

CIRCULAR

Date: March 30, 2020

CIRCULAR NUMBER: COVID#: 2020-29

To: CFS Authorities

Subject: **Information Pertaining to COVID-19**

Program(s): Work with high-risk expectant parents

Type: Policy For Internal Reference Only
 Procedure Information Only

Effective Date Immediately

Topic: Birth Alerts and the COVID-19 Pandemic

Primary and public health care providers are currently focused on responding to the COVID-19 pandemic.

CFS authorities and agencies are responsible for overseeing changes in practice they want to implement in relation to birth alerts. The following information outlines interim policy in response to COVID-19 and will be updated as needed.

- **Birth alerts currently on file at birthing hospitals will remain in effect for births expected during April 1 to June 30.** For the next three months, hospitals will notify CFS agencies of births where there is an existing birth alert on file. CFS agencies, with authority approval, can continue to cancel a birth alert on file if it is no longer required.
- **CFS agencies may, subject to authority approval, issue birth alerts between April 1 and June 30 in exceptional circumstances where the risk remains high despite other planning and assessment activities.** Agency staff will continue to engage in planning and assessment with all expectant parents before a birth.

The Department of Families has provided lists of existing birth alerts with a due date expected in the next three months to the CFS authorities. CFS authorities will determine if agencies may require additional supports and resources for these expectant parents and can work with the agency to cancel the birth alert, if appropriate. The CFS branch (inter-provincial desk) must be notified of cancelled

alerts, so that the hospitals can be notified. These actions will be documented by the inter-provincial desk in CFSIS.

Departmental resources may be redeployed to support planning with these families if needed.

- The first choice for expectant parents is to have them access voluntary services and engage with community supports.
- Agencies should seek to provide voluntary services, prioritizing referrals to community-based supports over public health at this time. The ability of health services to respond to referrals may be affected by their priority work around COVID-19.
- For all services noted above, existing CFS standards for documentation and record keeping remain in place. CFS authorities will provide guidance to their mandated agencies on any new or changed expectations regarding documentation for high-risk expectant parents expected to deliver in the next three months.

Information on existing community-based supports available for high-risk expectant parents is attached. It also summarizes current service levels of these programs as of March 26. This list is not exhaustive and local agencies will be aware of other supportive services for families in their community

As you know, many programs are having to alter service delivery approaches to meet the guidelines being established by public health. For example, programs may be increasing outreach services or using virtual approaches to connect with families (such as by phone or Skype).

A package of materials on supporting new practice approaches for birth alerts will be distributed for full implementation once the health and CFS systems are ready to do so, following the COVID-19 response.

Previous communication and guidance for agency staff about adhering to new protocols respecting COVID-19 remain in place. Staff should continue to follow directions about limiting exposure and follow the service practice guidelines distributed.

The most up to date information on COVID-19 can be found at www.manitoba.ca/covid19.

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