



The community vs. COVID-19

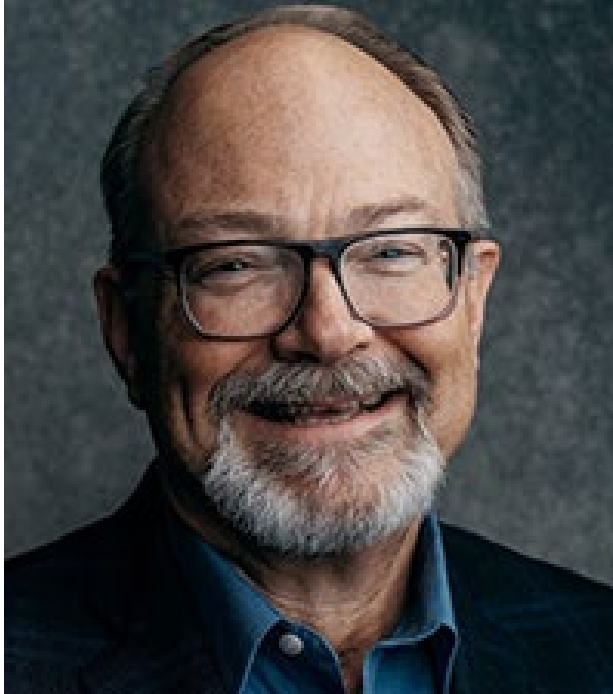


COMMUNITY vs. COVID-19

WEBINAR HOST: DISCLOSURES



Calgary Zone
webinar series
COMMUNITY
vs. COVID-19



Dr. Rick Ward

Family Physician

Crowfoot Village Family Practice

Medical Director, Primary Care,

Alberta Health Services (Calgary Zone)

Disclosures

- Shire
- Pfizer
- Merck
- BI
- AZ
- Janssen
- Takeda
- Servier
- BMS

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AGENDA



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Time	Topic	Speaker
6-6:05 p.m.	Welcome, overview	Dr. Rick Ward
6:05-6:20 p.m.	Mental health moment: Child and adolescent mental health (pharmacology)	Dr. Sam Chang
6:20-6:30 p.m.	Mental health Q&A	Dr. Sam Chang & Dr. Ward
6:30-6:50 p.m.	Infectious disease: Variants of Concern	Dr. John Conly
6:50-7 p.m.	Variants: Pathways, isolation nuances	Dr. Christine Luelo
7-7:15 p.m.	Community clinic perspective	Dr. Rick Ward
7:15-7:45 p.m.	Community vaccination	Dr. Ernst Greyvenstein
7:45-7:55 p.m.	Panel discussion	All
7:55-8 p.m.	Evaluation link, next webinar	Dr. Rick Ward

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Disclosures

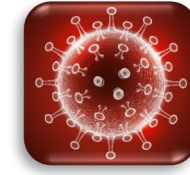
- PCN Physician Lead, Calgary Zone
 - Physician Leads Executive
 - Family physician, South Calgary
- Allergan – honoraria (speaking engagements)

