COVID-19 MOH Update

CURRENT TOPIC, SCENARIOS AND A COMMUNITY PROFILE APRIL 23, 2020

Outline

- 1. MOH Update
- 2. Mass Gatherings
- 3. Scenarios
- 4. Community Profile Saddle Lake
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MOH Update

DR. WADIEH YACOUB, SENIOR MEDICAL OFFICER OF HEALTH

DR. CHRIS SARIN, MEDICAL OFFICER OF HEALTH

The global numbers as of April 22, 2020 (WHO Situation Report – 93)

- 2 471 136 confirmed cases
- 169 006 deaths

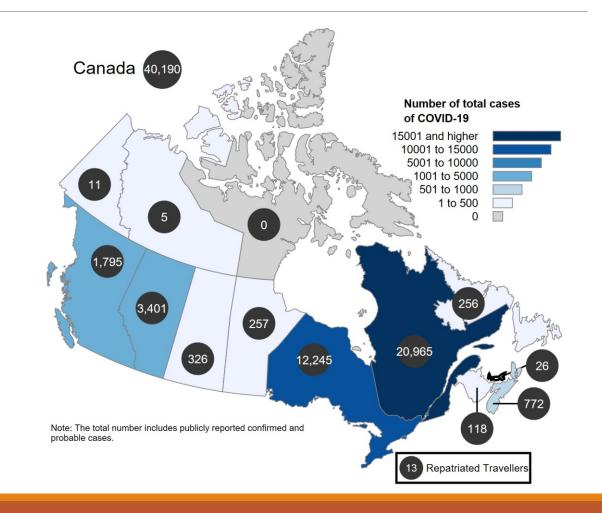
The United States is reporting the highest number of cases, followed by Spain, Italy, Germany, the United Kingdom, and France.

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

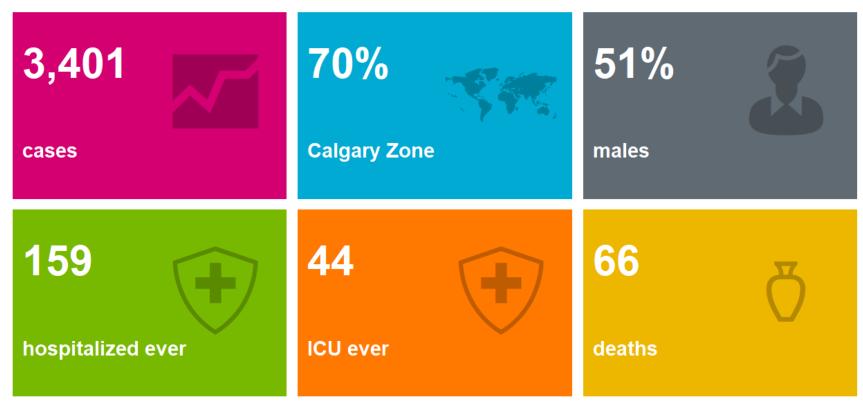
The numbers in Canada as of April 22, 2020:

- 40,179 confirmed cases
- 1,974 deaths

Source: PHAC https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection.html



Overview of COVID-19 in Alberta (as of April 22, 2020):



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

The numbers across Alberta as of April 22, 2020:

Location	Total Confirmed Cases	Deaths
Calgary Zone	2 396	42
Edmonton Zone	451	9
South Zone	303	0
North Zone	150	14
Central Zone	79	1
First Nation Communities	1	0
Unknown	20	0
TOTAL	3 401 (1 310 Recovered)	66

COVID-19 Testing

Alberta has expanded access to laboratory tests to better trace the spread of COVID-19.

Testing is to any person exhibiting symptoms of COVID-19 including cough, fever, shortness of breath, runny nose or sore throat.

