

MNCYN Regional Perinatal & Paediatric

COVID-19 Update

January 5, 2022

1500-1600

WebEx

Moderator: Kerri Hannon (MNCYN)

Present: Kerri Hannon (MNCYN), Gwen Peterek (MNCYN), Kristine Fraser (MNCYN), Alison Stevenson (LHSC), Amanda Williams (LHSC), Stacy Laureano (LHSC), Dr. Wendy Edwards (Chatham), Alissa Howe-Poisson (Chatham), Deborah Wiseman (Stratford), Lori Merner (Stratford), Sharon Johnson (Walkerton), Dr. Sep Taheri (Paeds-LHSC), Michelle Wick (Exeter), Leanne Paton (Woodstock), Cailin McMeekin (Owen Sound), Crystal Turner (Thunder Bay), Katie Forbes (Thunder Bay), Heather Christie (Owen Sound), Jackie Mitchell (St. Thomas), Penny Lipschik (St. Thomas), Lynn Mitchell (Leamington), Leigh McKenzie (Strathroy), Lindsey Rae (Thunder Bay), Sherrie Schope (Hanover), Carolina Proctor (MOH), A. McPherson (Woodstock), Dr. Ram Singh (Paeds-LHSC), Anita Bunnie (MNCYN), Sheila Johnston, 1 unknown caller on the phone.

Item #1: Welcome/Regional Updates, COVID-19 Cases (Kerri Hannon)

Kerri welcomed everyone attending today and introduced herself as the interim Executive Director of MNCYN, formerly the Director for the Mat/Newborn Unit at HPHA Stratford. This is Kerri's first meeting leading this meeting, but she has been a regular participant representing Stratford. The number of COVID positive cases has risen dramatically over the past week and projections are that this will continue to trend upwards in the next few weeks.

We recognize the challenges with COVID and respect that everyone is probably involved in a lot of meetings and internal planning as it relates to our current situation. We also recognize that the biggest challenge that most are probably navigating is HHR.

Paediatric Dashboard update— Ontario West Paediatric Task Group – data is being collected from all sites and updated hourly from PRHS and CitiCall statistics. The data gives a snapshot of paediatric capacity and HHR challenges. Kerri encouraged everyone to regularly review the information and to also note if the data for your site does not reflect what you are seeing on your unit to make sure that the statistics are being pulled from the correct data source.

Update on Paediatric escalation process and activities of Ontario Health West – hospitals are all facing similar issues and many have reached out to other neighboring hospitals for support. Please contact Kerri Hannon (kerri.hannon@mncyn.ca) if there is a need to report impending paediatric escalation. Kerri is the representative for this region for notifications.

Update from PCMCH - Rural maternal healthcare was discussed at the last meeting before the Christmas break; this is now, more than ever, a risk to care closer to home and maintaining our level 1 facilities is really challenging – especially right now in light of the HHR issues. This will be escalated to the Ministry of Health for some further conversation.

Item #2: LHSC Women's Care & Perinatal Updates (Stacy Laureano)

I echo what Allison was saying about staffing, we are, as well, suffering through these staffing challenges that I'm sure everyone is dealing with between exposures and actual illnesses. We're working with the occupational health team and working the algorithms, trying to get people back to work, but it changes every day, so we're having challenges with that.

Our visitor policy has changed to limit our population to have 1 visitor a day versus the 4 on the list rotating through. We've kept our labour and delivery at two essential care partners at the bedside and currently we have 3 COVID cases between MBCU and OBCU and none currently in the critical care unit.

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

PCMCH:

- In light of the rapid increase in COVID-19 case counts due to the Omicron variant, PCMCH has issued a statement with updated guidance regarding use of N95 respirators when caring for suspected or confirmed COVID positive patients and the importance of and eligibility for COVID-19 vaccination (including booster doses) for pregnant people in Ontario.

N95 Respirators:

- PCMCH supports the interim recommendation of Public Health Ontario (Dec. 15, 2021)) for use of fit-tested, seal-checked N95 respirators, eye protection, gown and gloves when providing direct care for patients with suspected or confirmed COVID-19 infection [Public Health Ontario: Interim IPAC Recommendations for Use of PPE for Care of Individuals with Suspect or Confirmed COVID-19 \(Dec. 15, 2021\) \(PDF\)](#)
 - The Public Health Ontario: Interim IPAC Recommendations for Use of PPE provides a table that lists the appropriate PPE to be used for various settings and patient care activities.
- A point-of-care risk assessment should be completed before every patient interaction to determine risk of HCP exposure to COVID-19, and to select the correct PPE
- Fit tested N95 respirators should be used as a minimum level of respiratory protection for HCPs within close range (or anticipated to be) aerosol-generating medical procedures

