

22.01.18

9 Deputy R.J. Ward of the Minister for Health and Social Services regarding Paediatric Inflammatory Multisystem Syndrome (OQ.10/2022)

Will the Minister advise what work, if any, is being undertaken to address the occurrence of Paediatric Inflammatory Multisystem Syndrome as the number of COVID cases rise in children in Jersey?

The Deputy of St. Ouen (The Minister for Health and Social Services):

We know that most children do not become seriously unwell with COVID. Despite increased rates of infection in children, rates of hospital admission in Jersey remains very low. In the U.K. doctors have seen a small number of children and teenagers who develop a rare inflammatory condition linked to the virus referred to in the question, which I will abbreviate to P.I.M.S. (Paediatric Inflammatory Multisystem Syndrome). It remains very rare, it occurs in less than 0.5 per cent of children who have had COVID. Most children with the condition will not be seriously affected but in a very small number of cases it can be serious. The median age of children with P.I.M.S. is 8 years, mostly in the male sex with obesity from black or Asian ethnicities. There are no cases of P.I.M.S. recorded in Jersey to date in the paediatric age group. As to measures to prevent recurrence. Firstly, maintaining low community transmission rates and continued vaccination of children and adolescents reduces the risk. Secondly, public health guidance makes people aware of the signs and symptoms and the importance of timely contact with healthcare workers. Thirdly and lastly, the medical and nursing teams are trained in identifying early signs of P.I.M.S. and diagnosing with tests and executing treatment plans in accordance with established clinical practice.

3.9.1 Deputy R.J. Ward:

I asked the Minister and I was pleased to hear him say that medical teams are already aware and ready to deal with it. But can I ask the Minister for reassurance that, as we have learned in this pandemic being prepared for all situations is so important, can he reassure that that preparedness for this type of condition is there and can we reassure parents that should this very rare occurrence happen there is a plan to deal with it and it is discussed, for example, with the competent authorities Ministers when making decisions over children and COVID?

The Deputy of St. Ouen:

While the competent authorities Ministers have not discussed this particular condition, I do not think we would need to. This is an operational preparedness. I am assured that the medical and nursing teams are trained to identify the early signs. They know how to diagnose with tests and they know what the treatment plans are. There are pathways for treatment that are set by the Royal College of Paediatrics and Child Health, U.K. I have every confidence that our staff know of those and indeed that is what I have been assured of.

3.9.2 Deputy I. Gardiner:

I thank the Minister for his response, it is really reassuring that the medical team is aware and prepared. At the current wave we see it exceeded the number of children with COVID compared to previous waves, would the Minister advise if the parents or basically the general public were made aware about specific symptoms of P.I.M.S. conditions, so parents also can react quicker?

The Deputy of St. Ouen:

Yes, I will pass on that request to see if there is anything more that can be done. I am informed that there has been public health guidance by way of posters. There has been a media briefing by consultant paediatricians on the Government of Jersey website; that was done in the early days of the pandemic to make parents and caregivers aware of the signs and symptoms and importance of timely contact with a healthcare worker. I think what I could do is to make sure that if that was done in the early days, that information is still in the forefront of the website, it is still easily accessible and I will look into that.

3.9.3 Senator T.A. Vallois:

Could I ask the Minister, there are a number of recovery plans from COVID that have been initiated by the Government, what consideration within those COVID plans have been given to this particular condition, if any at all? How would the Minister envisage that being determined in a way of recovery, whether it is over a medium or long-term period?

The Deputy of St. Ouen:

There are various complicating conditions from which children can suffer as a result of COVID. I think the plans address generally the need for children to have the right support and well-being to get them back on track. It addresses educational needs, that in preschool conditions that would address developmental needs. There is not, I believe, a plan for each and every condition that a child might suffer from but drawing them all together they are good plans and good funding to put into ensuring that children can reach their developmental goals and educational goals too.

3.9.4 Senator T.A. Vallois:

Just briefly, in terms of the plans that the Minister referred to, has he taken soundings from the Children's Commissioner with regards to United Nations Convention on the Rights of the Child?

The Deputy of St. Ouen:

I know the Children's Commissioner has been involved and consulted in putting together those plans that have come forward as a result of the release of fiscal stimulus monies and the developmental plans to try and address the very real risks that we know children have incurred during this period of the pandemic.

3.9.5 Deputy R.J. Ward:

We are very pleased that this is a very rare condition but would the Minister agree that as numbers increase in children we have to have a great deal more awareness and facility to identify this condition, it is something we might be living with into the long term?

The Deputy of St. Ouen:

I would agree with that. We do need to be aware of it and I am confident that our clinicians are aware. I will do what I can to ensure that it achieves the appropriate prominence on our public health guidance.