

MNCYN Regional Perinatal & Paediatric COVID-19 Update June 23, 2021

1500-1600 WebEx

Moderator: Leanne McArthur (MNCYN) (21 attendees)

Present: Gwen Peterek (MNCYN), Kristine Fraser (MNCYN), Colleen Ford (Owen Sound), Kerri Hannon (Stratford), Leigh McKenzie (Strathroy), Lynanne Mason (LHSC), Marie Greer-King (Goderich), Penny Lipcsik (St. Thomas), Tihana Antic (MOH), Mary Rae (Hanover), Alison Stevenson (LHSC), Dr. Henry Roukema (LHSC-NICU), Jackie Mitchell (St. Thomas), Cailin McMeekin (Owen Sound), Karina Teterycz (LHSC), Alex Tilstra (Woodstock), Keescha Wherry (Woodstock), Leanne Paton (Woodstock), Anita Bunnie (MNCYN), Sheila Johnston.

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

Welcome to everyone attending today. Things are slowly dissipating with volumes but work is ongoing as we approach phase II, so there may be needs that take priority. We will focus on the new cases and new deaths that have occurred in our region since our last meeting (May 26). The full list is available in the chart below.

| LOCATION | Total Cases | RECOVERED | DEATHS | OTHER STATS | Differences Since |
|--------------|--------------|--------------|--------------|----------------------|---------------------|
| | Jun 23, 2021 | Jun 23, 2021 | Jun 23, 2021 | Jun 23, 2021 | Last Update Meeting |
| | | | | | May 26, 2021 |
| LONDON- | 12,519 | 12,273 | 224 | New Cases in 24H: 10 | 443 New Cases |
| MIDDLESEX | | | | | 7 New Deaths |
| WINDSOR- | 16,790 | 16,302 | 434 | | 354 New Cases |
| ESSEX | | | | | 8 New Deaths |
| CHATHAM- | 1,877 | 1,856 | 17 | | 27 New Cases |
| KENT | | | | | 2 New Deaths |
| ST. THOMAS- | 3,867 | 3,752 | 83 | | 116 New Cases |
| Elgin-Oxford | | | | | 3 New Deaths |
| LAMBTON | 3,571 | 3,478 | 62 | | 109 New Cases |
| | | | | | 2 New Deaths |
| HURON- | 1,883 | 1,815 | 57 | | 107 New Cases |
| PERTH | | | | | 0 New Deaths |
| GREY-BRUCE | 1,435 | 1,387 | 7 | As @June 22/21 | 99 New Cases |
| | | | | | 0 New Deaths |
| MICHIGAN | 886,118 | | 19,031 | | 7,467 New Cases |
| | | | | | 631 New Deaths |
| *Detroit | 51,426 | | 2,270 | As @Jun 22/21 | 682 New Cases |
| | | | | | 87 New Deaths |
| ONTARIO | 543,019 | 530,894 | 9,093 | 295 in hospital | 16,974 New Cases |
| Last updated | | | | 305 ICU | 415 New Deaths |
| Jun 23, 2021 | | | | 190 Vent | |



Discussion: Update of Current COVID-19 Cases within the Region

- The numbers still feel big, because any death is too many, but there are certainly significant decreases in the numbers of deaths overall. The number of new cases for each site, compared to last report, are down approximately 50% and the same for new deaths, with the exception of a few sites that had no new deaths at all, those being Huron-Perth and Grey-Bruce. Ontario has a little more than double the number of new cases compared to Michigan in the past month, however, Ontario had approximately 1/3 fewer deaths. Things are moving forward in a positive direction.
- With respect to these calls, we will put this forum on a bit of a hiatus moving forward. If
 we need to reconnect, we will certainly do so. There is a need to focus on revamping and
 we all need to take a break and rejuvenate and I hope that you are all able to take some
 time this summer to refresh.
- PCMCH is working on finalizing the new guidelines and these will be shared when they become available.

Action Item:

Distribute PCMCH guidelines when available.

