

# **Covid19 Service Delivery Protocol**

**Worcestershire Children First** 

Social Care and Safeguarding Services

# for Partners and Stakeholders

### Introduction

The full Covid19 service protocol has been developed to enable our services to;

- Deliver the required interventions to safeguard those children in need of protection, promote
  the welfare of those children and young people in our care and to provide the necessary support
  to those children in need preventing escalation of risk and need for child protection or care
  where possible.
- Adapt and respond to the delivery of social care & safeguarding services in the context of minimising the spread of infection within our community and workforce

Our service response, whilst being responsive at pace to the immediate demand and impact of Covid19, must also plan as a front-line critical service. This protocol has considered the medium and longer-term management and deployment of our resources to try and ensure we are in a strong positon to deliver our services to vulnerable children and families throughout this crisis.

During Covid19 we will need to do less due to our reduced workforce, but maintain an appropriate level of quality, so we are making the right decisions for children and young people.

In working with our families and partners we need to be clear and honest about what we have to **stop doing**, either because we will not have the ability to do the quality of work required or we will not have the staff to make it a priority.

We need to be equally clear about what we **must continue to do** because the risk to a child is high and imminent or because we have done the quality work required already and we should not delay unnecessarily making final decisions on assessments, children protection planning or in our court work where it can be avoided.

	Contents
1	Assessing risk and monitoring welfare
2	Family Front Door
а	New Contacts and Referrals
b	Early help and Targeted Family Support
С	Social Work Assessments- S17 and S47
3	Children in need of Support and Protection
а	Case Management of Plans and ongoing assessment of risk
4	Visits and Keeping in Touch
5	Children with Disabilities and Additional Needs
6	Looked after Children and Young People
а	New accommodations
b	Looked after reviews
С	Visits to children in residential care and foster care
d	Virtual School
е	School places
7	Supervised Family Time
8	Care Leavers
9	Managing cases in Legal Proceedings
10	Partnership working
а	School Places
b	Multi-Agency meetings
С	Allegations against those in a position of trust

### 1. Assessing risk and monitoring welfare

The fundamental change in our service delivery will be the way we assess risk and monitor a child's welfare through direct contacts and visiting children and young people and parents at home and in the community.

This is because we will need to manage the reduction in workforce, manage the wellbeing of the workforce to prevent full depletion and comply as much as possible with the wider national Covid19 agenda to stop the spread of infection and save lives.

Visits required to children and young people at home will be rag rated based on presenting and assessed risk. Those designated as "**High and Immediate Risk**" will receive a visit within 24hrs. Those designated as "**Priority**" will receive an initial planned visit within a community home visits programme of visits undertaken by a field work team over a two-week period.

Those not meeting either category will be our "**Vulnerable**" criteria and as such receive keeping in touch calls and direct contact from other professionals such as Residential Care staff, Foster Cares and Schools (where they are attending)

### **Risk Assessment Criteria**

### a) Immediate and High-risk Criteria

- New S47 enquires received at FFD
- Referrals received from a child or young person making allegations of abuse or neglect
- KIT calls where direct allegation or disclosure of abuse of neglect are identified
- KIT calls where parents or young people are incoherent or extremely distressed / threating harm to self or others

### b) Priority criteria

- Children open to Supporting Families First known to be on the Edge of Care
- CP or CIN where the parents are an open case to adult mental health
- High risk MARAC where a high-risk domestic abuse incident has occurred within the last 4 weeks
- Isolated parents with learning difficulties
- Cases where all three triggers of harm exist, mental health, domestic abuse and substance
  misuse.
- Children living in a Placement with Parents arrangements where we have re-entered care proceedings
- Any Care Leaver living solely independently.
- New S47 enquires opened on existing cases
- Cases presenting with new and or increased risk of CP/Care at FFD or through KIT calls
- Missing from Home on more than three occasions in a four-week period

### c) Vulnerable Criteria

The remaining cases are recognised as vulnerable children and young people. They will receive regular keep in touch calls from their social workers and will have direct contact supporting professionals such foster carers, residential workers, specialist community health workers and schools. Children and young people in these criteria can at any time be re-categorised. They will also be subject to core groups, case conferences and looked after child reviews according to their plan

## Children and Young People who are not attending their school place will be an additional risk factor taken into consideration in all the above case scenario

### 2. Family Front Door

### a) Child Protection Level 4

The FFD portal remains open to professionals to use for referrals meeting level 4

Incoming contacts received at FFD will be accepted at the threshold of Level 4 only.

