



**CHILDREN AND FAMILIES OVERVIEW AND SCRUTINY
COMMITTEE**

7 JUNE 2022

IMPACT OF COVID-19

**REPORT OF THE DIRECTOR OF CHILDREN AND FAMILY
SERVICES**

Purpose of Report

1. The purpose of this report is to provide the Committee with an overview of how COVID-19 has impacted and continues to impact key aspects of service delivery across the Children and Family Services Department. It provides an overview of:
 - i) Performance in key areas – including increasing demand upon Children and Family Services.
 - ii) Impact on service delivery to vulnerable groups, including those supported by Children’s Social Care.
 - iii) Impact on Targeted Early Help (Children and Families Wellbeing Service).
 - iv) Schools.
 - v) Workforce and recovery planning.

Background

2. The COVID-19 pandemic emerged in early 2020 with the first national lockdown being put in place in March 2020. This and subsequent periods of national restrictions until late 2021 had a significant impact on family life and the way in which services could be delivered.
3. Given that the Children and Family Services Department is key to delivering statutory responsibilities, it was necessary to develop new and innovative ways of working that evolved over time and became responsive to the different phases of the pandemic, enabling key business functions to be maintained.
4. The Department responded quickly at the start of the pandemic to adapt its ways of working. Key to the initial stages was the prioritisation of responses

so that oversight to the most vulnerable children was in place. This provided a framework for responses against the threat of high levels of staff sickness at a time when family stressors were likely to increase, and families' own resources and relationships were placed under significant strain.

5. Activities over the course of the pandemic included:
 - i) Quickly enabling remote working for most staff with support from ICT to facilitate the provision of equipment and software to allow easy virtual contact with children and families when required.
 - ii) Development of safe office spaces to provide opportunities for collaboration and maintaining a high priority response to Child Protection referrals.
 - iii) Roll out of technical solutions to allow collaboration using Skype, WhatsApp, and Microsoft Teams over initial weeks and months to support virtual meetings both internally within the Council and with professional partners.
 - iv) Establishing high level communication and coordination of responses across the safeguarding partnership – linking to emerging Leicester, Leicestershire and Rutland (LLR) strategic priorities and cross cutting issues including children, families, health, adult services, education..
 - vi) Reviewing and developing practice guidance to prioritise and manage how contact would be maintained with key groups of vulnerable children by use of both virtual and face to face visits.
 - vii) Accessing suitable Personal Protective Equipment (PPE) and guidance to protect the workforce, including completing risk assessments to respond to the needs of specific groups of workers. As more became known about the impact of the virus on specific groups and risk criteria emerged, these informed expectations of staff and managers including shielding arrangements.
 - viii) Creating strong communication and support to local Schools, tracking attendance of vulnerable children and providing regular support and information.
 - ix) Planning new ways of working as the pandemic continued into 2021/22 including workforce and wellbeing strategies and adapting ways of working for the future.
 - x) Maintaining a strong focus on early offers of support to respond to emerging needs such as Domestic Abuse and children's mental health.
 - xi) Developing a strong virtual training offer to continue to support improvement activity.

Overview of demand for Children's Social Care (CSC) and Early Help Services

6. It is now possible to track the impact of COVID-19 on demand during 2020 to date. The data below provides an overview of contacts and referrals made to both Children's Social Care (CSC) and the Children and Families Wellbeing Service (CFWS), comparing the same period in 2019 (pre-pandemic), with data collected during 2020, 2021 and 2022 as restrictions were removed.

