



Llywodraeth Cymru  
Welsh Government

**GUIDANCE**

# Children's social services during the COVID-19 pandemic: guidance

How children's social care providers can change their services  
to support young people during COVID-19.

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Operational guidance for providers of children's social care services during COVID-19 including:

- local authorities
- providers of care homes for children
- adoption services
- fostering services

## Background

The coronavirus pandemic (COVID-19) has presented unprecedented challenges to vulnerable families and has placed increased pressure on children's services. We are grateful for the response of children's services and their partners for continuing to provide effective services and for the speed in which professionals have had to adapt their practices to support vulnerable families and children during this time.

This document provides guidance on the continued provision of support to vulnerable, at risk and care experienced children, during this period and as lockdown measures begin to be eased. Please share with your teams and be assured that we are working hard to continue to provide guidance that will support you as the situation develops. Please note that current guidance may change in line with the prevalence of community transmission rates. This guidance aims to support children's social services for planning in regards to changing scenarios and public health measures.

The terms 'child' and 'children' in this guidance means up to the age of 18 years. The term 'care leavers' can apply to certain young people up to the age of 25 years.

Welsh Government **[COVID-19 guidance for health and social care professionals is available on the Welsh Government website](#)**. This includes guidance on areas such as critical workers, testing for coronavirus and appropriate use of Personal Protective Equipment (PPE).

We recognise that families will be under additional emotional, financial and

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psychological pressure at this time. For the safety and well-being of your staff and the children and families you support it is also crucial that services are delivered in a way that is consistent with the **expert scientific advice being provided by the Welsh Government**.

Please be aware that the scientific advice and, therefore, guidance may change. Further details about social distancing can be found on **Welsh Government**.

Any queries relating to this guidance should be directed to -  
**Lookedafterchildren@gov.wales**

## Intended audience

This guidance should be used by all those involved in:

- promoting the well-being of vulnerable children, including those who already have a care and support plan
- safeguarding children at risk including those who already have a care, support and protection plan
- the assessment and planning of care and support for care experienced children
- those making and reviewing placement decisions for looked after children, care leavers and adopted children

The application of this guidance should be made on a case-by-case basis, ensuring the best outcome for children is central to planning and decision making. Recording and evidencing why and how decisions have been reached remains a key responsibility when applying this guidance. Ascertaining children's wishes and feelings remains central to social work practice. Decisions, and the rationale for making those decisions, should be clearly communicated to children and young people.

The aims of this guidance are to:

- encourage a flexible and pragmatic approach to maintaining support for looked after and vulnerable children during the outbreak of novel coronavirus

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- and as measures are relaxed
- recognise the areas of provision where local authorities will struggle to meet their statutory requirements, and provide guidance on the measures that should be put in place that are in the spirit of the law
  - minimise the impact of novel coronavirus on Children's Services and partners, when resources available to cope with additional burdens are reduced, and as alternative working practices are being introduced and delivered
  - promote partnership working across the breadth of services that support families

This guidance is a temporary measure in response to the unprecedented circumstances that we have been currently facing. The guidance was originally published on 23 April 2020 and has been updated periodically. It remains in place until further notice.

## Recovery framework for children's services

To support local authorities plan for a phased restoration of routine children's services when lockdown regulations were relaxed in the summer, Welsh Government worked with Heads of Children's Services and stakeholders to develop a Recovery Framework. The Framework sets out a realistic and consistent roadmap for the recovery of children's social services; adapting to new ways of working and learning from the positive experiences that lockdown has brought about. It sets out principles of working to help local authorities plan in a consistent way and at a pace determined by individual local authorities. These principles are focussed on supporting the prioritisation of work and services, maintaining the wellbeing of the workforce, delivery of placements, contact with children and families and engagement with the Judiciary.

## Principles

Local authorities and their relevant safeguarding partners have specific duties under the Social Services and Well-being (Wales) Act 2014, the Codes of Practice and statutory guidance in relation to promoting the well-being of and

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safeguarding children.

In applying this guidance, local authorities and their partners should continue to work in an innovative way to continue to meet their statutory duties. We will update this guidance periodically and will continue to explore flexibilities in regulations and guidance as the situation develops.

In planning how to move forward, a staged approach to the delivery of services should be considered.

## Table

Status	What service delivery looks like
Red (lockdown)	Practitioners are available to engage with children and families through electronic means, with consideration given to face to face visiting in the most exceptional circumstances.
Amber	Practitioners continue to engage with children remotely, unless it is necessary and safe to meet with them in person, subject to consideration of a two stage risk assessment principle.
Green	Once COVID-19 restrictions are lifted, practitioners no longer need to follow a risk assessment approach and the full range of interactions, including remote, visits and face to face, should be resumed.

Based upon the staged approach above, at the time of this guidance's publication, we are at Red status. When making decisions about the operation of services, or about individual children, everyone's work should be guided by the following principles.

i. Promoting well-being and safeguarding:

- each practitioner and organisation is required to play their part to safeguard and contribute to promoting the well-being of children
- information-sharing is in accordance with **sharing information to safeguard children advice**

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- continued inter and multi-disciplinary working in order to better understand the child and their needs for care, support and protection. Including an understanding of the impact COVID-19 arrangements may have on changing these needs
- co-productive working relationship with children, care leavers, their families and carers to establish what matters to them and to ensure they feel respected and informed. This includes explaining to children and families the ways in which the COVID-19 arrangements may impact on the provision of their care and support

ii. A child-centred approach:

- the rights and well-being of the child and their best interests remains paramount
- as far as is reasonably practicable whilst taking account of the impact of COVID-19 arrangements, practitioners shall continue to ascertain and have regard to the child's views, wishes and feelings and provide appropriate support to enable the child to participate in decisions about them
- have regard to the characteristics, culture and beliefs of the child and their family

The National Approach to Statutory Advocacy (NASA) provides a standardised approach to statutory advocacy services in Wales. An active offer of advocacy forms part of the NASA, and children and young people are entitled to an active offer of advocacy from a statutory Independent Professional Advocate (IPA) when they become looked after or become the subject of child protection enquiries leading to an Initial Child Protection Conference.

Service providers are continuing to offer all advocacy interventions for the active offer and issue based advocacy, using technology to facilitate support remotely. The Welsh Government is receiving regular updates from providers to monitor the impact of COVID-19 on the active offer.

