

Circulation	Cllr Rachel Powell Caroline Turner Ali Bulman
From	Jan Coles Head of Children's Services
Title	Children's Services and COVID-19
Purpose	Synopsis of response from Children's Services during COVID-19 pandemic
Status	Information
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1. Early Help, Front Door, Assessment and EDT

1.1 Early Help

- Over 700 children were previously open to Early Help and this has been significantly reduced. All cases allocated to an Early Help support worker have been risk assessed and this is attached to WCCIS. Families have been individually contacted to discuss the options and if we are able to close safely then this has been done. Cases which have been closed all have case closure forms with a clear rationale to inform decision making.
- We have identified families with ongoing risk and the level of contact/ support each family requires at present. This summary is available to all members of the team so that if someone is absent it is clear what support is required.
- Early Help staff have developed a family support pack and a young person pack to send out to families, this has also been disseminated out to partner agencies.
- We have developed a plan to reduce the service provision in Early Help but ensure that we are still available to support families during this challenging time, by providing both one off and longer term skype parenting sessions, offering advice / support and strategies to enable them to feel confident in their parenting and provide children with as stable an environment as possible. We are continuing with some Incredible Years home coaching, sending out the resources and then talking parents through these. The Family Information Service also remains instrumental in getting messages out to parents and young people through Facebook.

- Early Help staff have been trained to support the Front Door team, so that if there is an increase in contacts, as anticipated, or a reduction in staff, the Early Help Co-Ordinators are able to cover this. We have deployed staff based on their experience and skills into service critical areas, which have involved care and Support teams and our residential care.
- We have liaised with partner agencies (Youth Intervention Service) and Detached Youth Team to ensure that we have provided and joined up and consistent approach.

1.2 Front Door

- The Front Door Team is now the single point of contact for all enquiries and communications for the whole service (unless there is an allocated social worker who is contactable). To date, the team remains fully staffed and we have ensured that staff from the closely linked Early Help Team are fully trained and set up to respond to any increase in demand for the service. This will more than double our capacity, if required, to answer calls /e- mails and provide information, advice and assistance.
- During the week beginning the 16th March, we had 119 approaches to service and 9 of those were assigned to the Assessment Team for further intervention. Following the government restrictions on social distancing the number dropped to 98 approaches to service with only 2 assigned to the Assessment Team. We anticipate the number of approaches to the Front Door Team (and referrals) will increase as time goes on, as the virus peaks and restrictions in place have a greater negative impact families' ability to cope. We are confident that we have the resources and links with other professionals to respond to risk appropriately.
- We continue to respond to approaches to service as previously, by completing agency checks and consulting parents and professionals. We have access to contact details of all the head teachers / safeguarding leads for all schools in Powys as well as full access to Teacher Centre to enable us to carry out checks with Education. Health have also provided a central point of contact. This has enabled us to continue to make proportionate decisions and to manage risk appropriately

1.3 Assessment

- All active cases currently under assessment have been risk assessed and graded accordingly. Cases that can be safely closed have been closed in a timely way to ensure capacity to respond to an increase in referrals and the potential depletion in workforce capacity over the coming weeks.
- Separate duty systems in North and South assessment teams are enabling us to manage the requirement of any immediate visits and child protection investigations.
- We have contact with Social Workers to ensure any risk management issues are shared and solutions agreed. Urgent visits are prioritised and will be risk assessed to ensure both the key worker and the family are protected - all staff have access to PPE.
- Strategy meetings / discussions are happening as normal with the exception that they are being undertaken solely via Skype. Arrangements are in place for child protection medical examinations.
- Support and assistance will remain available to 16/17 year olds who are in need of accommodation or present as homeless.
- For those children where it is deemed unsafe to remain at home in the care of their parents, then they will be safeguarded as a critical priority and services mobilised to meet the assessed need.
- Staff are being freed up to offer critical support to other service areas
- There are currently 122 active cases within the service however in line with the risk assessment process a high number of the cases will be closed or referred to Early Help Services for low level support once normal services are resumed. Information packs have been prepared which can be shared with families and which provides relevant contact telephone numbers etc.
- Urgent cases are being transferred quickly to the receiving teams post ICPCC / Initial Hearing care proceedings so that plans can be managed within the arrangements set out for Care and Support Teams.

