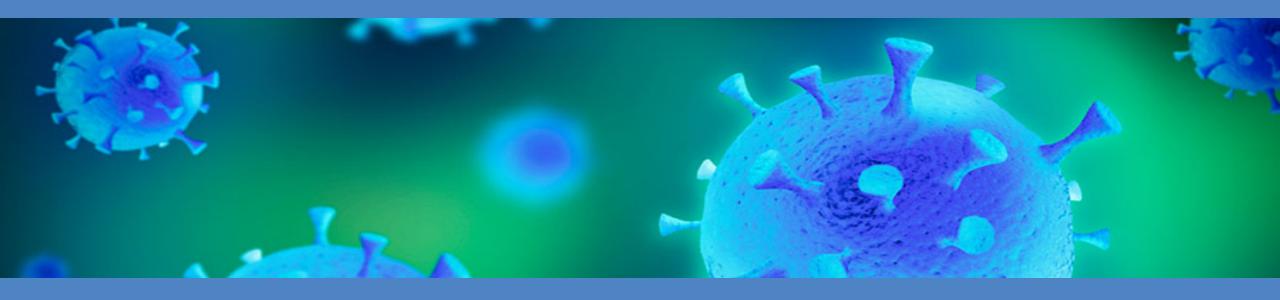
VCHIP / CHAMP / VDH COVID-19 UPDATES



Wendy Davis, MD FAAP - Senior Faculty, Vermont Child Health Improvement Program, UVM Breena Holmes, MD FAAP – VCHIP Senior Faculty & Physician Advisor, MCH Division, VDH December 11, 2020









Technology Notes

1) All participants will be muted upon joining the call.

If you dialed in or out, unmute by pressing #6 to ask a question (and press *6 to mute).

Presenters: Please avoid the use of speakerphone and make sure your computer speaker is muted if you dialed in via phone.

2) To ask or respond to a question using the *Chat* box, type your question and click the licon or press Enter to send.







Overview

- Wishing you a peaceful Hanukkah Celebration
 - https://www.lostmural.org/
 - Remembering Sr. Irene Duchesneau, Religious Hospitaller of St. Joseph (Fanny Allen community)
- Reminder: weekly event schedule
 - VCHIP/CHAMP/VDH calls: Mon/Wed/Fridays; Gov. Media Briefings Tues/Fri; VMS call with Comm. Levine Thursday
- Situation, VDH updates; today's media briefing
- □ Practice Issues: DCF Family Services & UVM CH Update
- □ Q & A, Discussion

[Please note: the COVID-19 situation continues to evolve very rapidly – so the information we're providing today may change quickly]





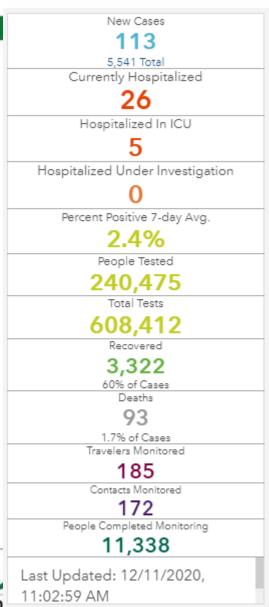
Reminder: Data Dashboard Change (effective 12/2/20)

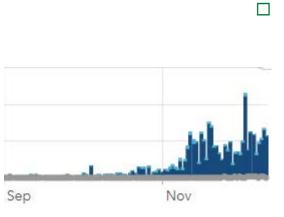
- Vermont COVID-19 cases now includes probable cases reported to VDH since September 6, 2020.
- Definition:
 - Person tested positive on antigen test and has symptoms of COVID-19 or epidemiologic evidence, OR
 - Person has symptoms of COVID-19 and is epidemiologically linked to a confirmed case of COVID-19.