# How should local authorities prioritise activity during the emergency?

COVID-19 has placed new and additional pressures on children, care leavers, families and carers. The Welsh Government is aware that the majority of Children's Social Services are continuing to risk-assess cases already open to them and are reviewing these on a regular basis. There is an expectation that this approach is continued by all local authorities when considering in-person interactions, working in partnership across agencies to share information, avoid duplication and secure a shared understanding of need in relation to each individual child or care leaver. The delivery of in-person contact should be in accordance with local authorities' judgement, depending on local circumstances and the best interests of the child/care leaver.

This approach will also be important in making decisions about new cases involving children who have needs for care, support and protection as a result of the additional pressures of COVID-19. Welsh Government is aware that changes in universal and preventative services has placed additional burdens on Children's Social Services in relation to supporting vulnerable and at risk children and care leavers.

Local authorities should work with partner agencies to consider how best to support these services, utilising available resources to best effect. The well-being of the workforce should remain a key consideration.

Decisions made in one agency will have an impact on arrangements across agencies and the case for inter-agency working is stronger than ever to avoid duplication and close the gaps. Recording and evidencing why and how decisions have been reached remains a key local authority responsibility. Decisions, and the reasons for taking them, should be clearly communicated to children and their families.

Children's services should work closely with other agencies including education, family support services and health services to meet the needs of vulnerable children and young people. In particular, closer work with education welfare services may be needed to ensure children and young people who have not

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returned to school are safe, seen and heard.

In the event of school closures or partial closures due to national restrictions, schools and local authorities should work together to identify the children whose needs are such that, as an exception, could attend school. In doing so schools and local authorities should take account of the following principles:

- we must ensure all children and young people are safe, seen, heard, nurtured and developing
- schools and local authorities should work together to identify those who would exceptionally benefit from accessing the school
- the decision should consider the impact of any restrictions on the child or young person's emotional, mental and physical health, and educational development
- the decision should consider how risks of not attending school could be mitigated through the most appropriate support for the child or young person
- the decision should take account of the views of the child or young person and their parents/carers, so their needs can be understood and delivered through the most appropriate support
- children and young people should be categorised according to decisions about their risks and benefits, and prioritised accordingly for support
- parents and carers should be informed of the decision
- the risks to children and young people should be regularly reviewed and monitored on a multi-agency basis

**Guidance on supporting vulnerable and disadvantaged learners** has been issued and could help in identifying and supporting learners who may benefit from additional support.

## Supporting the Children's Social Care Workforce

### Social worker registration

During the current emergency, we have introduced measures to help get as many practitioners on the front-line to help with tackling the effects of

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coronavirus. We have worked with Social Care Wales to arrange for the temporary registration of social workers who were previously registered.

Further details about these arrangements can be found on the [Social Care Wales website](#).

## Personal Protective Equipment (PPE)

We recognise there is a desire for clear guidance about the use of PPE equipment for the children's social care workforce. [Welsh Government has produced the following guidance](#) for use in health and care settings, which applies to children's social care.

Please also see Public Health Wales' [advisory note](#).

A link to the COVID-19: infection prevention and control (IPC) guidance (including table 4) can be found on the [GOV.UK website](#).

This states what equipment should be used in all settings where there is interaction with someone (either symptomatic or not) and where contact is within 2 metres. It also covers the use of masks and goggles if there is a risk of exposure to factors such as fluid transmission for example.

Practical advice on maintaining contact with children and families in different scenarios is provided in the next section, including the safe reintroduction of face to face contact and routine services.

Guidance on the [Prevention and Management of Infection and Outbreaks of COVID-19 in Residential Settings in Wales](#) has been updated. It provides information on infection prevention and control measures in a range of settings including those for children. We recognise that implementing this guidance for children's homes has proven difficult and adaptations will need to be made on a case by case basis.

Information on [PPE and Testing for children in residential homes](#).

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## Testing for COVID-19

Testing of key workers and the social care workforce is a priority. We are testing social care workers in residential and domiciliary care settings who have symptoms to enable them to get back to work before the seven-day self-isolation or 10-day household quarantine period. Workers who show symptoms should self isolate immediately and book a test. Once that test result is known then:

1. if it is negative they are free to resume work immediately
2. if it is positive they continue to serve the remainder of the recommended 7 days self-isolation period after which, and providing they no longer have a temperature, they are able to resume work.

The latest Welsh Government guidance on testing can be found at -

<https://gov.wales/test-trace-protect-coronavirus>

The requirements of the **Test Trace Protect strategy for employers** includes information on GDPR requirements and the need to capture, retain and potentially release personal information of employees in order to assist in a TTP case.

## Guidance for maintaining contact

Local authorities have a responsibility to ensure they are complying with the latest Welsh Government guidance on **staying safe and social distancing** including **physical distancing in the workplace**.

Additionally they will need have regard to the guidance around self-isolation and ensure all staff are fully aware of the requirements of that guidance. They also need to comply with the Welsh Government's Test Trace Protect strategy (see previous paragraphs) and ensure their staff are fully aware of those requirements too and the issues around GDPR.

This will involve informing families who have met face to face with an LA employee about the TTP strategy and the possible need of disclosing their personal contact information in the event that the LA employee is involved in or

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included in a TTP case.

## Contact by social workers

The Health Protection (Coronavirus Restrictions) (Wales) Regulations 2020 place a series of restrictions on gatherings and the movement of people and impose requirements to ensure the continued physical distancing between people to help protect the spread of coronavirus. Rules to protect workers during the coronavirus outbreak also came into force on 7 April , enforcing the 2-metre physical distancing rule in the workplace.

When delivering services in a proportionate way, it is important to continue social or physical distancing. When considering in-person and face to face contact, local authorities should continue to risk assess on a case by case basis.

Local authorities will already have their own risk assessment processes in place and these should continue. Consideration should be given to the principle of a two stage risk assessment process - based upon an assessment of both necessity and risk:

### Assessment of necessity

- whether remote communication has been utilised and is no longer deemed effective
- there are particular concerns present or action needed where a home visit, in-person interaction or physical sight of a child is required
- where physical contact will aid a positive placement, support a successful transition, or is deemed particularly beneficial for well-being and mental health

### Assessment of risk

- the health, vulnerability and personal circumstances of the worker and any person they are going to see face to face, particularly taking into account if

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any of the individuals are in the '**increased risk group**' or '**extremely vulnerable**' to coronavirus - previously known as shielding and ensuring that no face to face appointments take place where any of the individuals (regardless of vulnerability) are displaying symptoms of COVID-19.