To determine if you need to be tested and next steps, complete the:

- AHS Online COVID-19 Assessment, or
 - https://myhealth.alberta.ca/Journey/COVID-19/Pages/COVID-Self-Assessment.aspx
- AHS Online Assessment for Healthcare and Shelter Workers, Enforcement Personnel and First Responders.
 - https://myhealth.alberta.ca/Journey/COVID-19/Pages/HWAssessLanding.aspx

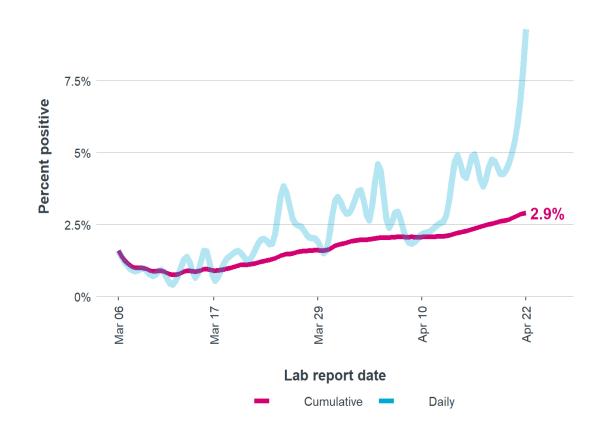
COVID-19 Testing

As of April 22, 108 521 people have been tested in Alberta.

Calgary Zone has completed 44% of the tests.

Trend has been increasing for the percentage of positive tests.

Increased testing due to a number of outbreaks, including reported outbreaks in health facilities, as well as outbreaks associated with gatherings.



COVID-19 Testing Data: First Nations Communities in Alberta (as of April 21)



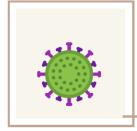
Number of communities Reporting data

37



Number of communities not Reporting Data

8



Number of communities doing testing

34



Number of swabs in stock

3036



Number swab samples collected to date

412



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

381

Mass Gatherings

DR. WADIEH YACOUB, SENIOR MEDICAL OFFICER OF HEALTH

Public Health Order - Gatherings

Restrictions and prohibitions on gatherings were put into effect to protect Albertans and prevent the spread of COVID-19. Gatherings of more than 15 people are prohibited as per **CMOH Order 07-2020**:

- Gatherings in outdoor public spaces are limited to groups of 15 people in one location and all persons must observe 2 metre distancing requirements
- Gatherings in an indoor location must also be limited to 15 people and all persons must observe
 2 meter distancing requirements
- This applies to any private or public gathering including, but not limited to, weddings, funerals, religious services and informal events etc.

Further information can be found at: https://open.alberta.ca/publications/cmoh-order-07-2020-2020-covid-19-response

COVID-19 Public Health Orders

COVID-19 public health orders under the Alberta Public Health Act are enforceable by law:

• Violators may be subject to tickets of \$1,000 per occurrence. Courts could administer fines of up to \$100,000 for a first offence and up to \$500,000 for a subsequent offence for more serious violations.

Complaints can be submitted:

- Online through Alberta Health Services https://ephisahs.albertahealthservices.ca/create-case/
- Call Alberta Health Services at 310-4455 to submit a complaint by leaving a message when prompted.

Funerals, Wakes and Memorials

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, are very risky at this time. Even small 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 under all circumstances.

Practical Guidance for Funerals, Wakes and Memorials

The following guidance outlines how to ensure COVID-19 is not transmitted during this time. This guidance should be followed regardless of the cause of death.

- Funeral services not involving burial should be postponed as much as possible
- The dignity of the deceased, their cultural and spiritual traditions and their families should be respected and protected throughout
- People who have died from COVID-19 can be buried or cremated

Practical Guidance for Funerals, Wakes and Memorials

Wakes and funerals are unique situations due to their emotional and spiritual components. If burial is being postponed, viewing of the deceased is still possible. Whether the viewing is in the home, or in a pre-determined facility, the following procedures are recommended:

- Consider limiting the number of people involved in the ceremony to only members of the immediate family/same household.
 - Limit number of people to less than 15 (as per AB CMOH Order)
 - Ensure strict physical distancing can be achieved (includes outdoor gatherings)
 - Consider staggering arrival/departure times of attendees
- Consider the use of virtual technologies (e.g. telephone, video conference, video recordings) in place of in-person services and gatherings. Posting these on social media, publically or privately will need to be in keeping with the family wishes.

