

Dear Dr. Hinshaw, Health Minister Shandro and Premier Kenney,

I am writing on behalf of Alberta's Emergency physicians to express our grave concerns about the pending abrupt discontinuation of almost all public health measures implemented to mitigate the ongoing COVID-19 pandemic. We strongly believe that these actions will lead to an increased and avoidable burden on Alberta's Emergency Departments.

Emergency physicians across the province are collectively concerned that the recent public messaging on the efficacy of these measures, along with intentions to immediately end them, has led to significant public confusion. This confusion, coupled with the abrupt cessation of even minimal precautions, will exacerbate the Access Block already present in our overflowing EDs. We are extremely worried that in the face of a fourth wave of a highly contagious variant this apparent surrender, via an all or nothing approach to precautions, will have the potential to significantly compromise patient care for all Albertans with acute medical needs.

The past 17 months have been challenging for our society and our healthcare system. With the recent ending of the third wave and widespread availability of vaccines, we understand many Albertans are looking forward to a return to pre-pandemic lifestyles. We empathize that everyone is frustrated with the many challenges this pandemic has brought to bear. We have borne them collectively. Health care providers throughout all facets of the healthcare system have risen to the challenge, but many are fatigued and frustrated as well.

Given that we have made significant progress in controlling the pandemic, we agree that a relaxation of public health restrictions is reasonable. However, COVID-19 remains a serious active threat within our province. The delta variant, with an increased potential for both transmission and severity of disease, is now the dominant strain in Alberta. With 35% of our eligible population either not fully vaccinated/unvaccinated, and many others either ineligible for vaccination or challenged with compromised immune responses, we expect to see an increasing burden of severe acute illness. This increased COVID-19 related illness burden has been repeatedly observed in other regions and countries, and unfortunately has occurred even in those areas with high vaccination rates and significant ongoing public health measures.

Health care providers working on the front lines in the province's EDs are specifically concerned about the implications the proposed policy changes will have for patients presenting for hospital-based care. Our EDs and prehospital services are currently facing significant capacity strain due to increased patient volumes and acuity. In fact, many emergency physicians are worried that ED overcrowding may soon become as dangerous as it was in 2010, when we warned against potential collapse of timely emergency care delivery if immediate action did not happen. Medical and mental health issues which have been inadequately managed during the pandemic now require acute care. Moreover, we expect to see a significant increase in ED volumes for acute respiratory illnesses, along with increased demand within EDs for COVID-19 testing secondary to discontinued physical distancing, relaxed masking protocols, and the closure of dedicated testing centers.

Across the province, emergency medicine leaders have expressed their concern that the proposed provincial COVID-19 plan will lead to escalating Access Block. Our ED capacity is currently strained, and

increasing demand will result in unacceptable wait times, many more patients leaving without being seen, and a significant impairment to timely patient care delivery. Many EDs have been working short staffed throughout the pandemic, and unfortunately staffing shortages and burnout are only continuing to worsen. Many of the province's EDs are currently operating with active care spaces closed or inoperable due to staffing shortages that are not simply due to holiday leave or temporary reasons that will be easy to address.

Abrupt removal of policies that have been working, along with the resumption of school for children under the age of 12 - who are not currently eligible for vaccination - in conjunction with a significant delta variant COVID-19 fourth wave, will inevitably place increased volumes and demand on our already immensely stressed acute care system. At the very time we are dealing with worsening Access Block in most of our hospitals we cannot give up on the test, trace, and isolate measures that have been working

We strongly recommend a thoughtful re-evaluation of the premature discontinuation of COVID-19 public health measures. We are writing to advocate for a measured process that continues to protect timely patient care and appropriate access to emergency medical services across Alberta. Specifically, we endorse a gradual and stepwise approach to relaxing public health measures which include ongoing mandatory isolation of patients with confirmed or suspected COVID-19, contact tracing to minimize community spread, and ongoing operation of testing centers to avoid unnecessary ED visits for the sole purpose of testing. We advise continued close monitoring of ED and prehospital service capacity across Alberta and iterative policy changes to ensure we can continue to deliver high quality acute care to all Albertans.

We have come so far but we are not across the finish line. Albertans will continue to present to the province's EDs, and we will continue to attempt to provide the highest quality care in a timely and appropriate manner, but we will need the help of provincial policy leaders to protect an acute care system that is showing obvious signs of serious strain and impairment.

I anxiously await your reply on this urgent matter that will have serious implications on worsening Access Block in the months to come.

Sincerely,

Dr. Paul Parks

President of the Section of Emergency Medicine, Alberta Medical Association

CC Dr. Paul Boucher, President of the AMA