1.4 EDT

- The majority of the work of EDT can be undertaken by telephone from base with staff only needing to go out into the community to undertake critical Mental Health and Child Protection assessments and direct work with the public infrequently, although demand is likely to increase in the coming weeks.
- 4 out of the 5 available ‘dual registered’ (Approved Mental Health Practitioners and Child Protection) Social Workers in EDT are currently needing to self-isolate in line with Covid- 19 Government advice and guidelines. Currently these staff are fit and well and continue with all EDT duties apart from going out directly to respond to calls including Child Protection enquiries and urgent Mental Health Act assessments.
- Agency dual registered Social Workers are being employed to cover shortfalls in capacity to meet current legislative requirements. Relaxation of the legislative requirements of the MHA 2005 have been implemented, allowing us to roll forward of MH Assessments from EDT to daytime services, for persons who have an identified place of safety has relieved some of the pressure on EDT. This has been agreed with Dyfed Powys Police as a necessary action.
- AMHP capacity/cover remains our biggest risk and we are continuing to try and recruit agency staff in this area to increase resilience.
- The EDT TM is also absent due to Covid-19 symptoms/related illness. Interim arrangements have been put in place to cover the TM role by re-deploying a staff member from elsewhere in Children’s Services.
- The EDT rota has been reconfigured to ensure that the existing 4 staff who are self- isolating will provide EDT cover by telephone cover over all out of hours shifts.
- Activity logs are being completed daily by EDT staff to monitor activity which will help ensure that Adults and Children’s services can actively identify the trajectory of need to better focus resources and identify areas where additional resources are needed. Business Intelligence is prioritising building a report on EDT activity which will enhance our ability in this respect.
- A new rota has been developed to ensure that there is sufficient AMHP and CP qualified workers available to meet the current and projected demands. This will be continually reviewed and amended as necessary. Moving forwards additional

Children's Services cover will be made available during 'out of hours' times by changing the operating times of the Children's assessment team which will operate Mon-Sun from 8.30 am to 12 midnight and will sit alongside the EDT provision. Skeleton EDT staff will cover the hours between midnight and 8.30 am.

This will replace the 'on call' provision currently in place.

- There has been additional work, for example parents refusing to let teenage children back into their homes if they have gone out to socialise against their parents' wishes and an increase in mental health work and vulnerable adults/older people. It is anticipated that this work will increase over the coming weeks. Additional resources have been made available to the service to help ensure that any increase in calls can be managed. Adult Services have redeployed staff to manage an increase in calls in respect of community adult care needs. There is also a bank of support staff from CS who have agreed to provide support out of hours on an ad hoc basis who are able to respond to acute situations such as family breakdown freeing up qualified staff to respond to statutory referrals.

2. Care and Support, including Integrated Disability, Services

2.1 Children at risk of harm

During this period, it has been important to identify and plan for the potential increased risk to children and young people. This involves drastically reduced contact with professionals, family members and peers and a change to support networks. Children and families are now spending most of their time indoors together, which may lead to increased pressures on the family unit. These potential risks are compounded by the need to balance the health and wellbeing of children and families by limiting physical contact and adhering to social distancing techniques to reduce the spread of COVID-19.

2.2 Children and families supported through care and support plans

2.2.1 Managing risk

Children's Services engaged in a risk rating exercise in the early stages of business continuity planning. This has ensured that the cases of all children open to Children's

Services now have a rating which has provided the service with a clear view of which care and support cases are towards the higher end of the care and support threshold. This includes households where there is domestic abuse, substance misuse and / or a risk of family breakdown. The number of care and support cases which will receive additional monitoring and support is 20.