Situation update



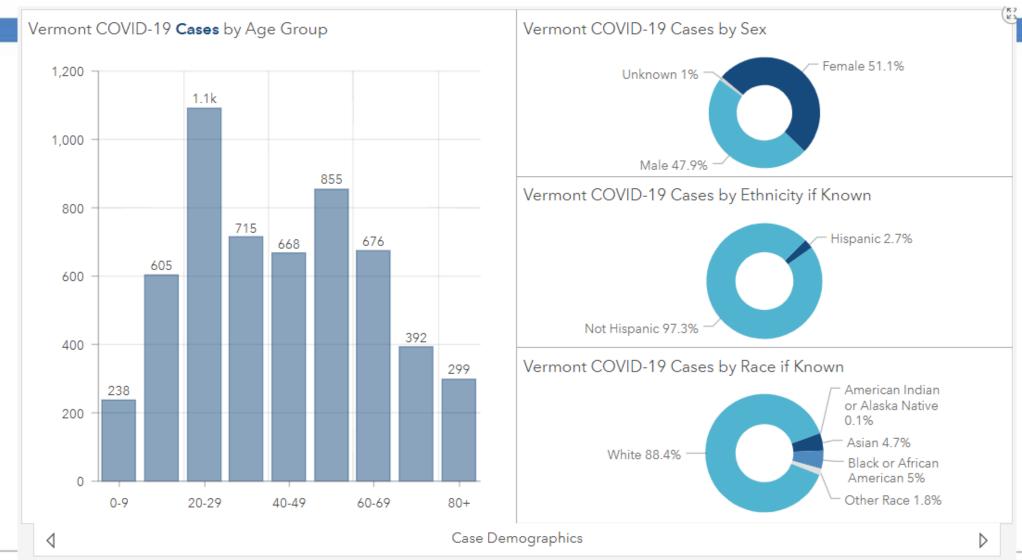


VT New Cases, Probables, Deaths

- U.S. 15.8 million+ cases; 294,362 deaths
 - https://www.nytimes.com/interactive/2020/us/coronavirusus-cases.html (updated 12/11/20)
 - 12/10/20: 225,572 new cases; 2,923 d.; 107,258 hosp.
 - Past week: average 211,199 cases/day (increase of 28% from average 2 weeks ago)
 - 1.5 million+ deaths worldwide (69.9 million+ cases)
- VDH Weekly Data Summary(12/11/20)
 - Weekly Spotlight Topic: High Risk Populations
 - VTers ≥60 yo or w/pre-existing health conditions are at highest risk for serious COVID-19 outcomes.
- Find previous summaries at:
 - https://www.healthvermont.gov/covid-19/currentactivity/weekly-data-summary

https://www.healthvermont.gov/covid-19/current-activity/vermont-dashboard

Situation update







COVID-19 Cases in VT K-12 Learning Communities (While Infectious)

- COVID-19 Cases in Vermont K-12 Learning Communities While Infectious (dashboard)
 - https://www.healthvermont.gov/sites/default/files/documents/pdf/COVID19-Transmission-Schools.pdf
 - Table updated **Tuesday** w/data through previous Sunday. As posted 12/8/20: **158** total cases; 20 cases reported in preceding 7 days (up from 18 reported previous week).

Cases in Vermont K-12 Learning Communities While Infectious

Learning Community Schools with less than 25 students are reported in the "Total for all Suppressed Schools" row at the end of the table.	Cases Reported in the Past 7 Days	Total Cases
TOTAL FOR ALL SCHOOLS	20	158

- VT College & University dashboards:
 - Now on break from on-campus learning: https://dfr.vermont.gov/about-us/covid-19/school-reopening