- whether the proposed meeting is an area in which social distancing can be enabled
- considering the age and understanding of any child and / or adult involved, whether several children will be present, or whether there are additional complexities linked to impairment or understanding
- the use of protective equipment and the potential impact this will have on the proposed interaction

Throughout the crisis, local authorities have continued to deliver statutory safeguarding face to face visits where the highest risks have been identified and where children are rated as most vulnerable. As decisions are being taken about the reintroduction of in-person contact for more routine cases, the two-stage risk assessment approach should be considered. This means that the frequency of in-person contact with children, care leavers, families and carers may continue to be less than usual. There may however be grounds for the frequency of contact to be gradually increased based on information about the care and support needs of the child at the time.

Ensuring that children at risk are safeguarded and continue to be protected is of paramount importance. Safeguarding remains everyone's responsibility and all public services should continue to take responsibility for keeping children safe and continue to report concerns. Local authorities and social workers will need to make informed, professional judgements about visiting children at risk, which balance risks to children, care leavers, families and carers and risks to the workforce. Social workers and social care staff should follow PPE guidance when visiting private households with different approaches depending on whether or not social distancing is possible.

## **Family time (contact arrangements for children and their families)**

One of the main principles of the Social Services and Well-being (Wales) Act

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2014 and the Local Authority Fostering Service (Wales) Regulations 2018, is that there should be continued contact between the child and their family while the child is in the care of the local authority. Such contact arrangements should be focused on, and shaped around, the child's needs. Ongoing contact with siblings, parents, grandparents and significant others can be a critical factor in supporting placement stability.

Existing contact arrangements will be set out within a looked after child's care and support plan. These will invariably describe the frequency and duration of contact with family members and whether such contact should be supervised or unsupervised. To support open lines of communication, local authorities should consider ways in which children can safely contact professionals when in need of support.

The latest Welsh Government guidance about leaving home and seeing other people should always be considered when social workers are assessing viability of face to face family visits. We expect that alternative forms of contact between children in care and their birth relatives will also continue. It is essential for children and families to remain in touch at this difficult time, and for some children, the consequences of not seeing relatives would be traumatising.

### **Read the latest information on households meeting**

Local authorities should continue to consider ways in which equipment can be provided to families to enable continued contact. Where alternative contact arrangements have been shown to work well during this period, these should also be continued with agreement of both parties. Where family time visits cannot be achieved based on an individual assessment, this must be clearly communicated to children and their families.

All the options available should be considered when making arrangements for keeping in touch, including a hybrid mix of meetings outdoors and continued virtual arrangements. We expect the spirit of any contact orders made in relation to children in care to be maintained and will look to social workers to determine how best to support those valuable family interactions based on the circumstances of each case.

As the [latest information on households meeting explains](#), in families where parental responsibility is shared, children are allowed to move between parental households. Likewise, children in care who do not live with their parents but have existing arrangements to visit them for contact can continue with these arrangements.

We are working hard across government and with the judiciary to make sure the family justice system continues to operate during this unprecedented time. The Family Courts have issued [guidance on the delivery of remote and hybrid court hearings](#). Local authorities should seek to ensure social workers are supported in preparations for court and when attending court hearings to avoid feeling of isolation and to support well-being.

## **Keeping in contact with children on the child protection register (CPR) and children placed with parents (PWP)**

Maintaining social worker contact with families, where children are on the CPR, on the edge of care or placed at home with parents under Care Orders, is of paramount importance. Social workers should, seek to reintroduce face to face contact with children on the CPR, children on the edge of care and children PWP. The frequency of face to face contact should be informed by a regularly reviewed - risk assessment and agreed with a manager. Remote methods for maintaining contact should continue to be considered where health risks are deemed too high. Social workers should consider the benefits of remote contact and how a mix of contact methods can better support children and families, whilst continuing to help maintain social distancing and minimising the risk of infection.

Social workers will be experienced in assessing risk of harm to children and the Wales Safeguarding Procedures are available to support practice. The Welsh Government is aware that many local authorities are already practicing in this way and we would expect this approach to be replicated across Wales.

Any home visit should be risk assessed using the two stage process principle and comply with [Welsh Government advice on social distancing](#). If social distancing is not practical or possible during a home visit then [PPE guidance](#) for

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COVID-19 should be followed.

Statutory safeguarding visits to see children on the Child Protection Register face-to-face should be carried out at least every 10 working days. If following a two stage risk assessment a decision is taken that this requirement should be met through remote/virtual contact for individual children on the CPR, this decision must be agreed by a manager and the rationale for it must be recorded. All cases should be subject to a review of risks on a frequent basis and at least once per week. This must be communicated to children and families.

## **Initial child protection conferences, initial/subsequent core group meetings and care, support and protection plans**

The Welsh Government recognises that COVID-19 arrangements, workforce capacity and the rapidly changing nature of risk for children and families at this time, present very real challenges to multi-agency child protection decision making and the usual care, support and protection planning process for individual children.

However, initial child protection conferences and core group meetings should be maintained using innovative ways such as remote meeting technology. It is important that partner agencies with information about the child or a role in meeting the needs of the child attend and contribute to such virtual meetings. We understand that some local authorities are developing hybrid approaches in order to meet the needs of individual families, some of whom may prefer to physically attend a meeting with their social worker with other agencies joining remotely. We welcome these innovative approaches to person-centred arrangements on a case by case basis as parental attendance is essential.

Decisions in relation to arrangements about how meetings will be conducted and on the nature and frequency of contact with individual children and their families should be included in Care, Support and Protection Plans in the usual way and explained to the family. However a clear record of the decisions taken, any changes in level of risk and the response to these should be maintained.

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## Contact with families/ children

Guidance for families about **meeting arrangements during the current restrictions.**

**[Read the latest information on households meeting](#)**

## How foster carers can help children to maintain contact with birth families

We expect all children in foster care to continue to be supported to maintain contact with their birth families and to be able to spend time with their siblings for example, in any way they can. Foster carers should be supported to consider the reintroduction of in-person contact in outdoor spaces, in line with social distancing guidance, or in suitable community venues where it is agreed by both parties and where those venues can comply with social distancing and hygiene requirements.