Management of incoming contacts and referrals at level 4 remains in place and in line with current practice. There continues to be management of; Strategy calls, S47 enquiries, MASH, DA triage and Get Safe activity all with partnership contribution.

Social Care, Police and Health staff are either effectively working from home bases or offices bases and meetings are taking place online. (see section 10 Partnership Working)

### b) Early Help and Targeted Family Support

The Targeted Family Support portal request for service will be closed

Contacts received at FFD and assessed to meet level 2 or 3 will not be accepted as new requests for service for family support.

In response to any new contacts and existing open cases the referrer/parent will be advised of the following:

- There will be a telephone call to the responsible parent to discuss the needs identified and those parents will be provided with information and links to online advice and support services relevant to the need identified, this may include here 2 help.
- The Targeted Family Support telephone number will be given to parents and will be able to provide telephone support should they need it
- These contacts will then be closed

### There will be no Early Help assessments completed by EIFS or TFS

WCF are contributing staff and coordinating services with the community development of Here 2 Help (H2H) in order to ensure we maximise resources.

### c) Social Work Assessments S17 and S47

### S47 Child Protection Enquiries

Where a referral is received about child/ren who have suffered or are at risk of suffering significant harm level 4, normal procedure will be followed. This includes a strategy discussion and visit to the child at home undertaken by a qualified social worker.

Where the Section 47 results in the need for an ICPC, the ICPC will be held online, with parents supported to contribute by the Social Worker and the CP chair.

These cases will transfer to locality safeguarding at the ICPC, in line with usual business protocol. (see section 3 for further detail on case management)

### S17 Social Work Assessments

Where a referral determines a Section 17 Social work assessment is required this will be undertaken. This will include a call to the parent and young person initially, checks on historical information and partner agency checks. These collective activities will inform the need for a home visit. (See section 1 for criteria)

S17 Assessments will be completed to closure or progressed to a Child in Need plan.

New Children in Need plans opened at the Front Door during the emergency period will be held in FFD until September 2020. During this period there will be regular KIT calls and home visits as required, (see section 4) determine by the risk criteria (Immediate and High Risk / Priority / Vulnerable).

A school place for these children will be sought.

### 3. Children in Need of Support and Protection

This group of children are already assessed to be a "vulnerable group" who have been assessed as in need of our safeguarding services. This is both:

**\$17**: voluntarily agreed support and intervention with parents to Children in Need who without support are unlikely to achieve in their health/development and are at risk of harm escalating to a CP/Care need

\$47: statutory involvement to Children subject to Protection plans

### a) Case Management of CIN/CP Plans and ongoing assessment of risk

### **Child Protection Cases**

Initial Child Protection Conferences and 1<sup>st</sup> Review Conferences will continue to take place in statutory timescales and partners will be invited to contribute online. Subsequent Review Child Protection Conferences will continue until 30.4.20 and will then be postponed until 30.9.20

30.4.20 is approximately six weeks from the date of our "Covid19 service delivery" up until that time work will have been completed with families and it is not appropriate to maintain CP planning where the family have made appropriate progress against a CP plan and as such review conferences are in a position to make well informed decisions for continuation or removal of CP planning.

Where the Child Protection planning is removed these cases will be held open as Children in Need until September 2020, when they will be closed unless further concerns have been identified.

Post 30.4.20 the work we will have been able to undertake, i.e. direct work with children & young people, observations and discussion with parents on the assessed areas of risk and contacts with partners will have seen a limitation. This, in recognition of likely increased risk and pressure during Covid19 on families, means we will not have sufficient quality of assessment on which to confidently remove child protection planning.

Therefore, there will be no further removal of CP plans for children until 30.9.20 by which time (subject to review of the national Covid19 planning) the social work service will have been able to undertake quality visits and direct work sessions and schools and partners will be in a position to contribute appropriately.

Review conferences during this period will be replaced with core group meetings, chaired by Team Mangers, and focused on sharing information, progressing any appropriate element of the plans and assessing any Covid19 increased risk impact.