These children and their families will continue to receive services throughout this period. The care and support plan will be reviewed to reflect the changes to methods of support and any additional risks which could emerge during self-isolation. All professionals working with the child and family will make efforts to maintain relationships through regular telephone contact or video chat calls. Children and families will be able to access a school-based child-care hub and this service offer has been communicated to them.

2.2.2 IDS

Within the Integrated Disability Service (IDS) we are continuing to visit, support and advise families. We have increased the use of direct payments wherever possible. Short breaks are also taking place if there is a risk of family breakdown or in the event of a family needing an urgent break.

2.2.3 Visits

The frequency of visits is identified in the child's plan and will be followed. Children and families are being spoken to about changes to service provision. Decisions to enter the household will be made in partnership with the family and based on an assessment of risk. The health of all family members will be considered, and all staff will use PPE when entering households where there are symptoms. Staff will explore opportunities for direct contact and spending time alone with children in garden spaces or whilst walking in green spaces. Social workers have resources to share with families on activities and online resources they can use as support. Social workers can offer advice on routines and joint activities for families in self isolation.

2.3 Children and families supported through care and support protection plans

2.3.1 Child Protection Register

Currently in Powys there are 91 children on the child protection register (CPR). The categories of registration which have the largest number of children are emotional abuse followed by neglect. To ensure our resources are targeted towards the correct families, 9 children have been identified for an earlier review child protection conference. These are children where the social worker will be recommending to conference that the child's name be removed from the CPR.

The Wales Safeguarding Procedures (2019) state that the child whose name is placed on the CPR must be seen by the social worker every 10 working days. This timescale will remain in place during the pandemic however the methods of contact will need to adapt and there may be circumstances when a social worker is unable to see the child within the family home.

Having direct contact with a child may impact on their health due to the increased risk of infection. In turn, this will compromise the wellbeing of all other household members and increase the strain on family functioning potentially leading to the child being at greater risk. Any visits to households will be considered in this context and justified. If any household members are in high risk categories, the social worker will speak with their manager and agree / record how to proceed. This discussion will also consider the wishes and feelings of the family. Children and families are increasingly fearful of direct contact with staff in case they become infected with COVID-19.

Social workers are also having contact with family members at the door of their property or in the garden / local green spaces if they are unable to enter. All efforts are being made to speak with the child alone.

2.3.2 Child Protection Conferences

In respect of child protection conferences, Powys has developed and ratified a policy document which clarifies how these will be undertaken. Child protection conferences

are now being undertaken virtually. This is being closely monitored and is working well in these early stages. The policy gives clear guidance on how virtual conferences will work and expected practice. Timescales in respect of a case reaching conference and the periods for review will continue to adhere to Wales Safeguarding Procedures (2019). However, the policy pre-empts issues around family participation and quoracy. The safeguarding unit will ensure that children and families are able to participate and will consider a reasonable delay if family members are unwell. However, the conference must be reconvened within a reasonable timescale. The safeguarding unit will assess all cases on their individual merit and may, in specific circumstances engage in a desk-based review and place the child on the CPR if the concern warrants this. A review conference could occur as soon as the family is able to engage.

Engaging families in the child protection process in a meaningful way is key to the success of our work with families. The current circumstances are bringing new challenges and barriers to this important aspect of our work. Many resources for families have ceased or changed the way they work, such as IFST and drug and alcohol support, making it a challenge for families to work on aspects of their plan.

Ultimately, all decision making will continue to be defensible, agreed with a manager and clearly recorded on the child's file and the Children's Services action log if outside of standard procedures.

2.3.3 Core Group Meetings

All core group meetings are being managed virtually, and within timescales. All child protection work, including core groups is multi-agency work and it is a challenge to get core groups fully represented in the current circumstances. This is being raised with partners.

2.3.4 Pre-birth assessments

There are a high number of pre-birth assessments currently underway. The pre-birth risk assessments are being tracked by a principal social worker who has the lead responsibility for ensuring that social workers are working on plans which can include a birth plan, home plan, foster placement plan and/or court plan. Weekly meetings are being held and this work is being overseen by the senior manager, Sharon Powell.