Pediatricians in the News

- From a Group of PL-3s at Mass General Hospital: We're Pediatricians In A Pandemic. We Shouldn't Be Taking Care Of Your Grandparents. (Thank you, Erica Gibson)
 - "Last spring, we were asked to do something extraordinary...to take care of sick and dying adults."
 - "As summer turned to fall, our pediatric floors turned into way stations for teenagers unable to cope any longer with virtual school and social isolation...Far too many teenagers reached their breaking points and tried to end their lives...It wasn't hard to imagine that things might have turned out differently had these teenagers been able to go to school, see their friends, work with their school counselors and therapists."
- https://amp.wbur.org/cognoscenti/2020/12/08/pediatricians-grandparents-covid-19-sam-cohen-anna-handorf-vidhya-kumar-sarah-servattalab-jeffrey-sumner-emily-ziady?fbclid=lwAR0qXwHsLc_lprj_qlKifOX-ECbqowPpS1JGxra36OO7d_GeAD0EE4AIURU





Pediatricians in the News

Vermont's Coalition of Health Care Provider Associations

UPDATE FROM
THE FRONTLINE OF
COVID-19

virtual legislative briefing

Panel Agenda & 2021 Policy Proposals

Panel Participants

Moderator, Jill Mazza Olson | Coalition Representative & Executive Director, VNAs of VT Home Health & Hospice /Adult Days - Gretchen Bates, RN, BSN | Vice President, Clinical Operations, UVM Network Home Health & Hospice

Independent Physicians - Ashley Miller, M.D. | Pediatrician, So. Royalton Health Ctr.





Today's Media Briefing (12/11/20)

Governor Phil Scott

- □ FDA Advisory Panel rec. approval Pfizer vaccine; expect FDA will make official w/in next few days.
 - Vermont team preparing for distribution X mos.; we're ready
- □ Expect 1st doses to arrive sometime next week
- Reviews Northeastern state data q.a.m.: FL, TX, CA –
 cases/deaths as daily reminder of how quickly things change.
- More deaths in single day yesterday than 9/11; about to exceed 300K deaths since March.
- Outbreak among NH Legislature (death of House speaker)
- "COVID isn't compassionate."





AOE Deputy Secretary Heather Boucher

Career & Technical Education (CTE) Program Update

- Majority in hybrid mode; curricula moved to online platforms
- Students/families following guidelines & grateful for in-person learning

GEER funds (Governor's Emergency Education Relief)

- Assure >4.4m. used to bolster CTE system; all 16 centers applied
 & all funds applied as intended
- Equipment (incl. laptops, iPads), supplies; upgraded teaching technology; mannequins to replace in-person clinical learning.





LIVE

- □ Erica Bornemann, Director, VT Emergency Management
- Use of VT Alert system to inform Vermonters re: COVID-19
- https://vem.vermont.gov/vtalert
- Does NOT replace other VT state government (web) resources
- □ Is an opt-in service encourage all to subscribe
- □ Current ~25K subscribers; if current subscriber, opt in to COVID-

19 updates







AHS Secretary Mike Smith

LTC outbreak follow-up & staffing challenges

- Contract w/TLC Care (Williston) for emergency staffing capacity; also seeking paid/volunteer help through DAIL web site:
 - https://www.vermont.gov/covid-staffing#gsc.tab=0
 - Not intended to pull from other health care entities

Testing: continuing to add capacity

- □ New sites next week: Richford, Swanton, Wells River (34,541 tests last 7d.)
- Will require 25% patient-facing HCPs/staff to be tested monthly
- Next week NEW call center: augment contact tracing w/Maximus staff:
 initial 25 agents + 2 more waves of 25 = 75 total. 8-4:30 pm daily 7d./wk

veruntit no longer necessary.

DEPARTMENT OF HEALTH

December 11, 2020



VDH Commissioner Levine

- Following potential impact of Thanksgiving (now ~2 wks. out);
 somewhat stable pattern. We may still see pts. who become symptomatic later in incubation period.
 - No recent contacts reveal clusters related to TG.
- □ Almost 5K tests/d. over 7d. (since college students left campus)
- "Comfortable w/low 2%" positivity rate"; flu remains "sporadic"
- Epi Team following 38 outbreaks & >220 situations; not seeing "surge"
 on a surge"
- CDC recent summary of PH strategies to adjust high levels transmission