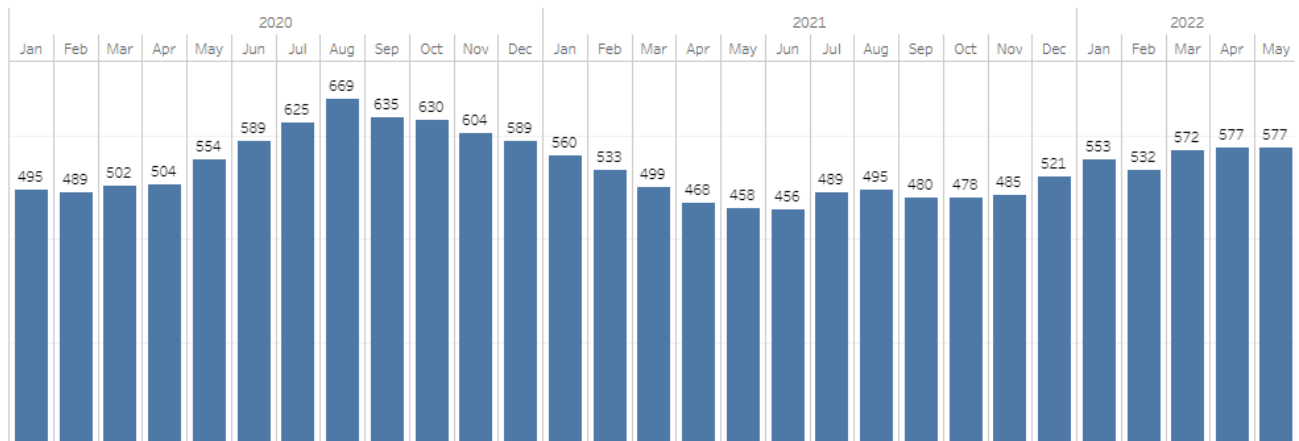
Contact Analysis: January to March 2019 to 2022

	Jan 19	Feb 19	Mar 19	Jan 20	Feb 20	Mar 20	Jan 21	Feb 21	Mar 21	Jan 22	Feb 22	Mar 22
Total Contacts	1743	1667	1945	1969	1667	1643	2154	1976	2538	2186	2302	2792
Contacts going to CFWS	411	421	538	539	317	299	404	366	505	542	662	822
Contacts going to Social Care Referral	380	424	448	414	469	371	385	446	468	397	423	403
Percentage Contacts to Referral	21.8%	25.4%	23.0%	21.0%	28.1%	22.6%	17.9%	22.6%	18.4%	18.2%	18.4%	14.4%
Contact Source: Police												
Total Contacts	588	506	579	607	518	593	681	584	898	600	711	860
Contacts going to CFWS	26	26	49	45	28	50	64	38	93	123	167	220
Contacts going to Social Care Referral	131	137	125	132	148	138	149	169	136	110	151	138
Percentage Contacts to Referral	22.3%	27.1%	21.6%	21.7%	28.6%	23.3%	21.9%	28.9%	15.1%	18.3%	21.2%	16.0%
Contact Source: Education												
Total Contacts	297	304	387	399	258	285	252	277	463	481	461	665
Contacts going to CFWS	167	151	208	223	101	104	88	98	154	172	214	284
Contacts going to Social Care Referral	40	65	90	62	49	77	36	49	80	69	52	47
Percentage Contacts to Referral	13.5%	21.4%	23.3%	15.5%	19.0%	27.0%	14.3%	17.7%	17.3%	14.3%	11.3%	7.1%
Contact Source: Health												
Total Contacts	271	270	329	290	328	226	389	400	389	363	379	500
Contacts going to CFWS	71	79	91	96	71	57	87	82	72	97	106	130
Contacts going to Social Care Referral	50	51	71	57	98	46	64	76	68	45	65	64
Percentage Contacts to Referral	18.5%	18.9%	21.6%	19.7%	29.9%	20.4%	16.5%	19.0%	17.5%	12.4%	17.2%	12.8%