Key partners with involvement with the family will be invited to contribute to these core group meetings online. (see section 9 Partnership Working)

### Children in Need Cases

As with our Child Protection planning case work the work we will have been able to undertake, will have seen a limitation, this and the recognition of likely increased risk and pressure during Covid19 on families means we will not have sufficient quality of assessment on which to confidently close CIN cases during this period. **Therefore, all existing CIN cases in Locality Safeguarding will remain open until September.** During September cases will be closed following a KIT / visit and lateral checks identifying no concerns.

All CIN cases held at FFD that require an ongoing CIN plan will transfer to locality safeguarding team in September 20.

### 4) Visits and Keeping in Touch

Team Managers have, and will continue, to identify all children and young people considered to be at High and Immediate risk and Priority and in need of a visit, they will ensure KIT calls are made regularly to <u>every</u> family and make arrangements for more planned visits to be undertaken as necessary.

Data reports will be available to front line and senior managers to monitor our level of contact with families.

A detailed Visit and Keeping in Touch protocol has been developed as a Practice Standard guide for workers.

Social Care staff are aware that KIT calls are a self-reporting line of communication and of the need to manage the potential for increased risk within the conversation that takes place.

Social Care staff will use their professional communication and assessment skills to judge the level of risk from the general conversation that takes place and the manner in which children, young people and parents engage in the conversation.

### 5. Children with Disabilities and Additional Needs

The decision has been made to temporarily suspend all community short breaks for children with disabilities and additional needs in order to reduce risk to this group of children and reduce community activity.

There has been development of a Crisis Home Support offer for children with additional needs identified as at risk of becoming in need of child protection and or local authority care as a result of increased pressure in the family.

### 6. Looked After Children and Young People

### a) New Accommodations

Children and Young People will continue to be accommodated where we are unable to safely secure and support them to remain in parental care. Supporting Families First Team remain active and will work alongside the FFD and Locality teams to offer assistance from the specialist roles within that services preventing care where it is safe to do so. This is in line with current thresholds and service approach.

Young People 16-18 years presenting as homeless will be assessed in line existing legislation and practice standards. That assessment will consider the young person's wishes to be received into care and we will continue to work with Housing providers to secure emergency accommodation where appropriate.

### b) Looked After Reviews

Looked After Reviews for children in care will continue to take place and within in statutory timescales.

Children and Young people will be encouraged and supported to contribute live online to the meeting or by their preferred means, supported by their carer and social workers. Partners and parents will be supported to contribute online.

### c) Visits to Children in Foster Care and Residential Care

The following arrangements for visits seek to maximise staffing capacity and reduce the number of visitors to a single household.

### Mainstream and Kinship Foster Care:

The WCF Fostering Social workers will undertake visits to the Child AND Carer in internal mainstream and kinship foster care placements.

Visits will be undertaken bi-monthly basis unless the case is assessed as "Priority". Assessment against the criteria is done by Fostering Managers and Child's Social Work Managers taking into account the needs of the child and carer

### Residential Care

Social worker visits to young people in <u>internal</u> residential care are suspended and residential care workers are undertaking day to day care. Telephone contact with responsible social workers to residential staff will take place to identify any raised concern.

Visits to children in <u>external</u> residential care will be by the child's social worker. The frequency of visiting will be determined against the risk criteria outlined in section 1

### Out of County placements

Those placed <u>out of county</u> will have visits undertaken by IRO's coordinated with their Looked After Child Reviews, one at the time of the review and one three months after/before.

NB: some placement providers have implemented their own Covid19 protocols preventing any external visitors for a limited period. We will be working case by case to ensure we are assured about the well-being of these children and young people whilst supporting the providers in their own Covid19 service planning.

### Placement with Parents

These children are identified in the "Priority" group where PLO/care proceedings have been re-entered. Others will be assessed for visiting alongside all CIN/CP cases using the risk criteria in section 1

All children in care will have regular Keep in Touch Calls from their allocated social worker and access to Momo

### d) Virtual School (VS)

Personal Education Plan (PEP) meetings will continue to take place via phone for our statutory school age Children Looked After during the summer term. PEP dates have been arranged and shared by the VS. Social workers and Designated Teachers are expected to complete the (e-PEP) prior to the meeting and to 'sign off' following the meeting. Welfare Call online platform continues to be fully operational.

PEP Co-ordinators and Area Learning Advocates will also be contacting schools and settings more frequently for our VS high priority children/young people. These 'keeping in touch' contacts will enable the VS to work effectively with schools and SW to provide advice and guidance more frequently.

