



VCHIP CHAMP VDH COVID-19

July 27, 2020 | 12:15-12:45pm Call Questions and Answers*

Wendy Davis, MD, FAAP, Vermont Child Health Improvement Program, UVM Breena Holmes, MD, FAAP, Director of Maternal & Child Health, Vermont Department of Health (VDH)

VDH Updates: calling all Tweetiatricians!

VDH is leading the Governor's new statewide **#MasksOnVT** campaign encouraging Vermonters to wear masks to reduce the spread of COVID-19. The goal is collective impact to normalize/sustain mask wearing in VT. They created a one-stop **digital toolkit** to assist state agencies, departments and partners to use or adapt as appropriate for the audience, including sample social media posts and content, sample newsletter blurbs or articles, key talking points and posters. These materials can be used as-is or customized.

VT Principals' Association – Fall Sports

Wendy Davis, MD, VCHIP: The Vermont Principals' Association (VPA), which oversees the return to sports process, noted the fall high school sports preseason practice start date scheduled for August 10th would be delayed due to coronavirus health/safety concerns. The VPA Activities Standards Committee/COVID-19 task force recommended fall season to start on the first student day for a school (e.g., end August/early September). This group hopes to forward final recommendations to the Governor, Secretary French & Commissioner Levine shortly, with an anticipated announcement forthcoming once final approval is obtained.

Breena Holmes, MD, VDH: Not everyone is willing to wait for standard statewide guidance, so some decisions are being made about different aspects reopening school sports at the school district level. I've heard from several schools now that they've already made a fall sports decision, which unfortunately mostly means cancelling. The guidance will likely say there is a way to safely have some fall sports, so maybe the schools that have cancelled will revert and figure out a way to add back some athletics for their students.

William Raszka, MD, UVMCH & Larner COM Dept. of Pediatrics: The Fall Sport group met this AM. If all goes well, the guidance should be released by the end of the week. Both Ben and I attended. The goal was to preserve as many as possible.

School Reopening

Wendy Davis, MD, VCHIP: Communities are moving forward. Where is yours in this process? What are your thoughts/concerns to safely re-open? What are you hearing from families and what are communication gaps? Volunteers are needed for PSAs and videos and we are continuing to seek cases for analysis and to inform guidance revisions.

Practice Issues: Back to "Back to School" (Vermont K-12 Reopening): Stories from the Field

Elizabeth Hunt, MD, Timber Lane Pediatrics: Dr. Leah Costello and I met with the Superintendent, director of student services, media and remote learning director, and an amazing school nurse who's actually been staffing summer school. I would say an in-person meeting with actual conversations was much more effective than looking at guidelines over email, which is where I think a lot of administrators are coming





from. We represented the healthcare system and illustrated how we've been successfully engaging with children and families since March. We figured out how to troubleshoot many situations and remained a part of the child support system we have in Vermont with a very low COVID-19 incidence rate. Talking about creating distance in an encounter if any educator starts to feel concerned about their own exposure to reduce the panic. Other than the summer school team, teachers have been home for so long they seemed to be coming from an early to late March mindset. The overall tone was positive and we offered to do some education for kids and teachers. They were very interested in the Q&A between teachers and health officials about handling potential scenarios, like how to handle a kid who expresses experiencing symptoms during class.

Leah Costello, MD, Timber Lane Pediatrics: The school nurse we're working with from Shelburne is amazing, but I was surprised that they really didn't seem to know the data on Vermont children and COVID-19 in general in Vermont. This spurred my idea to try to set up a Q&A with teachers on their safety within the school, because it feels like teachers are getting a lot of their information from the national media and we need to change the focus to how Vermont is well-posed to lead the nation in school reopening. I recruited an internal medicine hospitalist to help us with this Q&A for teacher health and safety measures.

Breena Holmes, MD, VDH: That's a great point. VDH is working on some additional refinements on the pediatric data, which we will get out to all of you. The recommendation in our guidance for teachers and staff over 65 or with chronic conditions is to talk to their health care professional, but we need to do some outreach to those adult primary care providers to parse out their role in getting kids and teachers back to school safely. In that spirit, Drs. Lee and Raszka will be joining me and Commissioner Levine for a town hall tomorrow to start chipping away at the fear by presenting data. I look forward to telling you more on Wednesday.

Stephanie Winters, VMS: The town hall begins at 4 pm and runs for an hour. To participate in this Zoom event, please click here to receive an invitation: <u>https://www.vtnea.org/reopeningtownhall</u>.

