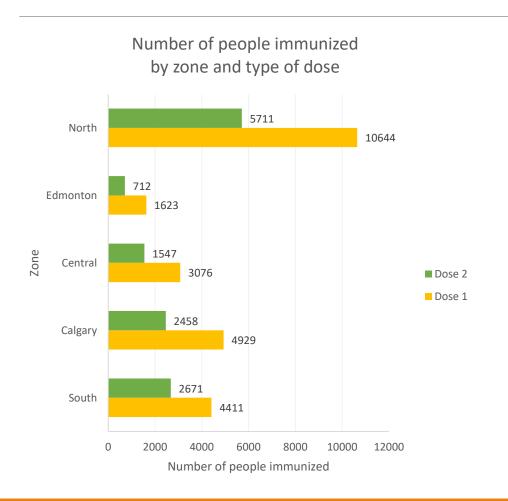
46

Source: Okaki Slice Analytics (May 12, 2021)

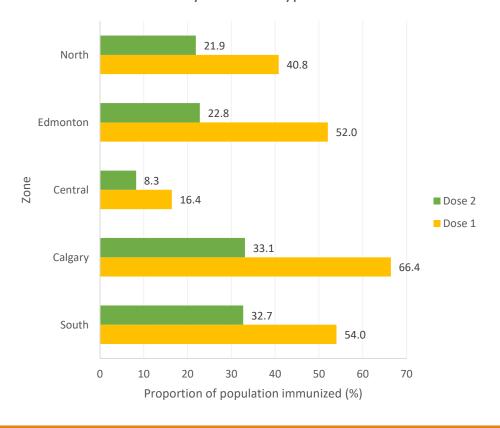


COVID Immunization Activity – On Reserve in Alberta

Source: Okaki Slice Analytics (May 12, 2021)

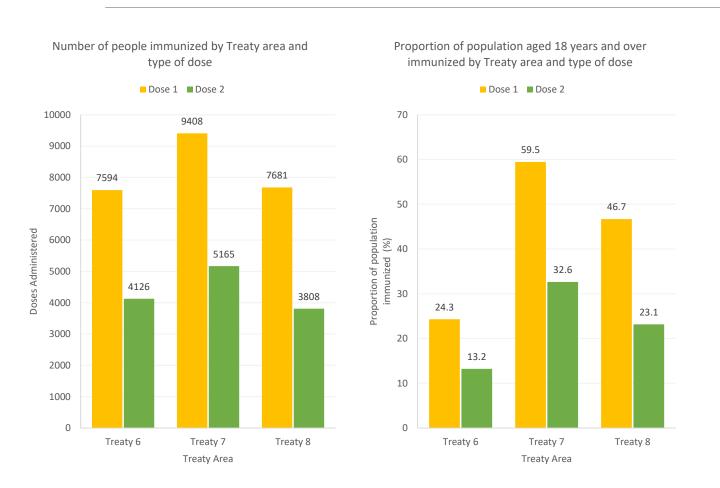


Proportion of population aged 18 years and over immunized by zone and type of dose



COVID Immunization Activity - On Reserve in Alberta

Source: Okaki Slice Analytics (May 12, 2021)



Priority Reason	Dose 1	Dose 2
Healthcare Workers (HCWs)	1043	874
Long-term Care Staff	75	64
Long-term Care Residents	51	46
65+ year olds	3380	2890
Other Congregate Care Living Sites	91	47
Essential Services Workers (not HCWs)	2405	1450
16 - 64 year olds	17297	7630
Other Risk	162	30
Unknown	179	68
Total	24683	13099

COVID Immunization Activity – On Reserve in Alberta

Source: Okaki Slice Analytics (May 12, 2021)

COVID-19 doses administered by week of immunization and type of dose



Reported Reactions Following Immunization

Health practitioners are to report an adverse event following immunization within 3 days of determining or being informed that a patient has experienced an adverse event following immunization unless it has already been reported.