VDH Commissioner Levine

- CDC report (cont'd.): assure all strategies take health equity into account
- Expect FDA will issue official rec. for EUA for Pfizer vaccine
- ACIP meeting this weekend to inform CDC & expect recommendations Monday, 12/14/20.
- "And then we'll move from there."
- Text notification system went live yesterday: texts to those identified as close contacts.
 - Contacts will receive a text from 89361





VCHIP-CHAMP Email Update

- Had received inquiries re: post-call emails not being received last few weeks (unclear if related to cyber attack)
- Continuing to work with LCOM Information Systems (COMIS) to remove (automatic) block due to large percentage of messages marked as spam by many recipients originating from our VCHIP-CHAMP mailbox
- Created a UVM LISTSERV to hopefully resolve the issue. Replies to the LISTSERV will still go to <u>vchip.champ@med.uvm.edu</u>.
 - □ Please continue to use vchip.champ@med.uvm.edu for feedback/inquiries
- □ Please continue to let us know if you are NOT receiving emails.





CHAMP E-Mail Distribution

For now, we will continue to post email on our landing page following the call and it will remain there until the subsequent email is posted

Stay up-to-date about COVID-19 Please scroll down for recorded webinars, questions & answers, presentation slides, and documents. Email questions, thoughts and concerns to VCHIP.CHAMP@med.uvm.edu VCHIP / CHAMP / VDH Calls The call schedule is Monday, Wednesday and Friday. 12:15-12:45 p.m. https://uvm-vchip.adobeconnect.com/vchipchampcovid-19update/ Call in number - 1-866-814-9555 Participant Code - 6266787790 (2) Dial-in to the Audio Conference via Phone (use the call-in information below (3) Using Microphone (from your computer/de Link to Emails Supporting Material





Coming Attraction: VMS Vaccine Panel

COVID-19 Vaccine: Safety, Distribution & Considerations for Patients Description:

Presentations followed by Q&A with a panel of Vermont's experts Time

Dec 22, 2020 12:00 PM in Eastern Time (US and Canada)





Practice Issues

Update from Vermont DCF Family Services & UVM CH

Brenda Gooley, VT DCF Family Svcs. Operations Director James Metz, MD FAAP – Child Abuse Physician, Div. Chief



