# Outline

- 1. MOH Update
- Dr. Chris Sarin
- Simon Sihota
- 2. COVID-19 Treatment Update
- Dr. Celeste Loewe
- 3. COVID-19 Vaccine Update
- Christina Smith
- 4. Questions





# MOH Update

Dr. Chris Sarin Senior Medical Officer of Health

Simon Sihota Regional Environmental Health Manager





Canada

Indigenous Services Services aux Autochtones Canada



### Overview of Confirmed COVID-19 Cases in First Nations Communities on Reserve in Alberta, April 20, 2022

Source: FNIHB COVID-19 ER System via Synergy in Action (April 20, 2022)

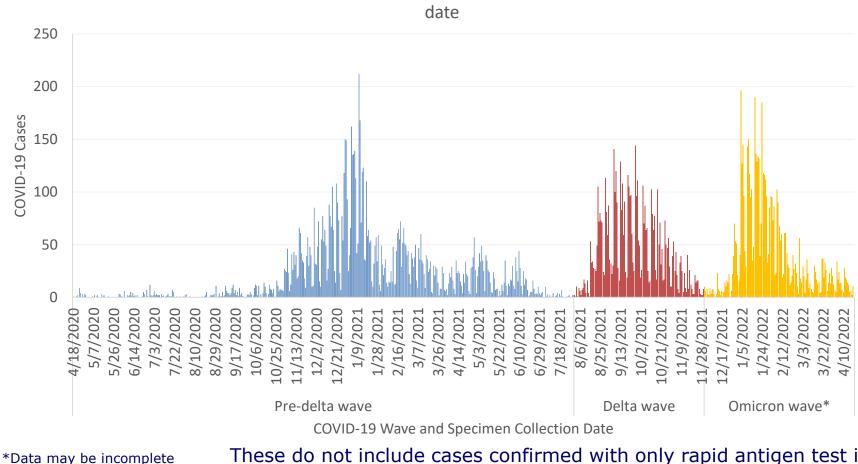
<b>19,854</b> Total COVID-19 cases	9,408 (47.4%) Males	<b>46</b> Impacted communities ever	<b>994</b> Hospitalized ever	238 ICU ever
29 Communities with active cases	<b>23 (5 in ICU)</b> Currently in Hospital	19,480 Recovered	197 Active	177 Deaths

These do not include cases confirmed with only rapid antigen test in communities



# Confirmed COVID-19 Cases by Day and Wave, April 20, 2022

Source: FNIHB COVID-19 ER System via Synergy in Action (April 20, 2022)



COVID-19 Cases in First Nation Communities in Alberta by wave and specimen collection

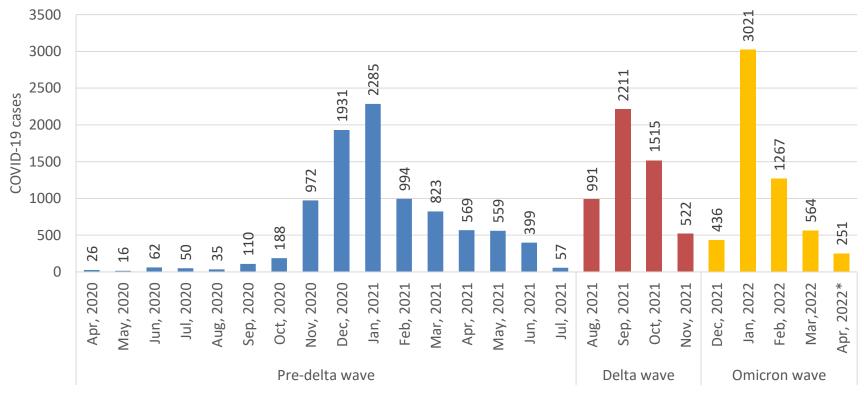


These do not include cases confirmed with only rapid antigen test in communities Questions: VChelp@FNTN.ca

# Confirmed COVID-19 Cases by Month and Wave, April 20, 2022

### Source: FNIHB COVID-19 ER System via Synergy in Action (April 20, 2022)

COVID-19 cases in First Nations communities in Alberta by wave and sepecimen collection month



