

From: [redacted]

Sent: September 12, 2024 11:47 AM

To: [redacted]

Cc: Adriana.LaGrange@assembly.ab.ca; Jason.Nixon@assembly.ab.ca; mike.ellis@assembly.ab.ca; SCSS.minister@gov.ab.ca; premier@gov.ab.ca; Health.Minister@gov.ab.ca; PSES.Minister@gov.ab.ca
Subject: Care Concerns – [redacted]

[redacted],




As the decision maker for my mother, I have serious concerns with regards to her care. **She was subjected to unlawful isolation after an illegally administered invasive test. This is the THIRD such illegal test, without informed consent, and contrary to the written instructions for her care.**

Please provide before the end of today (12th September, 2024) **all written documentation that your organization has relied upon to test and isolate my mother.** This includes written documentation and any communications with AHS or any other organization as regards these items. I have been informed by staff at the centre that all of this is being done at the direction of the government and AHS. **However, at a recent Town Hall event on August 17th, 2024, Premier Danielle Smith stated that none of this was still happening and that she would be directing Minister Nixon to look into any such incidents. I have included the Premier, Minister LaGrange and Minister Nixon for their immediate response to this. I am also including retired police officer and Deputy Premier/Minister for Public Safety Mike Ellis as he is aware of similar incidents that are happening in Alberta.**

Unless you can demonstrate otherwise, there is no lawful authority in Alberta to support the actions you have taken in the care home. **The testing performed, without informed consent and against the documented wishes of the resident via their proxy may constitute an assault and a sanctionable event under each respective College/Code of Conduct.**

I am requesting an immediate in person meeting with the head of the Edmonton Good Samaritan organization ultimately responsible for these actions.

[redacted] (POA and Medical Proxy for [redacted])

DROPLET and CONTACT PRECAUTIONS		
CONTINUING CARE		
SINGLE ROOM RECOMMENDED WITH DEDICATED EQUIPMENT		
EVERYONE MUST:		
Clean hands when entering and leaving room		
STAFF MUST:	VISITORS MUST:	RESIDENTS:
 <ul style="list-style-type: none">✓ Wear mask, eye protection, when within 2 metres or 6 feet of resident✓ Wear gown and gloves when providing direct care✓ Discard ALL PPE on leaving room	 <ul style="list-style-type: none">✓ Check with nursing staff before entering room✓ Wear mask, eye protection, when within 2 metres or 6 feet of resident✓ Wear gown and gloves when providing direct care✓ Discard ALL PPE on leaving room	 <p>When residents must leave their room:</p> <ul style="list-style-type: none">✓ Wear clean clothing and procedure mask



From: Health Minister <Health.Minister@gov.ab.ca>
Date: October 2, 2024 at 10:34:46 AM MDT
To: [redacted]
Cc: SCSS Minister <SCSS.Minister@gov.ab.ca>
Subject: Continuing Care Home Protocols

AR redacted]
Dear redacted]:

While waiting for this unacceptable response, this resident **DIED** as a direct result of the **GOVERNMENT POLICY** implemented on August 30th, 2024.

The Government of Alberta is allowing the abuse of the Public Health Act by AHS doctors who have shown dangerous incompetence and Munchausen by Proxy behaviour since 2020.

Thank you for your emails to the Honourable Danielle Smith, Premier of Alberta, and the Honourable Jason Nixon, Minister of Seniors, Community and Social Services, regarding infection prevention and control within continuing care homes. As Minister of Health, **I appreciate the opportunity to respond on behalf of the Government of Alberta.**

I recognize your concern for your mother and appreciate you bringing this issue to our government's attention. **We believe that individuals should be supported in their personal health care decisions, and discussions about the risks and benefits of treatments are part of a health care provider's due diligence when obtaining informed consent.** I encourage you to continue to discuss your concerns with the administration of Gerald Zetter, as they are in the best position to address issues at the site. **If your concerns have not been sufficiently addressed, then you may also wish to contact the Alberta Health Services (ASH) Patient Relations** at 1-855-550-2555 or [online](#).

Outbreaks in continuing care homes are managed by the AHS Zone Medical Officer of Health. While AHS and continuing care homes do have autonomy in setting workplace policies, **communicable outbreak restrictions in congregate settings (including COVID-19), are slightly different.** In those situations, **the Public Health Act applies, which gives zone medical officers authority during outbreaks to impose restrictions.** The **zone medical officer works in collaboration with site administration to determine appropriate strategies and protocols** in accordance with [standard operating policies and procedures](#) in a way that minimizes the impact on residents. For example, **site administrators are encouraged to manage outbreaks on a unit or floor basis** to limit disruptions to other residents.