Dr. Ernst Greyvenstein

Family Physician

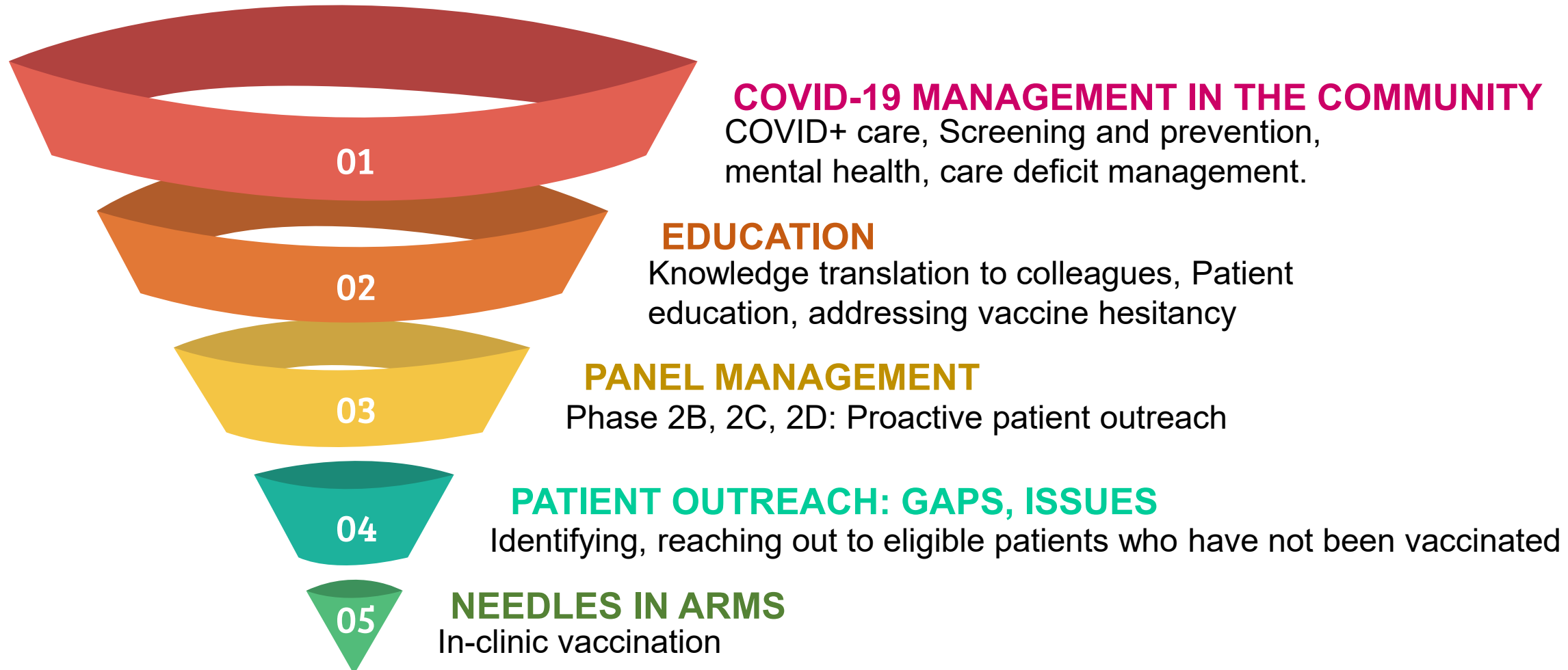
COMMUNITY VACCINATION

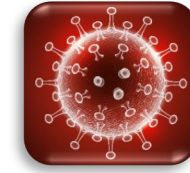
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Every physician, clinic has a role to play





PCN role in vaccination strategy

- Provide continuous knowledge translation to physicians regarding **up-to-date evidence** around vaccines.
- Support patients with **educational material** regarding value of vaccinations, vaccine hesitancy and managing and reporting side effects.
- **Identify at-risk patients** and patient populations in our panels, actively direct them to the appropriate vaccination facility when eligible.
- Support vaccine administration by providing **info/tools** for how clinics can be 'vaccine ready'; identify and fill gaps in information for physicians.
- Advocate for community physicians and their staff to be immunized and coordinate their own vaccinations when eligible (*completed*).

Note: PCNs will continue to help navigate patients to COVID testing, support, assess and refer COVID+ patients to primary care and attach unattached patients