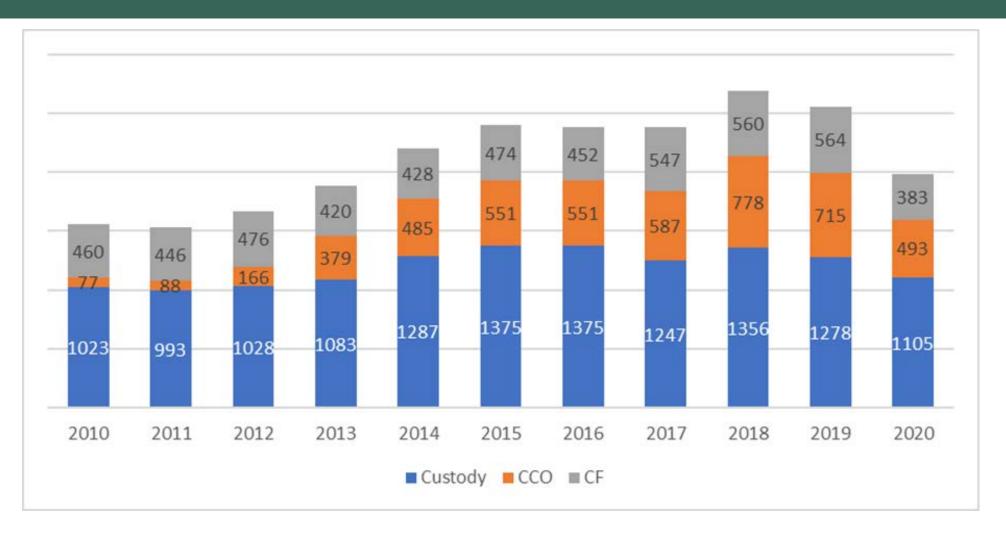


DCF- FAMILY SERVICES PEDIATRIC AND FAMILY MEDICINE HEALTH CARE COLLEAGUES MEETING

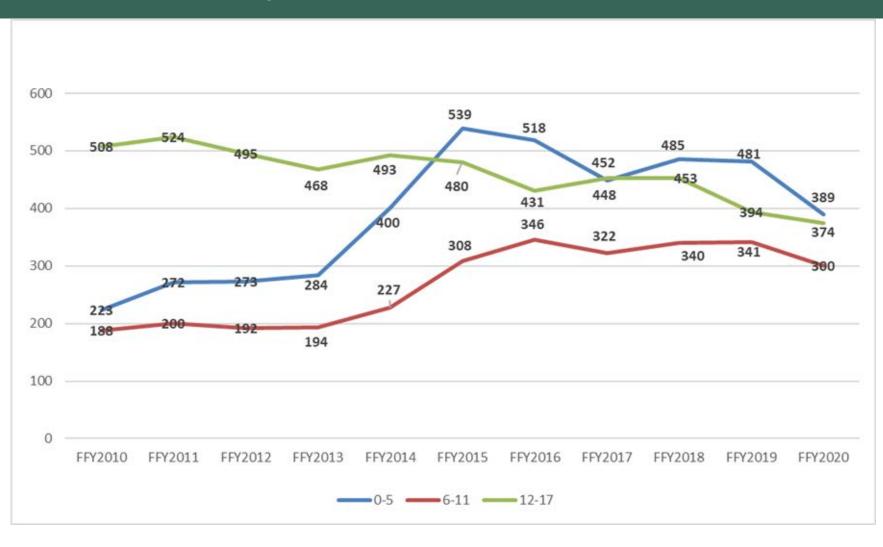
FRIDAY DECEMBER 11TH

CHILD/YOUTH INVOLVED WITH DCF

(CUSTODY, CONDITIONAL CUSTODY (CCO), FAMILY SUPPORT CASES (CF))



NUMBER OF CHILDREN/YOUTH IN DCF CUSTODY BY AGE GROUP



	DCF-Family Services Guiding Principles during COVID		
1	Child & Youth Safety FSD's priority is the safety of Vermont's children and youth. FSD will continue to respond timely and compassionately to ensure children and youth are safe during these uncertain times. FSD will focus on increasing public awareness around child safety knowing that many families are isolated and experiencing higher levels of tension, anxiety, and stress.		
2	Staff Safety & Well-Being We value our workforce's dedication and commitment in carrying out FSD's mission during these challenging times. The safety and well-being of our staff will continue to be a top priority as we adapt our practices during COVID.		
3	Collaboration with Foster & Kin Caregivers, Community Partners, and State Agencies FSD values our strong partnerships which are even more critical right now in order to accomplish our mission. FSD will continue to collaborate and think creatively with our foster and kin caregivers, community partners, and other state agencies to ensure we meet the needs of the children and families we serve.		
4	Informed Decision Making FSD will continue to make practice and operational decisions that are informed and supported by data and guidance from the CDC, VDH, and VOSHA.		
5	Continuous Quality Improvement through Staff Engagement As we continue to adjust and adapt during these unique times, FSD is committed to taking time to pause and hear from staff about their experiences and lessons learned.		

COVID-19 UPDATES

COVID-19: CHILD SAFETY INTERVENTIONS

- March: temporary changes were made to the CSI screening practices by assigning all accepted reports as assessments
 except for substantial child endangerment and reports involving allegations of immediate risk to a child 3 years and
 younger.
 - the commencement options were broadened for assessments to include videoconferencing as a preferred option, therefore avoiding in-person contact whenever possible
- June: screening criteria was updated to require an in-person response for all CSIs regarding children age 6 and under.
- July: screening practices resumed to normal and followed existing policy for children of all ages.
- November 13^{th,} due to the increase in COVID-19 cases,
 - For children age 7 and older, intakes that do not fall into the category of substantial child abuse, will be assigned as
 assessments and supervisors have the discretion to allow assessments to be conducted remotely.
 - CSIs regarding children age 6 and under continue to require an in-person response.
 - This plan will be revisited every 30 days and extended as needed

