Safe and accessible COVID-19 testing for children and young people with disability.

**Purpose**

The purpose of this document is to provide guidance to the Children’s Health Queensland workforce when providing COVID-19 testing advice to children and young people with disability and their families, particularly where variations to standard testing practices may be required.

The Queensland Department of Health has recognised that people with a disability are a priority population for the purposes of COVID-19 response planning. The [QH Disability COVID Policy and Action Plan for Queenslander with disability](https://www.qld.gov.au/health/disability/covid) requires HHS to make specific COVID health care arrangements for people with disability including to ensure that COVID-19 testing services and service models are accessible for people with disability (Action 4.4).

There are likely three main groups within this cohort, but the considerations outlined in this guideline will be applicable to other children and young people:

- **Children and young people with physical access issues.** This may involve equipment that requires additional space and/or additional carers.

- **Children and young people who have difficulties with social distancing**, particularly in unfamiliar, busy environments where there is additional worry. These children may be intolerant of PPE, have difficulties maintaining physical distance or following physical distancing measures, and express their stress and frustrations in ways that others find difficult to understand.

- **Children and young people with comorbid medical complexity and/or fragility**, where there is concern about infection risk associated with large crowds. This may include children known to specialist teams such as the Queensland Paediatric Palliative Care Service.
Background

The COVID-19 pandemic has brought disruption to health and social systems across the world. Health services have been required to rapidly respond to meet the needs of their communities. International evidence indicates that children and young people make up only a small number of cases of COVID-19, and that children largely experience a mild illness course. However, children with disability are more likely than their peers to have comorbid medical conditions and often experience social and systemic barriers to health care that can exacerbate both concern and risk.

Children’s Health Queensland has established a COVID-19 Testing Clinic for children on the ground floor of the Centre for Children’s Health Research (CCHR) building within the Queensland Children’s Hospital precinct. This testing centre is well designed for most children and young people and has surge capacity into the neighbouring Staff Wellbeing Centre. However, there are accessibility issues for children and young people who have assistive technologies or sensory needs, or who require more than one parent, carer or support person in attendance. For example, doorways are narrow and testing cubicles are small with narrow openings. The space is enclosed and is crowded at periods of peak demand.

The COVID-19 Testing Clinic surge space (Staff Wellbeing Centre) will be more suitable for some children with disability. This area could be utilised for children who require a variation to the standard process to ensure their health care needs are met. Prioritisation would be considered on an as-needs and capacity basis.

The CHQ COVID-19 Testing Clinic has variable hours of operation. This flexibility enables the clinic to respond to changes in community need and public demand.

Scope

This guideline applies to all medical, nursing, allied health and administrative staff working for Children’s Health Queensland in an inpatient, outpatient, or community settings and who may be providing advice to families about options for COVID testing.

Guideline

(1) **Any child who is unwell** and displaying more than mild respiratory or other COVID-19 symptoms needs to be directed to the Emergency Department. This includes children with disability.

(2) **Children who may need variation to standard practice for a successful COVID-19 test** can be flagged at the CHQ COVID-19 Testing Clinic ahead of their arrival or at the time of triage. This could happen the following ways:

   (a) **The primary treating team can call the QCH COVID-19 Testing Clinic** on 3068 1320 or the nursing DECT phones (3068 1149/1152) to let them know that a child needs testing ahead of the child arriving at QCH. This gives the clinic time to ensure the additional space in the Staff Wellbeing Centre is operational, other alternative measures are in place, or to let the family know how busy the clinic is at that time.

   (b) **The child’s parent can call the QCH COVID-19 Testing Clinic** on 3068 1320 ahead of leaving home to attend the clinic to advise that they are coming, to enable time to stand up the additional space if required or to let the family know how busy the clinic is at the time.

   (c) The family can let the greeter at the door of the clinic or clinic administration know that their child may not be able to access the standard clinic, tolerate a long wait in an unfamiliar environment, or have additional health care needs. Depending on need, consideration of an alternative setting for
waiting and for test administration may be required. This may include waiting in their car or on the grass until the team is able to complete their test. The family could give their mobile number to the team so they can be called when the team is ready.

(3) Families need to be advised that:
   (a) The CHQ COVID-19 Testing Clinic phone number may not be answered in times of peak demand
   (b) Clinic opening times are flexible and vary according to demand and capacity
   (c) Variations to standard practice will be made on the basis of individual need and circumstance

(4) Families calling ahead enables the CHQ COVID-19 Testing Clinic staff to:
   (a) Provide advice to families as to the current demand for service
   (b) Provide advice re the anticipated opening hours for the clinic on that day (subject to change)
   (c) Determine whether a variation to standard practice may be required (eg. delivering the test in an alternative area such as the Staff Wellbeing Centre).

(5) **A very small number of children may not be able to safely attend the QCH COVID-19 Testing Clinic** at all. Alternative testing opportunities will be considered following both a medical and risk review, and consultation with the relevant Nursing Director. Alternatives may include:
   (a) Emergency Department (under sedation).
   (b) Hospital in the Home

### Additional Considerations

(1) **Communication** with the child and their family/carers:
   (a) Understand the child’s preferred means of communication and check in with the child, their family members and/or trusted others to see if there are additional strategies that will facilitate a successful COVID test and positive experience.
   (b) Explain the testing process to the child using a method of communication that is suited to the child’s individual needs. This may include spoken language, picture cues, gesture or sign (using an AUSLAN interpreter if required).
   (c) A social story may be helpful to support a child’s understanding of the testing procedure. An example of a social story is the [Getting a Coronavirus Test Done](developed by Tara Tuchel, Speech Language Pathologist, Autism Little Learners).

(2) **Previous adverse experiences of health care:**
   (a) Many children with disability and their families have experiences of health care that have been unpleasant or traumatic. There may be triggers in the CHQ environment that exacerbate stress and anxiety.
   (b) Personal Protective Equipment (PPE) used during a COVID test may also elicit a trauma response.
   (c) Consult with the child and/or with their family members about ways to reduce stress and anxiety. This may include delivering the test in a particular environment, using child-friendly PPE if available, and including the child and their family members in as many aspects of decision making as possible.
(d) Refer to **CHQ-PROC-62111 Procedural Pain Non Pharmacological Management** procedure which has been developed to support CHQ staff in the process of administering painful or distressing procedures to children

**Related documents**

**Policy and standard(s)**

- Queensland Health COVID-19 Policy and Action Plan for Queenslanders with disability
- Australian Health Sector Emergency Response Plan for Novel Coronavirus: Management and Operational Plan for People with Disability

**Procedures, Guidelines, Protocols**

- CHQ-GDL-63327 The management of children with COVID-19 (including HITH)
- CHQ-PROC-62111 Procedural Pain: Non-pharmacological management

**Consultation**

Key stakeholders who reviewed this version:

- Executive Director Clinical Services
- Executive Director Clinical Services QCH
- Executive Director Allied Health
- Disability Cross Sector Partnerships
- Nursing Director, Critical Care
- Nursing Director, Clinical Support
- CHQ NDIS Steering Committee Members
- CHQ Disability Clinical Advisory
- Clinical Nurse Consultant - Infection Management and Prevention Service (IMPS)
- Service Group Director Infectious Diseases, Immunology/Allergy, Rheumatology

**Guideline revision and approval history**

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- Disability, COVID-19, testing, children, young people, 19409

**Accreditation references**

- NSQHS Standards (1-8): 3 Preventing and Controlling Healthcare Associated Infections 5 Comprehensive Care
- ISO 9001:2015 Quality Management Systems: (4-10)