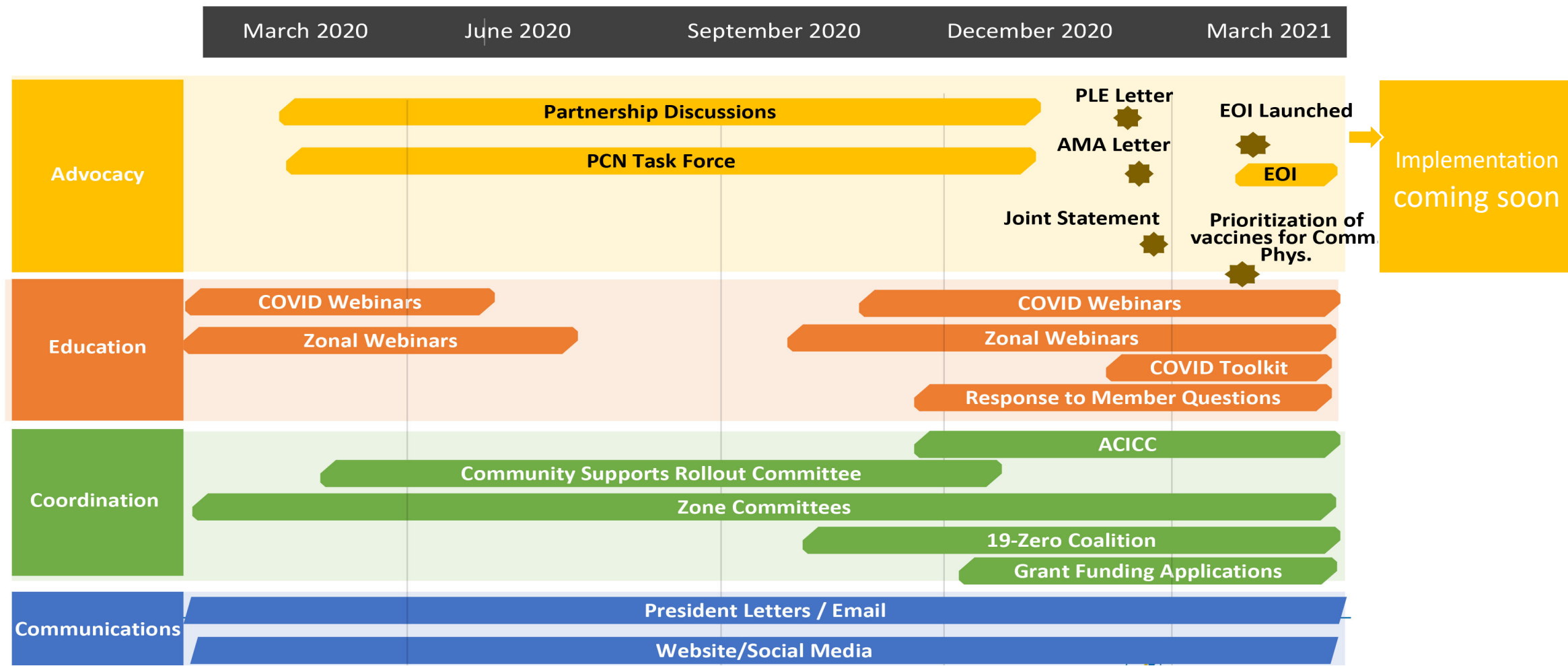
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Physician Involvement in Advancing Covid Care



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Expression of Interest update: Calgary Zone

- 177 EOIs from Calgary Zone clinics, as of April 6
- 53 physicians in 177 submissions also willing to work at Rapid Flow Site, if needed
- Total number of doses possible at 177 sites exceeds 12,000

177

Expressions of Interest

53

Applied to Both Options

53

AHS Rapid Flow EOIs

Location	EOIs
Calgary	45
Other	8
Total	53

177

Clinic / Partner Site EOIs

Zone	Clinics	Daily Doses	Doctors
CALGARY	177	12822	953
EDMONTON	74	6273	440
SOUTH	23	1670	112
CENTRAL	16	1043	82
NORTH	12	539	54
Total	306	22517	1651

Participating PCN	Clinics	Daily Doses
Calgary West Central Primary Care Network	44	3760
Mosaic Primary Care Network	30	3096
Calgary Foothills Primary Care Network	44	2177
South Calgary Primary Care Network	27	1857
No PCN Affiliation	14	686
Highland Primary Care Network	6	545
Calgary Rural Primary Care Network	9	391
Bow Valley Primary Care Network	3	310
Total	177	12822