Item #2: LHSC Women's Care & Perinatal Updates

MBCU (Karina Teterycz) – reported no updates for MBCU NICU (Dr. Henry Roukema) – also reported no new Covid-related updates

Item #3: MNCYN Perinatal Updates (Gwen Peterek): BORN Updates:

- BORN has recently released preliminary Data regarding pregnancy and COVID-19
- Posted on the <u>BORN website</u> under a section entitled "COVID-19: Numbers to Know"
- Will be adding updates on a monthly basis so you can see the cumulative totals for each indicator.

| COVID-19 and Pregnancy: Numbers to Know | | | | |
|---|----------------------|--|--|--|
| Indicator: Time Frame: March 1 2020 - April 30, 2021 | to April 30, 2021 | | | |
| Number of pregnant individuals in Ontario with COVID-19 | 1642 | | | |
| Number of pregnant individuals in Ontario with COVID-19 that had a COVID-19 related hospitalization | 90 | | | |
| Number of pregnant individuals in Ontario with COVID-19 that had a COVID-19 related admission to an intensive care unit (ICU) | 17 | | | |
| Number of pregnant individuals with COVID-19 that had a live birth | 817 | | | |



| Percentage of live births to pregnant individuals with COVID-19 who were born preterm (before 37 weeks of gestation) | 11.9 |
|--|------|
| Percentage of newborns (born to pregnant individuals with COVID-19) who were admitted to a neonatal intensive care unit (NICU) | 17.1 |

PCMCH Webinar Series: Let's Talk About COVID-19 and Pregnancy Thursday, June 24, 2021 12:00 – 1:00 p.m.

- Intended for people who are planning or are currently pregnant
- Will answer questions and concerns re:
 - o the implications of a possible COVID-19 infection mother and baby
 - o the safety of COVID-19 vaccines
 - what to expect over the course of the pregnancy
- Registration is required on the PCMCH website

PCMCH recently updated its Infographic re: Vaccines for Pregnant and Breastfeeding People

Version 3 now posted on the PCMCH website and on the MNCYN website under Vaccine Information tab

This Infographic presents easy to understand information regarding

- Option for taking the vaccine
- Benefits / Risks
- Side Effects
- Expert Opinion
- Steps in Making a Decision
- Vaccine Information for Breastfeeding Women
- What if get pregnant after getting vaccine?
- What if you are planning a pregnancy?

National Advisory Committee on Immunization Advisory Committee (NACI) Statement (ACS) on Immunization: Recommendations on the use of COVID-19 Vaccines

NACI: Recommendations on the use of COVID-19 vaccines 06.17.2021 (Website)

- This document is updated as COVID-19 vaccines are authorized and become available for use in Canada, as evidence on these vaccines and COVID-19 evolves, and as recommendations from NACI evolve based on this evidence.
- It provides a table summarizing the updated information since the publication of the last version of the document on May 28, 2021.
- Posted on the MNCYN COVID-19 webpage



Summary of National Advisory Committee on Immunization statement (June 17, 2021) NACI: Summary of updated vaccine statement of June 17, 2021

- Provides a summary of the updated recommendations from the National Advisory Committee on Immunization (NACI) on first and second doses of COVID-19 vaccines authorized for use in Canada based on current scientific evidence and NACI expert opinion.
- For first doses, NACI recommends that:
 - An mRNA vaccine (Pfizer-BioNTech, Moderna) is preferred to start a vaccine series, unless there is a contraindication
 - A viral vector vaccine (AstraZeneca, Janssen) may be offered to start a vaccine series when an mRNA vaccine is inaccessible or contraindicated
- For second doses, NACI recommends that:
 - o Individuals who received a first dose of an mRNA vaccine (Pfizer-BioNTech, Moderna) should be offered the same mRNA product for their second dose. If this is not readily available, or the product used for the first dose is unknown, another mRNA vaccine is considered interchangeable and should be used to complete the series.
 - An mRNA vaccine is now preferred as the second dose for individuals who received a
 first dose of the AstraZeneca/COVISHIELD vaccine, based on emerging evidence of a
 potentially better immune response from this mixed vaccine schedule and to mitigate
 the potential risk of VITT associated with viral vector vaccines.
 - People who received two doses of AstraZeneca/COVISHIELD vaccine are assured that the vaccine provides good protection against infection and very good protection against severe disease and hospitalization.
- Posted on the MNCYN COVID-19 webpage.