Practical Guidance for Funerals, Wakes and Memorials

- Individuals who are ill, or have high-risk medical conditions must not attend. Friends, family and other visitors should not touch or kiss the body.
- Wearing a homemade facial covering that covers your mouth and nose may be helpful in providing some protection for others around you, for a short period of time:
- Ceremonial objects should not be shared amongst participants.
- Should touching of the body or clothing occur, ensure that the individuals wash their hands thoroughly with soap and water or applies hand sanitizer (with alcohol content 60% or more).
- Maintain a list of all participants, in the event that tracing needs to be done.
- **DO NOT** permit self-serve buffets. If necessary, provide single-serve foods in individual containers, maintaining physical distancing of 2 metres or 6 feet.

Resources

- AB CMOH Order 07-2020: https://open.alberta.ca/dataset/c02f3b06-9c37-4845-98ee-d07d805fdce1/resource/32f3367d-9a15-4aef-af6e-4e960891c14e/download/health-cmoh-record-of-decision-cmoh-07-2020.pdf
- Practical Guidance for Funerals, Wakes and Memorials During the Current COVID-19
 Pandemic Situation
- Dr. Tom Wong Chief Medical Officer of Public Health http://www.onehealth.ca/ab/ABCovid-19
- Alberta Health COVID -19 Orders and Legislation https://www.alberta.ca/covid-19-orders-and-legislation.aspx
- Alberta Health Services COVID -19 Public Health Order Violations https://ephisahs.microsoftcrmportals.com/create-case/

Scenarios

CDC TEAM - CHRISTINA SMITH, ANDREA WARMAN, BRENT WHITTAL

Scenario

A client comes in requesting a test for COVID-19.

He does not have any COVID-19 symptoms and does not meet the exposure criteria.

The nurse tells the individual he does not need to be tested.

He states he is going to the health director and community leadership to have them make the nurse do the test.

The nurse receives a phone call to say "Test the individual or you will be fired".

Should the nurse do the test?

This is a very difficult situation:

The nurse doesn't want to damage the nurse- patient relationship

The nurse's job is potentially in jeopardy

If the nurse does the test, it would be outside of the scope of when she is able to test

The nurse wonders, "Would an extra test sent to the lab make such a big difference?"

Discussion

The nurse has assessed the client correctly and he does not meet the testing criteria outlined in the FNIHB MOH directive.

The nurse is not covered by the FNIHB MOH to test anyone outside of the testing criteria.

Discussion (con't)

The nurse could:

- Consult with a local physician or NP who could order a test if they feel it is required
- Call a member of the CDC Team to review the situation
- Call the MOH on call (780-218-9929) to review the situation

Support for Nurses

FNIHB MOH and CDC Team

Able meet with the individual or community by phone to review the guidelines for testing

Registered bodies for nurses

- College of Registered Nurses of Alberta (CARNA)
- College of Licensed Practical Nurses of Alberta

Employee Assistance Programs

Occupational & Critical Incident Stress Management (OCISM) for nurses (FNIHB and Nation employed) 1-800-268-7708

Scenario

I have collected a swab for COVID-19.

How do I fill out the lab requisition?

There are several types of lab reports used around the province.

Each of them are slightly different

There is some key information that is required on the lab requisition:

Patient information

Provider/Requestor information

Specimen/Collection information

Patient Information Section

Information required:

PHN (health care number)

Date of Birth

Legal Last Name, Legal First Name

As it shows on their health care card

Address

If you are ordering under FNIHB's MOH the following information is required in the *Provider* or *Requestor* section:

Name: Yacoub, Wadieh

Address: Canada Place, Edmonton, AB

Phone: 780-495-3391

Provider ID: 004699A

Copy To portion in the Provider or Requestor section:

If you are ordering under your local physician or nurse practitioner, enter his/her information in the *Provider* or *Requestor* section and enter Dr. Yacoub's information in the *Copy To* section.