The VS website <a href="www.worcestershire.gov.uk/virtualschool">www.worcestershire.gov.uk/virtualschool</a> has a large number of online resources for different areas of learning and development.

### e) School places for Looked After Children

Children and young people in Mainstream/IFA foster care placements have been asked not to use the school places and instead adopt the Government approach that "Children should stay at home if it is possible"

However, where the carer or social worker believe that without the school place the placement could be at risk of breakdown a school place will be taken up.

Children placed with Parents or those placed with Kinship Carers will <u>always be encouraged</u> to use the school place that should be available to them. See Partnership Working section 10

### 7. Care Leavers

Our cohort of care leavers living in semi and independent placements are a vulnerable group, especially those who are living in solo accommodation where their sense of isolation is profoundly compounded.

As corporate parents we need to ensure we continue to stay engaged and help safeguard care leavers at a time when they have less contact, interaction and support than would ordinarily be in place.

KIT calls and Visits to ALL Care Leavers will be assessed against the criteria set out in section 1.

Care Leavers residing in solo independent and semi-independent living arrangements are identified as a "priority" group in need of face to face visiting. These young people were identified by the service with visits being undertaken to all between 23.3.20 and 8.4.20 with a follow up plan of visits or KIT calls in line with need.

A detailed Care Leaver Visits Guide has been developed to guide good practice

### 8. Supervised Family Time

A decision has been made that all family face to face supervised contact is to be suspended for the period of community "lock down". This is to reduce the risk of cross infection between children / households and to minimise community activity.

All children, young people, parents and carers have been contacted individually and informed of interim arrangement to support contact via other mediums appropriate to the child's plan and care arrangements

Group Manager, Daniela Carson, appointed to:

- Manage the Supervised Family Time services.
- Write the Covid19 emergency service protocol for Supervised Family Time
- Coordinate communications to all parties
- Act as SPOC to families for challenges/complaints
- Coordinate the delivery of information to Children, Young People, Parents and carers,
- Co-ordinate the delivery of the interim service approach

### 9. Managing Cases in legal proceedings

Our principles of good social work practice are to deliver a high-quality safeguarding service to child in need of protection and the principles of our court work is to ensure children have permanency in a safe care arrangement without unnecessary delay.

To achieve this, we need to do less and what we do has to maintain the same level of quality, so we are making the right decisions for children.

Taking those principles in mind we need to be clear and honest about what we have to **stop doing**, either because we will not have the ability to do the quality work required or we will not have the staff to make it a priority and what we **must continue to do** either because the risk to a child is high and imminent or because we have already done the quality work required and we should not delay unnecessarily final and permanency planning for children where it can be avoided.

Covid19 service Legal Protocol has been developed taking into account the current work of stakeholders: Courts / Cafcass and Legal Services.

### 10. Partnership Working

The Worcestershire Safeguarding Children Partnership Executive board are meeting regularly to undertake a multi-agency impact risk assessment of Covid19 and will agree any necessary measures to mitigate risk supporting each individual agency to undertake their roles and responsibilities as well as their own Covid19 emergency service responses. Regular updates will be provided through the WSCP website and newsletters.

### a) School Places

All children who are the subject of Child in Need or Child Protection plans must be able to access a school place. **We will encourage all families to take up this offer**.

However, we are not able to force families to take school places and we will factor that issue into the risk assessments for visits as set out in section 1.

Looked After Children are also within the "vulnerable" group defined by the DfE. Our position, as set out above, has been to support schools with a challenging staff capacity issue and seeks to apply the government agenda to keep children at home where possible.

However, looked after children who do need a school place, either to support the parent/family carer or to prevent a potential breakdown of place will be encouraged to take up their place.

Where any school is refusing a school place to a child who is the subject of a social work plan (CIN/CP or Care) the case will be raised to Education Safeguarding Lead who will address the case directly with the school, escalating if necessary.

### b) Multi Agency Meetings

Initial and 1<sup>st</sup> Review Child Protection Conferences / Looked After Child Reviews / Strategy Meetings / MASH and Core Groups activities continue and partners will be invited to contribute online via Skype or conference calls.

Each partner agency is required to make their own arrangement with staff working from home/offices to receive and respond to invites.

### c) Allegations against person in a position of trust

The LADO referral process remains in place via the secure inbox with associated meetings undertaken online.

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