COVID-19 wave and specimen collection month

\*Data may be incomplete



These do not include cases confirmed with only rapid antigen test in communities

# COVID-19 Cases by Wave and Selected Indicators, April 20, 2022

Source: FNIHB COVID-19 ER System via Synergy in Action (April 20, 2022)

Indicator	Total (all waves)	Pre-delta wave	Delta wave	Omicron wave*
Total COVID-19 cases	19,854	9,076	5,239	5,539
Total Hospitalizations (ever)	994	515	296	183
Total ICU Admissions (ever)	238	123	76	39
Total Deaths (ever)	177	95	55	27
Case Hospitalization Rate (per 100 COVID-19 cases)	5.0	5.7	5.6	3.3
Case ICU Admission Rate (per 100 COVID-19 cases)	1.2	1.4	1.5	0.7
Case Fatality Rate (Per 100 COVID-19 cases)	0.9	1.0	1.0	0.4

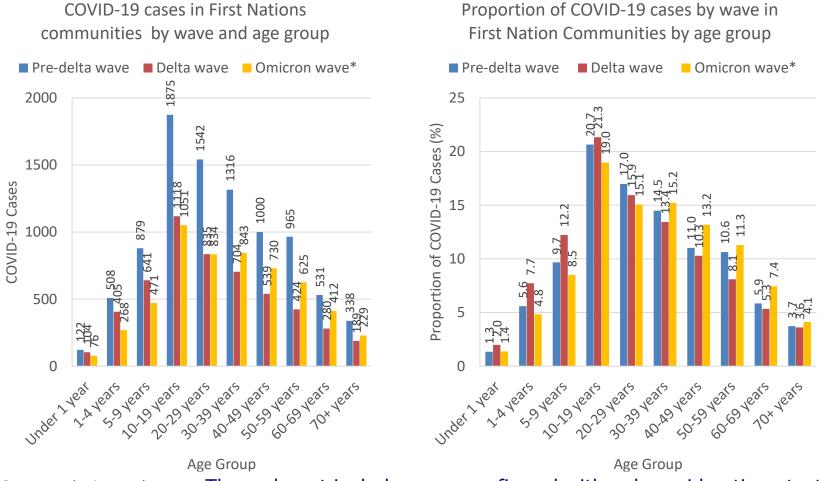
\*Data may be incomplete



These do not include cases confirmed with only rapid antigen test in communities Questions: VChelp@FNTN.ca

# COVID-19 Cases by Wave and Age Group, April 20, 2022

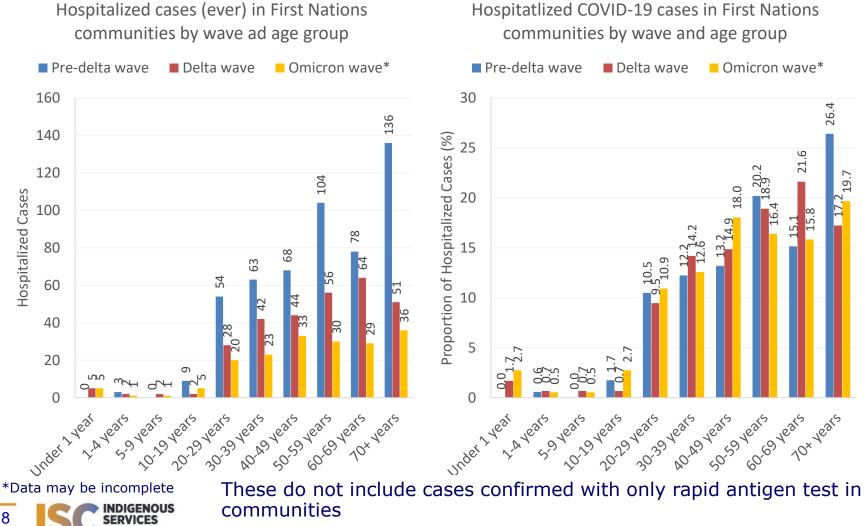
### Source: FNIHB COVID-19 ER System via Synergy in Action (April 20, 2022)



\*Data may be incomplete 7 **ISC** SERVICES CANADA These do not include cases confirmed with only rapid antigen test in communities

