



# COVID-19 Emergency: Children's Social Care and Early Help

## Staff Guidance

7 April 2020

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## 1. Introduction

This protocol sets out the arrangements for delivering 'core' children's social care services to children and families where the City has a statutory legal duty under the Children Acts and associated legislation.

This unprecedented COVID-19 civil emergency period and guidance issued by central government and Public Health England regarding social-isolation and social distancing measures prevents the 'business as usual' delivery of children's social care services. As much of statutory children's social work intervention requires multi-agency meetings, home visits and direct contact with children, families and professionals we will not, during this civil emergency, be able to meet the existing raft of DfE statutory guidance which underpins statutory children's social work.

Statutory guidance can be set aside under 'exceptional circumstances' and the current COVID-19 civil emergency meets those criteria. In response, where the available personnel, protective equipment and COVID-19 civil protection arrangements allow, the City Children's Social Care will deliver only 'critical' social work services against the key elements of the Children Act 1989.

### Our 'Critical' Priorities

- Protection of children from significant harm
- Support to children at imminent risk of their family living arrangements breaking down
- Support to children looked after at imminent risk of placement breakdown
- Support to care leavers who are or are at imminent risk of becoming destitute and homeless

**Assessments, Plans and interventions delivered will be limited to the minimum social work activity required to reasonably mitigate risk during the period of the COVID-19 civil emergency.**

## 2. Critical Service Delivery Arrangements

### 2.1 Staffing Descriptors

To reflect the range of staff availability as a result of COVID-19 and Public Health England guidance the following terms are used to describe staff roles in this protocol:

#### **Fully Operational**

A member of staff who is well; is not required to self-isolate; is not in a vulnerable group.

These staff will focus on undertaking 'critical' direct contact tasks with children and families subject to social distancing precautions, adherence to protective personal hygiene measures and, where there are COVID-19 symptoms or diagnosis, provision of personal protective equipment (PPE).

To support social distancing, these staff are encouraged to work away from Council buildings where it is possible for them to safely travel to their direct contact tasks with children and families within one hour.

These staff will be supported with any indirect tasks by their **well and working away** colleagues.

#### **Well and Working Away**

A member of staff who is well and is working remotely away from Council buildings as a result of:

the requirement for self or household isolation due to COVID-19 symptoms of persistent cough or fever  
being in a vulnerable group and social distancing

These staff will focus on undertaking 'critical' and 'business as usual' tasks which support **fully operational** colleagues and the effective delivery of critical services.

These staff are available by phone, email and other City of London systems to undertake 'business as usual' and 'critical' indirect tasks as directed by a manager. These staff may be required to undertake indirect tasks related to their current role; be redeployed into another indirect role or a combination of indirect tasks.

#### **Absent**

A member of staff who is not available for any kind of work due to illness; annual leave or the lack of suitable remote working provision to enable them to be considered well and working away where they would otherwise meet these criteria.

## 2.2 Task Descriptors

<b>Indirect Social Work Tasks</b>	These are tasks which can only be undertaken by a social worker and do not require face-to-face contact with others. E.g. Multi-agency meetings via Skype or Teams; phone discussion with professional network to contribute to assessment; phone discussion with family about a plan; phone /email correspondence with agencies to secure services; case supervision by Skype or Teams.
<b>Direct social Work Tasks</b>	These are 'critical' tasks which can only be undertaken through face-to-face contact with children, families and other professionals. E.g. Section 47 child protection investigation visits/medicals; collection and placement of children entering care; home visits to prevent family or care placement breakdown.
<b>Indirect tasks</b>	These are support tasks which can be undertaken by practitioners and support workers and do not require face-to-face contact with others. E.g. phone discussion with professional networks; phone discussions with families and children; phone /email correspondence with agencies to secure services; Skype calls with family networks; case supervision by Skype or Teams.
<b>Direct tasks</b>	These are 'critical' tasks which can only be undertaken through face-to-face contact with children, families and other professionals. E.g. transportation and placement of children entering care; home visits to prevent family or care placement breakdown; in home support for children with complex and enduring disabilities; provision of emergency food, supplies and medicines for isolated young people and families.

## 3. Organisation of Targeted Early Help and Critical Social Care Service Delivery

**Fully operational** and **well and working away** Head of Service and social work Team and Deputy Managers and the Early Help Coordinator will remain available to support staff and the casework in the Service. Case and practice decision- making will remain with these managers as long as management staffing levels in Early Help and Children's Social Care allows.

It is acknowledged that ongoing provision of some **Targeted Early Help** services is critical to ensuring that the needs of vulnerable families don't escalate, and that Children's Social Care is able to focus available social worker resources on critical interventions to safeguard children.