There are 22 pre-birth or newborn babies currently under review. Court applications have been made where necessary and hospitals are working closely with Children's Services.

2.3.5 Court work

Weekly tracker meetings for all court cases are continuing and are chaired by a senior manager and include our legal advisors. These meetings also consider children subject to the Public Law Outline and cases in care and support which are causing concern. A court specialist is now in place which is a county wide role operating at principal social worker level. This specialist will oversee all court matters and ensure that any actions are undertaken in a timely manner. Any issues arising are immediately raised with the senior manager.

2.4 CP Medicals

Work is underway regionally and nationally regarding confirmation of process if a child protection medical is required when a child has COVID-19 symptoms.

3 Corporate Parenting

3.1 Children Looked After

3.1.1 Managing risk

- Children and young people currently being looked after by the local authority in Powys continue to receive statutory visits and reviews in line with the timescales set out in their care and support plans.
- Each child or young person's case has been reviewed by a manager and rated according to the identified risks. The majority of our children are in stable high-quality placements supported by skilled and committed foster carer colleagues.
- A small number of cases are receiving additional visits and input to support their needs and those of their foster carers. In particular, children placed at home subject to a Placement with Parents Agreement have been identified as requiring supplementary support and resources. We recognise that the families are currently placed under severe pressure during the 'lockdown' period.
- Children placed with independent fostering agencies and in residential settings outside the county continue to receive an equitable and supportive service.

- The allocated social workers are delivering a flexible and supportive service and are actively devising creative solutions to overcome the stress and anxiety that some children and their families are experiencing in the current situation.
- Risk is being appropriately assessed, managed and overseen by managers and children's needs are actively being addressed. The teams are working hard and are utilising a 'can do' mentality.
- This is a period of high case activity and the crisis planning work is taking place alongside the needs of a very busy service.

3.1.2 Education

- Children looked after in Powys are remaining at home in the current climate to reduce the risk of infection being transmitted between home and school and to safeguard the whole family including their foster carers. This decision was made at senior level in collaboration with colleagues in Education and is viewed as a measure that keeps children looked after safe from infection. This stance prioritises childcare places for the children of keyworkers and the most vulnerable children in the care of their families.
- For some fostering families this has presented challenges that have necessitated extra practical and financial support to be allocated to foster carers caring for children with complex needs and behaviour.
- Education packs for home school work are in place to support learning during lockdown.

3.1.3 Family Time Contact

- Unfortunately, face to face family contact has ceased for the moment. However, children and their families are being encouraged to see each other via social media, telephone, text, email, letters, Skype and Zoom. This is very difficult for some children to comprehend. Foster carers understand the importance of making the children and young people feel safe and secure with reassurance and good emotional support. As soon as it is safe to do so, the normal schedule of family contact will resume.

3.2 Care Leavers

- For care leavers with limited support networks and resources, this is a worrying an anxious time and a time when many will be at increased risk of a deterioration in their physical and mental health and emotional wellbeing.
- The care leavers in Powys have all been contacted to assess and support their well-being and physical needs. A register of current locations has been set up to easily identify where support may be needed.
- The young people have been candid about the anxieties they feel about self-isolation and the risk of infection in the lockdown period and have accepted support and guidance to address their needs. Contact is being maintained with care leavers by face to face visits, telephone and email contact and via a variety of social media platforms according to the preference of the young person.
- Every young person has been contacted to ascertain their current needs. The social worker and personal assistant workforce has been strengthened with additional support worker capacity by re-deployed staff to ensure that there is a flexible and responsive service in place.
- There are emergency packs containing a basic food supply, toiletries, sanitary protection and cleaning products prepared and ready for immediate delivery or collection if required. Arrangements are in place to offer care leavers financial support either in cash or into bank accounts, allocation of food vouchers and e-vouchers and Smart meter cards to pay for utilities are available.