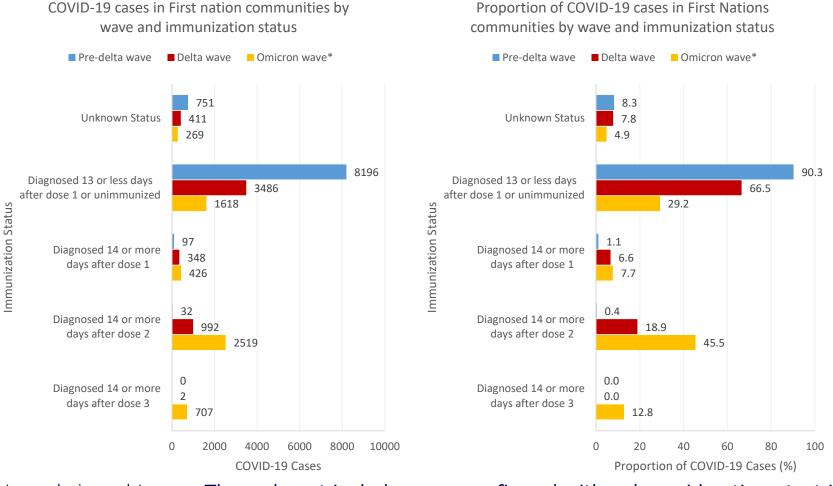
# Hospitalized COVID-19 Cases by Wave and Age Group, April 20, 2022

Source: FNIHB COVID-19 ER System via Synergy in Action (April 20, 2022)



# COVID-19 Cases by Wave and Immunization Status, April 20, 2022

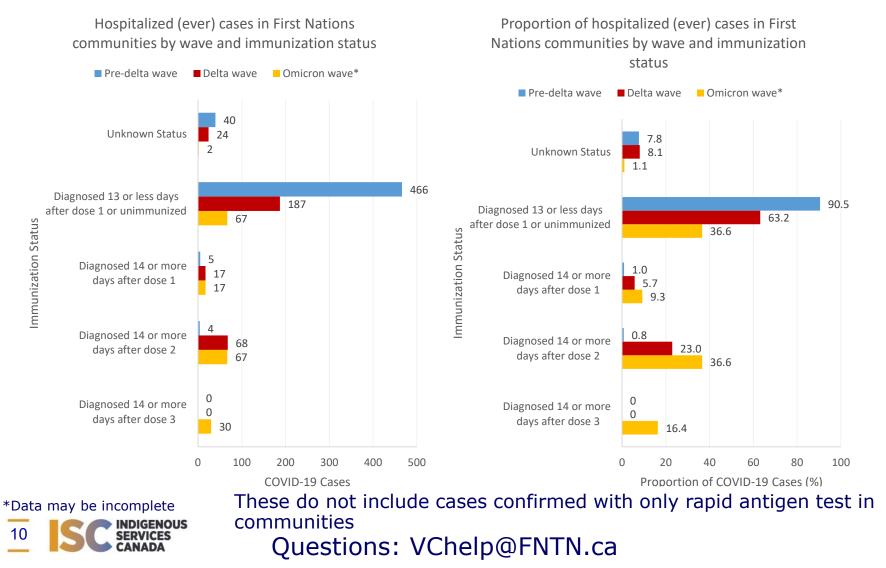
### Source: FNIHB COVID-19 ER System via Synergy in Action (April 20, 2022)



\*Data may be incomplete 9 ISC INDIGENOUS SERVICES These do not include cases confirmed with only rapid antigen test in communities

# **COVID-19 Hospitalizations by Wave and Immunization Status, April 20, 2022**

### Source: FNIHB COVID-19 ER System via Synergy in Action (April 20, 2022)



# Total COVID-19 Hospitalizations in Alberta by Vaccine Status count and rate (per 100,000 population) in the past 120 days

