

Assessment of prospective kinship, foster and adoptive carers & progress of permanence planning during Covid-19 Lockdown

A summary of local experience & learning across Scotland March to August 2020

CELCIS' Resilience Team September 2020



# Context

In May 2020, the Celcis' Resilience Team was asked by Scottish Government to explore how local areas were responding to the challenges of Covid-19 in terms of:

- Assessments and approval of prospective kinship carers, foster carers and adopters
- Child's care planning and permanence planning.

## **Information gathering**

To mitigate the increased pressure on workforces prioritising delivery of essential services to children and families and risk of 'survey fatigue' a small team at Celcis made a direct approach to sector colleagues known to us through our Permanence and Care Excellence and Improving Care Experiences programmes during lockdown and recovery phases.

We reached out to 32 local areas and heard back from 17. In addition we received feedback from a range of partners within our kinship, fostering, adoptive and reviewing officer networks. Respondents were asked for information and experiences following a set of structured headings via one to one telephone discussion or in an email reply.

This report is a summary of the responses offered over four months to end August 2020. It builds on the earlier interim report in June 2020 with updates and developments received from additional areas.

## **Overall position**

All local areas responding described increased use of telephone, telephone conferencing and virtual technologies to enable prospective carer assessments and care planning to progress. More rural and remote areas tended to be better placed to work in this way from early in lockdown due to technical systems already in place pre Covid-19. Use of technology has been dependant on availability of technical hardware, software, inter net and data capacity together with the knowledge, competence and confidence of practitioners. Following a frenetic period of pausing to plan and regroup in the early weeks of the pandemic, it is clear that all the areas we spoke with have adjusted to a 'new normal' of virtual connections with children and families. There is also an energy to strive to continuously improve and extend provision for carer and adopter assessments, care planning, reviewing and permanence planning.

*`What has amazed me most, is the sheer speed of change that Covid has created. We have had to change our systems so rapidly and normally things change very slowly!'* 

'Much of the energy has been to consider how existing practices can be converted into virtual/online methods of interaction. Where this is not possible consideration has been given to how else requirements can be met to enable good and effective practice at this time.'

For the areas and agencies who connected with us, assessment of prospective kinship and foster carers and adopters has adapted to Covid-19 circumstances with increasing momentum as recovery progresses.

#### Assessment and support for prospective and current kinship carers

Practitioners spoke of becoming aware of kinship families who needed more support in the early stages of lockdown – and of changes needed in local systems to identify and offer this earlier. This is likely due to be an amalgam of factors. Unlike foster care, kinship families are less likely to have formal supports such as a supervising social worker equivalent, consistent financial payments or agency peer group supports. They are also more likely to be disadvantaged and affected by poverty; potentially experiencing overcrowding in housing during Covid-19 and home schooling demands which further exacerbated stress. Within kinship families there is an added layer of relationship dynamics when caring for children where there is a biological relationship with the child's parent. Kinship carers are often older, such as grandparents, and may themselves be shielding or experiencing other health issues. All of these factors are influencers in adding strain on placements as the pandemic ebbs and flows.

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'The adult conversations with support services can be the only ones kinship carers get so the emotional support is still provided, albeit at a distance. Some home visits have been undertaken where higher risks are identified or potential (placement) breakdown... at least weekly contact by phone, often via the third sector, or through social work duty services'.

 In one area during lockdown, kinship, fostering and adoption managers worked alternate weeks to manage a local social work hub (inspired by NHS Covid models) offering support to children and placements. Duty social workers worked from home. The hub provided a venue for direct contact arrangements, socially distanced case assessment and planning reviews and social work support where this was not being offered virtually. Other examples were offered of hubs hosted by third sector agencies such as Sure Start with social distancing in place for children and families.