3.3 Powys Fostering Service

- The Fostering Service is fully operational and compliant with all staff engaged in this critical area of business. Foster carers are receiving enhanced support from their supervising social workers and have full contact details of all staff members should their allocated worker become ill or unavailable.
- The informal support networks that foster carers have, have been revisited and engaged as a means of offering further support if necessary.
- A foster carer survey has been undertaken to ascertain their views and wishes and to tailor the service to local needs.
- The pool of foster carers is being maximised by contacting retired or those who have finished fostering to invite them to re-join the Powys cohort of foster

carers. Within the local authority a recruitment campaign has identified 17 employees willing to be assessed as emergency foster carers. This planning is essential to create sufficient capacity to care for children whose foster carers become ill and unable to care for them while they recover.

- We recognise that foster carers and their families are under immense pressure with children at home for this prolonged period of time. For those foster carers who need additional help we are utilising the Edge of Care service for practical support and guidance and where needed financial support is being allocated to help our foster carers cope.
- The foster carers are delivering an impressive high quality of care and retain their resilience and commitment to children.
- Powys Fostering Panel continues to conduct business remotely to ensure the approval and review of foster carers.

3.4 Powys Adoption Service

- Powys adoption services are part of the Mid and West Wales Adoption collaborative arrangement. The regional service is hosted by Carmarthenshire Children's Services.
- The face to face activity of assessing adopters and placing and matching children has ceased until it is safe to resume.
- The more administrative elements of the service continue in readiness to resume safely at the right time.
- The needs of local children for adoptive placements are predicted to increase in the coming months so the service is preparing for the increased demand.
- Adoption Panel business of approving, reviewing adopters and matching with children continues to be conducted remotely. However, introductions and placing children with their adopters will resume when deemed safe to do so.

3.5 Powys County Council's Children's homes – Golwg y Bannau and Golwg y Gamlas

- The children's residential homes continue to offer full time care to young people with complex and enduring needs.

- The staffing position has been precarious and recognised as such for a considerable period of time. However, this area of the service has had the highest rate of staff self-isolating and demonstrating COVID-19 symptoms resulting in further staffing pressures.
- One young person has been in isolation after developing symptoms. Extreme care has been exercised to reduce the risk of further infection to staff and the other residents.
- Short break provision has ceased temporarily and statutory visits have been suspended whilst there is a risk of infection. Allocated social workers are calling in by telephone and Skype to monitor the well-being of the young people. There is also full access to daily records via the WCCIS electronic data management system.
- A staff survey conducted in first days of BCP identified staff with skills and experience suitable for redeployment.
- Staff have been re-deployed to the service to supplement the substantive staff cohort. Whilst shifts are being covered, it is a daily challenge to identify appropriately experienced and trained staff to support the service.
- An abridged suite of training has been developed and delivered to ensure that re-deployed staff meet mandatory training requirements.
- Both homes have been closed to visitors
- Statutory visits are being conducted via video call.
- Every effort is being made to ensure that the young people and staff are supported to maintain health, safety and well-being in a very difficult environment.

4. Intervention and Prevention, including Youth Justice, Services

- Edge of Care, Family Support, Placement Support and IFST are deemed non-critical in the business continuity plan and all staff have been redeployed.

4.1 YJS

- A skeleton staff remains in the service to provide support to 16 high risk cases and to ensure bureaus continue, where possible virtually, and to provide cover for Appropriate Adults and court appearances.

- Dyfed Powys Youth Offending Services have worked closely with police and courts to ensure there is robust cover for children involved in the criminal justice service.
- Powys YJS are working closely with YJB Wales to ensure relevant information linked to reporting and National Standards are completed, when it is possible to do so.
- A number of staff have been redeployed to other service areas. Whilst this can be an anxious time for staff, the feedback from staff has been positive.

4.2 IFST

- Staff have been redeployed to other teams within Children's Services. They are being allocated to priority cases and are supporting the business-critical work.

