



Children in Our Care Strategic Group (CIOCSG) Update

Report for Corporate Parenting Board (CPB) 6 August 2020

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Section 1: Items Discussed

It was agreed that, given the length of time since the last CIOCSG following the pandemic outbreak that this meeting would focus on the impact of COVID-19 and how services had managed during this period.

Section 2: Covid-19 Update/Overview from Services

Children's Social Care

Residential Children's Care Homes

All of our children's homes were immediately risk assessed following lockdown. PPE was made available for all staff. We changed the statement of purpose (SOP) of three of our homes to allow for more flexibility in preparation for the potential of an increase in children coming into care. Our Place (a provision to support short breaks and children on the edge of care) was changed to accommodate children on a slightly longer basis. Although it was well used, this change did have an impact on the level of support we could offer children on the edge of care.

Support staff from Our Place worked closely with parents via various remote systems which worked very positively and did prevent a number of children from coming into care. An element of this 'hand holding' approach will be maintained moving forward, particularly around those children who go missing from home. Families often engage more fully with a support worker rather than a social worker.

We worked closely with housing colleagues and identified further supported housing placements in case there were additional demands around older young people.

Foster Care

We immediately pulled together a data base to show which foster carers needed to shield and isolate i.e. because of age, particular health issues. PPE was made available for all of our foster carers. Vacancies were identified from this data base. We recruited a number of foster carers who had retired and fast tracked these carers through updated assessments and processes. We made use of some of the flexibilities that Local Authorities were offered i.e. the approval of foster carers without a medical and with shortened assessments. Our fostering panel was held remotely.

The majority of CIOC complied with government restrictions although a small cohort did not. These young people were mostly from our residential care homes and residential staff devised rotas and small huddles to ensure if Covid-19 was brought into the homes, it would affect only a small number of staff.

Children in Our Care (CIOC)

All staff have adapted and responded to a new way of working i.e. home working and the use of technology to ensure all CIOC reviews and meetings continued. Children were generally contacted via TEAMS, SKYPE, MOMO,

and mobile phone. Some direct visits did take place but were done so safely, either door step or in the garden with social distancing being maintained. All staff had access to PPE.

We immediately risk assessed all of the CIOC and updated risk assessments for each one based on a number of themes i.e. vulnerabilities, risk, need and complexity of health and disabilities.

Quite a high percentage of CIOC did not initially attend school, although this number has increased with time. Although CIOC were encouraged to attend, we also had to balance this with the particular vulnerabilities and anxieties of some of our foster carers. We have seen improved communication with schools during lockdown which has been a positive across the board, not just in terms of CIOC. Home learning has taken place and both foster carers and our residential staff have been really creative in developing new skills with the children they care for.

We immediately suspended direct contact with birth parents and family at the beginning of lockdown. We expected a lot of negativity from birth parents in response to this but actually had very little. Contact was encouraged and did go ahead, but again this was done remotely. We are in the process of carefully introducing some direct contact for children with their birth family – this has been planned on a priority basis with approximately forty children now enjoying direct 'family time'.

Early Help

At the start of lockdown all partners contributed to rag rating our most vulnerable children which included CIOC. Every child was attached to a school or early years setting. A specific person of contact (SPOC) was identified to communicate directly with schools and ensure those most vulnerable children did receive support. This process helped to ensure that all vulnerable children were safe and contact was made via a variety of means.

Food parcels were delivered to families before free school meals were introduced. A high amount of virtual contact was undertaken with birth parents and carers to offer additional support.

In terms of youth offending – for a number of young people who are CIOC, court hearings were held virtually with requirements of court orders being met but generally done so remotely. We have seen a general reduction of anti-social behaviour from CIOC placed in our residential homes during lockdown. Lots of contact has been maintained and support offered on line particularly around exploitation and online safety.

Not in education, employment or training (NEET)

The government has awarded additional financial support for local businesses with further money proposed to invest in apprenticeships. We have two young people involved in apprenticeships who have been furloughed during the lockdown.

One of the challenges we do have is that many CIOC are not ready or mature enough to commit to an apprenticeship and employers expectations can be unrealistic. We also do not have enough training providers in Stockton. This is a challenge which will be picked up moving forward.

The CIOC NEET group have continued to meet virtually throughout the lockdown period and are looking at the opportunities available to meet the individual needs of some CIOC.

Child and Adolescent Mental Health Service (CAMHS)

Therapeutic work has continued throughout the lockdown period for the most vulnerable CIOC although this has not always been offered face to face. CAMHS identified the most vulnerable children and young people early into lockdown. Initially it was believed that the numbers of referrals would increase with vulnerable children finding it

hard to cope with the additional anxieties around COVID19. This has not happened and they have shown a remarkable level of resilience.

New assessments for ADS and ADHD were put on hold but plans are now underway to reintroduce this work.

Some concerns raised around how some CIOC and those most vulnerable will manage a return to school.

Communication and support is being offered to schools and carers in order to best manage emotional wellbeing.

Health

Initial health assessments for CIOC have continued throughout lockdown but have been managed remotely. The feedback from some staff and CIOC is that they have preferred this remote way of working as it can feel less intrusive and children and young people have tended to engage more fully. Moving forward it is planned to offer a hybrid model i.e. the option of either a remote or face to face health assessment. Compliance has been maintained throughout the pandemic period.

Some paediatricians are showing a level of reluctance in relation to the re-introduction of face to face health assessments. This is being challenged.

0-19 Service/Family Action

Both services contributed to the vulnerability data base, liaising with the early years settings. The health child programme continued to be delivered throughout the lockdown period, initially this was done remotely but plans are now in place to re-introduce some face to face work. The weight/height programme was stood down although again plans are in place to re-introduce the delivery of this programme. This will be a priority given the governments focus on childhood obesity.

A questionnaire was undertaken with year 6 pupils who are due to transition to secondary schools. The focus was on this group of children as there were concerns around their emotional health and wellbeing and resilience around moving schools. There was a high response and school nurses have since picked up some supportive work around this. Further work is planned around resilience moving forward and will look at support around a wider age range.

Section 3: Summary

- The resilience of our children and young people has been incredible during this pandemic period.
- PPE has been available for staff and carers.
- Partners have all pulled together with a much more collaborative and positive approach being seen, particularly in relation to our schools.
- Communication has improved between all agencies and services.
- The introduction of the vulnerable children's data base has improved information sharing and the ability to identify those most in need of support
- Remote/virtual working has been very positive in most areas i.e. a number of children have been much more willing to engage in meetings/sessions and discussions with key professionals.
- Birth parents have adapted incredibly well to the restrictions that have had to be put into place particularly around the removal of direct contact.
- Generally, a hybrid model of working is being considered by the majority of partners and services as part of their recovery plans.
- There will be significant challenges moving forward in relation to the economy and the impact of this, particularly in relation to NEET and training opportunities for many CIOC.

Creativity of CIOC during Covid-19

This presentation will be shown at today's CPB and demonstrates some of the fantastic work CIOC have undertaken during lockdown. New skills have been learnt and creative methods of home learning have been introduced. CIOC have supported VE day, the NHS and the wider community.

Rhona Bollands

Assistant Director Children's Social Care

30/07/2020