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BACK TO SCHOOL GUIDE 2021



Quebec students will be going back to school for the second time since the emergence of COVID-19. The 2020-2021 school year was marked by the need for constant adaptation, from dealing with health restrictions to the joy of meeting up with friends. In short, it was a story about resilient children and their parents.

With the rise of new and troubling variants and children between the ages of 5 and 11 being unvaccinated, questions and concerns about going back to school remain this year.

This new edition of the Back-to-School Guide is a practical reference tool to help students have a safe back-to-school experience. It was designed to provide information about health-related topics that may be of concern to families in this exceptional context.

Since the situation is constantly changing, we suggest that you also keep up-to-date about potential changes that could impact you and



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COVID-19 IN CHILDREN

At the start of the pandemic, it was noted that children and adolescents affected by the virus developed few complications, which were generally not severe.

There is no indication at this time that COVID-19 caused by the Delta variant is more virulent among children. Although an increase in hospitalizations associated with COVID-19 has been noted in some U.S. states, they occur in communities with high transmission rates due to low vaccination coverage. Nevertheless, the proportion of severe cases seems to be stable.

Since mid-August 2021, hospitalizations at CHU Sainte-Justine have been often due to various respiratory infections caused by the respiratory syncytial virus and other viruses that often result in admission to the hospital—generally in the middle of winter. Sometimes, these hospitalized children can also test positive for COVID-19. Since the end of the lockdown, a constant circulation of viruses other than COVID-19 has been noted in the CHU Sainte-Justine.



THE DELTA VARIANT AND CHILDREN

The Delta variant—the main cause of the fourth wave of COVID-19—is being rigorously monitored by microbiologists and infectious diseases specialists at CHU Sainte-Justine and elsewhere.

At this time, there is no evidence that the Delta variant is more dangerous and virulent to children or that it targets them more than the general population.

The higher incidence of COVID-19 among the youngest age group is due to the ease of transmission of the Delta variant among both toddlers and adults, whereas the ancestral strain of the virus was not widely transmitted among children. Vaccination rates are lower among the young, since children under 12 years of age do not yet have a vaccine available to them. However, most infected children often have few symptoms, and about one-quarter have cold-like symptoms. Complications from COVID-19 remain rare among healthy children.

CHU Sainte-Justine is anticipating a higher hospitalization rate this fall, mainly due to the return of common respiratory infections, such as influenza, that drive up hospitalization rates each year.



LONG COVID OR POST-COVID-19 SYNDROME



Although there is still no consensus on its definition, post-COVID-19 syndrome, commonly known as long COVID, is of interest to researchers and clinicians worldwide. Long COVID means that COVID-19 symptoms linger for several months after a person becomes infected with the virus.

Even if this form of the disease is rarer in children than in adults, a minority of children, whose initial infection may not have been severe, will have persistent symptoms.

In April 2021, a post-COVID-19 clinic—the first of its kind for children—opened at CHU Sainte-Justine. Children are monitored by our experts and their symptoms are carefully studied. Depending on the

symptoms, these patients may be referred to specific departments of the hospital. In this clinic, symptoms such as shortness of breath, chest pain and palpitations were observed for up to several months after the initial infection. In addition to these more common manifestations, a variety of other symptoms have been documented including headaches and difficulty concentrating.

Fortunately, many of the children followed for post-COVID-19 symptoms have seen their symptoms disappear or decrease in intensity over the months.

MEDICALLY VULNERABLE CHILDREN

Children with chronic illnesses (including diabetes and asthma) do not get infected more easily than children who do not have health problems. They also do not appear to develop complications more frequently than healthy children. But it is reasonable to expect that children at risk of complications from common viral infections will be at greater risk of complications from infection with COVID-19.

If your child is being managed for a specific disease, feel free to discuss the situation with their doctor or health care team if you feel the need.



VACCINATION

Vaccination against COVID-19 has been a hot topic for several months now. COVID-19 vaccines have been made available to the general population and to children 12 years of age and older, but they have not yet been authorized for children under 12 years of age, which sometimes causes concern among parents.

According to experts, a more sustained community transmission of COVID-19 may occur among younger people this fall. While these children are not yet vaccinated, hospitalizations in this group are rare and far less worrisome than for those who are older.



CHILDREN AND THEIR ACCESS TO THE COVID-19 VACCINE

Before any use of a new vaccine or drug, clinical trials are conducted in groups of healthy adults, so as to protect children from possible, as yet unknown, adverse effects. This is also the case with COVID-19. The first clinical trials were done in the 18+ age group, then the 12-17 age group, and finally the 5-11 age group. This will be followed by the 2-5 age group and the 6 months to under 2 years old group. Because the immune response of young children is different from that of adolescents and adults, and the safety of vaccines may differ, in the absence of data it cannot be assumed that the vaccine currently given to older children can be used for younger children.