Contact should also continue to be maintained through daily or regular phone calls, video chats, the use of social media platforms or other means. We recognise that not all families will have access to the internet or laptops, and in many cases children may have restricted access to electronic devices or are not allowed social media accounts, so this must be given consideration and foster families will need support to help children to keep in touch, through letter writing for example.

Arrangements should seek to reasonably fulfil the expectations set out in section 81 of the Social Services and Well-being (Wales) Act 2014 to ensure contact can go ahead in the safest and most appropriate way given the current circumstances.

## Court ordered contact and ongoing proceedings

The courts will expect local authorities to act reasonably having considered all relevant factors.

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The President of the Family Division and Head of Family Justice for England and Wales has provided advice in his statement, [Coronavirus crisis: guidance on compliance with Family Court Child Arrangement Orders](#). Whilst this is directed at separated families subject to private law proceedings, the principles are relevant. If there is court ordered contact, and contact is unable to take place or happens remotely, local authorities should record the reasons for their decisions.

The National Association of Child Contact Centres (NACCC) has taken the decision that contact centres are able to make independent decisions about whether they feel able to re-open their services. The readiness of centres to be able to offer services will vary significantly and no centre should consider opening their services if they do not feel fully prepared or if doing so contravenes any local advice. The nature of local advice will vary and centres will be expected to make decisions based upon the guidance offered by the current Welsh Government and Public Health Wales advice.

It remains the legal duty of the operator responsible for any facility, to identify and assess risks and take full precautionary measures which comply with current government regulations and guidance. Such restrictions include matters relating to physical distancing between participants and the need to ensure full disinfection of any items of common surfaces and equipment between and before different users or groups of users touch it, plus the need to restrict the number of households which can meet at any one time. Where supervised contact arrangements are in place, the risk of transmission is lower outdoors than indoors and so if and where possible, outdoor meetings should be arranged in order to reduce the risk of transmission of COVID-19.

Consideration should continue to be given to undertaking supervision using video conferencing, with a staff member present during the video conference, where it is safe to do so, to maintain levels of supervision. If the family is self-isolating or being shielded the staff member should be present remotely.

## Contact with babies/birth mothers

We would expect contact arrangements with new-borns, babies and toddlers

and their birth mothers to be prioritised. We recognise compliance with social distancing measures will be difficult to manage however all efforts should be made to sustain the well-being of the child and birth mother in these circumstances.

Appropriate measures must be taken to ensure that all parties concerned are protected as far as reasonably possible, taking into account family circumstances by the use of social distancing and checks to ensure that no-one involved is presenting with symptoms of COVID-19. Additional measures should be considered to enable face to face contact to take place whilst maintaining safe distancing, including arranging contact in open spaces, to help minimise risks of infection.

A two stage risk assessment should be considered including the health of the child and parent, the risk of infection and any other vulnerable people living in each household. Decisions should be taken whilst considering the corporate parenting responsibilities of local authorities and what constitutes reasonable contact. Decisions made should be clearly evidenced, including all relevant factors and recorded.

## Guidance for separated families

Throughout the lockdown restrictions, Welsh Government guidance has stated for parents (or anyone who has parental responsibility or cares for a child) who do not live in the same household, that children under 18 can be moved between their parents' or those people's homes.

**Lockdown regulations have now been updated.** This continues to emphasise the importance of social distancing and the purpose of continuing restrictions to help prevent the transmission of the virus, including to those we care about. For separated parents with shared parental responsibility, access and contact arrangements can continue, however if you are in an at-risk or extremely vulnerable group, you should stay at home and children should not visit. As of 16 August when shielding was paused, these restrictions can be relaxed as long as stringent 2-metre distancing is maintained.

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As with other areas of the guidance, a degree of personal judgement will need to be exercised when visiting non-resident children or having them to stay, and all households still need to adhere to guidance on social distancing.

The latest extended household guidance can be found in the [frequently asked questions guidance](#).

During this challenging time, we are encouraging parents to work together to find a solution and maintain a sense of routine for their children.

As discussed, the statement issued by the President of the Family Division is in relation to Family Court Child Arrangement Orders, it is relevant to all separated families where children have connections with more than one household. The statement offers general advice to parents recognising that the circumstances of each child and family will differ. Where there are court orders in place concerning contact arrangements between separated parents, the courts will expect parents to act reasonably and sensibly in maintaining these arrangements, whilst continuing to follow official advice.

## Care and support plans, pathway plans and reviews

We recognise COVID-19 has made it difficult for local authorities to comply with some requirements set out in the Social Services and Well-being (Wales) Act 2014, regarding the development of care and support plans for care experienced children and statutory reviews. This may include for example, the delivery of health assessments within existing timescales for looked after children or the timescales for reviewing and maintaining care and support plans or pathway plans.

However, local authorities should make every effort to fully comply with the legislation and continue to fully take into account the needs and wishes of children in their care. It is imperative the development of care and support plans/pathway plans continues and these are completed, with the full involvement of professionals specified and facilitating the views of children and families, as is reasonably practicable. However, it is recognised there will be practical

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implications in the delivery and review of care and support plans within timescales and the effective input of health and education professionals in the current emergency. As measures are being relaxed, local authorities should ensure care and support plans/pathway plans are sufficiently focussed on progression and child focus outcomes. This includes specific actions and realistic strategies that will help meet the child's needs and achieve planned outcomes.

Independent Reviewing Officers (IROs) will continue to have responsibility for monitoring the performance of the local authority in relation to a child's Part 6 care and support plan and undertaking regular reviews. IROs should continue to use digital means to carry out reviews and consider hybrid meetings (a mix of face to face and virtual meetings) for more complex cases, to monitor progress and make decisions. Review meetings should continue to be multi-agency, involving key agencies and professionals as is reasonably practicable, include the role of advocates and facilitate the wishes of the child and family members.

Children and young people should be informed of the changes in their statutory reviews and supported to participate to ensure their views and wishes are heard. Children's ability to participate in virtual meetings must be considered and efforts made to promote their involvement, for example, prior phone calls, test calls etc, to help familiarise children with the new process.