COVID-19: CSI DATA

Ist week of the month	% Decrease in Calls Compared to 2019	% Decrease in Accepted CIS Compared to 2019
April	-54.12 %	- 70.18 %
May	-37.04 %	- 53.91 %
June	-46.19 %	- 49.09 %
July	-10.74 %	- 15.52 %
August	-1.10 %	- 30.77 %
September	-23.86 %	-2.5 %
October	-20.67 %	-7.87 %
November	-19.4 %	-27.72%

COVID-19: MONTHLY FACE-TO-FACE CONTACTS

Due to the increase of COVID-19 cases, as of November 13th:

- FSD has suspended in-person face-to-face visits
- Staff are required to conduct remote video conferencing at least 1x per month
- ► The Children's Bureau has continued to approved "virtual" monthly visits to meet the federal monthly face-to-face contact requirement
- ► For youth placed in a residential setting, visits are not supported at this time unless it is essential for placement.

The plan to suspend in-person monthly visits will be revisited every 30 days and extended as needed.

COVID-19: PARENT CHILD CONTACT

In Vermont, ALL Parent-Child Contact (PCC) is court-ordered

- ➤ March: To address health and safety concerns, there was an initial effort to explore if parents would agree to a voluntary temporary modification to PCC
- > June: PCC transitioned back to in-person family time
- November: Due to the rise in COVID cases, staff have explored again if parents are willing to agree to a voluntary temporary modification of PCC for 30 days and possibly extended if everyone agrees
 - When parents agree to this temporary modification, our CFS partners are available to help support PCC through videoconferencing
 - When parents do not agree, FSD and our CFS partners continue to support in-person PCC



Guidance for Children and Families Involved with the Child Welfare System During the COVID-19 Pandemic

Critical Updates on COVID-19 / Clinical Guidance / Guidance for Children and Families Involved with the Child Welfare System During the COVID-19 Pandemic

Visiting Principles:

- Whenever possible, in-person visitation is preferable.
- Agencies should prioritize obtaining regular feedback from birth families and caregivers regarding visitations so that adjustments can be made to best promote connection and secure attachment between the child and family members.
- A combination of in-person and virtual visits can be considered to increase the frequency of parent-child and sibling interactions.
- Everyone involved in the visits should adhere to the same guidelines, for the purpose of risk reduction

COVID-19: PLACEMENT MOVES

We are striving to have all children and youth **shelter in place** when someone becomes COVID positive in a foster home or residential facility.

Efforts to quarantine or isolate in the existing placement are best for the children and youth, and best for the community to help to prevent the spread of COVID.

We are very grateful to our caregivers and residential providers who have been going above any beyond during these challenging times, and we are committed to doing all we can to support our amazing caregivers during this unprecedented time!

Questions/Discussion

- Q & A Goal: monitor/respond in real time; record/disseminate/revisit later as needed.
- For additional questions, please e-mail: vchip.champ@med.uvm.edu
 - What do <u>you</u> need how can we be helpful (specific guidance)?
- □ VCHIP CHAMP VDH COVID-19 website:

 https://www.med.uvm.edu/vchip/projects/vchip_champ_vdh_covid-19_updates
- □ Next CHAMP call: *Monday December 14, 12:15-12:45* (current schedule: M-W-F):
- □ Please tune in to VMS call with VDH Commissioner Levine:

Thursday, December 17, 12:30-1:00 p.m. – Zoom platform & call information:

Join Zoom Meeting:

https://us02web.zoom.us/j/86726253105?pwd=VkVuNTJ1ZFQ2R3diSVdqdlJ2ZG4yQT09

- Meeting ID: 867 2625 3105 / Password: 540684
- □ One tap mobile +1 646 876 9923,,86726253105#,,,,0#,,540684#