If you are ordering under Dr. Yacoub and the client has a regular physician, his/her information can be entered in the *Copy To* section.

Specimen or **Collection** Section

Routine collection (not usually Stat)

Date of collection (use the format identified on the form)

Time of collection (using the 24 hour format)

Location: the name of your health centre

Outbreak EI: only filled in if applicable. The CDC team would most likely relay this information to you if it is required. (con't)

Specimen or Collection Section (con't)

Swab:

- Nasopharyngeal
- Throat
- Nasal

Reason for Testing/Clinical Information:

- COVID 19 symptoms (some may have check boxes for symptoms)
- Onset of symptom date
- Travel out of country history if applicable (in last 14 days)

(con't)

Specimen or Collection Section (con't)

COVID-19 does not usually appear on the lab requisition as one of the tests available.

Write "COVID-19" in the "other" or "additional" test section that is usually found at the bottom of the lab requisition.

Your local laboratory is a great source of information if you have questions

If lab requisitions are not completed in full, the lab specimen may not be tested

The information on the lab requisition MUST match the information on the specimen that was collected.

Scenario

I have tested a client for COVID-19.

How does the client get the lab results?

Lab Results

A FNIHB MOH will be notified by phone of all **positive** lab results.

The ordering physician, FNIHB MOH or CDC Team will usually be the ones to notify the client of the results.

The CDC Team will reach out to the community health nurse as soon as possible to start case management and contact tracing.

Lab Results

There are a few ways for the client to get their **negative** lab results:

From the ordering physician/NP or nurse

- Nurses ordering testing under Dr. Yacoub are responsible for checking NetCare for lab results and relaying negative results to the client.
- Note: if the nurse does not have NetCare access, the CDC Team can watch for lab results until NetCare access is obtained. Client information must be relayed to the CDC Team. (Con't)

Lab Results

Clients will receive a phone call from Health Link (811) to inform them of a negative test result.

Clients may view their health information on line if they have registered in the *MyHealth Records* program. (myhealth.alberta.ca)

If consent was obtained at the time of specimen collection, clients can receive negative results via an automated message sent by the COVID-19 Auto-dialer program.

What is the COVID-19 Auto-Dialer?

What is COVID-19 Auto-Dialer?

An automated phone call from Albert Health Services reporting NEGATIVE COVID-19 results to people who consent at the time of testing.



How the COVID-19 Auto-Dialer Works

A person getting tested for COVID-19 consents to this reporting option at the time of swabbing

Consent and phone number is documented on lab requisition and goes with the specimen to the laboratory

A NEGATIVE test result is entered into auto-dialer system

A call to the client is made the next morning

How COVID-19 Auto-Dialer Works

The client answers the call, responds to prompts, listens to the message, and acknowledges receipt of the information by pressing a key. Process ends.

If no one answers, a clear message is left to expect a repeat call.

Two more such calls are made, the last one is at 4:00 p.m.

The following day Health Link staff will attempt to manually call the person.

COVID-19 Auto-Dialer

Over the last week, the FNIHB CDC Team has been meeting with Precision Labs and the AHS COVID-19 Surveillance Team.

A custom lab report must be used in order to participate in the Auto-Dialer process

- A lab requisition with Dr. Yacoub's information is being created
- Note: the custom lab report can also be used for clients that do not want to participate in the auto-dialer process.

COVID-19 Auto-Dialer

Informed consent must be obtained from the client if the auto-dialer process is going to be used.

• This is important because medical information is being relayed and it may not be the client who picks up the auto-dialer phone call.

On the lab requisition, there is a consent box that must be checked off.

Even if the client has consented to the auto-dialer process, nurses who collect COVID-19 specimens need to monitor NetCare for results.

COIVD-19 Auto-Dialer

Next Steps:

FNIHB CDC Team will receive the custom lab report required for the auto-dialer process.