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Provincial submissions

693

Expressions of Interest

482

AHS Rapid Flow EOIs

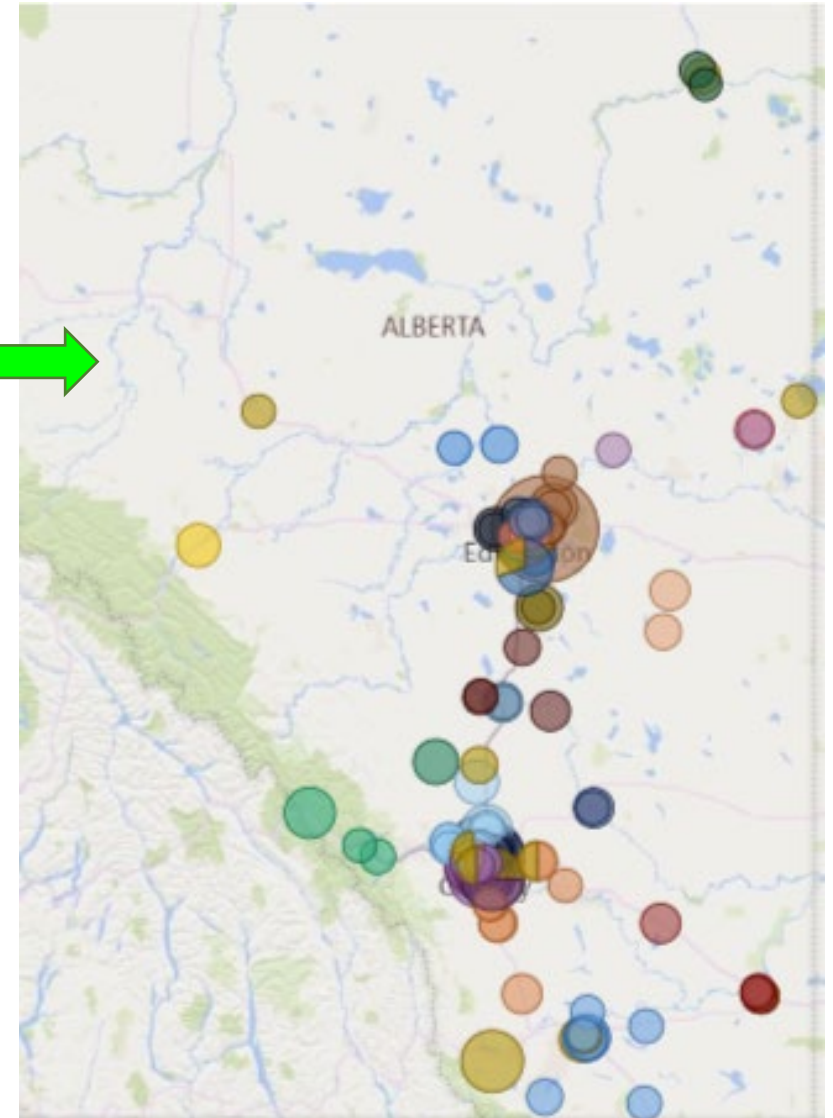
306

Clinic / Partner Site EOIs

95

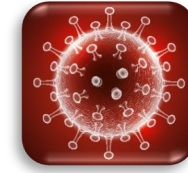
Applied to Both Options

Location	EOIs	Zone	Clinics	Daily Doses	Doctors
Calgary	257	CALGARY	177	12822	953
Edmonton	137	EDMONTON	74	6273	440
Fort McMurray	2	SOUTH	23	1670	112
Grande Prairie	5	CENTRAL	16	1043	82
Lethbridge	12	NORTH	12	539	54
Medicine Hat	5				
Other	54				
Red Deer	10				
Total	482	Total	306	22517	1651



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Current activities

- Project charter and work plan → gather and test materials
- Alberta-specific resources covidtoolkit.ca
- AMA website
- Learnings from Phase 2B patient searches in EMRs
- Weekly meetings with Chief Medical Officer of Health
- Monitoring unknowns



Vaccine in community clinics: Next steps

- Pilot project (proof of concept) due to start mid-April: 10 sites province-wide
- We are anticipating media release
- Testing processes for safe, efficient vaccine distribution
- Evaluate/gather lessons learned in the pilot including patient satisfaction and the utility of an onboarding document
- Proof of concept to conclude end of April (approximately)
- Share lessons learned with COVID-19 vaccine planning groups in each Zone
- Broader rollout tentatively scheduled for May

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PATHWAY UPDATES



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Dr. Christine Luelo
Family Physician

Disclosures

- Family Physician:
McKenzie Family Practice (fee for service)
- Medical Director:
South Calgary Primary Care Network (contract)
- Co-Chair:
Calgary Zone Operations Coordinating Committee (contract)
- College of Physicians and Surgeons of Alberta: Assessment
Program Advisory Committee (honorarium)
- Pharma: Nil

PATHWAY UPDATES

DR. CHRISTINE LUELO



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Variants:

- Close contact definition is the same
- Isolation is different
 - 10+14 – very few exceptions
 - Isolation hotels for case *or* contacts
- Reporting from lab
 - Pos/neg/unresolved
 - Once you are variant positive you are variant positive



PATHWAY UPDATES

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Variants:

URGENT FROM AHS

VARIANT OF CONCERN COVID-19 Test Result:

This message is to notify [REDACTED] is POSITIVE for a variant strain of COVID-19 based on the test taken on Mar 28, 2021. You must isolate immediately for at least 10 days from when you started to have symptoms or were tested. Go to ahs.ca/positiveresult.