7. Analysis of this data shows that the volume of contacts whilst fluctuated, significantly increased over the period. This is likely to be the result of periods of lockdown, in particular schools not being fully open at some times, and pressure on health services. Contacts range from simple information sharing and requests for early help, to reporting high risk and complex child protection concerns.
8. Despite increased contacts, referrals for CSC remained similar over the period with no reduction in core processes such as child protection responses. A referral defines information that meets the threshold for statutory social work intervention.
9. The number of contacts progressing to Targeted Early Help through the CFWS reduced significantly in the early period of lockdown, when school closures were in place – schools are a key agency when identifying early signs of vulnerability for children. Over time, however, these have significantly increased, accounting for the lower percentage of contacts progressing to CSC. The increase in requests for support from the CFWS appears to demonstrate the needs of children being more appropriately identified as school attendance has normalised, and the impact of lockdown on school aged children has become clearer.
10. Despite health and education pressures, contacts from both agencies are now relatively comparable with pre-COVID levels. When compared with Leicester City and Rutland, there appears to be similar patterns in relation to the increase in contacts, with stable referral numbers and increased demand on Early Help services. The reduced percentage of contacts progressing to CSC

is also similar in all three local authorities which helps when considering local performance.

11. In addition to the impact on demand for services, the initial stages of the pandemic saw significant increases in the number of children subject to Child Protection Plans, which can be seen in the graphic below.



12. August 2020 saw the highest number of children subject to Child Protection Plans. This was as a result of both an increase in the number of referrals in response to child protection concerns, as well as a slow down of plans ending, perhaps linked to the effect on professional confidence in new ways of working and the need to maintain oversight of children during school closures.
13. Audit work documented the increase in complex child and family cases emerging, likely linked to evidence of families affected by domestic abuse and the reduction in family support available due to them being separated by lockdown restrictions. Work to support vulnerable children maintain their school attendance became key to sustaining oversight and support to this group. Strong connections were therefore established between the Service and schools to ensure regular communication around attendance reporting.
14. Professional employees became increasingly confident at using virtual meetings and childcare practitioners became more used to doorstep visits, the use of PPE and managing the risk of infection alongside business as usual planning in response to assessed child protection risk.

Impact on Service Delivery

15. Services have continued to be delivered throughout the pandemic, ensuring that the most vulnerable children and families have continued to be supported. Initial COVID-19 risk assessment processes were implemented to assist the prioritisation of both timescales and type of visits for each child. This focused on the level and type of risk assessed to the child, available family and professional support and vulnerabilities specific to the child. As a result of this, children in more stable circumstances may have had virtual

visits put in place allowing face-to-face visits to continue for those most vulnerable children, including those subject to child protection planning, some children in care and many care leavers.

16. From June 2021, COVID-19 was considered to become a feature of our business as usual operations. Guidance was updated so that face to face visits for all children again became expected and virtual visits used to create additional contact with children rather than relied on as the primary means of contact. By September 2021, all statutory visits and timescales relied on face-to-face visits for all children.

Corporate parenting responsibilities and children in care

17. Throughout the period of the pandemic, a key responsibility has been the Council's role as a corporate parent which has continued to underpin services provided to children in our care and care leavers. All children in care were subject to a COVID-19 risk assessment process to inform both the type and frequency of visits put in place in the early stages of the pandemic. For many children living with foster carers and in residential placements, the support of carers was significant.
18. For care leavers, particularly those who live on their own, the Service ensured that this group were offered increased levels of contact including a delay in transitioning to alternative provision where appropriate. The Service has provided targeted services for some young people by providing funding for mental health support and counselling where they did not meet the formal threshold of Child and Adolescent Mental Health Services (CAMHS) or adult services.
19. The Service has provided laptops and other IT equipment to ensure all of its children and young people have the digital support they need to enable them to access school or college remotely when appropriate.
20. Looked after children, as a vulnerable group, have been able to continue to attend school with social worker support, throughout the pandemic. The Service has also ensured that children have been able to continue to see their families, where it is safe to do so, through managed contact arrangements which included the use of virtual contact. Where children are very young and are therefore unable to socially distance, the Service introduced contact methods such as virtual story telling or games. As the pandemic continued, safe contact spaces allowed some face to face contact to continue safely, subject to rules on capacity, face masks and cleaning regimes.
21. For unaccompanied young people seeking asylum, a resource was identified which allowed a fourteen-day quarantine period for those coming into the Council's services. Demand for support for this group of vulnerable children has continued to increase over the period of the pandemic with additional capacity having to be built into the Service to respond.

