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| **Guidance For Visiting Children During Covid19 : 1st April 2020** | |
| **1.** | **Introduction** |
|  | Most importantly, at this time and on every level - social workers, practitioners and managers need to work closely with our partners to plan and coordinate our visits to children. Children must experience visits which are as coordinated and joined up as is possible.  A number of key services are still visiting vulnerable children – social workers, school staff, police colleagues, health visitors and others. All practitioners, supported by their managers, should plan visits so that we maximise our collective opportunity to safeguard and support the most vulnerable children. |
| **2.** | **Key Messages** |
|  | Plan your visits alongside key professionals working with children, making sure that you don’t all visit or  telephone on the same day         Keep in touch with key professionals about those children you are worried about  - we might not be meeting as frequently but the work we would usually complete through core group and planning meetings still needs to be happen (in different ways). This activity will help to safeguard children and must be clearly recorded on the child’s record         Keep in touch with IROs regarding children looked after and discuss how IROs are staying in touch with children and how this fits with wider plans         If anything, more of all of our time should be spent talking to people and recording this work to evidence our efforts to manage risk and safeguard children |
| **3.** | **Child Protection** |
|  | At this stage, all children subject to a child protection plan should still be visited at their home address and social distancing should be adhered to. Therefore, you may not be able to enter the property or see the child alone in the normal way but you should visit the property and see the child, even if only at a 2 meter distance or through the window. The specific details should be recorded clearly on the child’s record.  If a child is not seen it should be recorded as a ‘Visit Child not Present’ and parents / carers should be asked specifically about the child’s whereabouts. If the social worker is dissatisfied with the response, this should be escalated to the team manager and checks should be made to establish whether other agencies have seen the child.  Timescale for CPP visits; at least every 10 working days. CP visits should be recorded as a ‘Statutory CP Visit’.  At least one telephone welfare check should be completed between each CPP visit – this can be done via phone or WhatsApp and should be recorded using the newly added ‘telephone welfare check’ option. |
| **4.** | **Child In Need** |
|  | At this stage, the majority of child in need cases, are being managed via welfare checks on the telephone or preferably using WhatsApp. This will be reviewed on a regular basis as Government Guidance regarding social distancing is updated.  When risks are high or increase for children in need, a risk assessment should be completed or updated to determine whether a visit is needed. Managers must be consulted at this stage. It is important that social workers and managers keep a close eye on the length of time since a child was last seen in person. To support managers with this task, weekly reports will be produced from Monday 6th April 2020 which monitor visiting activity across all teams.  If telephone welfare checks indicate concerns or that a child is at increased risk, a risk assessment should be completed to determine whether a visit should take place. Welfare checks should be recorded as such and visits only recorded if you actually visit the property, even if you don’t enter but see the child at the door or through the window.  For assessment teams, visits will be planned at Team Manager and Group Manager discretion and dependant on the perceived level of risk to the child. Visits would normally take place at the point of receiving the referral and reviewing all information. Further visits should be planned, with partners, based on the perceived level of risk as the assessment progresses.  Where assessment work is underway and/or nearing completion the CIN and CP visiting guidance should be followed. |
| **5.** | **Early Help Visits** |
|  | At this stage, Early Help contact with families are being managed via welfare checks on the telephone and recorded using **Welfare Check** case note.  Covid-19 risk assessment should be completed or updated to determine whether a visit is needed. Managers must be consulted at this stage. It is important that Early Help family support workers and managers keep a close eye on whether families are engaging by telephone or not, and if this lack of visibility is leading to increased risk.  If telephone welfare checks indicate concerns or that a child is at increased risk, a risk assessment should be completed to determine whether a visit should take place and whether it is necessary to follow the Step Up Procedure. Welfare checks should be recorded as such and visits only recorded if you actually visit the property, even if you don’t enter but see the child at the door or through the window. |