Please be advised that the quarantine recommendations for your household contacts may change due to this variant strain of COVID-19. With variant COVID-19 it is not possible to fully isolate from household contacts. Go to ahs.ca/isolation for more information including how to access isolation hotels by calling 211.

If you recall any additional close contacts or possible places you may have been exposed, which you did not previously identify to when speaking with Public Health, please call 1-888-522-1919 to provide the information.

For any health concerns or questions about your result, call your family doctor/health care provider or call Health Link at 811.

For a medical emergency, call 911 or go to your nearest emergency department and tell them that you tested positive for COVID-19.

For COVID-19 related information in languages other than English, please visit alberta.ca/covid-19-translated-resources.aspx

Do Not Reply

Mar 31, 2021 8:10:22 AM

PATHWAY UPDATES

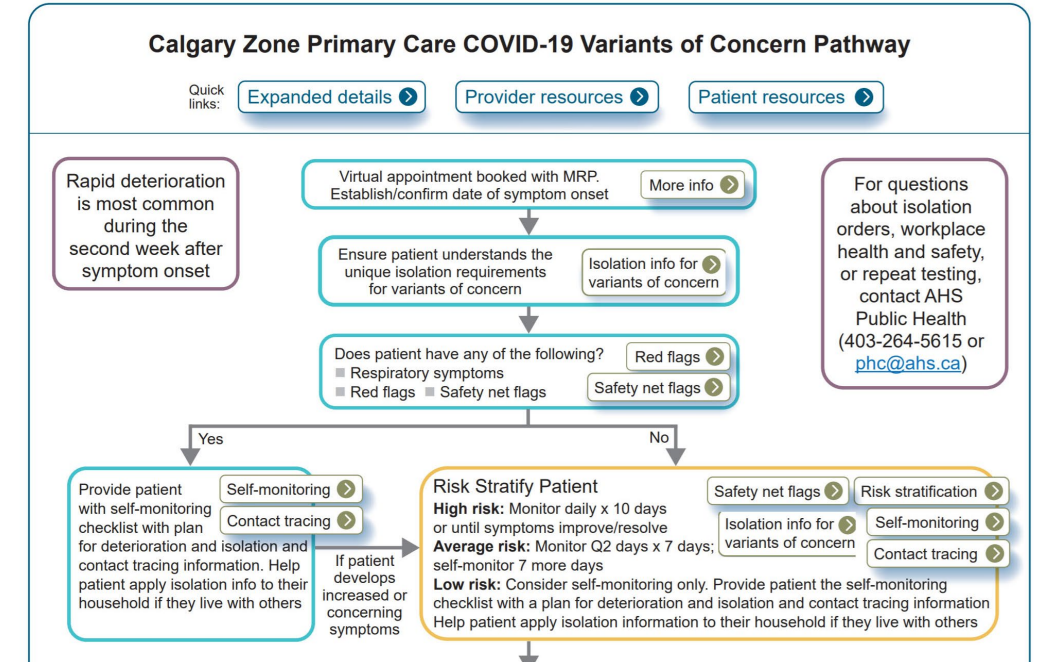
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Variants:

- Extra repeat testing for close contacts
 - Day zero
 - Day 10 (post last close contact)
 - Emergence of symptoms
- AHS Public Health is approximately a week behind on calls for variants
 - Prioritizing HCW, school aged children, congregate care settings
 - Critical for family practice to fill the gap as we did in the fall



Variants pathway:
specialistlink.ca



Pregnancy:

- Really important to clarify who is most responsible provider for acute COVID-19 illness
- **First trimester**
 - Make sure COVID-19 status is communicated at hand off to all future providers
 - Use adult pathway via specialistlink.ca
- **Second and third trimester**
 - Use pregnancy pathway with enhanced red flags
 - Early hand off or consult with expected OB
 - Consider MFM consult
 - Consider additional US for growth in later pregnancy

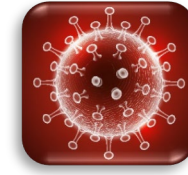
A patient who develops COVID-19 at any stage in her pregnancy may need unique monitoring and surveillance even beyond her period of active infection. For this reason, all care providers should be aware that the patient had COVID-19 during pregnancy.



