There is little clinical data regarding the effect of COVID-19 on children with underlying serious health conditions.

Initial data from several countries suggests that children are significantly less affected by COVID-19 infection than adults, with the majority of infected children reported to be asymptomatic or experiencing only mild illness. Although critical illness has been relatively rare in children, it is known that adults with underlying serious health conditions are more susceptible to more severe complications, including death, and children with underlying serious health conditions may be similarly at risk. This Briefing Note sets out the recommendations for caring for children with underlying serious health conditions during the COVID-19 pandemic.

COVID-19 is highly infectious and appropriate infection control practices (including the use of Personal Protective Equipment (PPE) when indicated) is particularly important when interacting with children with underlying serious health conditions, to protect them from contracting COVID-19. This may be difficult in resource-poor settings where access to basic necessities such as running water may be limited.

Families of children with underlying serious health conditions often rely on support from home care, health and social services, special schools, friends and family, to provide care. The need for physical distancing and changes to care arrangements may disrupt usual support systems which could result in families struggling to care for their child.

Families may also experience heightened fear and anxiety related to COVID-19, including the possibility of transmission to the child or other family members by carers coming into the home. Some families may elect to suspend in-home support to avoid infection.

Decision-making on the appropriate intensity of care a child with serious underlying health conditions receives should, ideally, be made in advance.

Ensure the continuation of holistic child and family centred care, albeit, in potentially new, unique and innovative ways, despite the challenging circumstances of the COVID-19 pandemic. Avoid separating children from their carers as much as possible.

Hope for the best, but plan for the worst. Plan for the possibility that a child with an underlying serious health condition becomes unwell, or his/her main carers become too sick to ensure ongoing care and support for the child.

Plan for a key family member or trusted contact to assume responsibility in the event that either the child or carer becomes unwell with suspected COVID-19 to ensure appropriate access to testing, if available, and continuity of care. Plans should ensure access to essential medicines and supplies for the child's underlying serious health conditions (e.g. opioids, seizure medicines, nutritional feeds etc.).
- Maintain ongoing contact with the primary care clinician that oversees the child’s care, in order to optimise continuity of care in the case of COVID-19 infection. Virtual care (e.g. telephone, WhatsApp and other video technologies) can be used whenever possible and can facilitate individual and family support while physical distancing is required.

- Promote timely, life-affirming advance care planning that takes account of the impact of COVID-19 infection on the child or their carers. Develop advance care plans (ACPs), particularly those with “Do Not Attempt Resuscitation” orders (DNAR) using individualised, transparent and compassionate communication. Review existing ACPs already in place in the context of possible COVID-19 infection.

- Ensure ACPs are developed using open communication in a life-affirming manner which incorporates and acknowledges the views of the child (if she or he is able and desires to participate) and caregivers.

- Keep health professionals up to date with available evidence and experiences of others in caring for children with serious underlying health conditions who have contracted COVID-19.

- Provide ongoing emotional, social and spiritual support to children with underlying serious health conditions and their families and recognise the additional stress they may be facing as a group who may be at higher risk of serious complications or death from COVID-19.

References
- Joint statement on advance care planning. British Medical Association, Care Provider Alliance, Care Quality Commission, Royal College of General Practice.

Authors
Downing J (ICPCN), Chambers L (Together for Short Lives), Daniels A (ICPCN), Doherty M (University of Ottawa), Drake R (Starship Children’s Health), Ferguson J (Together for Short Lives), Kiman R (University of Buenos Aires), Lacerda A (Portuguese Institute of Oncology, Lisbon Centre), Muckaden MA (Tata Memorial Centre), Nakawesi J (Mildmay Uganda), Okhuysen-Cawley R (Texas Children’s Hospital), Palat G (MJN Institute of Oncology Hyderabad), Phillips M (Perth Children’s Hospital), Thompson S (Parent), Vadeboncoeur C (Children’s Hospital of Eastern Ontario).