



Date: July 22, 2020 1600-1630 hrs.

Moderators: Leanne McArthur, Kristine Fraser

**Present:** Leanne McArthur, Kristine Fraser, Gwen Peterek, Kerri Hannon, Jocelyn Patton-Audette, Andrea McPherson, Henry Roukema, Tihana Antic (MOH), Wendy Edwards, Umeshaa Pararajasingham (MOH), Caroline Proctor (MOH), Ian Johnston,

# Item #1: Welcome/Regional Updates, COVID-19 Cases (Leanne McArthur) Discussion: COVID-19 Case Update

• London: 647 cases, 578 resolved, 57 deaths, 1 new case

• Windsor: 2,044 cases, 1,314 resolved, 69 deaths

• Lambton: 292 cases, 261 resolved, 25 deaths

• Chatham-Kent: 197 cases, 163 resolved, 1 death

HPHA: 61 cases, 54 resolved, 5 deaths

Owen Sound: 115 cases, 115 resolved, 0 deaths,

• St. Thomas: 93 cases, 80 resolved, 5 deaths

• ON: 37,942 cases, 33,605 resolved, 2,753 deaths, 120 hospitalized, 36 ICU, 23 vented

• Detroit: 12,301 cases, 1,471 deaths

Michigan: 74,725 cases, 6,135 deaths,

- Continue to see curve flattening because of great work everyone is doing on front lines
- 3 newborns in Texas, Vancouver & Paris who've tested + for COVID-19 <24H postdelivery - placental swabs done identified proteins that allow the virus to proliferate – researchers continue to gather evidence re: vertical transmission, but currently no changes to recommendations regarding this
- Will be interesting to watch as this research continues to evolve

**Action Items: NONE** 

Item #2: LHSC Updates

**Henry Roukema:** Things have been quiet in terms of COVID-19 - have not seen much with

neonatal perspective

**Action Items: NONE** 





### Item #3: MNCYN Updates (Kristine Fraser)

- 1. CTV News Article: Children over age of 10 spread COVID-19 as much as adults, study finds (July 19, 2020) <a href="https://www.ctvnews.ca/health/coronavirus/children-over-age-10-spread-covid-19-as-much-as-adults-study-finds-1.5030231">https://www.ctvnews.ca/health/coronavirus/children-over-age-10-spread-covid-19-as-much-as-adults-study-finds-1.5030231</a>
  - New study released Thursday by the Korea Centers for Disease Control and Prevention, found children up to age 10 spread COVID-19 much less than adults do, however, <u>children aged 10 to 19 were just as likely as adults</u> to transmit the virus to someone else, contradicting the perception that COVID-19 affects all young people less than it does the elderly
  - Children under age 10 were roughly half as likely as adults to spread the virus to others, which is consistent with several other <u>studies from Europe</u> and <u>Asia that have</u> <u>suggested</u> that young children are less likely to get infected.
  - Researchers acknowledged that the first person in a household to develop symptoms is not necessarily the first to have been infected. They also noted that the study may have underestimated the number of children who transmitted the virus within their households as kids are less likely than adults to show symptoms. It is still unclear how asymptomatic children spread the virus.
- 2. TREKK is currently working with Dr. Kate Maki and Dr. Garth Meckler at BC Children's Hospital around a potential TREKK resource related to Paediatric Pandemic Planning there is a <u>short survey</u> to help determine the current environment and needs/focus for paediatric pandemic planning in emergency care across Canada. I will be sending this survey out to region as well so we encourage you to share this email and survey link within your own institutions and networks.