4.3 Edge of Care and Family Support

- The team leaders have been deployed to different service areas and are responsible for directly managing all the support staff who have been redeployed. They are ensuring support staff are clear on the work that is expected of them, and that they feel supported and valued in their temporary roles.

5. Safeguarding

5.1 Partnership working

- Collaboration with key partners is occurring on both a local, regional and national level. This currently includes:
- Weekly meetings with Powys health, police and education partners. This meeting allows professionals to discuss specific issues and scenarios to enhance local responses and to ensure that partner agencies remain updated on each other's challenges / responses.
- Weekly meetings with regional board partners to discuss practices and to disseminate information between agencies.

- Weekly regional children's safeguarding leads meeting. This group is endeavouring to gain regional agreement on matters such as child protection conferences and section 47 enquiries. This provides a helpful space to ratify practices and processes which are outside of standard practice when necessary.
- Powys Children's Services Leadership Team (CLT) continue to meet daily to assess and respond to the unfolding situation.
- The Head of Children's Services is in close communication with All Wales Heads of Children's Services.
- The Head of Children's Services is a member of Silver Command and attends meetings which are held at least daily.

5.2 Participation Work During COVID-19 Pandemic

- During this time, it is more important than ever to be engaging and communicating with young people. We have developed a range of platforms and methods to ensure that engagement and participation continues.
- For children looked after aged 8-13 years, an age appropriate blog has been developed. The blog includes child friendly information on COVID-19 as well as educational links and support lines. For parents/carers there is a link to different resources for those young people aged 0-7 years who cannot independently use the site, this includes ALN resources.
- An Instagram page has been developed specifically for care experienced young people. This page contains important information on COVID-19. Additionally, the participation officer will be posting competitions such as photography competitions for our young people to have a focus during their time at home.
- We are also looking to set up some Webinars for young people including virtual singing and mindfulness, as well as smaller group video chats to promote contact and to enable social contact.

6. Placements for children and young people

- Extensive planning around placement sufficiency took place in the early days of BCP.

- Risk assessment and prioritisation of all children's placements in relation to placement stability.
- Staff resource directed according to need, re-deployed from within the service.
- Regular email and telephone communications with all providers.
- Activity to secure additional placement capacity.
- Survey of foster carers to understand their risks in relation to COVID-19.
- Work to identify which carers and placement providers will be willing to accept children who are symptomatic/ diagnosed with COVID-19.
- Support for foster carers continues remotely.
- Foster carers provided with PCC email addresses and software packages to enable secure transfer of information without delay and facilitate remote meetings.

7. Keeping staff safe – access to PPE

- Children's Services secured a small supply of PPE.
- Further small supply provided by WG.
- Supply held at three locations (colleagues' homes) around the County to enable workers to have access 24/7
- Guidance issued to staff on use of PPE
- New guidance issued by Government late 2 April 2020 prompted review of guidance which was issued to staff 3rd April 2020. This is interim guidance whilst work takes place with colleagues in other local authorities to achieve consistency across Wales.
- Current guidance enables use of PPE by Children's Services workforce undertaking face to face work with individuals, in specific circumstances. Revised guidance has been issued.
- There are concerns there is not a sufficient supply of PPE.

8. Covid-19 Testing for Social Care Staff

- Social Care testing is being undertaken for frontline staff who meet priority testing eligibility criteria.

- Referrals received from managers of front-line staff which are triaged and submitted for testing on a daily basis.
- Staff members contacted directly to agree time and location of testing arrangements and results communicated back directly to staff members.

9. Childcare (children aged 0-4) for Key Workers

- A number of childcare settings have taken the decision to close.
- We are working with childcare providers both maintained and non-maintained to ensure they have the relevant staffing and support to continue to provide childcare to key workers.
- We are working closely with WG and CIW to secure ongoing funding and any changes to regulation required.
- All childcare places requested by keyworkers have been allocated.
- We are strengthening plans to continue to provide childcare 7 days a week across the County.