In response to the reduction in a **fully operational** workforce 'critical' targeted early help and children's social work services will begin delivery through the virtual MASH.

### 3.1 Virtual MASH and Duty

**Virtual MASH: the duty social worker** will continue to receive and triage incoming referrals from professionals and families using the Virtual MASH.

The duty worker(s) will operate remotely. Staff with suitable skills will be redeployed from other areas (such as Early Help and the QA Service) if there are staff shortages. Staff limited to home working due to self-isolation or vulnerable group social distancing will be prioritised for such deployment.

Duty social workers will be **fully operational** and work from home where they can safely travel to a direct social work task within one and a half hours.

They will undertake child protection investigations and 'critical' visits to children and families under Section 47 Children Act 1989 for children not previously known or closed to Children's Social Care in the City.

The Duty Team Manager will identify those children requiring 'critical' visits and ensure they are allocated to a **fully operational** social worker. Children who require a statutory assessment but not a 'critical' visit will be allocated to **well and working away** social workers for phone-based assessment and agency checks.

**Early Help:** will provide coaching, advice and support to families over the phone around the following themes;

- Early Help guidance and support
- Parenting / behaviour (for families open to both early help and social care)

As workforce levels reduces, **fully operational** social workers will prioritise 'critical' direct social work tasks across the service. **Well and working away** social workers will be tasked with 'critical' indirect social work tasks across the service which may include those for children whose **fully operational** social worker is otherwise deployed on 'critical' direct work.

### 3.2 Phasing of the Service in Responses to Workforce Availability

During Phase one all **well and working away** staff will continue to complete indirect tasks with children allocated to them such as phone/Skype check-ins; agency checks; multi-agency skype / conference call meetings; completion of assessments and plans.

On a rota basis, **fully operational** social workers will come into the Guildhall on Monday, Wednesday and Friday. There will be one social worker and one manager in the office on each of these days.

Both **fully operational** and **well and working away** qualified social workers across DCCS and support staff currently in non-case holding roles will be redeployed to cover the direct and indirect tasks of absent colleagues.

Phase two: will consider redeployment to cover critical work within Children's Social Care from across DCCS.

## 4. Targeted Early Help and Children's Social Care Critical Tasks

### 4.1 S.47 Enquiry:

- Immediate risk of significant harm identified from available information to reach s.47 threshold by a social worker and manager.
- Virtual discussion to be held with Manager, police (where criminal element) and if possible, the referrer or most involved professionals within **24 hours**. A series of discussions can be held, and this will form the **Strategy Discussion**. Lack of professional availability due to absence or redeployment of resources should not delay safeguarding action for the child.
- There will be **15 working days** to complete a s.47 enquiry, which includes the child being seen by a **fully operational** social worker within **five days** and information being gathered from the available network and support system. Analysis of this information will be recorded as a brief Child and Family Assessment.
- During the COVID-19 emergency period we will need to make more use of resources within the child's family and community network to increase safety for children. A social worker should arrange a virtual Family Network meeting with extended family members within **ten working days**. Extended family members can be sent email links or given dial-in / PIN numbers for Skype conferences held through the Skype conferencing facilities.
- Within **15 working days** a social work Manager will review the available information to make a decision about the level of risk to the child and next steps e.g. case closure, planning under s.17 or s.47 or legal action.
- Children identified as 'in need' under s.17 will only be offered a s.17 child in need plan where there is an imminent risk of family breakdown or the intervention required is deliverable in the context of service availability during the COVID-19 emergency period. A social worker should complete a case summary outlining a child's s.17 needs where a social work manager has agreed to close involvement of Children's Social Care because no services can be delivered during the COVID-19 emergency period.
- Subject to central government and Public Health England guidance regarding management of COVID-19 transmission and infection in individual cases, safety measures could include involvement of the child's relatives, requesting an adult posing a risk moves out of the family home or requiring the child to attend a school setting (symptomatic, infected and some children with specific health conditions should not attend school). Written Agreements with parents should not be used.
- The child's case summary on Mosaic will be updated by a social worker to reflect the new understanding of the family, risk and the child's plan.
- The child protection process remains the same – with s47, child and family assessment and ICPC.
- For children with new child protection plans they will have professional contact **two weekly**. This will be a mixture of direct contact and phone/Skype calls. Contact can be through a social worker or other professional identified by a Manager e.g. nurse, health visitor, teacher, police officer

