

## **Advice for Health Professionals Working in Adoption & Fostering and with Looked After Children and Young People in view of Covid-19 outbreak**

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## 1. Advice for Health Professionals working in Adoption & Fostering and with Looked after Children and Young People in view of Covid-19 outbreak

This advice provides a full update to the advice issued on 19<sup>th</sup> March and 26<sup>th</sup> March 2020 and reflects the rapidly changing situation in Wales and the UK. The situation continues to change daily and NHS staff are urged to keep up to date with current advice from PHW and UK Government.

<https://www.gov.uk/coronavirus>  
<https://covid19-phwstatement.nhs.wales/>  
<https://gov.wales/coronavirus>

Looked after Children and Young People (LAC/YP) are a particularly vulnerable group and with school and education providers closing, we need to be aware of the increased risk of safeguarding concerns. We know that educational provision is a protective factor for many vulnerable children. LAC/YP are eligible for continued education provision. See guidance:

<https://gov.wales/vulnerable-children-and-safeguarding-coronavirus>  
<https://gov.wales/education-safeguarding-guidance-coronavirus>  
<https://gov.wales/education-coronavirus>

Paediatricians and LAC nurses are being redeployed into other areas of work which are being prioritised in response to the Covid-19 outbreak. The result of this is a reduction in paediatricians' and LAC nurses' ability to contribute as usual to well-established multi- agency working/ processes and this is also likely to be impacted by workforce and safety issues within partner agencies.

The Chief Medical Officer for Wales has confirmed that the NHS England (NHSE) prioritisation guidance for the NHS in England is applicable in Wales:

<https://phw.nhs.wales/topics/latest-information-on-novel-coronavirus-covid-19/information-for-healthcare-workers-in-wales/>

[https://www.england.nhs.uk/coronavirus/publication/covid-19-prioritisation-within-community-health-services-with-annex\\_19-march-2020/](https://www.england.nhs.uk/coronavirus/publication/covid-19-prioritisation-within-community-health-services-with-annex_19-march-2020/)

We do not yet know whether or when certain statutory processes may be suspended regarding LAC health assessments, adoption and fostering

reports, and how long this may last. Guidance and a change in Regulations is awaited.

Health professionals in Wales are working with the National Adoption Service and Welsh Government around practice issues and it is expected that further information on processes and pathways and perhaps legislation will be forthcoming.

We are working closely with AFACymru and the National Adoption Service to co-ordinate advice for health and social care professionals.

AFACymru have issued advice for professionals and agencies:  
[www.afacymru.org.uk/supporting-effective-functioning-during-covid-19/](http://www.afacymru.org.uk/supporting-effective-functioning-during-covid-19/)

The National Adoption Service in Wales has provided advice:  
<https://www.adoptcymru.com/news/update-on-our-services-in-the-current-covid-19-pandemic>

CoramBAAF UK have liaised with other organisations and NHS colleagues across the UK to produce practise points to address some of the emerging issues.

<https://corambaaf.org.uk/coronavirus>  
<https://corambaaf.org.uk/coronavirus/health>

## 2. Statutory Health Assessments – Adoption medicals, Initial and Review Health assessments

Health professionals are expected to keep contact and travel to a minimum and only when absolutely necessary. This is to comply with current UK recommendations on social distancing and to keep LAC/YP, their families and carers, alongside NHS staff as safe as possible and reduce the risk of virus transmission within communities in Wales and the UK.

All professionals who look after children and young people, should continue to base their judgments and practice decisions on the best interests of the child or children that they are caring for.

We must always be aware of the particular vulnerabilities of LAC/YP and consider the possibility of safeguarding concerns, particularly where we are not able to meet face to face.

The current advice is that virtual appointments/clinics should be used wherever possible as in other areas of Community Paediatrics. Using video conferencing or telephone should be considered for all LAC health assessments and Adoption medicals. This includes Initial Health Assessments (IHAs) and Review Health Assessments (RHAs). Where a physical examination is warranted, arrangements should be made for this to happen post Covid-19 restrictions.

Please continue to liaise with your local authority to communicate how your health board and LAC Health Team are responding to the current situation. Advice is still awaited from Ofsted in England and Welsh Government regarding statutory duty.

Health professionals across the UK with the support of CoramBAAF have been considering best practice in these challenging times. At the present time, conducting IHAs and RHAs by video or telephone should be feasible. Lack of parental health information and/or consent to obtain this is likely to make compiling reports very difficult. For LAC Health Teams, as NHS staff are redeployed, it may be necessary to provide RHAs only for the most vulnerable LAC/YP and provide support to others as needed. More flexible opportunities for keeping in contact with those LAC/YP who need it the most should be considered. The use of a triage system and discussion between LAC teams and social workers will help identify the most vulnerable LAC/YP. There is an expectation that LAC/YP placed from out of area will continue to have their health assessments conducted by LAC health team in the area where they are living.