*`local resources and easy access to these are required. The coordination between schools, the third sector and HSCP at the start of the pandemic were essential to meet the immediate needs of families, such as food. It is only now that we are exploring the mental health needs of children and their carers'.* 

- Coaching and mentoring were provided virtually by senior staff to smaller teams to progress care plans and assessments of kinship carers.
- Where an immediate kinship assessment was required in order to place a child at short notice examples were offered where these have been conducted by telephone. Practitioners reflected that this was more informal than usual with less opportunity for social workers to undertake face to face assessments, instead using telephone or virtual conversations on which to base assessment of the individual to provide the care needs of the child.
- Kinship approval panels were described as largely on hold in areas at the start of lockdown due to the time needed to design and set up safe virtual alternatives. However one area managed to continue with all panels virtually throughout and reported a higher attendance of carers than before lockdown. Access to technology and confidence in using it were key factors in the continuity of running panels. This has developed with familiarity and efforts to provide families with appropriate devices and panels are progressing
- Anomalies have been highlighted in data recording, for example where kinship carers were recorded as 'friends and relatives' when they are in fact grandparents.
- Positive feedback from some kinship carers that virtual assessments and panel experiences are less formal, more family friendly and enable better participation for children and families.

# Assessment and support for prospective and current foster carers

- One area described temporarily pausing assessments of prospective foster carers at the start of lockdown, instead prioritising finding existing foster carers with 24 hour availability to help look after children requiring to self-isolate.
- Many described continuing to receive enquiries from potential foster carers throughout lockdown. New assessments could not start until direct meeting opportunities opened up but those already started continued virtually so as not to lose the applicants.
- Relationship building, preparation groups and individual assessments continued virtually for foster carers and adopters in most agencies with face to face preparation groups pausing.
- For individuals in the latter stages of assessment before Covid-19 video and telephone meetings were used to complete assessments and virtual approval panels have been enabled.
- Examples offered of physically distanced assessment meetings in outside venues such as parks.
- Medical advisors highlighted as a key source of advice with their capacity to complete medical reports increasing as the pandemic developed.
- At the height of lockdown one area commissioned a new contract with a private provider to overcome delay in medical assessments and enable assessments to progress (for all prospective carers).

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- An 'early permissions' consent form enabled initial checks to be accelerated to screen out applications at an earlier stage thus using resources more effectively.
- Second opinion/line manager visits were undertaken remotely with applicants with attention paid particularly to reading the room and body language.
- In one area frequent regular newsletters to adopters, foster carers and kinship carers are circulated and a similar newsletter to practitioners. Both include links to resources and toolkits. Feedback is good with comments from carers that the tone is correct for the current circumstances. Intent to develop this training and learning online with existing resources in the interim collated and shared with carers through a Learning and Development booklet.

## Assessment and support for prospective and current adopters

- One third sector adoption agency reported an increase in enquiries from prospective adopters during lockdown and increased attendance at new virtual support groups for adoptive carers particularly those held in the evening.
- For individuals in the latter stages of assessment before Covid 19 video and telephone meetings were used to complete assessments and virtual approval panels enabled.
- The same agency continued to participate in matching panels with children's local authority and adopters via virtual platforms.
- One area spoke of continuing to introduce children and adopters using physical distancing outside.
- Report of one local area reaching out in a new way to a third sector adoption partner to learn from their assessment processes during Covid-19.
- Adoption and Fostering Alliance Scotland's virtual practitioner sessions on assessment and The Fostering Network websites were repeatedly cited as helpful for practitioners and current and prospective carers and adopters.

'AFA have provided exceptional support in the interpretation of guidance and legislation. They have also provided forums in which local authorities can join for practice exchange'

- Adoption UK (Scotland)'s array of virtual support groups and learning opportunities such as webinars are proving popular with adoptive families.
- One area favoured use of telephone conferencing as the method across approval panels for all carers (kinship, foster, adoptive), and care reviewing. The rationale being that it made it equal for everyone as parents, children and prospective carers often don't have access to other platforms and it avoided internet connections crashing. Also reported as less stressful for children and young people.
- Wider use of materials and work being sent to prospective carers (kinship, foster and adoptive) to complete in lieu of assessment visits. Attention to value and nurture relationships during lockdown by the assessing social worker hand delivering materials to applicants' front doors.
- Some foster placement breakdowns reported but a sense that where breakdown is occurring it is more often with kinship placements (as highlight in earlier kinship section).