## 4.2 Planned ICPCs may be held in two Parts

- The ICPC can be held in two parts if needed while there is COVID 19, if the family are not able to attend face to face on skype/teams.
- The Child Protection Chair and social worker will meet with the family virtually, or face to face to share concerns in relation to the potential risks to children.
- At this stage family will be advised of the virtual conference and the process involved in regard to ICPC and potential outcomes. If the family are unable to attend their views will be ascertained and shared at the virtual ICPC.
- Virtual ICPC meeting with professionals and family if possible, will take place within three days of the above meeting to discuss risks and needs of the children, and whether they need to be on a child protection plan or child in need plan. Outcome of this meeting will be shared with the family if they were not able to be present.
- Child Protection plans will determine level of contact with the child and family, which includes virtual contact (WhatsApp, Skype, Video Calling); review meetings (akin to core group), dates and network around the child
- Every four weeks, using information from contact with the family and involved professionals, the child's case summary is updated by a social worker. The Plan and level of risk to the child is reviewed by a social work manager and a social worker.
- Every three months the Child Protection Chair will arrange a virtual review of the child protection plans with the family, a social worker and involved professionals. The child protection chair will review information recorded on the child's Mosaic record before commencing the virtual review. The virtual review can be a series of phone/ Skype discussions.

## 4.3 Transfer-In Child Protection Conferences

- These will not be held during the COVID-19 emergency period
- Requests to be reviewed in 12 weeks and originating LA contacted re: proposed transfer-in dates (depending upon national climate)
- The Children's Social Care team will agree to undertake 'critical' direct social work tasks with a child and family where a valid transfer-in request has been made

## 4.4 Current Child Protection Plans

- A Child Protection Chair will virtually review and update the plan in discussion with the family, a social worker and involved professionals on or before the date a RCPC had been set. Virtual reviews will then be held every 12 weeks.
- During the COVID-19 emergency period we will need to make more use of resources within the child's family and community network to increase safety for children. If the child protection plan is not working, the core group and/or the RCPC can be brought forward. If needed, the social worker can arrange a virtual Family Network meeting with extended family members. Extended family members can be sent email links or given dial-in / PIN numbers for Skype conferences held through the City of London's Skype conferencing facilities.
- The child protection chair will update the child protection plan and share with it with the network



- Children will not have their child protection plans ended during the COVID-19 emergency period unless a) they become a child looked after; b) any risk posed to them by adults ends through permanent alternative living arrangements; c) the permanent absence of adults posing the risk to a child
- The Safeguarding and Quality Assurance Service will decide, based on risk, the timescale and priority for scheduling of RCPCs.

#### 4.5 Children identified as 'in need' under s.17

- Social workers and managers will risk assess all children currently identified as 'in need' under s.17 as low, medium or high need. All children at imminent risk of family breakdown or those children for whom current 'need' would rapidly escalate into a 'need for protection' should be assessed as 'high need'.
- It is acknowledged that, in the City, where we can work in partnership with families and they are active in increasing their children's safety we do not over-intervene under child protection processes. Social workers and managers should be particularly alert to ensuring these children are risk identified as 'high need'.
- Children in need assessed as 'high need' will have **four weekly** contact from a social worker through phone / Skype / social media. A social worker will undertake **four weekly** agency checks and update the child's case summary on Mosaic. Where any social worker becomes aware of increasing need or risk to the child, they will alert a manager and record the outcome of that discussion / email response. Where agreed by a social work manager, a direct visit to these children may be made by a social worker.
- Every **12 weeks** a social work manager or IRO/CP chair will virtually review the s.17 plan of children identified as 'high need' with the family, a social worker and the involved network. This may take place as a series of phone/Skype calls. There will be no face-to-face meetings.
- During the COVID-19 emergency period we will need to make more use of resources within the child's family and community network to increase safety for children. A social worker should arrange a virtual Family Network meeting with extended family members where actions and goals in the current plan are not achievable. Extended family members can be sent email links or given dial-in / PIN numbers for Skype conferences held through the Council's Skype conferencing facilities.
- In the event that reduced multi-agency intervention and service delivery increases the risk to a child 'in need' a social worker and manager should consider if the threshold for immediate risk of significant harm is met and whether a s.47 enquiry is required.
- In the context of service availability and the 'critical' operating model for children's social care during the COVID-19 emergency period, children currently supported under s.17, except those children with additional needs and an EHCP, who are assessed as low or medium need are not considered eligible for 'critical' social work interventions.
- These children will remain open to children's social care as children in need during the COVID-19 emergency period to enable them to access the

emergency school and childcare provisions for vulnerable children and remain 'in sight' of professionals.