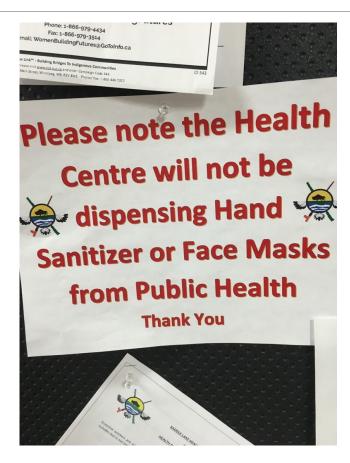
The custom lab requisition and information on the auto-dialer process will be sent out by email to all community health nurses.

Thank you for all the work that you are doing in the community.

The CDC Team

Community COVID-19 Response Profile – Saddle Lake Health Centre

DR. NICOLE CARDINAL
TROY TILLEY, NIC
TAMARA LARGE, LPN





"It will take the effort of all of us to keep our loved ones and our community safe"

SLCN PUBLIC NOTICE

FROM THE EMERGENCY MANAGEMENT TASK FORCE STATE OF EMERGENCY - TRAVEL RESTRICTIONS PURPOSE

*To protect our First Nations people from COVID-19 entering our boundaries.

*To ensure our people are following safety precautions.

*To protect our most vulnerable; Elders and children and our
Nations people with current medical conditions.

*To keep all our First Nations people safe.

*Help track and monitor COVID-19 infected.

TRAVEL RESTRICTIONS

*No non-essential travel – visiting on & off reserve, going for fast food, going out to socialize, etc.

*Essential Travel Only – groceries, work, prescriptions, medical appointments, etc.

Please do not take your children out for shopping.

NOTE: The only people travelling within SL should be our own residents and people providing essential services to SL.

- *Outside visitors/non residents will not be permitted entry.
- * Edmonton is a hot spot for the virus, if you choose to go to Edmonton or any other hotspot, you will be asked to self-isolate for 10 days. A monitoring system is in place to ensure that you are complying.

SECURITY AND CHECK POINTS

*5 major Check Points have been established with security personnel. They have been oriented and informed of safety precautions. They will be taking temperatures and doing a short assessment with all travelers passing through the check point.

*They will be logging all activity and movement.

*All other entry ways to SL are blocked and monitored by both the floating security personnel and the RCMP.

*The Check Point is not only to monitor but also to help track our people's movement and to urge our people to stay home.
*If you have any flu or cold like symptoms, you will be asked to return home and self-isolate, contact the Health Centre @(780)
726 - 3930 and to self-monitor your symptoms.

YOU CAN HELP TOO

The best prevention is staying home and not allowing visitors in your home.

Teach everyone in your household safety precautions, washing hands regularly, sneezing into elbows and sanitizing surfaces. Avoid touching your face.

We know this is difficult, it is difficult for all of us, we are a very social people; call, text, or skype instead.

Regularly check on your Elders but do not expose them by entering their homes.

Visit from outside or call them regularly and update them.

If you know others; family and friends who are not connected with internet of do not have face book, please help by calling and updating them regularly.

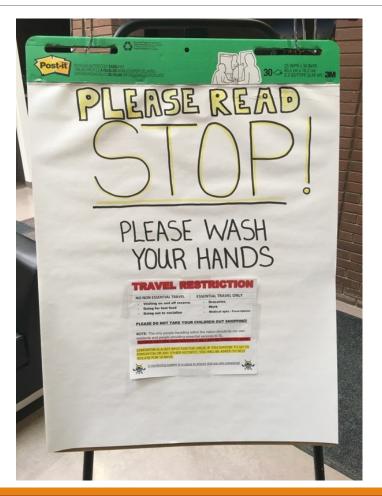
Do not pick up hitch hikers, or provide rides for hire, you are sutting yourself and your family at risk.

