



Caretech/Cambian position on new admissions during Coronavirus – children's services

Prior to admission, in addition to normal impact risk assessment, due and documented consideration needs to be given to the following questions:

About the incoming young person

- Has the young person tested positive for Coronavirus in the past 14 days?
- Is the young person currently displaying symptoms?
- Has the young person been in direct contact with anyone who has tested positive for Covid19 (social worker will need to answer if possible)? Local Health Protection Team will be able to advise on whether the exposure was significant.

About the home

- Is anyone living or working at the home/school currently self-isolating?
- Is anyone living at the home [clinically extremely vulnerable](#)? Does anyone living or working at the home/school have serious underlying health conditions?

If you answer Yes for any of the questions above, then a further consultation with HPT and MD is required. Ensure that the necessary risk assessment decisions are documented and confirmed with the service's Registered Manager/Principal and Regional Manager/Responsible Individual.

Our priority is to protect our existing young people in our care and our staff. Therefore wherever possible we will expect new admissions to have completed and have the results of a Covid 19 test to ensure we can plan and manage the admission. We understand however that this may not always be possible to be achieved in a timely manner. We aim to enable all new admissions to go ahead as long as this does not place other young people, our staff and the wider community at significant risk.

The NHS now has responsibility for testing patients being discharged from hospital to a care home facility, in advance of a timely discharge. The Hospital Discharge Service and staff will clarify the outcome of Coronavirus testing and whether any COVID-19 symptoms are apparent, during the process of transfer from a hospital to the care home.

If a young person has no COVID-19 symptoms or has tested positive for COVID-19 but is no longer showing symptoms and has completed their isolation period in a hospital or another setting, then care should be provided as normal and the young person can be admitted.

These are examples of the potential case scenarios that services may experience during new admissions:

Test completed - negative result	<ul style="list-style-type: none"> • Young Person is admitted
Test completed - positive result	<ul style="list-style-type: none"> • If the risk can be managed, then Young Person is admitted and agreed to self isolate for 14 days. If risk cannot be managed, self isolate elsewhere for 14 days and then retest prior to admission.
Test completed - pending result	<ul style="list-style-type: none"> • Admission delayed (if feasible) until results are back. If delay is not possible - self isolate until the test result is back. Then follow guidance for conclusive test result.
Test completed- inconclusive result	<ul style="list-style-type: none"> • Young Person is admitted, agreed to complete self-isolation for 7 days or requested test to be repeated and self isolate until result is back
Test declined by the Young Person	<ul style="list-style-type: none"> • Young Person is admitted, agreed to self-isolate for 14 days
Insufficient time to be tested (emergency admission)	<ul style="list-style-type: none"> • Young Person is admitted, agreed to be tested, agreed to self isolate for 14 days until the result is back
Test and self isolation declined Other situations not described in this guidance	<ul style="list-style-type: none"> • Advice sought from the local HPT , consultation with MD required followed by the risk assessment

A decision on whether it is appropriate for a young person to be admitted should be made locally in discussion with MDs and where required with advise of the Health Protection Team. Where appropriate - the risk assessment of each case should be completed. The decision on whether a test is appropriate in the specific circumstance is a clinical decision, informed by information on the context, clinical needs and urgency of the situation and appropriate risk assessment by the service and public health team involved. The decision to test and the results must not impact on the urgency of responding to the needs of the child and ensuring their safety and wellbeing. **However**, the placement should take account of the health protection and infection prevention control requirements, if the young person is thought to have had a significant exposure or symptoms that could be COVID-19.