Vaccination and Eligibility for Booster Shots:

- Pregnant people ≥ 18 years of age are eligible as of December 20, 2021, to receive a booster shot.
- HCPs should continue to encourage their patients who are planning a pregnancy, currently pregnant (in any trimester) or breastfeeding to get vaccinated
- Vaccination is the best way to protect against the known risks of COVID-19 in pregnancy. There is a growing body of evidence to support the safety and efficacy of COVID-19 vaccination during pregnancy.
- Memo from PCMCH was sent out today asking vaccine clinics to prioritize pregnant women for their COVID booster shot and asking HCPS to strongly encourage all pregnant women to get it. They are eligible 3 months after their primary series.
- HCPs should continue to reinforce the need for patients to wear well-fitted high-quality masks, practice physical distancing and frequent handwashing, limit close contacts and avoid crowded indoor spaces.

Nitrous Oxide Use:

- PCMCH has not released any changes to the recommendations posted July 2021 regarding the use of Nitrous Oxide during labour.
 - The recommendation still suggests that there is a lack of definitive evidence on the risk of nitrous oxide use and COVID-19.
 - A point-of-care risk assessment should be done for risk of droplet or contact transmission.
 - Precautionary principles suggest that a biomedical filter should be applied along with adequate sanitization of equipment if nitrous oxide is used during labour and delivery.
 - Given the current situation, it would be prudent for each hospital to have their own plan for use of nitrous. It probably should be the last resort for pain management.
- The use of water immersion (for pain relief or birth) should be avoided. HCPs should be protected from exposure from spray if showering is used for pain relief.

Perinatal Mental Health:

- In July 2021, PCMCH released a [Care Pathway for the Management of Perinatal Mental Health](#) and accompanying [Guidance Document](#) to help HCPs to understand how to identify and assess pregnant or postpartum people who may be experiencing mental health issues
- The guideline helps HCPs to determine an appropriate care plan and follows individuals through their care journey to ensure that their mental healthcare needs are being met.
- A webinar outlining these new resources and their implementation using case presentations is available on the PCMCH website

CAPWHN

Webinar: Vaccine Hesitancy - Best Practices in Moving towards Vaccine Confidence hosted Dec 7, 2021

- Have posted a link to this Webinar and the accompanying slides under our Vaccination Tab [CAPWHN Webinar: Vaccine Hesitancy Dec. 7, 2021](#)

Prenatal Screening Ontario:

- PSO has posted that misinformation about stillbirths is been debunked! Based on available [Ontario birth data](#), there is no indication that COVID-19 vaccine increases the rates of stillbirths
- British Society for Immunology, in partnership with reproductive immunologist, Dr. Viki Male, published an Infographic to explain the latest evidence on the safety of COVID-19 vaccination in pregnancy (based on evolving data). The infographic was last updated December 2021.
- Posted under MNCYN COVID website Under Vaccination information & Resources for Children & Families, Pregnancy & Breast Feeding
[British Society for Immunology: COVID -19 Vaccination in Pregnancy Infographic Dec. 2021 \(PDF\)](#)

NIPT Funding:

- MNCYN recently received an email from PSO stating that "Non-Invasive Prenatal Testing (NIPT) is now funded by the Ontario Ministry of Health (MOH) for ***all twin pregnancies, regardless of gestational age, maternal age or prior risk.***
- Any physician or nurse practitioner can order OHIP-funded NIPT for their patients who are pregnant with twins and who wish to have a prenatal screening test.
- Concurrently, First Trimester Screening (FTS) has been discontinued in Ontario for twin pregnancies.
- For additional information about these changes, please visit the Prenatal Screening Ontario (PSO) [website](#)
- We will be distributing the email out to the region in the coming days.

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

Action Item:

Item #5: Children's Hospital Updates

Paediatric Inpatients and Outpatients Children's Hospital (Lynanne Mason):

- 4 positive COVID patients in inpatients -not all admitted due to COVID. Some patients having an incidental finding, however, noting a rise in admissions within Paediatrics due to resp/Covid symptoms.
- Slight dip in Occupancy throughout due to school closures for Christmas Holidays, therefore, decrease in RSV infections. With school now online this may continue for a little longer, however, this can often cause an increase in Child and Adolescent Mental Health admissions but is not seen yet.
- Paediatric Surgery reduction to Emergent and Urgent only starting today. Waiting on clarity from the Government on Directive 2 and the impact to Paeds for both Surgical and Ambulatory patients.
- Children's Hospital has moved to Essential Caregivers only (non-essential removed from list). Remains 2 at the bedside at a time for inpatients and 1 at a time for Outpatients. Exceptions can still occur through leadership approval.
- HHR constraints remain very real throughout, with sick staff and high-risk exposures causing a big impact on daily staffing levels.