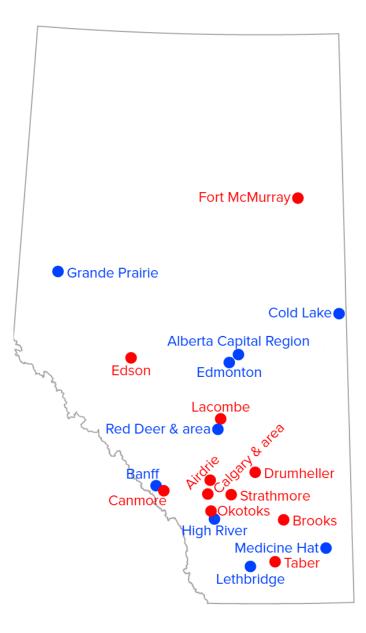
Age group	3 doses & hospitalized (n)	3 doses & hospitalized (rate per 100K)	2 doses & hospitalized (n)	2 doses & hospitalized (rate per 100K)	Unvaccinated & hospitalized (n)	Unvaccinated & hospitalized (rate per 100K)
Under 5 years	0	0.00	0	0.00	421	157.21
5-11 years	0	0.00	4	3.35	100	47.53
12-29 years	46	22.46	444	71.03	250	184.71
30-39 years	102	44.42	520	144.67	268	263.62
40-49 years	88	34.97	330	120.03	231	348.85
50-59 years	176	60.55	392	201.50	303	<mark>57</mark> 7.55
60-69 years	312	96.29	590	501.14	447	2203.55
70-79 years	585	287.27	573	<mark>1305</mark> .42	472	6406.08
80+ years	1173	1096.02	568	2625.74	434	5100.21



## Wastewater Surveillance

- Infected individuals may pass the virus in their feces before they become symptomatic.
  - wastewater can provide an early indication of infection trends in a community.
- Wastewater samples are collected, tested and reported 3x/week
- 19 sampling sites across AB encompassing 27 communities (encompasses >75% of AB's population)

https://covid-tracker.chi-csm.ca/



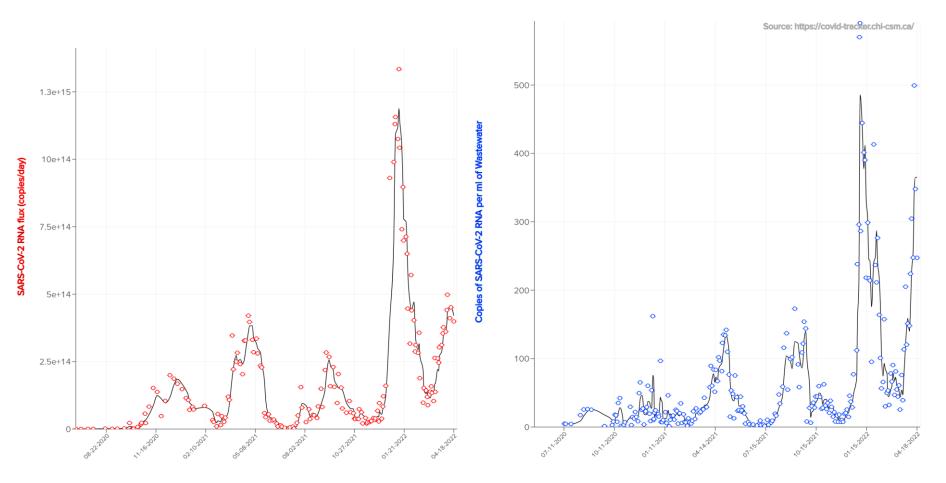
## **Wastewater Data**

Calgary & Area

GENOUS

13

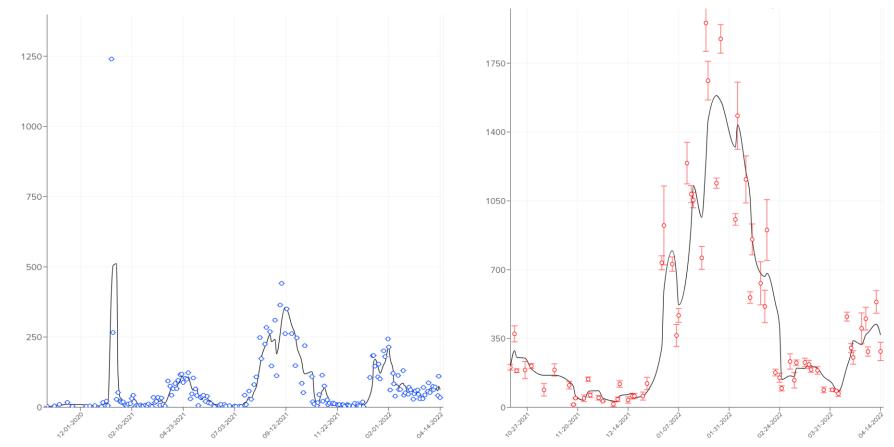
Edmonton



## **Wastewater Data**

Grande Prairie

Fort McMurray





## **Easing of Public Health Measures**

Alberta entered Step 2 on March 1st.