With all assessments carried out virtually, it is important to record that a face-to-face consultation was not carried out. If there is a need for an examination, this should be recorded and planned for post Covid-19.

For Unaccompanied Asylum Seeking Children (UASC), video calls or telephone assessments can be conducted using interpreters, such as Language Line.

Some LAC teams have found ways to conduct 3 way calls to ensure input from the social worker. Whichever platform is being used for video calling or telephone assessments/conversations, it is important to manage this carefully so that LAC/YP have the opportunity to talk on their own and that the carer is also able to do this. You may need to check with Information Governance regarding the video platform you are using for health assessments.

The RCPCH has posted a statement concerning Child Protection medicals and LAC health assessments. Only clinically essential face-to-face meetings should occur. Please use clinical judgement as to whether or not face-to-face contact is necessary and seek advice from your line manager, health board and also experienced colleagues if necessary:

<https://www.rcpch.ac.uk/resources/covid-19-guidance-paediatric-services#safeguarding-looked-after-children-and-vulnerable-children-processes>

Phone and video conferencing should be used to respond to requests for advice from carers and young people. Health professionals can help with liaison around health concerns, hospital appointments, etc.

Some children, young people and their carers are understandably anxious. Please signpost to the PHW Covid-19 site for adults and NSPCC helpline and BBC Newsround for children and young adults for further and regularly updated information on the changing situation with regard to Covid-19.

<https://www.bbc.co.uk/newsround/51861089>

<https://www.childline.org.uk/info-advice/your-feelings/anxiety-stress-panic/worries-about-the-world/>

<https://phw.nhs.wales/topics/latest-information-on-novel-coronavirus-covid-19/>

<https://www.gov.uk/government/topical-events/coronavirus-covid-19-uk-government-response>

For those who are advising pregnant young women and care leavers, the RCOG statement is helpful:

<https://www.rcog.org.uk/en/news/professional-bodies-response-to-government-advice-for-pregnant-women-to-self-isolate/>

### 3. Children moving into Fostering and Adoptive placements

It is likely that some children have been and will be moved to new placements, without full considering the additional risk of Covid-19 transmission. As with all placements a planned placement is preferable and should consider all the risks and a robust risk assessment by the local authority or adoption collaborative should be carried out for foster care or adoptive placement moves. Health professionals may be asked for an opinion. Please use the latest information on the PHW site.

The risk assessment should consider concerns about increased number of contacts and travel and impact on others of the possible spread of infection vs impact of delay for the child or young person.

CoramBAAF has provided advice on managing introductions and placing children for adoption on their website:

<https://corambaaf.org.uk/coronavirus>

#### 4. Meetings with adopters/ Adoption and Foster Panels

The current advice is we should promote the use of video conferencing, Skype or telephone for Adoption and Fostering Panels and for discussions with prospective adopters. As always it is good practice to follow any consultation with written advice. Clear recording of meetings/consultations is expected from health professionals, to reflect current practice.

CoramBAAF has provided the following advice:

<https://corambaaf.org.uk/updates/coronavirus-adoption-and-fostering-panel-virtual-meetings>

AFA Cymru and National Adoption Service information:

<https://www.afacymru.org.uk/supporting-effective-functioning-during-covid-19/>

<https://www.adoptcymru.com/news/update-on-our-services-in-the-current-covid-19-pandemic>

#### 5. Collating reports and information

There may be difficulties with accessing information remotely and access to Child Health systems and electronic records if NHS staff are required to work from home. This may be a particular challenge for some NHS staff and affect the success of working from home.

#### 6. Reports on prospective adopters and foster-carers

It is unlikely that GPs will be able to continue to provide health assessments on prospective adopters and foster-carers and therefore the requirement to provide advice is likely to diminish for Medical Advisers, although advice to the Fostering Team and Regional Adoption Collaborative about individual

cases or policy may be required, particularly regarding temporary placements.

CoramBAAF have developed a self-declaration of health for social workers to use if agreeing an emergency temporary placement or where it is not possible to obtain Adult Health (AH) forms from GPs. Local authorities will continue to need advice from their Medical Adviser. There are a high number of foster-carers and kinship carers who may be at significant risk from Covid-19. This includes, for example, those with hypertension, Type 2 diabetes, the over 70s and male carers.

CoramBAAF have uploaded health guidance which will be updated regularly. The information and forms can be found here:

<https://corambaaf.org.uk/coronavirus/health>

<https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19>

The Fostering Network has provided advice and support to which foster-carers can be signposted:

<https://www.thefosteringnetwork.org.uk/advice-information/coronavirus-covid-19>