## Fostering

We recognise the pressures being placed on fostering services and placements during this current time. Local authorities are already taking measures to support foster carers and ensure continued stability of the workforce and placements.

**AfA Cymru has provided guidance for effective functioning during this time.**

### What should happen to foster children if foster carers are self-isolating or become ill?

Maintaining a permanent stable setting for children wherever possible is of

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paramount importance. Should foster carers/children start presenting symptoms of COVID-19 we would expect children to remain with their foster parents in line with the self-isolation guidance. Whilst these are unsettling times for those involved in caring for and supporting children in foster care, we are grateful for the continued support and stability that is being provided for children in foster care.

## **What if there are not enough foster carers to care for additional children or provide respite for other foster carers who have become ill?**

We recognise that it might be challenging to provide additional respite for foster carers in this context. Local authorities should ensure systems remain in place to maintain interested applicants and identify ways to free up space within existing foster homes to make it easier to identify potential placements and ensure new foster carers are assessed and approved.

Where children may need to come into care for a short period of time for respite where birth parents or foster carers are ill, local authorities can re-purpose existing short break provision. In such circumstance, local authorities should change their statement of purpose for these settings and inform Care Inspectorate Wales.

## **We might need to recruit and approve more foster carers in the short term. What is being done to change regulations related to fostering panels?**

We recognise that fostering services will want to bring in more emergency foster carers to help build capacity within their services in case of additional demand. We would encourage them to do this. Whilst they will want to ensure that assessments and approvals are thorough and comply with regulations, we do not want this to be unnecessarily delayed.

Whilst the crisis presents new challenges, we understand that foster placements currently remain stable across Wales and local authorities have been stepping

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up their support for foster carers. We consider there is already sufficient flexibility within **The Fostering Panels (Establishment and Functions) (Wales) Regulations 2018** for fostering services to convene remote panels.

## Undertaking Medical Assessments for Prospective Foster Carers

The Fostering Panels (Establishment and Functions) (Wales) Regulations 2018, includes a requirement that a fostering services provider should, as part of the assessment process for prospective foster carers, 'obtain details of health (supported by a medical report)'. We are aware that the pandemic has raised issues with the ability for some prospective foster carers to access medical assessments with GPs either via face to face or remotely.

To keep the foster care system flowing whilst maintaining our focus on safeguarding children, minimising disruption to the fostering process and maintaining sufficiency of foster care placements, we have implemented the following:

- prospective foster carers whose applications were already in the system as at 8th November 2020 and who have been unable to access face to face or virtual health assessments with a GP during the assessment process, can proceed to panel as planned with any recommendation for approval based on a self-declaration of health
- from 8th November 2020 all new prospective foster carer applicants entering the system, must access either a face to face or remote health assessment by a GP during the assessment process and before progressing to foster panel
- by 31st March 2021, all foster carers approved utilising a self-declaration of health form must have completed a full adult health assessment and the service must complete a review of their approval, under the regulatory first year review process

It is important to use the time between now and the end of March to put in place full adult health assessments for your newly approved foster carers so that backlogs at the end of March 2021 are avoided.

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We recognise the valuable contribution that medical advisors provide to the health assessment process for prospective foster carers and would encourage agencies, where possible, to continue to work closely with the medical advisor in their area to maximise the clinical support required for this process. Their support may also assist in alleviating any issues that arise with the ability to access health assessments. It is recognised however that not all agencies have access to a medical advisor.

Please note: that all other requirements set out in the regulations remain in force.

## **Can we change the number of children that a foster household can care for?**

Foster carer approval terms, including age range and number of placements, may need to be flexible in the current circumstances. Where fostering services are concerned about capacity, they should start identifying potential fostering households that may be able to accommodate additional children and have sensitive and appropriate conversations as part of their contingency planning. No fostering household will be expected to take additional children into their home but many will want to offer help and these families should be enabled to do so.

Schedule 7 of the Children Act 1989 currently allows for some flexibility in placing multiple children together by allowing local authorities to grant exemptions to the usual fostering limit in specific placements.

## **Face to face/in person contact during the foster care process**

When considering in-person and face to face contact, local authorities should continue to risk assess on a case by case basis. Local authorities will already have their own risk assessment processes in place and these should continue. Consideration should be given to the principle of a two stage risk assessment process - based upon an assessment of both necessity and risk. Such instances

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can include:

- assessment for connected persons and general foster carers (including home visits to applicants homes)
- face to face family contact
- preventative support services
- moving on to adoption
- placement support

Where face to face/in person contact is not deemed as necessary or appropriate, the use of remote communication technology should be exercised.

## Should services make additional payments to foster carers during the COVID-19 pandemic?

Fostering services should decide how best they support their foster carers during the pandemic. [AfA Cymru's guidance offers some helpful advice](#) to services to assist decision making.

The Welsh Government recognises the vital role foster carers are providing in caring for the vulnerable children in every community in Wales during the health crisis. [Social care workers cards, are available](#) for issue to foster carers as well as registered social care workers.

## Adoption and Fostering (Wales) (Miscellaneous Amendments) (Coronavirus) Regulations 2020

The Adoption and Fostering (Wales) (Miscellaneous Amendments) (Coronavirus) Regulations 2020 came into force on the 1st November 2020 and will cease on 31 March (these can be revoked before this date if the situation with the pandemic improves).

These Regulations aim to support the fostering sector during the pandemic by making an amendment to Regulation 26 of the Care Planning, Placement and Case Review (Wales) Regulations 2015 to extend the period that a local

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authority may make a temporary approval of a connected person / kinship carer from 16 weeks to 24 weeks.

**Association for Fostering and Adoption Cymru (AFA Cymru)** have produced a **good practice guide** to support this change.

## Children's residential homes

Ensuring vulnerable children remain protected is a top priority for the Welsh Government. Local authorities have worked closely with residential homes on continuity plans to ensure they can safely remain open so children in these homes can continue to receive the care and support they need. For more information please visit **Social Care Wales**

Should providers be looking to change the purpose of a care home from short breaks provision to supporting COVID-19, a notification of a change to the statement of provision is required to CIW.

You must continue to notify CIW if your home is going to close and where you have an immediate or impending staffing shortage which may lead to the closure of your home, you should discuss this as a matter of urgency with the relevant placing local authorities.