The following changes came into effect at that time:

- Remaining school requirements were removed (i.e. Kindergarten to grade 6 cohorting).
- Youth screening activities for entertainment and sport activities were removed.
- Capacity restrictions on all large venues and entertainment venues were lifted.
- Restrictions were lifted on interactive activities, table limits, liquor sales and closing times for bars, restaurants and other food serving businesses.
- Indoor and outdoor social gathering limits were lifted, including for all wedding and funeral events.
- Mandatory work-from-home requirements were lifted.
- Provincial mask mandate was lifted, except:
- on municipal and intra-provincial public transit for Albertans 13 and older
- at AHS-operated and contracted facilities, and all continuing care settings



## **Easing of Public Health Measures**

### Step 3

The timeline for Alberta entering Step 3 is to be determined and will depend on hospitalization rates continuing to trend downward.

- COVID-specific continuing care measures will be removed.
- Mandatory isolation requirements will be removed (becomes a recommendation only).

For more information, refer to: <u>https://www.alberta.ca/covid-19-public-health-actions.aspx</u>



# **Isolation Requirements**

For **fully vaccinated individuals** (2 doses or 1 dose of Janssen) who test positive (with or without symptoms), the mandatory isolation period is:

- A minimum of 5 days or until symptoms resolve (whichever is longer) starting the first day of symptoms or positive test.
- Following isolation, a mask is required to be worn at all times when around others outside of home for up to 5 additional days. This means, they must eat or drink alone, away from others during this time.

For individuals **not fully vaccinated** (1 dose or less), the mandatory isolation period is:

• 10 days or until symptoms resolve, whichever is longer.



# **Quarantine Recommendations**

Individuals are no longer legally required to quarantine if they are a close contact of someone who has COVID-19 but they should follow the recommendations below.

### Household close contacts

- A household contact of a positive case who is <u>not fully vaccinated</u>, should:
  - stay home for **10 days** (i.e. not attend work, school or other activities)
  - monitor for symptoms if they develop, isolate immediately

### Other close contacts

- If an individual has been exposed to COVID-19 by someone outside of their household, they should:
  - avoid high-risk locations such as continuing care facilities and crowded indoor spaces
  - monitor for symptoms if they develop, isolate immediately

For more information, refer to: <u>https://www.alberta.ca/isolation.aspx</u>



### Isolation & Quarantine

### **ISOLATION REQUIREMENTS** Alberta

#### You must isolate if:

Isolation (staying home and avoiding others) helps prevent the spread of COVID-19 by reducing the number of people you could infect if you have symptoms or test positive. Effective January 3. Albertans are legally required to isolate as outlined below

You tested positive for COVID-19, or

> You are sick with a core symptom: fever, cough, shortness of breath, loss of taste or smell, sore throat\* or runny nose\*

\* Children under 18 with just one of either a runny nose or sore throat are not legally required to isolate but should stay home until well.

#### **ISOLATION REQUIREMENTS**

#### If you have core symptoms (whether you get tested or not):

- > Fully vaccinated (2 doses): Must isolate 5 days from start of symptoms or until symptoms resolve, whichever is longer, plus 5 days of wearing a mask at all times when around others outside of home.
- Not fully vaccinated: Must isolate 10 days from the start of symptoms or until symptoms resolve, whichever is longer.
- If you test negative, you should still stay home and away from others until symptoms resolve

day 0).

symptoms."