- Children in need assessed as 'low' or 'medium' need' will have **six weekly** contact from a social worker through phone / Skype / social media. A social worker will undertake **six weekly** agency checks and update the child's case summary on Mosaic. Where any social worker becomes aware of increasing need or risk to the child, they will alert a manager and record the outcome of that discussion / email response.
- Every **18 weeks** a social work manager and a social worker will review the s.17 plan of children identified as low or medium need. There will be no Child in Need meetings.
- Where a social work manager agrees to cease social work involvement, the impact on the child or their parent's capacity arising from the COVID-19 social and educational restrictions **must** have been taken into account in reaching that decision. The social work manager will record a 'COVID-19 Case Management Decision' in the child's case notes. A social worker will update the child's case summary on Mosaic. A **Case Closure** letter will be sent to the family and network to advise of the decision and their Mosaic record will be closed. The Case Closure Risk Management Panel will be suspended during COVID-19 arrangements

#### 4.6 Children in Care

- Where consistent with the child's and carer's health needs and the government's current Public Health England COVID-19 advice, all children in care can continue to attend their educational setting if this will promote their welfare and maintain the stability of their home. Foster carers wishing to practice social distancing can choose to care for the child in their home.
- Personal Education Plans will be completed virtually and on paper to ensure that due attention is given to their educational progression.
- IROs, social workers and managers will need to work sensitively with children, their families and carers to promote arrangements for the child to stay in touch with their family whilst ensuring that everyone involved is practicing social distancing and doing all they can to prevent infection and transmission of the COVID-19 virus. Creative and flexible arrangements using virtual technologies such as Skype, FaceTime, WhatsApp etc. should be actively encouraged in preference to face-to-face contact.

#### 4.7 Entry into Care

- An IRO will be allocated when a child becomes looked after during the COVID-19 emergency period.
- Within five days of coming into care a social worker will visit the child in their new home within to undertake a placement planning meeting and initial visit. This person can be the IRO, a social worker or a supervising social worker.
- An IRO will seek the views of the child in advance of their looked after review by virtual means such as MOMO/WhatsApp/Skype/Phone. Where possible the IRO will use virtual contact that allows them to 'see' the child. A social work manager

will decide if the child's circumstances and coronavirus risk levels are such that the child should have a visit from an IRO.

- An IRO will arrange for the initial looked after review to be held within 20 days through the most appropriate virtual means. This may occur as a series of phone/Skype/Facetime/conference call meetings.
- Initial Health Assessments will be requested through the usual route and undertaken through a virtual consultation between a member of the Children Looked After health team, the child and their carer (where appropriate). Where possible the consultation will use virtual contact that allows the health team member to 'see' the child. **A child will never be asked or expected to undress or show parts of their body usually covered by clothing during the virtual consultation.**

#### 4.8 Children in Care living in stable homes

- Where children in care are living in long-term stable homes with foster carers the IRO will arrange to hold the child's looked after review virtually, at **six monthly** intervals, with a preference for technologies where the child and others can 'see' each other. The review may take place as a series of virtual meetings.
- An IRO will undertake a 'desk-top' midway review at the three-month interval between reviews to ensure the child's needs continue to be met. An IRO will make virtual contact with the child to seek their wishes and views at this point.
- The IRO will record in case notes on the child's Mosaic case record any alternative arrangements under these COVID-19 emergency measures for reviews, seeing the child and actions which are delayed due to the COVID-19 restrictions as 'COVID-19 Alternative IRO Arrangements'.
- A children's social worker will make a direct visit to the child every **12 weeks**. They will contact the child using phone or virtual means every **four weeks**. Where possible the social worker will use virtual contact methods that allows them to 'see' the child.
- The supervising social worker will make a direct visit to the foster carer every **12 weeks**. They will contact the foster carer using phone or virtual means every **four weeks**. Where possible the supervising social worker will use virtual contact methods that allows them to 'see' the carer.

#### 4.9 Children in Care with Plans for Adoption or Special Guardianship

- Where children in care are living in short-term foster homes, the IRO will arrange to hold the child's looked after review virtually, at **three monthly** intervals, with a preference for technologies where the child and others can 'see' each other. The review may take place as a series of virtual meetings.
- An IRO will undertake a 'desk-top' midway review at the **six-week** interval between reviews to ensure the child's permanence plan continues to be progress. An IRO will make virtual contact with the child to seek their wishes and views at this point.
- The IRO will record in case notes on the child's Mosaic case record any alternative arrangements under these COVID-19 emergency measures for reviews, seeing the child and actions which are delayed due to the COVID-19 restrictions as 'COVID-19 Alternative IRO Arrangements'.

