



MNCYN & LHSC COVID-19  
Weekly Paediatric Regional  
Teleconference Update  
Minutes



**Date: July 8, 2020**  
**1600-1630 hrs.**

**Moderators:** Leanne McArthur, Kristine Fraser

**Present:** Leanne McArthur, Kristine Fraser, Leanne Paton, Deb Wiseman, Janice Tijssen, Tihana Antic (MOH), Ian Johnston, Wendy Edwards, Kelly Barzsa, Umshemma P.

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

**Discussion: COVID-19 Case Update**

- London: 631 cases, 2 new, 546 resolved, 57 deaths
- Windsor: 1,725 cases, 1,207 resolved, 68 deaths
- Lambton: 286 cases, 259 resolved, 25 deaths
- Chatham-Kent: 162 cases, 156 resolved, 2 death
- Sarnia: 270 cases, 233 resolved, 25 deaths
- HPHA: 58 cases, 52 resolved, 5 deaths
- Owen Sound: 114 cases, 112 resolved, 0 deaths, 5 days since last case
- St. Thomas: 86 cases, 78 resolved, 5 deaths
- ON: 36,178 cases, 31,805 resolved, 2,700 deaths, 123 hospitalized, 35 ICU, 26 vented
- Detroit: 23,459 cases, 2,743 deaths (Wayne county)
- Michigan: 74,011 cases, 6,256 deaths, 9% case mortality rate
- Continue to see cases decline, great news, need to stay vigilant
- There is not a lot of significant new information from paedics realm
- **Paediatric COVID-19 Data:** Public Health Ontario (PHO) has some data graphs that sort COVID-19 positive cases by age on their website based on iPHIS data. You can now see the number of cases by 0-9Y and 10-19Y ages groups sorted by public health units using their Ontario COVID-19 Data Tool. This may be of interest to our pediatricians as we have previously lacked paediatric specific data. <https://www.publichealthontario.ca/en/data-and-analysis/infectious-disease/covid-19-data-surveillance/covid-19-data-tool>
- Do continue to see children with COVID cases - I did report out on Monday's perinatal call there are a sign volume of children 0-19Y (1,773)
- Recent news article on CTV news regarding micro-droplets & whether or not there is concern related to the virus being airborne
- WHO states there is not enough evidence to be concerned with airborne perspective, but a volume of scientists saying that microdroplets can propel out 4M and can stay in air for short period of time, but at present, no further recommendations from WHO at this time, just interesting as research continues as we learn more how to protect ourselves



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**Action Items: CTV Article posted on the MNCYN website**

**Item #2: LHSC Updates**

**Deborah Wiseman:** I will forward a link Jackie with respect to an article from Ottawa Star on the importance of returning kids to school

- Otherwise, we don't have a lot of changes at LHSC and we are under the same directives at this time – OR times remain the level, as does out-patient ambulatory - not a lot of new in LHSC at Children's Hospital

**Janice Tijssen:** Nothing to report

**Action Items: Deborah Wiseman will forward article and MNCYN will post on website**

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

**1. LHSC Visitors Policy Updates**

- Last week LHSC went live with an electronic form which now captures some of the exceptions to the visitor policy, following the ministry guidelines that were sent out
- Slight adjustment – allows certain additional people to have visitor: (i.e.) antenatal pt who has been there for >1 week, now can have 1 designated person visit 1 time per week
- This is a welcome change as these patients haven't been able to have visitors up until now
- Also people undergoing major surgeries with expected length of stay >3 days, can have a visitor before or after surgical procedures
- This has helped vulnerable and isolated populations, something physicians have been advocating for - if there are patients the MRP or staff feel should have a visitor, there are some case by case exceptions at unit level with leadership team
- LHSC went live last week allowing 2 parents to visit as well, working really well and relieves a lot of stress, nice step forward
- Neonatal-Paediatric Transport Team: Will bring a visitor sign-in form for parents to sign before they arrive at LHSC as the screeners are now doing this electronically
- The TT will fax back to either the PCCU or NICU, it will be entered electronically, so if the parents show up separately from the TT, the screeners will already have record of it – went live on Monday with this

**Action Items: NONE**



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**Item #3: Regional Q&A, Open Discussion**

**Deborah Wiseman:** I have a question for our regional partners about vendors and access to hospitals. We are looking at the possibility and feasibility of opening up in 3 groups - urgent/emergent vendors being one (i.e.) ortho vendors needed for surgeries for example while another group would be external partners like media (non-essential). Some services such as our lab services require calibration every 6 months, but we want to keep with ministry regulations too. What are other sites doing?

**Wendy Edwards (CKHA):** I really can't answer these specifics as I am not involved in this specifically, but I know our hospital is looking at this and there is a med-surg group, other group and patient flow group

**Leanne:** We can reach out to the region specifically asking these questions and get some responses on this and bring back to LHSC leadership team.

No other comments or questions

**Action Items: NONE**

**Adjourned: 4:15 PM**