#### If you have tested Positive (on either a home test or a lab test):

- And have symptoms:
- Fully vaccinated (2 doses): isolate for 5 days from the start of symptoms or until they resolve, whichever is longer, if symptoms are not related to a pre-existing illness or health condition. For 5 days following isolation, wear a mask at all times when around others outside of home.
- Not fully vaccinated (1 dose or less): isolate for 10 days from the start of symptoms or until they resolve, whichever is longer, if symptoms are not related to a pre-existing illness or health condition
- And have no symptoms: Mandatory restrictions if you are in isolation: Fully vaccinated (2 doses): isolate for 5 days from the date you were tested (test date is day 0). For 5 days following isolation, wear a mask at all times when around others outside of home. Not fully vaccinated (1 dose or less): isolate for 10 days from the day you were tested (test date is
  - Stav home do not leave your home or attend work, school, events or any other public gatherings.
  - Avoid close contact with people in your household Do not take public
  - transportation
  - Do not go outside for a walk Do not use elevators or
  - stairwells if you live in an apartment
  - Get fresh air in your backyard
  - or balconv

#### IF YOU ARE A CLOSE CONTACT OR HOUSEHOLD CONTACT OF A CONFIRMED CASE

If core symptoms develop, keep

isolating as per the isolation

tested positive and have

requirement for those who have

While guarantine is no longer legally required for close contacts, it is still an important way to protect your family, friends and community. It can take up to 14 days after exposure to COVID-19 to develop ymptoms. Some cases have only minor symptoms or no symptoms at all but could still be infectious. By staying home during this period, you lower the chance of spreading the virus to others

#### It is recommended if you are a

#### Household close contact If you are a household contact of a positive case

and you are not fully vaccinated, you should:

- stay home for 10 days (i.e. not attend work, school or other activities)
- monitor for symptoms if they develop, isolate immediately and get tested
- Other close contacts If you have been exposed to COVID-19 by someone outside of your household, you should:
- ► avoid high-risk locations such as continuing care facilities and crowded indoor spaces
- monitor for symptoms if they develop, isolate immediately and get tested
- Canadä
- NDIGENOUS

- Isolation and guarantine fact sheet is available on One Health at https://www.onehealth.ca/
- ab/ABCovid-19

# Continuous Masking and Eye Protection in Health Care Facilities

- Continuous masking for staff, physicians, volunteers, designated support persons and visitors province wide will remain in place at all acute care, continuing care and community sites, as well as in corporate and warehouse-type settings.
- Eye protection requirement remains in place for all health centre staff who work within 2 metres of patients, and/or coworkers, regardless of immunization status.
- This applies to all facilities including health centres, hospitals, continuing care and congregate living sites, as well as immunization clinics and home care.
- There are **no changes at this time** to <u>existing PPE policies</u>.





## **Congregate Care Facilities**

- Public health orders remain in effect to prevent the spread of respiratory viruses, including COVID-19, among elders and at-risk groups for the following settings:
  - Hospice settings
  - Long-term care facilities
  - Licensed supportive living facilities, including elders lodges and group homes
- <u>CMOH Order 06-2022</u> outlines operational and outbreak standards for licensed supportive living, long term care and hospice settings
- <u>CMOH Order 07-2022</u> restricts healthcare workers who are not fully vaccinated to working at a single site.
- Other resources that should be implemented include the following:
  - <u>AHS Guide for Outbreak Prevention and Control in Long Term Care and Designated</u> <u>Supportive Living Sites</u>
  - <u>AHS Guidance for Outbreak Prevention Control & Management in Non-Designated Supportive</u> <u>Living Sites</u>
  - Gastrointestinal/Respiratory/COVID-19 Outbreak Operator Checklist



## **Congregate Care Facilities**

- All elders in congregate care are eligible for a 4th dose of vaccine
- Access to the outpatient treatment, Paxlovid, includes residents of Long Term Care and most Designated Supportive Living sites.
  - Can be prescribed to a resident who has tested positive for Covid-19 regardless of vaccination status. For more information see <u>https://www.albertahealthservices.ca/topics/Page17956.aspx</u>









# COVID-19 Treatment Update

### Dr. Celeste Loewe

Deputy Medical Officer of Health Office of Medical Officers of Health





Indigenous Services Services aux Canada Autochtones Canada



## **Outpatient Antiviral Treatment for COVID-19**

- Medications currently available in Alberta: Paxlovid<sup>™</sup> and Remdesivir
  - Sotrovimab paused as of April 13<sup>th</sup>, 2022
  - Remdesivir IV infusion given over 30 min daily for 3 days.
- Expanded eligibility:
  - <2 doses of vaccine Indigenous peoples aged 45 and up</p>
  - Regardless of vaccination status residents of long-term care/designated supportive living
- Access through dedicated Health Link line at 1-844-343-0971. For more information, refer to: <u>https://www.albertahealthservices.ca/topics/Page17753.aspx</u>
  - PCR testing
  - Symptom onset