- A social work manager will Chair a virtual Permanency Planning Meeting with the child's network every **six weeks**. The meeting will take place virtually and may consist of a series of virtual meetings.
- A children's social worker will make a direct visit to the child every **six weeks**. They will contact the child using phone or virtual means every **three weeks**. Where possible the social worker will use virtual contact methods that allows them to 'see' the child.
- The supervising social worker will make a direct visit to the foster carer every **12 weeks**. They will contact the foster carer using phone or virtual means every **four weeks**. Where possible the supervising social worker will use virtual contact methods that allows them to 'see' the carer.

#### 4.10 Children in Care Living in unstable placements; residential children's homes or unregulated provision

Children living in unstable placements, residential children's homes and unregulated placements are more vulnerable to placement disruption and abuse. During the COVID-19 emergency period it is critical to maintain, where it is in the child's best interests, their placements because suitable alternatives are likely to be extremely challenging to identify.

A child's placement is considered to be unstable where there are significant behavioural or restraint incidents occurring; children are missing; at risk of CSE/CCE/Serious Youth Violence; there are, or have recently been, allegations against carers; children refuse to return to placement; children are not attending an educational setting; children have significant additional needs arising from trauma, health or disability.

- Where children in care are living in unstable placements, residential children's homes or unregulated placements, an IRO will arrange to hold the child's looked after review virtually, at **three monthly** intervals, with a preference for technologies where the child and others can 'see' each other. The review may take place as a series of virtual meetings.
- An IRO will make a visit to the child at their placement before each three-monthly review to ascertain their views and assess the suitability of their placement.
- An IRO will undertake a 'desk-top' midway review at the **six-week** interval between reviews to ensure the child's permanence plan continues to be progress. An IRO will make virtual contact with the child to seek their wishes and views at this point.
- The IRO will record in case notes on the child's Mosaic case record any alternative arrangements under these COVID-19 emergency measures for reviews, seeing the child and actions which are delayed due to the COVID-19 restrictions as 'COVID-19 Alternative IRO Arrangements'.
- A social work manager will Chair a virtual Placement Stability Meeting with the child's network every **four weeks**. The meeting will take place virtually and may consist of a series of virtual meetings.
- A children's social worker will make a direct visit to the child every **four weeks**. A social worker will make separate contact with the child and their carers using phone or virtual means every **week**. Where possible the social worker will use virtual contact methods that allows them to 'see' the child.

- A supervising social worker will make a direct visit to the foster carer every **six weeks**. They will contact the foster carer using phone or virtual means every **week**. Where possible the supervising social worker will use virtual contact methods that allows them to 'see' the carer.

#### 4.11 Care Leavers

- Every care leaver between 18 and 25 years has an allocated social worker.
- During the COVID-19 emergency period, Personal Advisor support to care leavers can be provided by non-social work qualified but workers with relevant experience across DCCS. Support will be provided where care leavers are at imminent risk of homelessness or destitution.
- All eligible care leavers between 18 and 25 years will be identified as requiring low, medium and high support.
- Contact between young adults and social worker/support worker will be virtual and at the following minimum frequency:
  - Low support – **12-weekly**
  - Medium Support – **six-weekly**
  - High Support – **two-weekly**
- In the first instance, the social/support worker are to assist young adults to access community and central government resources made available as part of the COVID-19 emergency response. This should include making phone and email contact with relevant agencies to submit and pursue applications on behalf of young adults.
- Social workers/support workers with allocated responsibility for those young adults identified as requiring **High Support** should ensure that there is an updated case summary and a separate Plan recorded in case notes on the young adult's Mosaic record. The Plan should include actions which can be implemented in the context of social distancing and reduced service availability during the COVID-19 emergency period.
- A social work manager will hold a virtual review of the young adult's **High Support** Plans with a Social worker/support worker and the young adult's network every **eight weeks**. The IRO will convene a Pathway Plan Review Meeting of the young person's high support needs.

#### 4.12 Targeted Early Help functions (for open families)

- Early help will risk assess all children as low, medium or high need. All children at possible risk of family breakdown or those children for whom current need could rapidly escalate into a 'need of help / protection' should be assessed as 'high need'. It is anticipated that this should apply to very few families within the Early Help/Short breaks Service.
- Children assessed as 'high need' will have **four weekly** contact from a case practitioner through phone / Skype / social media. Case practitioners will undertake **four weekly** agency checks and update the child's case summary on Mosaic. Where any worker becomes aware of increasing need or risk to the child, they will alert a manager and make referral into social care.
- Children in need assessed as 'low' or 'medium' need' will have **six weekly** contact from a case practitioner through phone / Skype / social media. A Case practitioner will undertake **six weekly** agency checks and update the child's

case summary on Mosaic. Where any worker becomes aware of increasing need or risk to the child, they will alert a manager and make referral into social care.