Leah Costello, MD, Timber Lane Pediatrics: I think one other piece to remember is that obviously teachers agree the kids need to be in school, but a lot of concern regarding reopening is due to the lack of guidance surrounding staff and teacher safety.

Questions/Discussion

Q: Will the mandate include mask wearing in all who are >2, etc.?

A: Breena Holmes, MD, VDH: Masks are required for all in school, with special considerations for developmental appropriateness.

Q: Updates on school health screening plans?

A: Alex Bannach, MD, North Country Pediatrics: Quite a few schools are already planning on "tickets" for parents to screen at home in our district.

A: Elizabeth Hunt, MD, Timber Lane Pediatrics: The school team I have been meeting with seems married to some health screening, in home or at the door to the school.

Q: Any truth to the comment from Harwood superintendent that there will be a governor's executive order to delay school start date?





Q: Thoughts on distancing 6 feet or 3 feet in schools?

A: Alex Bannach, MD, North Country Pediatrics: As long as it says 6 feet a lot of schools feel bound by that due to fear of litigation, no matter what we say.

A: William Raszka, MD, UVMCH & Larner COM Dept. of Pediatrics: I think an important message is that we are supporting 3 feet, not simply to make it easier, but because there is data supporting that and many, many organizations support that, including the WHO and European agencies. And of course, the AAP supports that, too. In theory, the school can be sued by an individual who tests positive after being in school. However, the plaintiff would have to prove negligence on the school's part, which given the care the schools are taking would be extremely difficult.

C: Kristen Connolly, MD, Timber Lane Pediatrics: If the CDC continues to say 6ft, I worry schools will feel bound by this and plans will be impacted by realities of space/student numbers.

C: William Raszka, MD, UVMCH & Larner COM Dept. of Pediatrics: Here is my view (sadly); if the schools are deemed too risky for in-person teaching, then so are the daycare and childcare centers. We should shut them down too, and the grocery stores and hair dressing salons. It seems a local decision to decide how many days the school will be open for in-person learning.

C: Elizabeth Hunt, MD, Timber Lane Pediatrics: In our district, we have been told that between Part 2 and other partners there will be child care that parents pay for. To me, that seems untenable with our child care crisis in VT and makes me picture kids in a building on laptops with some minimal supervision.

Q: Does is still sound like the schools might start one way and shift to what we would prefer (in person learning)?

A: Breena Holmes, MD, VDH: Yes.

A: Sharonlee Trefry, RN, VDH: A Rutland school system, or LEA, mentioned this morning on the news that they are looking forward to opening full time with extra temporary buildings if using the cafeteria and gyms isn't enough for classrooms.

A: Kristen Connolly, MD, Timber Lane Pediatrics: I have found a lot of families actually do want full-time school, especially working families.

Q: Can we do local town halls like the Bright Futures roadshow to answer teacher's questions directly?

A: Toby Sadkin, MD, Northwestern Medical Center: I have been re-iterating all of the things we discuss here with our patients. Lots of questions from teachers. We are trying to advise them based upon data, science, facts. Probably would be good to get some consistent messaging out to teachers. Sounds like your Town Hall will be a good start.

A: Lori Racha, MD, UVMCH Pediatric Primary Care: I think reassuring teachers that we, as providers, felt exactly the same about seeing kids when we restarted in March. We have been safely seeing kids (and who are sick) without excessive risk to our health. They will be working primarily with healthy students. My heart is with the teachers because they are coming from a point of fear and hopefully data will reassure. A: Leah Costello, MD, Timber Lane Pediatrics: I have found that explaining the public health measures we have in place now put us in a much safer situation to open school's vs when we had to shut them in March. We use PPE with sick kids, they can use the same PPE we are with healthy kids. Contact/airborne PPE w/ sick.

A: Melissa Kaufold, RN, UVM Health Network Home Health & Hospice; Family and Children's Program: PPE measures are a big difference between medical care and school exposure.

A: Ann Wittpenn, MD, Pediatric Primary Care, UVMCH Pediatric Primary Care: We have learned more about the benefit of simple cloth face masks for all.





A: Alicia Veit, MD, Timber Lane Pediatrics: I think Vermont parents need the opportunity to hear as well why this is different in Vermont compared to what they are seeing in the national news.
A: Benjamin Lee, MD, UVMCH & Larner COM Dept. of Pediatrics: I agree. Again, any way we can help get out information directly would be great. I wonder if school boards would be willing to set up ad hoc meetings for parents to connect remotely with pediatricians to go over the data.