Action Items: Post CTV News article onto MNCYN website (Anita); Kristine will send out survey from TREKK to the region and post on MNYCN website (Anita)

## Item #3: Regional Q&A, Open Discussion Leanne McArthur:

- Interesting to see how the evidence has evolved related to children & to watch as these children are followed through their growth & development post-COVID-19
- Some of the work we will continue to do, which is quite relevant to pandemic challenges in terms of anxieties and stressors, include moving forward with our work re: Intimate Partner Violence (IPV) with from Dr. Harriet McMillan (VIGA Project)
- Online educational modules re: IPV will help clinicians to build assessment skills & provide options for treatment





- Thank you to Umeshaa (MOH) for additional resources that consider counselling etc. for these individuals – includes information re: child maltreatment & children exposed to violence in the home
- Once we have a cohort of people who have finished online modules, we will be looking to offer a workshop for the region to move theoretical work into practice

#### Leanne:

- Tagging onto that, there will be a presentation from CAS as a caveat to stopping the birth alerts & how we can work together as a fully integrated system of care to ensure that work is done to ensure that families are successful
- **Dr. Wendy Edwards (Chatham)**: I am really concerned about this. I have read their reasoning for stopping the birth alerts, but it doesn't really explain why they did it, other than to protect Indigenous women & children. By not knowing who is coming into our departments, I fear it puts families and staff at risk anyone that has issues, drug problems, etc. this not only put targets on families, it also puts staff at risk I am wondering if we as a paeds. group should be objecting to this?
- Leanne: Umeshaa P. / Caroline P. (MOH), do you have any further information on this?
  - Caroline: Do not have much information came from the Ministry of Children Services
  - I would like to hear your feedback as to why you think we should consider for this – I will take feedback back – Happy to listen and to convey feedback
- Wendy: When you read the paragraph, it sounds like we are being racially biased against
  Indigenous mothers but we are very concerned as there are also people that may have
  drug use issues that we cannot recognize and they might be going home in 24 hr. with
  their babies. If OBS were writing down a lot of social info on antenatal sheets, that
  would be helpful, but they aren't often doing this and the child can't talk to us about
  this.
- Umeshaa P.: The intent is to find other ways to have conversation to add more context to the issue, not to do away with the communication and relationship building.
- Leanne: It will be important to work as an integrated system of care. Glad to hear Dr. Edwards, that your team in Chatham will be exploring this further
- Leanne: CAS in London will be doing a presentation in September and I have asked if our region can participate I have received approval for that (will send out in email)
- Other piece in keeping with this work is a re-launch of the Period of Purple Crying to try to get resources in a timely manner to affected families





- We have noticed that the incidence of shaken baby syndrome has increased. We look to be doing a launch again in October or November, working with Public Health on campaign
- All this work is in keeping with the added stressors related to COVID-19

**Wendy Edwards**: I have a question about the program from Children's Hospital re: problem solving that Craig Campbell sent out.

- **Leanne:** Basically, it's a resource if there is a dispute between separated parents who are co-parenting. It's about coming to an amicable decision as to the care of the child. A tool to support families towards a mediation so that discussion can occur toward a successful outcome for the family to reduce the animosity and to support child care.
- Can get more context from Dr. C. Campbell and we can circulate more information out
- **Wendy:** It talks about the London Family Court Clinic will be responsible for initial screening does the family refer themselves?
- Leanne: I don't know, but I will get further information and let you know
- Wendy: Craig sent an email with some information about a website as well.

**Leanne McArthur**: Are we are collecting data as to the number of children accessing mental health services re: social isolation – what does this look like?

- I have been thinking about how children have not been at school and not able to see friends how this may be an increase in mental health issues, but it's only my hypothesis. I don't know if anyone is collecting this data and if so, how do we get access to it?
- Difficult to support these children through this pandemic
- **Kerri Hannon (Stratford):** I think this a good question We had a 14-year-old on a Form 1, and waiting over 24H to get a bed in London. We have trouble getting access to resources
- **Leanne**: My approach will be to reach out to both medical and nursing leadership in the tertiary centre to see if they have data and find someone who can speak to our group about this & what is available.

Action Items: Leanne McArthur will follow-up with Craig Campbell re: problem solving tool Leanne: Will reach out to Children's Hospital medical & nursing leadership re: mental health resources for children

Adjourned: 4:26 PM