Paediatric Critical Care and Emergency Services at Children's Hospital (Alison Stevenson)

- No COVID cases in PCCU, 6 PUI in NICU related to exposure
- Access and Flow through these areas is stable and primary challenge remains ongoing staffing challenges related to staff and physician COVID/exposures
- Level 2 PCCU Annex space (4 beds) not required at this time.
- CED volumes have reduced since peak, seeing less RSV, and felt to be due to school closures

Item #6: MNCYN Paediatric Updates (Kristine Fraser)

1. More Rapid Tests & More Paediatric COVID-19 Doses Coming (Jan 5, 2022)

<https://www.ctvnews.ca/health/coronavirus/140m-rapid-tests-more-pediatric-covid-19-doses-coming-this-month-feds-say-1.5728512>

- By the end of January, there will be enough paediatric COVID-19 doses in Canada for all eligible children to receive both doses, & 140 million additional rapid tests will be delivered to provinces & territories, the federal government announced this morning (Jan 5).
- Prime Minister Justin Trudeau said that the federal government would “quadruple” December’s fulfilled request from the provinces and territories for 35 million rapid tests.
- Trudeau also confirmed that there are enough COVID-19 vaccines in Canada now for all adults who are eligible to receive their first, second, or booster doses.
- More than 40% of kids aged 5-11Y have already received one dose of vaccine

2. Public Health Ontario Data: <https://www.publichealthontario.ca/en/data-and-analysis/infectious-disease/covid-19-data-surveillance/covid-19-data-tool?tab=ageSex>

As of January 3, 2022, at 1300

- 0-4Y: 4,061, 33 hospitalizations
- 5-11Y: 10,011, 9 hospitalizations
- 12-19Y: 14,206, 7 hospitalizations

3. Closure of Ontario Schools & Children’s Mental Health

<https://www.ctvnews.ca/canada/how-to-prioritize-your-child-s-mental-health-amid-a-delayed-return-to-school-1.5726677>

- Recent school closures, virtual learning or no access to extracurricular activities is continuing to put children’s mental health at risk
- Not only can learning be difficult online, but learning "in the context of relationships" can be even more challenging through a computer screen
- "School provides very important social emotional learning & skills, either directly in a curriculum or indirectly through all these micro-interactions at recess, at lunch, in the hallways, and those will be missing in terms of online learning
- Studies have shown [record high levels of stress and anxiety](#) in school-aged children due to routines & classrooms being disrupted by the pandemic
- A [study led by SickKids hospital in Toronto](#) showed that during the pandemic, about 70% of youth ages 6-18Y experienced one or more of the following: depression, anxiety, irritability, a lower attention span, or obsessions and compulsions. For children between the ages of 2-5Y, approximately 66% reported having at least one of these symptoms.

4. Vaccine dosing errors & children

<https://toronto.ctvnews.ca/ontario-family-waits-a-week-for-answers-after-2-young-children-get-adult-dose-of-covid-19-vaccine-1.5727234>

- On Dec. 22, an ON couple took their two youngest kids, aged 6 & 8, to a vaccine clinic in Napanee for their first shot - both received an adult dose of Moderna, which hasn’t even been tested on children
- Regardless of the error, the provincial guidelines say the recipient of the erroneous vaccine should be informed of any possible side effects & be provided with recommendations for future doses. All errors should also be reported to the Canadian Medication Incident Reporting and Prevention System, as well as the local PHU

- MOH COVID-19 Vaccination Administration Errors & Deviations Guidance Document is included at the end of this article.

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

Questions regarding the use of rapid testing for all patients. The consensus was that rapid testing is not done in most regional sites and few are testing the support person. It varies from site to site as to whether all patients are being tested on admission.

Question posed by Crystal Turner (Stratford) regarding if there are any processes being developed if the site is managing multiple cases of babies requiring a separate space and 1:1 care. Kerri Hannon commented that, while 1:1 is a gold standard of care, there may be times when in certain situations when that may not be achievable, but we continue to strive to meet that standard whenever possible. Continued adherence to proper usage of PPE is essential to protect the patient and staff.

Item #8 Ministry of Health (Tihana Antic)

No specific update. All communications from the Ministry are through PCMCH.

Wrap-up: Kerri Hannon posed the question about whether to keep the meetings monthly, or to change it to more frequent meetings. As there were no comments either way, the meeting will remain monthly for now, but Kerri reminded all that they are welcome to reach out to the MNCYN team members if they have questions or the situation changes requiring more frequent communication.

Thanks everyone for attending today – stay safe and well as we continue to push forward against COVID and in support of all the staff providing excellent care under pressure.

Adjourned: 1545 hrs.