We expect all children in residential care to continue to be supported to maintain contact with their birth families and to be able to spend time with their siblings. New guidance has been developed to support providers as they support children to reconnect safely with families, friends and professionals, whilst restrictions are in place. Providers have been supporting people to maintain contact in a variety of ways via daily or regular phone calls, video chats, the use of social media platforms or other means. In addition to these methods, the new guidance encourages care and support providers to make every effort to facilitate outdoor visits where it is safe to do so. It also includes guidance around limited indoor visits. In making arrangements for children to re connect with their family and friends, providers must discuss and agree these with the placing authority. The contact details must be set out within the child's care and support plan and personal plan.

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Further details can be found at [Welsh Government](#) and will be updated periodically.

Updated guidance has been prepared about the use of PPE in children's residential homes and the requirements around testing for children. A set of [frequently asked questions](#) has been prepared to help local authorities and providers work through some of these issues that have been raised concerning the tailoring of [PHW's guidance](#) to different circumstances within children's settings.

## **Securing placements if placements in children's homes or foster care cannot be found?**

Local authorities will need to ensure the accommodation provided to children meets their needs to the best of their ability given the current context.

Any service that delivers care and accommodation for children, as defined in Schedule one of the Regulation and Inspection of Social Care (Wales) Act 2016 must be registered with CIW as a care home for children.

Placements in independent and semi-independent provision can be the right choice for some young people, acting as a stepping-stone to adult life, and we expect these to continue (please see care leavers section below concerning additional support required). If the service is providing care, it must be registered with CIW.

Local authorities must continue to do all they can to promote the well-being of looked after children and ensure their safety in accordance with the Social Services and Well-being (Wales) Act.

## **Adoption**

Every child should continue to be offered the best opportunity to flourish in a safe family environment where their fundamental needs are met and where they can enjoy the same opportunities as any other child. For some vulnerable

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children adoption is a positive and effective intervention for meeting their care needs and improving their overall outcomes.

It is vital that in these adverse times we do not lose sight of the importance of progressing adoption placements. It is important that Regional and Voluntary Adoption Agencies continue to recruit adopters, progress plans to place children and support adoptive families, working innovatively and flexibly where possible. This will enable agencies to maintain services and return to more normal operating once the COVID-19 crisis is over, thus providing permanence for these children and freeing up foster placements that will be required to meet the needs of other vulnerable children in Wales.

To aid the continuation of adoption services especially with regards to facilitating contact arrangements and adoptive placements, the National Adoption Service has introduced a 'Risk Assessment Framework' for all adoption agencies to use.

The Framework is designed to provide a realistic and consistent roadmap for the continuation of adoption services across Wales, adapting to, and embracing the new ways of working as a result of COVID-19, and ensuring that vulnerable children with an adoption plan can be moved into their permanent homes in a timely, planned and supported way. This framework can be accessed directly from the [National Adoption Service](#).

## Should we stop all introductory meetings for children with new adopted parents?

No, whilst we understand that these will be challenging in current circumstances there should not be a blanket ban. There needs to be a case by case, risk-based decision to ensure that those children who can be moved into their permanent homes can be.

The National Adoption Service has developed a framework to support Welsh services to consider whether this is possible on an individual case-by-case basis while also meeting necessary legal guidelines and the restrictions imposed by the current public health emergency. Regional and Voluntary Adoption Agencies should consider utilising communication technology to continue with the adoption process where possible.

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# **During this challenging period do we have to comply with the requirements of the Adoption Agencies (Wales) (Amendment) Regulations 2020 which came into force on 1 April 2020?**

Welsh Government has considered the implications associated with the introduction of the Adoption Agencies (Wales) (Amendment) Regulations 2020 as their introduction coincided with the COVID-19 pandemic.

From April to October 2020 Welsh Government provided assurance to providers that no action, whether by use of Ministerial Directions powers or otherwise, would take place in relation to any infractions of the requirements in the new Regulations between 1st April 2020 and 30th October 2020 or until normal running is resumed, provided that these occurred with good reason.

From 1st November 2020 the Adoption and Fostering (Wales) (Miscellaneous Amendments) (Coronavirus) Regulations 2020 came into force and will cease to have effect on 31st March 2021 but can be revoked at any time before then if the situation improves. The Regulations provide the agreement above with legislative effect. The easements are summarised as follows:

## **A. Easements of certain procedural requirements in stage 1 and stage 2**

Stage 1 and stage 2 of the two stage adopter assessment process to run concurrently. This could mean, for example, that where it has not been possible to obtain health assessments and other checks during stage 1 applicants can move into stage 2 and these checks can be followed up and undertaken during stage 2 of the process.

The requirement remains however that all the necessary checks need to be fully completed before an adopter is approved.

Applicants will not be able to access the Independent Review Mechanism (IRM) where their applications are unsuccessful for such reasons relating for example

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to DBS or health checks, as would have been the case if these checks were completed in stage 1. Adopters will be able to access the IRM after stage 2, if their application is not approved for any other reason not relating to DBS, health or local authority checks such as child protection issues.

## **B. Easements of timescales for completion of stages 1 and 2 and length of time prospective adopter can pause between stage 1 and 2**

- timescales for stage one and stage two of the process from 2 months (stage 1) and 4 months (stage 2) remain in place but agencies will only be required to meet the timescales where reasonably practicable during the outbreak
- the 6 month limit on the length of time a prospective adopter could leave between stage 1 and stage 2 will be removed

A Good Practice Guide has been developed by the National Adoption Service to support providers and can be accessed by contacting the National Adoption Service via [contact@adoptcymru.com](mailto:contact@adoptcymru.com)

## **Should we stop adoption panels?**

Regional and Voluntary Adoption Agencies should consider how panels can continue to ensure the adoption system continues to place children, but we accept that some delays may occur especially for more complex cases.

Panels should consider continuing remotely through video or conferencing calls and this should be determined on a case by case basis. Adoptive parents and prospective adopters should only be offered the opportunity to join via video/telephone calls.

It may be possible to undertake partial or ‘hybrid’ panels (where some members are physically present), these should be considered especially as restrictions ease but subject to all risk assessments and strict compliance with the social distancing requirements.