Care home inspections are conducted by Alberta Health under the [Continuing Care Act](#) and associated regulations, which outline clear requirements to ensure compliance with the [Continuing Care Health Service Standards](#). These standards guide continuing care staff in providing comprehensive, individualized care, based on the assessed needs of each resident. Alberta Health also inspects all type A continuing care homes, including Gerald Zetter Care Centre, to determine compliance with the relevant [accommodation standards](#). This ensures accommodations provide meals, building maintenance, security, and housekeeping, in a way that promotes the safety, security, and quality of life for residents.

Inspection results are available [online](#). Alberta Health follows up on any deficiencies noted at a continuing care home and conducts unannounced visits to ensure the home takes corrective actions and maintains full compliance. Individuals with concerns about continuing care home inspections may contact the Continuing Care Licensing Office at 1-888-357-9339 (option 3), or cclo@gov.ab.ca.

Thank you again for writing, and **please accept my best wishes for your mother's good health.**

Sincerely,
Adriana LaGrange
Minister of Health

cc: **Honourable Jason Nixon, Minister of Seniors, Community and Social Services**

From: David Dickson

Sent: September 25, 2024 12:44 PM

To: Shane Getson <Shane.Getson@assembly.ab.ca>; Eric.bouchard@assembly.ab.ca

Cc: eric bouchard [redacted]

Subject: FW: ILLEGAL LOCKDOWNS CONTINUE IN CARE HOMES - URGENT - ADDITIONAL DETAILS - FOURTH REQUEST

Importance: High

Sensitivity: Confidential

FOR URGENT ACTION.

OVER 1 AVOIDABLE DEATH AN HOUR IN ALBERTA.

Meeting with UCP Chief Whip Shane Getson - January 30, 2024.

Me:

"Do you know how many more people are going to die between now and May?"

Chief Whip:

"Probably about 4,000"

To date, that number is now over 7,600 avoidable deaths that could have been prevented.

This Care Home resident is about to become another.

David T. Dickson

From: David Dickson

Sent: September 25, 2024 12:34 PM

To: Jason.Nixon@assembly.ab.ca; SCSS.minister@gov.ab.ca; mike.ellis@assembly.ab.ca; PSES Minister <PSES.Minister@gov.ab.ca>; Mickey.Amery@assembly.ab.ca; Ministry of Justice <ministryofjustice@gov.ab.ca>; Adriana.LaGrange@assembly.ab.ca; Health Minister <Health.Minister@gov.ab.ca>; Office of the Premier <Premier@gov.ab.ca>; Danielle.Smith@assembly.ab.ca

Cc: Karen Dickson <karen.dickson@dksdata.com>; mike.ellis@assembly.ab.ca; Andrew Boitchenko <Andrew.Boitchenko@assembly.ab.ca>; Sharif Haji <Sharif.haji@assembly.ab.ca>

Subject: RE: ILLEGAL LOCKDOWNS CONTINUE IN CARE HOMES - URGENT - ADDITIONAL DETAILS - FOURTH REQUEST

Importance: High

Sensitivity: Confidential

URGENT FOURTH REQUEST FOR A MEETING AND RESPONSE.

I am sending this urgent update with the approval of the family with a vulnerable resident in an Edmonton, Alberta Care Home who we are currently helping.

A summary – Care Homes NOW in Alberta (September 25th, 2024).

- Illegal COVID testing (3 times using Rapid Antigen Test (RAT)) without consent (against documented family wishes) – these are assaults on a vulnerable person who has no ability to consent (family has Power of Attorney).
- This unlawful testing led to illegal isolation of this resident – Unlawful Imprisonment under the Alberta Government 'COVID outbreak' protocols is a crime.
- This led to further neglect and a failure to properly chart or respond to a significant and dangerous change in blood sugar (ongoing).
- This led to deteriorating health, impacting resident and the family.

I have received no response to any of these communications and all involved have done everything to stop this from being addressed by the appropriate law enforcement groups.

They cannot respond as they are all complicit along with many in the freedom movement.