# Care planning and permanence planning

- Feedback from independent reviewing officers across the country evidences that care planning reviews have continued regularly during Covid-19. Where possible children and parents are included and their views known. Many authorities saw increased involvement with on line questionnaires to children, telephone calls to parents and the ongoing support, where in place, from advocacy services for both children and parents. Major focus on including child and family but still challenges re their access to technology and finance for internet use.
- Noting that kinship placement reviews are more variable cross country with practice developing locally at different stages.

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'Covid-19 has disrupted the roll out of procedures aimed at reviewing regularly, quality assuring and approving kinship care. Planned meetings to review kinship can be trumped by child protection review demands'

- During recovery phases return to face to face reviews are being explored and venues within councils adapted to ensure physical distancing and hygiene precautions are in place.
- Reports of children feeling comfortable to use phone, ipad or laptop screens to attend virtually. Some carers and parents responding that they prefer remote meetings with

## 'less eyes on them in the room', 'more informal'.

- There are some paper reviews in place where no or minimal direct contact takes place, with written reports and occasional phone calls.
- Examples of thought and care being taken to prepare adults and children before virtual meetings and the use of technology to provide virtual waiting spaces and pre meeting discussions, but variable across areas according to technology confidence and access.
- Examples of creative procedures set up for initial case conferences and pre-birth planning.
- Examples of continuous audits undertaken of children looked after at home and on the child protection register to ensure those children known to be at risk are being visited.
- Example of virtual iPad introduction replacing a child's pre move visits to new foster carers. On arrival the child is welcomed with their food choices, self care products and usual routines as far as possible.
- Adoption matching and placement plans required to be re-considered to enable introductions and transitions across households, recognising public health guidance. There are different practices and decisions across authorities regarding moving children during lockdown and recovery. This can be a barrier to making a placement even when the child is already matched. Different availability of children's hearings across localities can also contribute to drift.

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*Clearer national direction about the ability to move children to permanent placements during lockdown would be helpful'.* 

#### Challenges

• Hard working through the challenge of shielding with families.

'You can't social distance with a 3 year old!'

• Access to technology for the workforce, carers and children was a frequent topic.

'There have been challenges in accessing technology (not just in relation to digital platforms) but that front line practitioners do not have access to equipment with appropriate function such as camera to enable visual interaction. This is a significant resource issue'

'Technological equipment to support the workforce in undertaking high quality practice via another medium (would help overcome this). It has taken significant energy to ensure there is appropriate resources'.

• Panel meetings (and virtual meetings generally) are taking much longer due to the additional preparation time, need for detailed agendas and paperwork to support panel members as well as applicants. Impact of screen fatigue.

'lap tops have been supplied in the last week to admin staff to allow minutes to be undertaken, linking meetings to occur etc. Paper copies are also required for some panel members which adds to the volume of work. Minute taking was done by having the coordinator and minute taker sitting together in a room physically distanced'

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- Risk of drift in permanence decision making with reduction in Children's Hearings and dealing with emergency decisions as the main priority. Increasing backlog for hearings. (Conversely, also reflections that delay in reviewing Orders has been helpful to enable child and parental rights to be appropriately respected).
- Concerns noted around delays in legal permanence decisions with a backlog building up for court hearings.
- Difficult to evidence changed capacity of birth parents during lockdown and recovery if direct assessment is not possible. There may not be sufficient evidence to enable a children's hearing or court to make a fully informed decision on the basis of social work recommendations, leading to delays in care planning.

*`We're worried about the backlog of cases going to court. We're worried about the long term impact on children, especially infants, what if they forget their parents?'* 

- Lack of planned breaks for carers and children during lockdown and restrictions into recovery phase. Need to anticipate impact of this on children, families and placement stability.
- Some adoptive families experienced a decrease in children's anxiety behaviours during lockdown and home schooling. Others noted an increase in unsettled behaviours evidenced by disturbed sleep, distressed and troubled behaviours towards carers.
- Significantly higher demand noted from carers and adoptive families on helplines and virtual support groups (highlighting that there is less support accessible for kinship carers).