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## **Carrying out adoption medicals**

The Adoption Agencies (Wales) Regulations 2005 (in regulation 26(a)) include a requirement that an adoption agency must obtain a written report from a registered medical practitioner about the health of the prospective adopter following a full medical examination. During the COVID-19 crisis we are aware that the NHS has significantly reduced the ability to provide these health assessments for prospective adopters as priorities have been refocussed towards dealing with the emergency situation.

On 15th June a virtual medical assessment process was introduced for prospective adopters. This process is time bound and only in place whilst face to face consultations are proving to be difficult during the COVID-19 crisis.

Where possible, it is recommended that the usual in person consultation with a GP is undertaken. In cases where this is proving to be difficult, prospective adopters can access a virtual medical assessment with a GP via remote technology.

This interim virtual medical assessment process will ensure prospective adopters can access medical assessments and move on to decision panel, thus allowing the adoption process to progress.

Further guidance and the protocol for obtaining adult medical reports for prospective adoptive applicants can be found at Annex 3.

## **Face to face/in person contact during the adoption process**

When considering in-person and face to face contact, local authorities should continue to risk assess on a case by case basis. Local authorities will already have their own risk assessment processes in place and these should continue. Consideration should be given to the principle of a two stage risk assessment process - based upon an assessment of both necessity and risk. Such instances can include:

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- introductions and movement of children into agreed adoptive placements.  
The National Adoption Service has developed a framework to support Welsh services to consider whether this is possible on an individual case-by-case basis while also meeting necessary legal guidelines and the restrictions imposed by the current public health emergency. A copy of this framework can be obtained from the **National Adoption Service**
- final contacts between birth parent and child
- home visits to complete elements of adopter assessments

Where face to face or in person contact is not deemed as necessary or appropriate, the use of remote communication technology should be exercised.

## Visits to children and families

Families who require visits, particularly for adoption support, should be prioritised according to need. In circumstances where it is necessary to visit, risk assessments will need to be undertaken. Advice and support should be offered remotely where it is appropriate.

## Preparation and other training for adopters

Regional and voluntary adoption agencies should look to put plans in place to continue to facilitate as many as possible via video conferencing or other facilities.

## Are adopted children included in the term ‘vulnerable children’ for the provision in schools and registered childcare settings?

Vulnerable children include children with a social worker; children with statements of special educational needs; and other children on the edge of receiving care and support if they are known to be vulnerable by the school or family support services. Local authorities should assess every situation on a case-by-case basis according to the needs of the child or young person.

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## **What other support can adoptive families' access?**

It is clear that the COVID-19 pandemic could place additional pressure and stress upon families. It is imperative that families who are most in need of support, receive the right help in a timely manner. Services across Wales have adapted to continue to provide services safely during this health emergency.

### **Regional and voluntary adoption agencies**

Although the majority of face-to-face support visits have been suspended, support is being offered remotely via video call facility. Where support groups were planned these are now being set up remotely. Similarly any therapeutic sessions are being carried out in the same way.

[www.adoptionwales.org/](http://www.adoptionwales.org/)

[www.barnardos.org.uk/wales](http://www.barnardos.org.uk/wales)

### **Adoption UK Cymru**

Adoption UK Cymru is continuing to run their helpline which is open to anyone needing specific parenting or adoption advice. This can be accessed via 0300 666 0006 or [email.wales@adoptionuk.org.uk](mailto:email.wales@adoptionuk.org.uk). They also have a forum for anyone who wants to share anxieties or concerns with others experiencing similar feelings and have a list of [frequently asked questions on their website](#). Members have access to a network of local community groups, led by a team of experienced volunteers who are all adopters themselves.

In the current climate, physical meetings have been suspended, but members can still engage with their local community via messaging groups and virtual meetings hosted online. Virtual groups and online training is also taking place and one-to-one and peer support sessions for anyone experiencing challenging behaviour.

Therapeutic, Education and Support Services in Adoption (TESSA) - are

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continuing with referrals, consultations and matching with parent partners.

The Connected Service which is the Children and Young People's service in Wales is having individual discussions with each family to identify what can be offered to children and young people. At the current time face to face groups have been suspended but support is continuing to be provided virtually.

For general family support, Families First is available in every local authority and provides early support for families which helps prevent problems escalating. The Families First programme is delivered through local authorities and the referral process is available on local authority websites together with an advice line for families or professionals to use to make contact.

## National Adoption Service in Wales

The **National Adoption Service central website** is being adapted to ensure adopters understand the current position in relation to COVID-19 and are signposted appropriately. All social media channels are being regularly updated both by the Regional and Voluntary Adoption Agencies, signposting adopters to information, support groups and other forums.

## Care leavers

### How should local authorities meet their responsibilities to care leavers?

We are aware that care leavers are particularly vulnerable during this current time and are likely to need more support than usual. We know local authorities have been quick to adapt to the circumstances and are providing ongoing and effective support.

Considerable efforts have been made by personal advisers to maintain and adapt contact arrangements throughout the lockdown period. To support open lines of communication with care experienced young people, local authorities

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should consider ways in which reciprocal arrangements for contact between young people and their personal adviser can be safely facilitated during this time.

Local authorities should continue to meet statutory duties, including offering personal advisers to care leavers and preparing or reviewing pathway plans. We recognise the lockdown restrictions have made it difficult for local authorities to support young people to exit care and transition towards independence. As the restrictions are relaxed, local authorities should ensure pathway plans clearly set out the plans for progression and any mitigating measures needed to support young people during this time. We recognise the additional pressure local authorities are under, and if they need to alter the support they are able to offer care leavers during this period, they should assess their needs and prioritise the most vulnerable, using the two stage risk assessment principle.

Third Sector organisations stand ready to provide support. Voices from Care has developed a bespoke **package of support for care leavers** which has been circulated to local authorities. The support offered is intended to support emotional wellbeing by offering virtual social space. It is also providing a range of tailored advice and information and will look to adapt its service as the situation progresses.

Service providers should continue to offer all advocacy interventions for the active offer and issue based advocacy, using a hybrid mix of in-person contact outdoors and technology to facilitate support. Service providers should consider continuing any alternative contact arrangements that have shown to be beneficial during the lockdown period, if agreed by both parties.