<https://dksdata.com/AlbertaDead#COMMUNICATIONS>

- This also led to an illegal extension of the illegal isolation of ALL residents on the unit for an additional 10-15 days (as per the Alberta government documentation below).
- Blood tests were ordered for this resident to be taken “STAT” (immediately – same day) on Monday September 23rd, 2024. That didn’t happen. The family was told it had been done on the evening of September 24th, 2024 (already a day late) and they would need to wait until the following day for the results. The staff obviously never checked anything as the lab (Alberta Precision Labs (APL) – part of what the UCP gave to AHS) called to say they are understaffed so could come tomorrow (September 25th, 2024). A CRITICAL STAT blood order delayed THREE days because APL doesn’t have the staff!
- Resident’s blood sugar explodes to critical levels each night as staff give her sugar-based drinks (against what is charted) without informing anyone (the charge nurse was caught Tuesday night trying to give an apple based thickened sugary drink).
- Resident left untreated without a bowel movement for 7 days (now impacted and causing toxic shock).
- Resident was turned by staff overnight and in the process they blocked the clysis (sub q saline bag) tube leaving the resident dehydrated. The resident stopped urinating which increased blood sugar and toxic shock.
- Family demanded (from our advice) that the community paramedic was called immediately to address the failings this morning (Wednesday 25th, 2024). Blood work, IV and other treatments (new antibiotics) have now been started. This is potentially too late to save this elderly Albertan. This could have been prevented if Ministers had not ignored previous communications.
- All of this was done under the orders and requirements of the Alberta Government, enacted on August 30th, 2024.
- This despite Premier Smith saying none of this was happening in the Townhall on August 17th, 2024. <https://x.com/dksdata/status/1836810248192946648>
- Minister Nixon was to follow up on this, at the direction of Premier Smith yet none of the Ministers (Nixon, LaGrange, Ellis or Amery) or Premier Smith have responded to multiple communications from myself or this family.
- A whole host of wilful criminal acts, Code of Conduct failures and malfeasance in public office.

This is NOT an isolated incident. This is something happening in every care home on a regular basis now, made worse with the new GOVERNMENT OF ALBERTA protocols as of August 30th, 2024.

ALBERTA GOVERNMENT DIRECTION – AUGUST 30th, 2024

David

David T. Dickson

This lady died on the UCP government’s watch at the hands of their proxies – AHS – at the government’s direction.

This is not an isolated incident.

This is happening everyday in Alberta.

These are crimes and I have all the evidence to prosecute.

When will someone stand up and
DO THEIR JOB?

<https://www.albertahealthservices.ca/assets/info/hp/cdc/if-hp-cdc-ob-guide-for-outbreak-prevention-and-control-in-continuing-care-homes.pdf>

Appendix C: Case and outbreak definitions

Case and outbreak definitions are set by Alberta Health and are used to open and report outbreaks.

COVID-19

Case Definition	<p>A person with the virus (SARS-CoV-2) that causes COVID-19 by:</p> <ul style="list-style-type: none"> • A positive result on a molecular test [that is Nucleic acid amplification test (NAATs) such as polymerase chain reaction (PCR)], loop-mediated isothermal amplification (LAMP) or rapid molecular test] that is Health Canada approved or approved by the lab accreditation body of the jurisdiction in which the test was performed. <p>OR</p> <ul style="list-style-type: none"> • A positive result on a Health Canada approved rapid/point-of-care (POC) antigen test in a person with clinical illness¹⁰ <p>OR</p> <ul style="list-style-type: none"> • Two positive results on a Health Canada approved rapid/POC antigen test completed not less than 24 hours of each other in an asymptomatic person.
Outbreak Definition	Two or more confirmed COVID-19 cases in residents within a seven-day period, with a common epidemiological link ¹¹ .
Outbreak Duration¹²	14 days (two incubation periods). The outbreak ends on the 15 th day following symptom onset of the last resident case.

¹⁰ Clinical illness - any one or more of the following: new or worsening cough, shortness of breath (SOB), sore throat, loss or altered sense of taste/smell, runny nose/nasal congestion, fever/chills, fatigue (significant and unusual), muscle aches/joint pain, headache, nausea/diarrhea.

¹¹ Epidemiological link means the cases need to have been in the setting (same facility/same unit) during their incubation period or communicable period.

¹² Day zero is the first day of symptoms Day one is the first full day after symptoms develop.
If the person tested is asymptomatic, use date of specimen collection as day zero.