<u>SOGC: Frequently Asked Questions for Health Care Providers - COVID-19 Vaccination in Pregnancy 27.05.2021 (PDF)</u>

Posted under MNCYN COVID Vaccination Tab

Item #4: Regional Perinatal Q & A and Open Discussion

 Colleen Ford (Owen Sound) reported that they had their first Covid-positive delivery last week. The patient had been a high-risk contact, so was known prior to delivery. Baby did require resuscitation and CPAP overnight. A plan was developed last March and this was the first time using it in real time. There were some learnings for the team, but overall everything went very well.

In response to a follow-up question from Dr. Henry Roukema as to whether the mom had been immunized, Colleen noted that the individual had a high risk lifestyle and had not been vaccinated, nor had any of her contacts. For this reason, there were a number of concerns that baby is going home to her care, so a lot of work was done with public health and the Family doctor in preparation for discharge and follow up in the community. Swabbing of the baby is to be done at 24 and 48 hours and Public Health advised at 10 days. Henry noted that Public Health will not do swabbing unless baby is discharged. Colleen further noted that the mom resides in a motel and Public Health has good connections to allow the swabbing to be done there. Colleen praised Public Health involvement with this family. Leanne McArthur commented that it is always helpful to hear about other's journeys.



- Alex Tilstra (Woodstock) reported that they have have two Covid-positive moms in the last couple of weeks and another one who was positive earlier in the year. Everything went well with the protocols that had been put in place. Before this, their last covid-positive patient was in December.
- Kerri Hannon (Stratford) reported that they had a positive 5-year-old patient from an Old
 Order Mennonite family where the parents had been vaccinated. It was heartening that this
 particular community was embracing vaccination. The child presented with acute appendicitis
 and because he was febrile he was swabbed and found to be positive for Covid-19. He is being
 followed in the community.

Action Item:

Item #5: Children's Hospital Updates (Lynanne Mason)

Lynanne reported that at Children's Hospital, we are seeing an increase in occupancy, though not Covid related. There are fewer Covid-positive cases and it is interesting that the numbers have been secondary positive cases (ie. presenting for non-covid reasons). Current challenges include maintaining and staffing the separate "hot" and "cold" spaces and making sure there are adequate spaces available. This will be especially challenging over the summer months. Lynanne also noted that nursing recruitment has been an issue, with less than usual interest from the RN population. It is unknown whether this might be an impact from public health vaccination clinics where RNs might be getting work/life balance opportunities elsewhere.

For Adult counterparts work is resuming on how to address backlogs. Highest priorities include paediatric surgery. The minor surgery room will continue to operate, which will allow more urgent and more complex cases. It is anticipated that there will be some changes in hours and what is offered, but that will be communicated when information is available.

The mobile vaccination program is still coming in to vaccinate patients and their caregivers. Children's is looking at an outpatient vaccination clinic for paediatric patients and caregivers who may have some hesitancy. The Child life Specialist has been invited by Public Health to the vaccination centre and this has been very helpful.

In response to a question from Leanne McArthur about whether the virtual clinic is still seeing similar volumes, Lynanne noted there have been higher numbers and they are meeting their maximum, so that has been really good to see.

There was no response to Leanne's inquiry as to whether any other organizations have implemented virtual services, either perinatal or paediatric, but Leanne noted that this could be an excellent idea for future exploration.



Item #6: MNCYN Paediatric Updates (Kristine Fraser)

- 1. How do healthcare workers talk to teenagers about the COVID-19 vaccines?