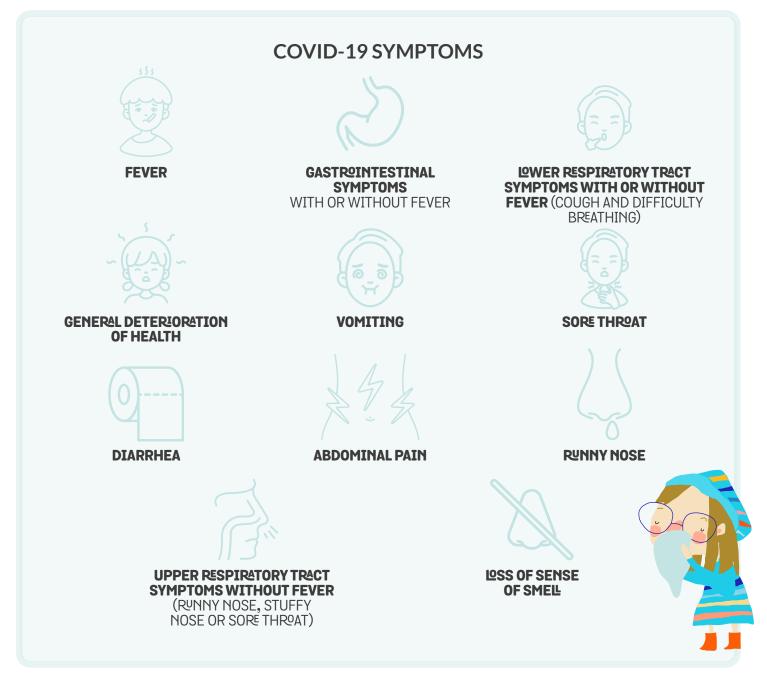


Clinical studies are underway in children aged 6 months to 11 years. These studies will allow to verify the levels of immune response induced by the vaccine, which will be compared to the levels in adults for whom efficacy is known, as well as to detect possible adverse reactions.



RECAP OF THE SYMPTOMS

One or more symptoms may occur when a child or teenager has contracted COVID-19. These symptoms are similar to those of the flu and the cold.



RECAP OF THE SYMPTOMS (CONTINUED)



Children and adolescents with COVID-19 seen at CHU Sainte-Justine since the start of the pandemic presented with a higher frequency of fever, followed by gastrointestinal symptoms and lower respiratory tract symptoms, such as coughing or difficulty breathing. These latter symptoms were not necessarily accompanied by fever.

PRACTITIONERS REMIND US OF THE IMPORTANCE OF MONITORING EACH MORNING FOR THE PRESENCE OF VARIOUS SYMPTOMS ASSOCIATED WITH THE VIRUS.

RECAP OF PREVENTIVE MEASURES

To protect yourself and others and reduce community transmission, compliance with preventive measures against COVID-19 remains a priority, regardless of the immunization status of the child or those around them.

Here is a recap of the main personal prevention measures:



Wash your hands regularly with soap and water for at least 20 seconds, especially when returning home. When this is not possible, use an alcohol-based solution.



If 10 years of age and older, wear a mask on public transportation, and in most enclosed or partially enclosed public places (see p.13 for wearing masks at school).



Cough or sneeze into your elbow. After using a tissue, throw it away and wash your hands.



Maintain a distance of at least 2 metres from people outside of your family bubble. If this is not possible, wear a mask.



When travelling in Quebec, Canada or abroad, **consult the current travel advisories.**



In case of symptoms, avoid contact with other people, especially the most vulnerable. Do a self-assessment at <u>http://bitly.bz/WNBoR</u> or call 1-877-644-4545 as soon as possible and follow the instructions given.



Sources: Basic health instructions to limit the spread of COVID-19 | Government of Québec (<u>quebec.ca</u>) Questions and answers on health instructions, symptoms, treatments and mental health during the COVID-19 pandemic | Government of Québec (<u>quebec.ca</u>)

WEARING A MASK AT SCHOOL

PRESCHOOL

ELEMENTARY

SECONDARY

Under the current measures, masks are permitted but not required for preschool students.

Wearing a mask is mandatory when walking within the school and using school transportation for elementary school students from Grade 1 upwards and for secondary school students.

In the Centre-du-Québec, Estrie, Lanaudière, Laurentides, Laval, Mauricie, Montérégie, Montréal and Outaouais regions, it is also mandatory in class.

The rules in place may vary depending on the evolution of cases in a region.



TRANSPORTS

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In public transport, masks are mandatory from the age of 10.

THE MEASURES CONCERNING THE WEARING OF MASKS MAY CHANGE ACCORDING TO THE EPIDEMIOLOGICAL SITUATION.

Sources: Back-to-school 2021 | Government of Québec <u>https://bit.ly/3sR1dN5</u> Wearing a mask or a face covering | Government of Québec <u>https://bit.ly/3gx4M6q</u>

ADDITIONAL INFORMATION



The epidemiological situation can change rapidly. It is essential to stay informed to protect yourself and others. Your child's school and school service centre will provide you with updated information about going back to school for the second time since the emergence of COVID-19.

The following websites are also useful for additional information:

- CHU Sainte-Justine chusj.org/en/Home
- Government of Quebec https://bit.ly/3ku7PNO
- Government of Quebec http://bitly.bz/z9Q4b

In addition, public health authorities in different regions are reliable sources of information on COVID-19.

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