Corporate Parenting Team – keeping in touch

22. During lockdowns, a key priority of the workers within the Corporate Parenting Team, including the Children's Rights Officers and Participation Officers, was to make contact with all children and young people either in residential placement and 16+ accommodation to check on their well-being to ensure they were receiving the support they needed and to offer any additional support around advocacy. Each contact led to the worker completing a short questionnaire on the young person's experiences since lockdown, specifically around how they felt they had been coping and the support they had received or needed. This information was then recorded on their file and any significant issues raised with their social worker, with visiting patterns updated to respond.
23. Overall, feedback received confirmed that young people felt they were receiving a good level of support from social care, often reporting having a greater frequency of contact with their social worker or personal advisor than before lockdown. Some young people did take up the offer of advocacy, for example, to support them in arranging contact with their family, or to ensure they were getting the correct allowances.
24. The Participation Officer led on Leicestershire's contribution to the LLR 'Coronavirus Health and Wellbeing Conversation for Young People June 2020'. This was developed following the Barnardo's 'Big Barnardo's Conversation' campaign in May 2020 to highlight the impact of COVID-19 on children and young people across the UK. This report highlights a number of positives that children and young people experienced during lockdown, as well as the significant number of challenges, most notably practical issues such as accessing dentists and other services, the impact of feelings of isolation and increased concerns about mental health.
25. The Children in Care Council was initially paused at the start of lockdown but has taken place virtually each month since July 2020 with the exception of the usual summer break. The meetings have been well attended and the feedback has been very positive.
26. Supporting Young People After Care (SYPAC) was also initially paused and then moved to virtual meetings, which was valued by care leavers. SYPAC had its first face to face meeting just before Christmas; 15 young people attended a socially distanced meeting to undertake a range of activities and welcomed being in a room together. Both the Children in Care Council and SYPAC intend to move to face to face meetings more frequently as restrictions allow and all safety measures will be taken.
27. The Children in Care Choir has continued to meet virtually throughout the lockdown period and although it has not been possible to arrange for everyone to sing together, they have been meeting each week for quizzes and other activities to keep the cohesion of the group together.

28. The Corporate Parenting Board has continued to meet virtually throughout the year. This has continued to be well represented by partner agencies, and the children and young people members have continued to attend and take a lead role in these meetings.
29. Participation Officers arranged a Leicestershire's Got Talent event in 2020 whereby any looked after young person could submit a three minute video to showcase their talents. This was judged in three age categories and was felt to be a successful event.
30. Participation Officers also arranged an interactive online art class for the October half term; each participant received paints, a canvas and an easel, and were given an online lesson on how to paint a lion. The Fostering Service undertook a Christmas Card competition and the five entries were sent to all carers, children and young people.
31. COVID-19 has impacted on the availability of County Council apprenticeships and other work opportunities for care leavers. Working from home and new pay arrangements for County Council apprentices (paid at grade of post) have led to fewer apprenticeships being available or being taken up by people already in post with the County Council. The Service continues to implement Independent Living ASDAN courses with care leavers to support transitions into independence.
32. The Looked after Children's Nursing service (provided by Leicestershire Partnership NHS Trust (LPT)), in line with national guidance '*NHS Covid 19 Prioritisation of Community Services*', has continued to maintain a service to the most vulnerable cohort of children/young people in Leicestershire throughout the pandemic.
33. Although the pandemic has been a considerable challenge, the health and welfare of looked after children has remained a key priority and alternative solutions have been applied to the provision of Review Health Assessments (RHAs) in order to continue meeting the needs of looked after children.
34. The virtual telehealth platform has worked effectively for the service, where it has been possible to reach previously hard to reach young people. However, the risk imposed by the pandemic to children, young people and carers was carefully balanced against the health needs of looked after children and the COVID-19 risk assessment enabled the service to identify the most vulnerable children and young people, for example those at risk of Child Sexual Exploitation, going missing, unaccompanied asylum seeking children, and those with complex needs or who have poor engagement with the Service.
35. All Review Health Assessments have been assessed and triaged on an individual basis with regard to the need to offer either a face to face contact or telephone/video contact. This is supported by a robust risk criteria framework and the individual professional judgement of the child's nurse.