#### 4.13 Local Authority Designated Officer functions

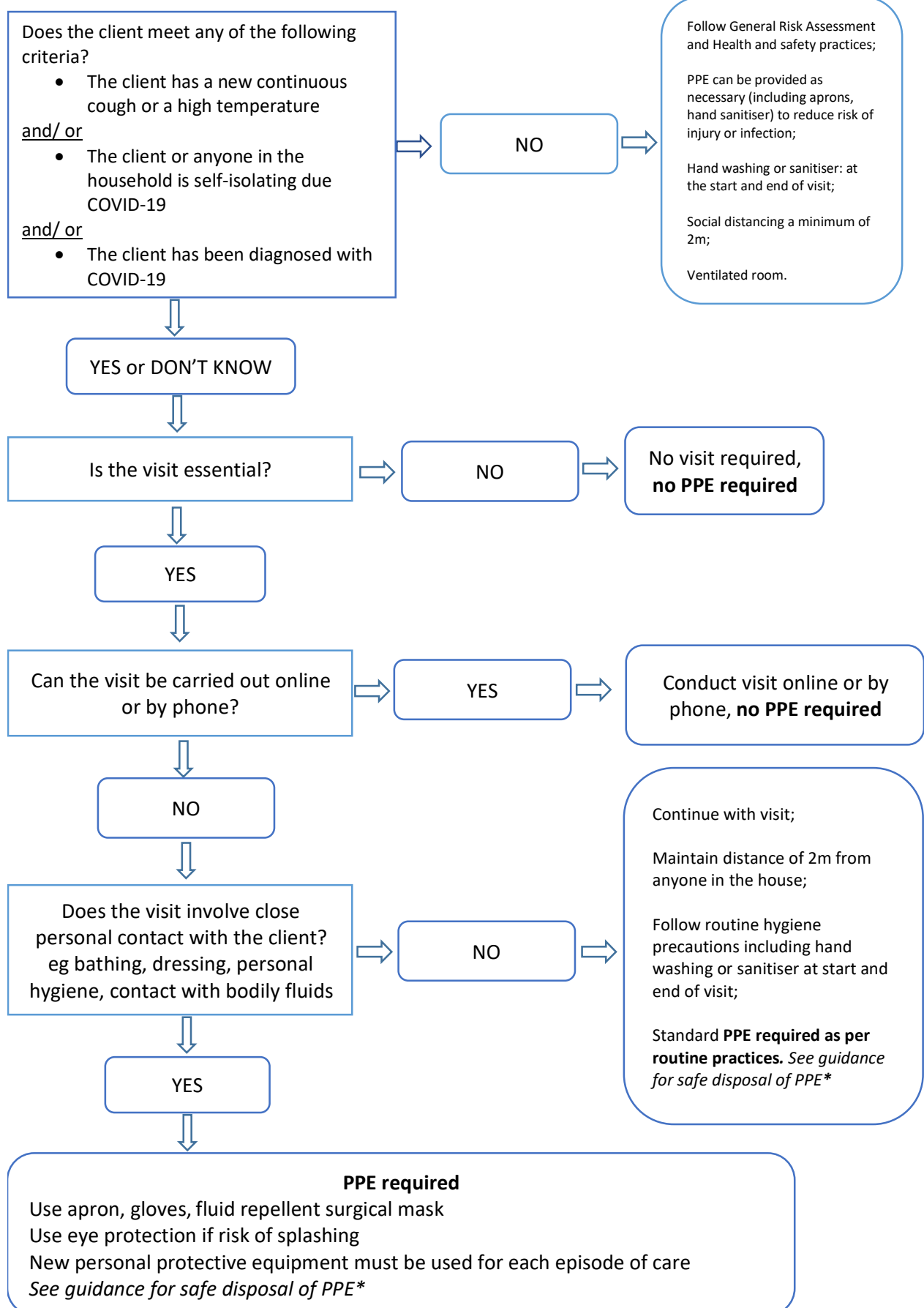
- A duty social worker / IRO or social work manager will receive information (within 48 hours of the incident) from a range of sources via email/phone.
- If the threshold is met for formal LADO oversight, then the LADO or IRO deputizing will convene a virtual ASV within 20 working days of the incident.
- Virtual review ASV meetings will be held by LADO or IRO, where actions by involved agencies are able to progress alongside COVID-19 emergency arrangements.
- Where COVID-19 emergency measures are the priority for other agencies i.e. Police and Health and there is no immediate risk to children the incident will remain logged on the LADO tracker.
- The LADO or IRO will take appropriate action based on investigation findings e.g. referral to regulatory body etc.