# **COVID-19 Vaccine Update**

### **Christina Smith**

CDC Nurse Manager



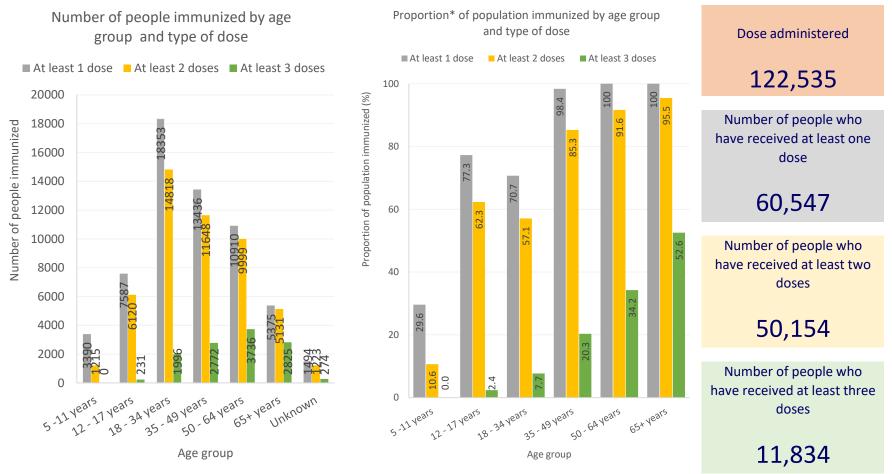


Canada

Indiaenous Services Services aux Autochtones Canada



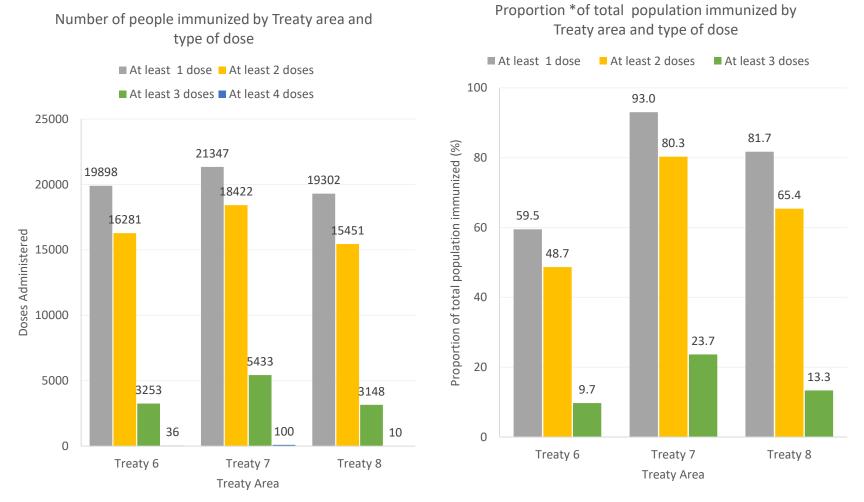
### Source: Okaki Slice Analytics (April 20, 2022)



\*Percentages are calculated using unadjusted ISC-IRS on-reserve and Crown land population as of December 31, 2020. If the proportion of population immunized in any age group exceeds 100% because of population data limitation, we keep the proportion at 100% by adjusting the population to be equal to the number of first doses administered in that age group



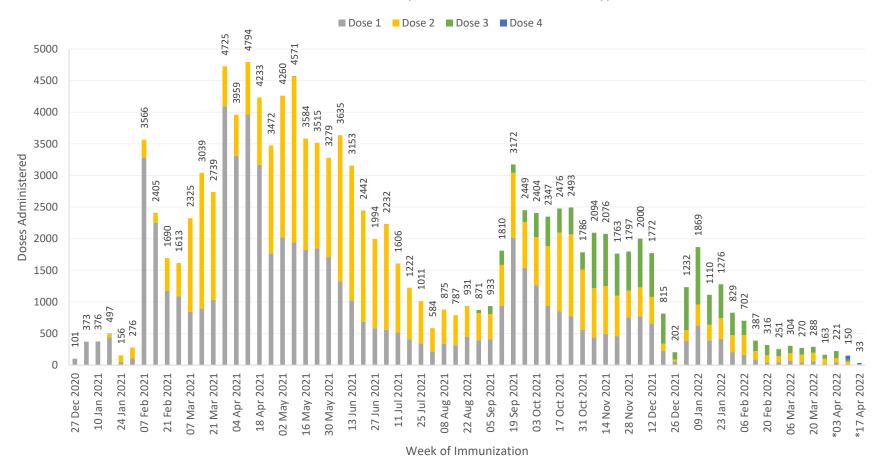
### Source: Okaki Slice Analytics (April 20, 2022)