36. LPT has also worked closely with local authority partners to ensure that all looked after children and young people who have an Education, Health and Care Plan and, or as well as, SEND are able to continue accessing support to meet their essential health needs during the COVID-19 response.

Service Improvement Activity

37. Despite the operational challenges faced during the pandemic, the Department has continued its focus on service improvement. This has meant that all aspects of the Quality Assurance Framework have been maintained. Examples of key areas of improvement include:
- i) Monthly performance meetings to maintain oversight of services to children including overview of the Covid-19 risk assessment process.
 - ii) Launch of a learning brief Think Practice to provide thematic learning to all practitioners via a regular email covering topics significant to the continuous improvement plan.
 - iii) Further enhancement to the Writing to the Child process and embedding this approach across all roles so that children can understand their journey.
 - iv) Development of online virtual training – small bite size learning sessions delivered by the Practice Excellence Team.
 - v) Delivery of the Defining Children’s Services for the Future programme to enhance cost effective service delivery using innovation and targeted interventions.
 - vi) Continued implementation of the thematic audit process.
 - vii) Launch of the commitment to becoming a trauma informed organisation
 - viii) Development and Launch of Equality, Diversity and Inclusion guidance for practitioners.

Fostering Service

38. The Fostering Service has continued to support carers through both virtual and face to face visits throughout the Pandemic. It has developed additional support opportunities through the creation of a Facebook page specifically for our carer’s, which has been well utilised to share news, key messages and offers of support. The Service has sent thank you hampers and gifts to recognise the security and stability that foster carers have offered our children during incredibly challenging times.
39. Despite the difficulties faced, the Service has continued to have positive placement stability for children and also stability in the retention of carers. Throughout the pandemic, a number of carers went on ‘hold’ due to shielding or other reasons. Whilst this was understandable, a process was developed setting out how to manage and progress foster carers on hold to provide a full understanding of their needs and prevent drift and delay in them returning to being able to care for children.
40. In terms of recruitment, there have been peaks and troughs in Enquiries and Request For Information (RFI). Nationally, foster carer agencies have seen a

reduction in the number of Enquiries. However, despite this, the Council has continued to develop its Communications Strategy, and although Enquiries remain low, the conversion rate for RFI's to Assessment remains high, allowing the opportunity for developing the in house offer.

Education

41. All phases of the education sector, from Early Years to Further and Higher Education settings have been deeply impacted. The first 1001 days of a child's life are a crucial foundation for a lifetime and fewer children spent these in pre-school than usual. School leaders have faced multiple challenges, adapting quickly to changes in regulations, and this situation led to a significant role for the Departments Education Effectiveness to co-ordinate a response and to facilitate the wider Leicestershire Education Effectiveness partnership. Communications between the Council and schools, by briefing e-mails and Teams meetings, have improved but also have become more focused on schools under Local Authority control. School attendance was irregular during the lockdown periods where at some times, only vulnerable children still attended. Attendance following the re-opening of schools to all children is now approaching pre-pandemic levels but schools are struggling with increased numbers of persistently absent children.
42. There is a sense that the gap between disadvantaged and other children is widening and this may be evident in primary SATs results in July 2022 and GCSE results which will be available in the autumn of 2022. Progress indicators at both stages are challenging to predict as these depend on relative performance compared to national performance when external assessment has not taken place for three years. Schools are having to address learning gaps which are inconsistent; some pupils are reportedly keen to be sitting external exams again whereas others are extremely anxious.
43. Many children with an Education, Health and Care (EHC) Plan have been adversely affected through discontinuity of support, whether with regards to their learning or wider needs. For children such as those with autism, for example, the change in routine has led to increased levels of anxiety. Since schools have re-opened the Service has also seen an increase in the number of referrals for EHC Needs Assessment.
44. Additional challenges such as funding, staff recruitment and absence management, budget and the impact of price rises, a perception of increased complex needs to meet, incoming Ukrainian pupils alongside the pressure of OFSTED and associated expectations are having an impact on morale. Some smaller schools, in particular, are struggling to find the capacity to meet these needs. There are concerns around wellbeing of staff and pupils, as well as the retention of staff.