**This protocol will be regularly reviewed by CSMT, DLT and the City's Gold Group to reflect the changing central government and Public Health England advice and guidance regarding COVID-19 and the role of Children's Social Care and Early Help services.**



## Guidance for Staff completing essential visits to people at homes: Do I need to use Personal Protective Equipment (PPE) to protect myself and my client from COVID-19?

[PHE Guidance on Home Care Provision](#) updated 19.03.2020



## Risk Management for COVID 19 re: Home visits & office appointments

<b>DATE:</b>		<b>DEPARTMENT:</b>		<b>TEAM:</b>	
<b>HOME VISITS &amp; OFFICE APPOINTMENT OFFICER:</b>		<b>MANAGER:</b>			

ASSESSMENT CRITERIA	YES/NO	OFFICER COMMENTS	MANAGERS COMMENTS
1. Is the visit essential?			
2. Can the visit be done remotely?			
<b>If it is agreed that a visit is required, the screening questions should be:</b>			
3. Does the household have anyone:			
<ul style="list-style-type: none"> <li>Who has symptoms of Covid-19 (new continuous cough and/or fever)?</li> </ul>			
<ul style="list-style-type: none"> <li>Who is self-isolating?</li> </ul>			
<ul style="list-style-type: none"> <li>Who is over 70 or has an underlying health condition or is pregnant?</li> </ul>			
4. <b>If so</b> , undertake a detailed risk assessment with a manager and maintain 2m distance if possible and if nature of visit does not allow this, wear PPE (mask, gloves and apron)			



## 5. Appendix One

	Registered social worker tasks	Green	Amber	Red	Comment
<b>Referral &amp; Assessment</b>	Following referral securing consent about data sharing, collating information and decision-making about whether to undertake a statutory assessment of	Completed by registered social worker	Social worker is supported by unqualified staff to secure consent, collate and identify who has relevant information.	Insufficient registered social workers to undertake this task on all referrals	
<b>Referral &amp; Assessment</b>	Assessment of need leading to a actions to meet needs including CIN Plan if continuing children's social care service.	Completed by registered social worker	Social worker is supported by unqualified staff in gathering & collating information, coordinating & supporting meetings with professionals and family, drafting action points, liaising with health and education professionals around health and education contribution to assessment and, completing child records.	Insufficient registered social workers to undertake this task on all statutory assessments.	
<b>Referral &amp; Assessment</b>	Professional judgement about child's needs, parenting capacity, family / environmental factors informing analysis of need and risk; reviewing or updating assessments; agreeing child in need plan where appropriate.	Completed by registered social worker		Insufficient registered social workers to undertake tasks relating to this activity.	
<b>Care packages</b>	Preparation and review of care packages.	Completed by registered social worker	Social worker is supported by unqualified staff in preparing and reviewing care packages( ie: checking changes of circumstances, changes in financial and housing circumstances).	Insufficient registered social workers to undertake tasks relating to this activity.	
<b>Child Protection</b>	Interventions under Part 5 Children Act 1989 (child protection) relating to strategy meetings / discussions, immediate protection, decisions about holding initial or pre-birth child protection conferences and related assessments / child protection enquiries.	Completed by registered social worker	Social worker is supported by unqualified staff in getting and collating information from children's services and other agencies.	Insufficient registered social workers to undertake tasks relating to this activity.	
<b>Child Protection</b>	Children who require unplanned removal from parent or current carer for their own protection.	Completed by registered social worker	Social worker is supported by unqualified staff in getting information about other potential carers or possible placements for children who may have to be removed from their parent or current carer.	Insufficient registered social workers to undertake tasks relating to this activity. to undertake this	
<b>Child Protection</b>	Pre-proceedings work with the family and their legal representative; presentation of child's case at legal planning meeting or professional panel making decisions about whether a child's needs can only be met by them becoming a looked after child (whether through court order or accommodation).	Completed by registered social worker		Insufficient registered social workers to undertake tasks relating to this activity.	
<b>Child Protection</b>	Presentation of a child's case to a family court and presenting the local authority's position on the best plan for the child's future care.	Completed by registered social worker		Insufficient registered social workers to undertake tasks relating to this activity.	
<b>Age &amp; Human Rights Assessments</b>	Carry out age assessment and human rights assessment in relation to unaccompanied asylum seeking children.	Completed by registered social worker		Insufficient registered social workers to undertake tasks relating to this activity.	
<b>Fostering regulations &amp; placements</b>	Approve people as carers under the fostering regulations subject to substantive assessment of the carers as suitable foster carers.	Completed by registered social worker		Insufficient registered social workers to undertake tasks relating to this activity.	
<b>Fostering regulations &amp; placements</b>	Make recommendations and decisions (usually manager who are registered SWs) about financial and placement support.	Completed by registered social worker		Insufficient registered social workers to undertake tasks relating to this activity.	