#### **General observations**

 Contact decision making and practicalities were voiced as an ongoing practice challenge alongside positive innovations with virtual methods of contact and opportunities emerging during lockdown recovery phases. Risk assessments introduced to enable physical distancing to be managed to facilitate contact with birth family members as well as other outings. Evidence of more opportunities for direct conversations between parents and carers through virtual contact.

'It appears in some contexts to have been supportive for children who would have responded differently to direct contact with parents'. 'Knowing when and how to promote contact (is a challenge) taking account of the safeguarding issues that come with this such as sending video updates to families'.

- Evidence of post lockdown recovery plans in place and requests that national post lockdown guidance would be welcome to enable forward planning. Feedback that the publication of the SWS framework to support wellbeing and contact decision making was a helpful baseline. General plea for greater clarity in all national guidance to enable consistency in decision making across the country.
- Encouraging reports of creative indirect contact for children writing and sending pictures to parents and parents responding, and between brothers and sisters in different placements.
- For new born babies there have been video calls where the birth mother sees the baby being fed, bathed and interacted with. One mum reported that this helped her learn about her baby's care in the future once a rehabilitation plan begins.
- Reports indicated that video calls enable parents, carers and children to interact in different ways. An example offered of a 15 year old who was supported to have a conversation over the garden hedge to his 70 year old gran for 15 minutes.
- Compliance reported of weekly visiting of children on the child protection register as a priority to ensure wellbeing and required for the Scottish Government's national Vulnerable Children Covid-19 data return. In some cases the frequency was experienced as unnecessary where the children are settled and doing well.

'the time required to report to the government has been a challenge, when staff are already under pressure'

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- One area sent letters to parents, carers and children at the start of Covid telling them how the local area would keep in touch with them, and that all contact would be enabled virtually. They were also advised on their right of appeal on this. Continual checking in with families underway throughout lockdown.
- Example of a baby remaining in hospital due to contact complexities and difficulties in building early attachment with parents as a result.
- Examples of food parcels, activity packs, financial resources given directly to families for food and household items. Use of amazon vouchers.
- PPE being worn by social work staff. No concerns raised about lack of access to PPE.
- Comments about good multi agency working.
- Outreach service for support for children with disability mentioned particularly in one area.
- Lower staff work sickness levels than usual, home working flexibility seems to be generally welcome.

## Innovations to potentially embed and further develop post Covid-19

- One adoption agency did not previously offer online support to families, but is now offering a weekly virtual open session which has been popular. Anticipate that this type of support will continue after the crisis.
- Local authorities intending to offer virtual reviews and panels post Covid-19 as advantages emerging for children, families and practitioners.
- Noted in rural areas, more time for reviews, child protection case conferences and assessments because there is no travel time (eg up to five hours travel to attend a meeting). Higher number of child protection case conferences and looked after reviews as a result and more flexibility around appointments.

'Currently working on shorter looked after review minute for virtual reviews and working with advocacy services to ensure children's views are still at the centre of reviews' 'The reporter has asked for shorter reports, which is a bonus and it raises the question about how necessary lengthy reports are going forward?'

• Hubs set up at the beginning of lockdown with health, social work and education to share information and attend care planning reviews and case conferences.

'They have worked really well and I think our relationship with education has improved. We have good links with families and in some instances we are having more contact with them.'

'More cross agency collaboration – but we need Scottish Government support to maintain this. Possibly keep the new hub structure of working and more working from home'.

- Example of a young person in secure care who found participating in her looked after review meeting by telephone much easier to do (supported by her key worker) than going in person. She is now involved in her reviews when she wasn't before and the reviews are hearing this young person's views directly for the first time.
- Good practice noted re time to plan before virtual panels to discuss any aspects which may need particular attention such as support to individuals to feel more comfortable with the technology and introduce the name and role of all attendees at the meeting.
- New and creative ideas to enable virtual contact by sharing letters and photographs rather than face to face.
- Supporting birth parents to read a bedtime story online.
- Sharing ingredients, a recipe and video with parents who are unable to attend a cooking group.
- Pregnant woman supported to share pregnancy progress creatively with her partner in prison.
- Excellent liaison with virtual head teachers' network with commitment to offer support to all vulnerable families.
- Helpful use of Signs of Safety approach to work alongside parents and families.