 National Post: June 16, 2021 https://nationalpost.com/news/canada/mature-minors?utm source=broadsheetcontentads&utm medium=onnetwork&utm campaign=on network boosting&utm content=roncontentads
 - Interesting article about age of consent & the Mature Minor Doctrine which was recognized by the Supreme Court of Canada in 2009
 - Federally, there is no age limit at which a child is required parental consent to make decisions on aspects of their healthcare, meaning children as young as 12 are legally permitted to receive the COVID vaccine without consent of their parents or guardians.
 - This has been challenging for some healthcare providers, but ultimately the responsibility of HCP is to take crucial steps to assess how well the teen is supported & informed
 - Finding teens are so highly connected & informed, they often ask very pertinent questions: "how protected am I? Is it safe? Will this affect my future fertility?", which are similar questions adults also ask.
- Canada lifting restrictions for fully vaccinated travelers starting July 5
 CTV News: June 21, 2021 https://www.ctvnews.ca/health/coronavirus/canada-lifting-restrictions-for-fully-vaccinated-travellers-starting-july-5-1.5478703
 - Effective July 5, fully-immunized travelers who <u>are currently able to enter</u> Canada under the existing rules will be able to do so without having to self-isolate for 14 days, take a test on day eight, or stay in quarantine hotel upon arrival
 - Proof of vaccination will be required in order to be exempted from quarantine measures, & travelers are being asked to either have paper or digital copy of vaccination documents.
 - They will also have to submit proof of vaccination into federal government's ArriveCAN app before arriving in Canada.
 - In situations where unvaccinated children are travelling with fully vaccinated parents, they will not have to stay in hotel, but will have to follow testing requirements, if applicable depending on their age, & isolate for 14 days after coming into Canada.
 - In this situation, federal officials said parents will be able to leave the house during their children's isolation, despite often repeated concern that fully vaccinated people could still transmit the virus.
- 3. Study investigates effectiveness and safety of COVID-19 vaccine in children CTV News: June 11, 2021 https://www.ctvnews.ca/health/coronavirus/study-to-investigate-effectiveness-safety-of-covid-19-vaccine-in-children-1.5467245
 - Federal government investing \$1.8 million towards Canada-wide study looking into effectiveness & safety of COVID-19 vaccine in children
 - Study underway since June 1 through Canada's Immunization Monitoring Program ACTive (IMPACT), a medical surveillance network involving 13 paediatric hospitals across Canada
 - Researchers are examining severity of symptoms in children who are admitted to these
 hospitals for COVID-19 infections as well as watching out for any children who report any
 adverse health events following vaccination



- Current data shows children infected with SARS-CoV-2 tend to experience milder symptoms compared to adults, however, children who do become seriously ill from COVID-19 have greater chance than adults of developing multisystem inflammatory syndrome or MIS-C, which causes inflammation in numerous parts of the body as a result of a dysregulated immune response. Cases of MIS-C will be one of the things that researchers will be looking out for.
- If Health Canada approves any COVID-19 vaccines for children under 12 in the future, the researchers would expand their focus to include younger children as well.
- 4. Schools don't pose higher COVID-19 risk than outside community: Canadian Study CTV News: June 22, 2021 https://www.ctvnews.ca/health/coronavirus/schools-don-t-pose-higher-covid-19-risk-than-outside-community-canadian-study-1.5481731
 - Canadian study designed to look at how safe schools are when it comes to COVID-19 transmission released their results: Infection rates were no greater among staff than other adults in the general public.
 - A key part of the study was testing a large number of teachers and staff for antibodies, in order to catch asymptomatic cases, instead of just relying on the numbers of teachers and staff who had expressed symptoms and then tested positive for COVID-19.
 - results showed that the risk of being in a physical school that was taking COVID-19 precautions was essentially the same risk of "just living in a community," even when accounting for asymptomatic transmission.
 - The findings from this new study could likely have the biggest impact in Ontario, which has closed schools for some 25 weeks since the pandemic began -- a longer stretch than any other jurisdiction in Canada.
 - The delta variant is still a looming concern, but the scientists behind this new study say they'll have an updated study on variants soon in order to further guide provinces looking to reopen schools in the fall.

Item #7: Paediatric Regional Q & A and Open Discussion

Commenting on this last item (schools), Leanne McArthur added her hope that schools will reopen in September.

As mentioned at the beginning of the meeting for those who may have joined late, Leanne informed attendees that MNCYN has decided to put this forum on hiatus. However, should the situation change, we will reconvene as needed and a communication and meeting invitation will be sent out in that event. In the meantime, she wished for everyone to have a super safe summer and enjoy some time with your families. You will hear from us, regardless.

Adjourned: 3:30 hrs.