<b>Fostering regulations &amp; placements</b>	Agree arrangements for delegating day to day responsibilities to foster carers.	Completed by registered social worker		Insufficient registered social workers to undertake tasks relating to this activity.	
<b>Fostering regulations &amp; placements</b>	Direct work with children preparing them for moving from their parent / current carer; support the child as they move into their new placement; placement planning meeting.	Completed by registered social worker	Social worker is supported by unqualified staff working under their direction.	Insufficient registered social workers to undertake tasks relating to this activity.	
<b>Fostering regulations &amp; placements</b>	Provide practical help and support in the placement set up and beyond.	Completed by registered social worker	Social worker is supported by unqualified staff working under their direction.	Insufficient registered social workers to undertake tasks relating to this activity.	
<b>Case management &amp; Children in Need</b>	Lead professional responsible for case management coordinating the work of professionals implementing a child in need plan, working with the child and family; coordinating meetings, maintaining and distributing records of meetings.	Completed by registered social worker	Social worker is supported by unqualified staff: telephone contact with family, other professionals as directed, setting up meetings and telephone calls, collating information requested by the social worker; providing information and practical support to families; accompany parent and children to appointments. Resolving practical problems in implementing care packages (ie: with transport) and direct payments.	Insufficient registered social workers to undertake tasks relating to this activity.	
<b>Case management &amp; Children in Need</b>	Visits to children in need or seeing the child at school or other settings.	Completed by registered social worker	Social worker is supported by unqualified staff who join the social worker on home visits.	Insufficient registered social workers to undertake tasks relating to this activity.	
<b>Care Plans &amp; Reviews</b>	Completing care plans for looked after children and reporting on their implementation and impact at looked after children reviews ; updating placement plans; return home and leaving care plans.	Completed by registered social worker		Insufficient registered social workers to undertake tasks relating to this activity.	
<b>Child Protection</b>	Preparing and presenting reports to initial, pre-birth or subsequent child protection conferences.	Completed by registered social worker		Insufficient registered social workers to undertake tasks relating to this activity.	
<b>Child Protection</b>	Leading the core group of professionals and parents / carers / family around the child subject to a child protection plan.	Completed by registered social worker		Insufficient registered social workers to undertake tasks relating to this activity.	
<b>Looked after children visits</b>	Statutory visits to looked after children.	Completed by registered social worker	Visits carried out by local authority fostering or adoption social workers as well as children's social workers.	Insufficient registered social workers to undertake tasks relating to this activity.	
<b>Looked after children placement</b>	Recommending and making decisions (usually managers with independent reviewing officers) about any changes of placement for looked after children.	Completed by registered social worker		Insufficient registered social workers to undertake tasks relating to this activity.	
<b>Supervision of contact</b>	Supervision of parental contact with looked after children.	Completed by registered social worker or contact centre worker.	Unqualified staff provide supervision of contact under direction of social worker or contact centre manager.	Insufficient registered social workers or contact service staff to undertake tasks relating to this activity.	
<b>Returning home and leaving care</b>	Implementing return home or leaving care plans.	Completed by registered social worker	Social worker is supported by unqualified staff who work with the parent on practical arrangements for the child's return home or young person's move to semi-independent provision or their own home.	Insufficient registered social workers or contact service staff to undertake tasks relating to this activity.	

<b>Critical incidents</b>	Making recommendations and decisions about responding to serious child care incidents, accidents, injuries or health emergencies involving looked after children or other children known to children's social care or coming to their attention as a result of an	Completed by registered social worker		Insufficient registered social workers or contact service staff to undertake tasks relating to this activity.	
<b>Leaving the secure estate</b>	Leading statutory assessment and discharge planning for children leaving the secure estate.	Completed by registered social worker.	Unqualified support the social worker or other qualified staff in the Youth Offending Team carry out the tasks.	Insufficient registered social workers or contact service staff to undertake tasks relating to this	
<b>Specialist assessments</b>	Specialist assessments relating to young carers, viability assessments of carers, serious youth violence and criminal child exploitation .	Completed by registered social worker.		Insufficient registered social workers or contact service staff to undertake tasks relating to this	

## 6. Appendix Two

### Children's Services High Level Emergency Planning Framework

[NB: phases align to SCG sit-rep indicator levels]