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'We feel they (parents) are more honest about their challenges now and we can support them with this. Health and social care are leading a 'phone line which can signpost to support families in need, and can be provided at short notice.'

Further information about practitioner experiences of innovations during Covid-19 can be accessed on <a href="https://www.celcis.org/knowledge-bank/spotlight/meeting-challenge-2/">https://www.celcis.org/knowledge-bank/spotlight/meeting-challenge-2/</a>

## Technology platforms named in use in different local areas

BT Call Me Google Hangouts Microsoft Teams Mind of my own App Skype for business Skype teleconferencing Survey monkey to invite feedback from parents and panel members Webex calls What's App WhyPay Zoom

Acknowledgement that some platforms meet different purposes with advantages and disadvantages to all of them. The number of people viewed on screen at once can help or hinder. Communication can be less nuanced virtually with reflections on awkward silences and it being more difficult to 'read the room'. Some areas described helpful use of teleconferencing but less consistency with video conferencing as platforms inconsistent across the whole local system.

Challenges with VPN crashing; wifi connections; incompatible technologies across households and multi agency partners; confidentiality of information both written and spoken.

Plea for Children's Hearing System to be supported with strong, secure technology platform to enable access and stable connectivity for child, family, carers, panel members and the team around the child.

Encouraging reports of areas supplying technology to families and offering support for families and carers on how to use the devices. Education staff supporting families with Ipads not being used in school during lockdown.

Overall during lockdown there appeared to be a clear transition to use of telephone and virtual methods of connection to enable communication, help, assessment, review and planning to continue. It is also evident in the areas we spoke to that there is a spirit of continuous improvement to keep building on initial innovations throughout recovery.

The challenge will be not to revert to system 'as was' but to further develop virtual practices to be as enabling and effective as possible whatever the purpose of the interaction for the child.

Within this the impact on the workforce of working virtually requires care and support, particularly when many of their skills are focussed upon human interactions.

'Some workers are keen to be office based to provide structure and connection.'

'Home working may be more of an option going forward but we would not want to lose the benefits of being in the same office'.

'Staff are working a rota system of being in the office or at home and this has reduced the day to day case discussions and informal problem solving. It has also reduce supervision time for staff'.

'Time will tell whether video conferencing is kept in the future, perhaps for lay members but not all of the panel. Being face to face is more beneficial and supportive'.

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## Conclusion

From the 17 areas and other agencies we heard from there appears to be a clear transition to use of telephone and virtual methods of connection to enable communication, help, assessment, review and planning within kinship, fostering and adoption processes and practice since March 2020. It is also evident that there is a spirit of continuous improvement to keep building on these innovations throughout pandemic recovery and into future practice.

'people have been falling over themselves to make themselves available for this work despite the circumstances'.

The crisis response to Covid-19 has galvanised different ways of working across multi agency public and third sector colleagues and services to support children and families. Care for the workforces, including carers and volunteers, is essential to protect and strengthen these new practices and further develop collaboration and the virtues of virtual communication opportunities. Resisting pull back to pre Covid -19 system 'as was' will enable us to continue towards the realisation of a rights based Girfec and UNCRC childhood for all babies, children and young people and the intentions of the Promise for those in need of care and protection.

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September 2020

#### Acknowledgements

With our grateful thanks to colleagues in the following agencies who took time from their extraordinary workloads to connect with us:

Aberdeen Citv Adoption Task Force (hosted by Celcis) Adoption and Fostering Alliance Scotland (AFA) Aravll and Bute Clackmannanshire Dumfries and Galloway Dundee East Lothian East Renfrewshire Edinburah City Fostering Community of Practice (hosted by Celcis) Glasgow Highland Independent Reviewing Officers' Network Inverclvde Kibble Residential School Midlothian North Ayrshire Social Work Scotland Kinship, Fostering and Adoption sub group Stirling South Ayrshire West Dunbartonshire West Lothian

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# **About CELCIS**

CELCIS is a leading improvement and innovation centre in Scotland. We improve children's lives by supporting people and organisations to drive long-lasting change in the services they need, and the practices used by people responsible for their care.

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