Welsh Government has updated guidance for the St David's Day Fund setting out that local authorities should give priority to care leavers who may be experiencing financial hardship due to income loss, difficulty with tenancy agreements, food and other basic living necessities. The latest guidance also encourages financial support for technology to maintain contact including devices and phone credit.

Welsh Government **advice to care leavers living supported accommodation and for those in private rented accommodation**.

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Working with Welsh Government, the Children's Commissioner for Wales has added advice to its **Information Hub** listing a range of support for care leavers.

## Are personal advisors still expected and able to visit care leavers?

Personal advisers should continue to use their judgement to determine the nature of their contact with the young people they work with during this period.

As decisions are being taken about the reintroduction of in-person contact for routine cases or more frequent contact for others, the two-stage risk assessment principle should be followed. Personal advisers will wish to take into account their individual circumstances and levels of vulnerability and assume that care leavers are likely to need more support than usual as measures are relaxed.

Personal advisers and their manager should continue to assess the level of risk and prioritise cases where in person contact is most beneficial, and where it is not possible to provide the right level of support to the care leaver by phone or video. A move towards a hybrid mix of in-person contact outdoors and virtual arrangements should be considered in most circumstances.

Where indoor face-to-face work is deemed necessary and a risk assessment has been undertaken, personal advisers should take account of advice on **social distancing** and the use of PPE, minimising any possible risk of contracting or spreading the virus to keep both themselves, and the care leavers they are visiting safe.

Where alternative contact arrangements introduced over the lockdown period have shown to be beneficial, we encourage personal advisers to continue to use technology to contact young people through phone or video.

## **Should we continue to transition care leavers who are turning 18 into independent living? Can care leavers still be moved between different accommodation settings if necessary?**

Local authorities should act in the best interests of care leavers. Care leavers should continue to be supported to remain in their current accommodation where the placement is meeting their needs. However as measures are relaxed, local authorities and their care leavers will wish to progress their plans to transition into suitable accommodation and/or independence. If this is the case local authorities should be confident they can provide the appropriate levels of support and guidance needed to make a successful transition. Such decisions should be taken on a case by case basis.

We appreciate that finding suitable and available accommodation may continue to be a challenge, and there is an increased need for young people to have stability and support at this difficult time. We will continue to maintain contact with leaving care teams across local authorities about the existing pressures they are facing and the particular accommodation needs at this time.

## **Unaccompanied asylum seeking children (UASC)**

### **Where can symptomatic UASC self-isolate and what is being done to increase capacity for UASC self-isolation?**

Where an unaccompanied asylum seeking child arrives in Wales and is symptomatic of coronavirus (COVID-19), the local authority receiving them will need to take steps to ensure that they are placed in suitable accommodation in isolation from other people in line with [Welsh Government guidance](#).

We encourage local authorities to find suitable premises and staff to enable the self-isolation. We will work with commissioning partners to establish if additional accommodation and support needs to be sourced. Local authorities will also wish to continue working as they normally would with Health services and the

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Third sector to provide support.

## Who will have legal responsibility for UASC in self-isolation accommodation?

As with any spontaneous arrival, the local authority that initially encounters the child (for example, from the police station or from Border Force) should assess the child's needs in line with best interests principles as they would in normal circumstances. The local authority will be responsible for the child and should place them in suitable self-isolation accommodation if the child is exhibiting symptoms.

## Care Inspectorate Wales (CIW)

CIW's key priority is to provide assurance to the public and Ministers regarding the safety of services. CIW decisions are guided by the following three key principles:

- CIW will focus activity where it is needed most to ensure people receive safe care – this means concentrating on those areas where the risk to the quality of care is the highest and where CIW can make the biggest difference
- CIW will support providers by looking at how they can act flexibly and proportionately
- CIW will honour duty of care to colleagues in CIW

To achieve this, CIW have adapted its approach to provide independent scrutiny while ensuring CIW does not put people using services, staff or its own staff at unreasonable risk and works in line with national guidance. This enables us to:

- fulfil CIW's statutory duties to report on the safety and well-being of people using social care and childcare and play services without adding unreasonable burdens to a system currently dealing with unprecedented challenges
- promote transparency about the response to COVID-19 and ensure lessons can be learned quickly

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CIW have produced an overview of its approach to monitoring and assurance during the COVID-19 outbreak. A copy of this document is available on [CIW website](#)

CIW will continue to inspect, monitor and performance review any service where there are significant concerns about the safety and well-being of people, and will continue to consider the need for inspection in relation to concerns raised.

CIW made this decision to ensure local authorities and providers can concentrate on maintaining the health and safety of the people using services and their staff in these exceptional circumstances.

CIW is monitoring and seeking assurance of risk and fragility in the system in the absence of routine inspection. At present this includes regular phone calls to providers, regular discussions with commissioners, and directors of social services and heads of service. In addition, alongside Welsh Government, CIW will combine formal requests for information and share the data and information across the system to limit duplication and additional burden on the system.

## **Education other than at school (EOTAS)**

Children who attend education other than at school (EOTAS) provision and, in particular, pupil referral units (PRUs), are some of our most vulnerable learners. They often have experienced or are experiencing challenging situations, and may frequently experience family breakdowns, and adverse childhood experiences. In addition some EOTAS learners will have special educational needs (SEN). We have published specific [Guidance for supporting vulnerable and disadvantaged learners](#) which sets expectations relating to support for vulnerable and disadvantaged learners for a range of scenarios.

All learners in EOTAS were expected to return to education provision when the Autumn term started. EOTAS providers must comply with health and safety law, requiring them to assess risks, and put in place proportionate control measures. Local authorities as EOTAS commissioners will need assurance these measures are in place. We have published [Operational guidance for schools and settings for the autumn term](#) that EOTAS settings should follow to make their

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site safe for staff and learners. Where a learner routinely attends more than one setting on a part-time basis, for example because they are dual registered at a mainstream school and a pupil referral unit (PRU), or another EOTAS setting or special school, the settings should work through the system of controls collaboratively, enabling them to address any risks identified and allowing them to jointly deliver a broad and balanced curriculum for the learner.

## Home educated children

Local authorities should also keep in touch with children who are usually home educated by their parents and promote relevant resources that are available on the Hwb. Where there is information to suggest that a child is vulnerable, it will be important to maintain regular contact, to offer support to families who need it and to report any safeguarding concerns to Children's Social services in the usual way.

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