Resource: Adverse Events Following Immunization (AEFI) policy for Alberta immunization providers

https://open.alberta.ca/publications/aefi-policy-for-alberta-immunization-providers

Reported side effects following COVID-19 vaccination in Canada and Alberta

CANADA - AS OF APRIL 30, 2021

Canada is monitoring one safety issue 13,420,198

Total doses administered

4,548

Total adverse event following immunization reports

(0.034% of all doses administered)

ALBERTA – AS OF MAY 11, 2021

1,975,341 Doses administered

314 Adverse Events reported

3,800

Total adverse event following immunization reports that were nonserious

(0.028% of all doses administered)

748

Total adverse event following immunization reports that were serious

(0.006% of all doses administered)

261

New adverse event following immunization reports since last update

(135 new non-serious and 126 new serious)

ALBERTA FIRST NATIONS ON RESERVE – AS OF MAY 6, 2021

36,160 Doses Administered 19 Adverse Events reported

Vaccine Hesitancy - Resources

Alberta One Health Portal – COVID-19 Page - https://www.onehealth.ca/ab/ABCovid-19



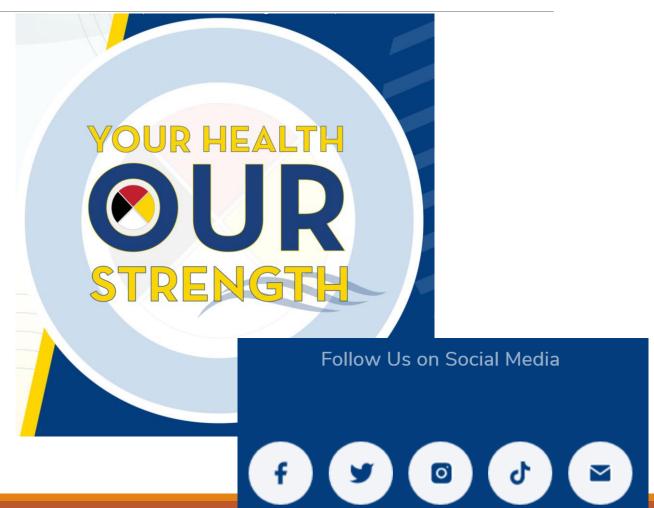
COVID-19 Vaccine □ General Information and References Staff Orientation / Training <u> TempTale Temperature Data Logger</u> Data Reporting Communications GOC - How were COVID-19 vaccines developed so quickly? (Video) GOC - Do COVID-19 vaccines have side effects? (Video) GOC - How do COVID-19 mRNA vaccines work? (Video) GOC - How do I know COVID-19 vaccines are safe? (Video) GOC - COVID-19 Vaccine Hesitancy (Brochure) ISC - Radio PSAs about COVID-19 Vaccines ISC - COVID-19 Vaccines Toolkit: Communications Resource SLFNHA - How the COVID-19 Vaccine works (Video) SLFNHA - Information about the Moderna Vaccine (Video) Handouts and Tools **Weekly Vaccine Updates** → Other Resources

Vaccine Hesitancy - Resources

Your Health, Our Strength campaign https://yourhealthourstrength.ca/

An initiative from Alexis Nakota Sioux Nation

- Community Resources
- Toolkit
- Video
- Blog
- FAQs



Vaccine Hesitancy - Resources

This Is Our Shot Campaign https://thisisourshot.ca/

Social media:

- Twitter Facebook Instagram

@thisisourshotca

#ThisIsOurShotCA







For COVID-19 resources and links to credible sources of information

GO TO THE ALBERTA ONE HEALTH COVID-19 UPDATE PAGE

HTTPS://WWW.ONEHEALTH.CA/AB/ABCOVID-19

Is there a topics you would like to hear about, or are you interested in presenting your community's COVID-19 response/experience?

PLEASE LET US KNOW!

EMAIL: VCHELP@FNTN.CA OR

SAC.CDEMERGENCIESAB-URGENCESMTAB.ISC@CANADA.CA

Acknowledgments

Dr. Wadieh Yacoub, Senior Medical Officer of Health - FNIHB

Dr. Chris Sarin, Deputy Medical Officer of Health - FNIHB

Dr. Parminder Thiara, Deputy Medical Officer of Health – FNIHB

Margaret Litt, Regional Assistant Nurse Manager - FNIHB

Ibrahim Agyemang, Senior Epidemiologist – FNIHB

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

FNIHB Technical Team

Questions?

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