



The Honourable Jason Kenney  
Premier of Alberta  
307 Legislature Building  
10800 97 Avenue  
Edmonton AB T5K 2B6

June 3, 2021

EZMSA Office  
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Dear Premier Kenney:

**Re: Concerns regarding Alberta's Open for Summer Plan**

Like you and all Albertans, we are looking forward to being able to visit loved ones and get our lives back to a more normal existence. Also, we reconfirm our strong support for the province's vaccine program. At every opportunity we have publicly and strenuously advised Albertans to receive their first and second dose of one of the offered vaccines against COVID-19 at the earliest possible opportunity.

While supporting a safe reopening, we have specific concerns regarding Alberta's "Open for Summer" Plan. We believe that the phases are rushed, as they allow lifting of all restrictions in early July, while the reopening plans for British Columbia and Ontario do not reach this milestone until early September. It is probable that a majority of citizens in those provinces will have been fully vaccinated by then, which will not be the case in Alberta in July. In particular, we believe it is inappropriate to permit large public gatherings mingling Albertans and visitors unless a significant majority of Albertans have been fully immunized.

In a recent press conference, you stated that real world experience from other countries had been used as a model to develop the Alberta reopening plan. You mentioned Israel specifically. In this respect, it is important to point out that as Israel reopened its government did not permit large group events until over 50% of its adult population had received their second doses of vaccine. In addition, individuals have to show their "green pass" confirming full vaccination prior to attending indoor dining in restaurants and bars, gyms, theatres, and concerts.



To date, Canada, including Alberta, has followed the approach of the United Kingdom by using the limited vaccine supply to provide as many citizens as possible with a first dose of vaccine. This has successfully protected many against severe illness and death caused by the original “wild type” of the virus as well as new variants of concern. The United Kingdom is now facing increasing cases of the highly transmissible delta variant (formerly B.1.617.2 variant first discovered in India), which is forcing reassessment and, in some areas, reinstatement of restrictions. This variant is concerning in populations that have mainly received only one dose of vaccine. A recent study from the United Kingdom has shown that the Pfizer and Astra Zeneca vaccines were only 33% effective after one dose against the delta variant but were, respectively, 88% and 60% effective after two doses. At last count, 42 cases of this variant (with 33 of these in the Calgary Zone) have been identified in Alberta through genomic sampling and it is likely that screening for this variant will find many more.

It is probable that 70% of Albertans over 12 years of age will have received their first dose of vaccine by the end of June 2021, but as noted, these individuals may still be at risk of infection with the delta variant. Events such as the Calgary Stampede could pose a significant risk of transmission - less so in the Exhibition Grounds, but with greater risk in the bars, clubs and hotels as well as in crowds. Attendees may then travel home to potentially infect their families and close contacts. In our opinion, it is unsafe to hold a major event such as the Calgary Stampede, which may draw attendees and participants from multiple provinces and countries before at least 70% of eligible Albertans have been fully vaccinated with two doses. Planning such an event with the current unknowns, along with concerns of reduced vaccine protection against highly transmissible variants puts attendees and their contacts at risk. It also increases the risk of a fourth wave of COVID-19 later in the autumn of this year.

Based on current evidence, we urge consideration of the following recommendations:

- 1) Large public events like the Calgary Stampede should be canceled or postponed to the autumn after most Albertans will have been fully immunized.
- 2) Groups at high risk of infection should be prioritized for second doses of vaccine. These should include the elderly, those with complex medical conditions, essential workers exposed to the public and those in high-risk occupations such as healthcare, teaching, meat packing plants, those staying in work camps and in worksites with previously documented COVID-19 outbreaks.
- 3) Mobile vaccination clinics and 24/7 vaccination clinics should be set up in areas with low vaccine rates in partnership with local leaders and communities.
- 4) Consideration should be given to providing further incentives to Albertans to be vaccinated such as time off from work for vaccination and a sick day afterwards if necessary, and lotteries for individuals getting both vaccine doses.
- 5) Alberta should work transparently with other levels of government to evaluate the possibility of developing documents proving individuals have been fully immunized.



- 6) Alberta should support a mandatory requirement that all health care professionals, personal care workers, residents and staff of long-term care facilities be fully vaccinated against COVID-19, with a system that allows provisions for those who cannot receive vaccination for health issues or who object on bona fide religious or conscientious grounds. This reduces the risk of spread to immunocompromised, chronically ill, and other vulnerable patients, including infants.

Like everyone, we sincerely hope that we are at the beginning of the end of this pandemic and not at the end of the beginning. Regardless, it is too early to declare victory over this unique and dangerous pathogen. We need to remain vigilant and cautious.

Sincerely,

The Strategic COVID-19 Pandemic Committee of Edmonton Zone Medical Staff Association:

Dr. Noel Gibney, Co-Chair  
Dr. James Talbot, Co-Chair  
Dr. Shazma Mithani, Member  
Dr. Tehseen Ladha, Member  
Dr. Lynora Saxinger, Member  
Dr. Hernando Leon, Member  
Dr. Ernst Schuster, Member  
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