Workforce

45. The pandemic has brought significant challenges for the workforce across the Department with previously unseen demands on staff both at home and in the workplace. It has been increasingly evident that some changes to the workplace are likely to remain and exploration of new ways of using office spaces, developing the capacity to collaborate and use virtual tools effectively have become central to strategic planning.
46. Some periods of the pandemic have seen significant staff absences, both directly associated with the virus but also linked to the increased pressure on staff wellbeing, the added pressures experienced by staff through covid and adaption to new ways of working. The Department has responded proactively to support the workforce with increased staffing in some key areas to respond to demand and continued use of agency cover where sickness has emerged. Work has been carried out with HR to adapt recruitment processes to new virtual interviews and proactive offers of wellbeing support.
47. Current planning for recovery continues to build on learning from experiences throughout the pandemic and aims to achieve an effective balance with maintaining services creatively whilst ensuring staff are well supported both in terms of opportunities for support, manager oversight and peer relationships. This includes the launch of the 'We Care' race equality strategy, the embodiment of the Department's vision to support confident staff who feel valued for their diversity and feel they are supported to seek opportunities to make the greatest contribution to the lives of children and families and as leaders.

Summary

48. COVID-19 has brought real challenges to service delivery both in terms of the logistical challenges of maintaining the Council's statutory duties, as well as supporting and protecting the workforce. This report demonstrates the key achievements such as maintaining contact with vulnerable children, adapting to new ways of working and continuing to maintain and increase the pace of improvement work throughout the period.
49. The impact of the pandemic, however, is clear and continues to affect service operations and it is likely that the challenges that families have faced will continue to underpin requests for help for some time to come. Whilst the Department continues to recover, there remains an element of uncertainty in relation to expectations in a post pandemic environment, the lasting impact on families, the community challenges and workforce pressures.
50. The Department's current priority is to continue to work towards a strong balance for staff based on flexible working with a strong focus on manager oversight and staff support from an office base whilst having opportunities to use time working from home to compliment that professional support and effective time to deliver services effectively and build relationships with children and families.

Conclusion

51. The Committee is asked to note the update on how the COVID-19 pandemic has and continues to impact on service delivery across the Children and Family Services Department.

Background Papers

Report to Children and Families Overview and Scrutiny Committee on 1 June 2021 regarding the Wider Impact of COVID-19:

<https://politics.leics.gov.uk/ieListDocuments.aspx?CId=1043&MIId=6514&Ver=4>

Equalities and Human Rights Implications

52. All services are offered in line with the Council's equalities and human rights obligations. Services are provided to more vulnerable children and families and therefore it has been important to ensure access to services throughout the national pandemic.

Circulation under the Local Issues Alert Procedure

None

Officer to Contact

Jane Moore, Director of Children and Family Services,

Tel: 0116 305 2649

Email: jane.moore@leics.gov.uk

Sharon Cooke, Assistant Director, Targeted Early Help and Children's Social Care

Tel: 0116 305 7441

Email: sharon.cooke@leics.gov.uk

This page is intentionally left blank