HIY, HIY May Creator protect us all

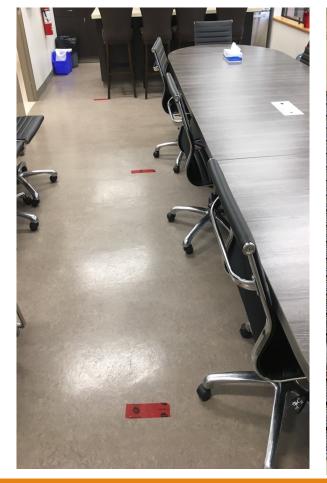






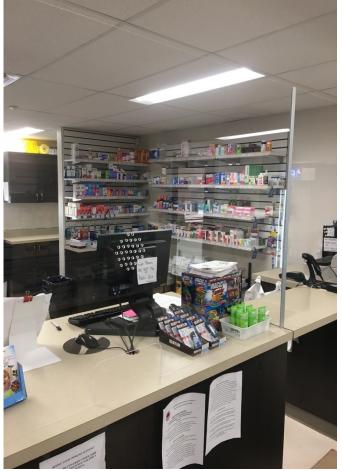










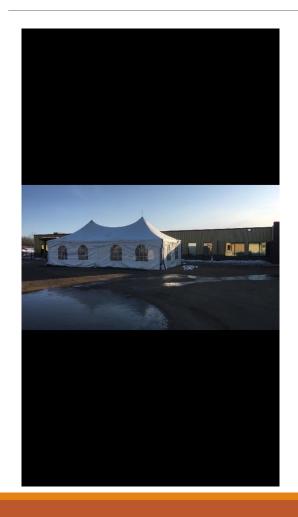








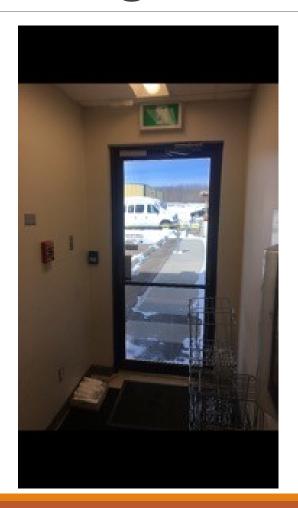


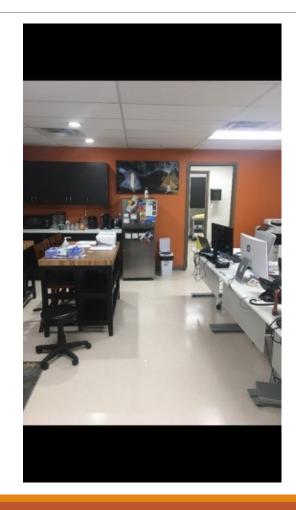






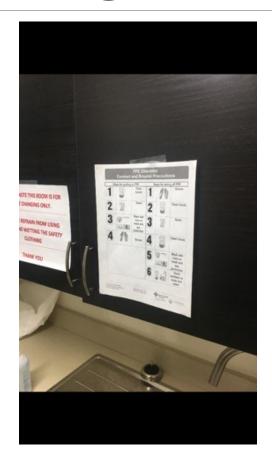


















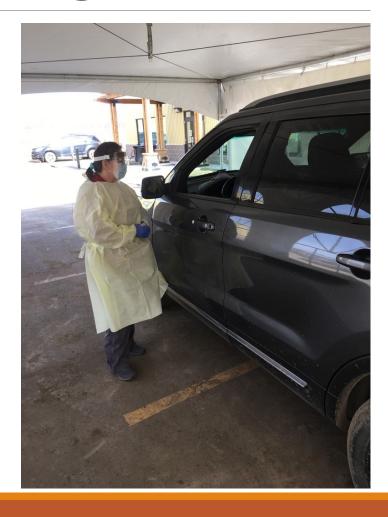
























Acknowledgments

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Christina Cardinal, CDC Nurse Manager

Andrea Warman, TB Program coordinator

Brent Whittal, CDC Nurse

Dr. Nicole Cardinal – Saddle Lake Health Centre

Troy Tilley, NIC – Saddle Lake Health Centre

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Questions?

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