\*Percentages are calculated using unadjusted ISC-IRS on-reserve and Crown land population as of December 31, 2020. If the proportion of population immunized in any age group exceeds 100% because of population data limitation, we keep the proportion at 100% by adjusting the population to be equal to the number of first doses administered in that age group



### Source: Okaki Slice Analytics (April 20, 2022)

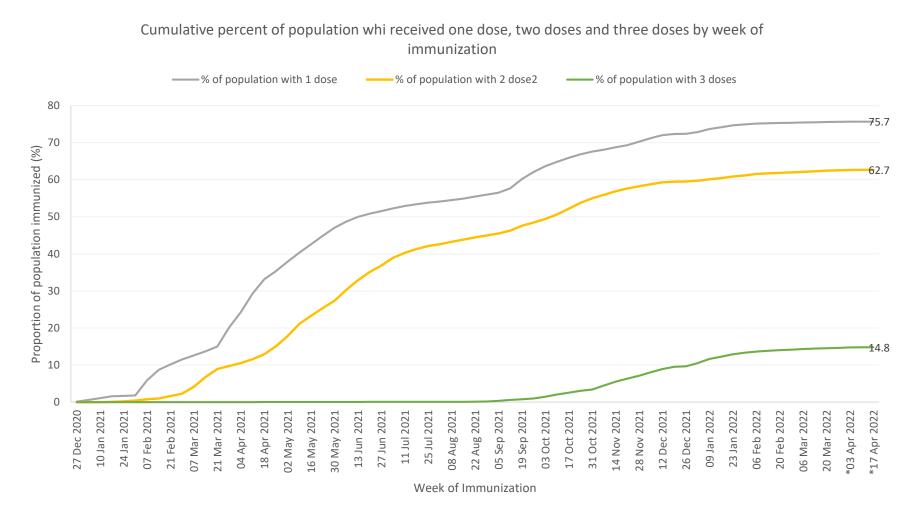


COVID-19 doses administered by week of immunization and type of dose

\*May be incomplete due to late reporting



### Source: Okaki Slice Analytics (April 20, 2022)



\*May be incomplete due to late reporting



## **Fourth Dose for Seniors**

As of April 12th, eligible seniors can book an appointment to get a fourth dose.

- Eligibility
  - Everyone 70 and older
  - First Nations, Metis and Inuit people age 65 and older
  - All seniors in congregate care regardless of age
- Spacing for boosters should be at least 5 calendar months after the first booster dose
- If an individual had a recent COVID-19 infection, the ideal spacing for the booster should be 3 months after symptom onset or positive test (if asymptomatic) AND at least 5 months after last dose



## Novavax vaccine

- Novavax is a COVID-19 protein sub-unit vaccine that has recently been approved by Health Canada for people who are 18 years of age and older.
- It is a two dose series, with 21 days between the doses.
- Now available in Alberta.
- Administration of Novavax immunizations will be done by Alberta Health Services.
  - If a health centre has individuals requesting the Novavax vaccine, please reach out to Dr. Thiara or Christina Smith so we can assist with obtaining the vaccine and provide training.





# **Questions?** VCHELP@FNTN.CA





Canada

Indigenous Services Services aux Autochtones Canada



## Acknowledgements

Dr. Chris Sarin, Senior Medical Officer of Health – FNIHB Dr. Celeste Loewe, Deputy Medical Officer of Health - FNIHB Simon Sihota, Regional Manager, EPHS – FNIHB Christina Smith, CDC Nurse Manager - FNIHB Ibrahim Agyemang, Senior Epidemiologist – FNIHB TSAG Telehealth Team (Michelle Hoeber, Brooke Hames and team) FNIHB Technical Team