Pregnancy red flags:

- Severe shortness of breath at rest
- Difficulty breathing
- Pain or pressure in chest
- Cold, clammy or pale mottled skin
- New onset of confusion
- Blue lips or face
- Becoming difficult to rouse
- Coughing up blood
- Reduced urine output
- Return of cough after period of improvement* may signal development of COVID-19 pneumonia
- Return of fever after afebrile period* may signal development of COVID-19 pneumonia





Pregnancy *NEW* Red Flags:

- Orthopnea or paroxysmal nocturnal dyspnea (PND)
- Fever $\geq 38^{\circ}\text{C}$ despite use of acetaminophen
- Weakness limiting activities of daily living (ADLs)
- Obstetrical complaints such as:
 - Regular uterine contractions
 - Ruptured membranes
 - Vaginal bleeding
 - Decreased fetal movement
- Oxygen Saturation $<95\%$ for normal lung function pre pregnancy



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Case 1: Primary care pathway monitoring

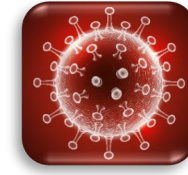
- Adult child (low risk) contracts COVID-19 from personal trainer who tested positive – he was asymptomatic when diagnosed (March 23)
- Lives with 4 adults, 2 children
- All adults test positive (March 24) – young children mildly symptomatic but not tested
- Three adults are high risk: One immunocompromised, one > 65 otherwise healthy, one very high risk (T2DM, obesity, CAD, RF, HTN)
- Pathway surveillance was initiated March 25





Patient #1

- Symptoms include GI, diarrhea, myalgia, weakness and fatigue
- Minimal respiratory symptoms
- Day 7 – ‘feels like a couple of steps backward’
- No respiratory but increased weakness
- Transient low-grade fever in a.m. (temp = 38.0)



Patient #1: Type 2 DM

- Given 'red flags' – community paramedic assessed within 4 hours
- O2 sat 90% at rest, with activity 87%
- Elevated pulse (on beta blocker) but vitals otherwise stable
- Decision to transport to hospital to assess
- Admitted 'COVID-19 pneumonia' – currently on 10 l/min O2



Patient #2: Immunocompromised

- Mild respiratory symptoms initially
- Moved to self monitoring on March 31 (day 8)
- Increased symptoms (day 9) and went back to daily monitoring
- Fever and SOB April 3 (day 11)
- Referred to ER – Dx COVID-19 pneumonia treated as outpatient

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Lessons learned:

- COVID-19 pathway is effective tool for surveillance
- HIGHLY transmissible within household
- High risk is high risk!
- Deterioration in second week of illness – the finish line isn't day 7



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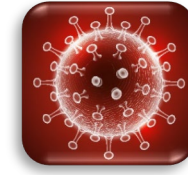
Case 2: Medical clinic spread

- Community specialty clinic which followed precautions
- Four physicians and two staff diagnosed COVID-19 positive, VOC positive (no MOAs)
- Patient received COVID-19 immunization but developed symptoms next day
- Two other adults in household – one swab positive, other presumed positive and didn't want swab
- All had favourable outcomes
- Office shut down for 2 weeks



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Lessons learned

- HIGHLY transmissible within household
- Even with proper PPE and screening, offices are at risk
- Spread likely from patient conference (board room, masked, 6 feet separation)
- Emotional impact of COVID-19



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Q&A DISCUSSION

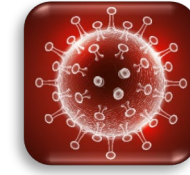


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APRIL 6 WEBINAR



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Thank you for attending!

- Complete the online evaluation form to receive your ticket of attendance:

<https://survey.albertahealthservices.ca/TakeSurvey.aspx?SurveyID=n6L2875KL>



- Next webinar:
Monday, May 3, 6-8 p.m.

Register here: <https://www.eventbrite.ca/e/calgary-zone-mental-health-covid-19-webinar-series-tickets-149609755807>