| **6.** | **Child Looked After Visits** |
|  | At this stage, children looked after will not be visited in their placement unless safeguarding or placement breakdown risks are identified (the exception to this is unregulated placements or connected carers). All children will be contacted via telephone or WhatsApp at a frequency of 3 times a week for those children rated Red on the RAG list and once a week for all other children looked after or care leavers.  If children are seen in school or by other professionals each week, the frequency can be reduced from 3 times a week to once a week, if appropriate. Most importantly, professionals need to work together to coordinate support. If concerns are raised or escalate, a risk assessment should be completed to determine whether a visit can be safely completed, following the visit guidance above. At this stage, the majority of our contact with children looked after will be carried out by extended communication via WhatsApp and telephone calls. These should be recorded at ‘Other CLA contact with child’ on Liquid Logic. |
| **7.** | **Leaving Care In Touch Visits** |
|  | At this stage, Care Leavers (Relevant and Former Relevant Children) will not be visited in their placement or accommodation unless safeguarding or placement breakdown risks are identified.  All Care Leavers will be contacted via telephone or WhatsApp at a frequency of once a week unless this level of contact is not needed. In such cases, the rationale for a reduced level of contact should be clearly recorded on the young person’s record.  We will aim to meet our responsibilities to see and stay in touch with our care leavers and we will adapt our approach creatively during this period.  Where a care leaver has involvement with adult social care, close communication should be taking place to ensure that the young person is safe and this should be clearly recorded.  If risks escalate, a risk assessment should be completed to determine whether a visit can be safely completed, following the visit guidance. Team Managers should have oversight and record clearly on the young person’s record. |
| **8.** | **Return Home Interviews** |
|  | Face-to-face interviews with C/YP who have returned (home or to their placement) following a missing episode will be to be replaced by a telephone contact or WhatsApp video. A face to face RHI will only take place if significant risks have been identified during the missing episode. The VEMT manager will identify high risk missing episodes and make the decision to undertake a face-to-face RHI. Where VEMT have concluded that follow up face to face discussion is required, they will plan with the social worker or placement in the first instance. The majority of RHI discussions are taking place by telephone at this stage. RHI’s will continue to be recorded on the standard RHI form on Liquid Logic.  As you know, Government and Public Health guidance is being updated all of the time and as such it is important to emphasise that the visiting expectations set out here will be reviewed on a regular basis, in line with wider guidance. |
| **9.** | **Supervision of and Visits to Hull City Council Foster Carers and Supported Lodgings Providers and One Adoption Adoptive Parents** |
|  | At this stage, the Fostering Service and the Adoption Service will continue to provide supervision and support to HullCC’s foster carers, supported lodgings providers and One Adoption Adoptive parents. The overriding principles here are 'Supervision' and 'Support' which can be delivered by telephone or video call. Visits in person should only be undertaken in the event of safeguarding concerns or for moving children to/between placements, unless risk assessed and authorised by a manager.  The frequency of contact with the foster carer/ supported lodgings providers/ adoptive parents may need to increase as carers will have children at home for longer periods of time where the child is not attending school or undertaking other usual activities in the community. In addition, foster carers/ supported lodgings/ adoptive parents will not be able to access face to face training or support groups.  Visits in person may be needed if foster carers/ supported lodgings providers ask for this or we feel they need extra advice, guidance and support. Visiting can double up with the CLA children's statutory visit, in liaison with the fostering manager/ adoption manager and the child’s team manager.  Supervising fostering or supported lodgings staff, Children's Social Workers or Personal Advisors should agree a household visiting plan with our Foster Carers/Adoptive Parents and children/ young people, so our duties are delivered proportionately, with shared tasks that do not duplicate.  If neither the fostering worker or Children’s Social Worker or Personal Advisors are visiting in person then Group Managers need to authorise the arrangements which will need to include: weekly contact with children by telephone but preferable video call and weekly contacts with foster carers/ supported lodgings provider by their Supervising Worker.  Routine Statutory unannounced visits and bedroom checks to Foster Carers by their Supervising Social Worker will be suspended until further notice.  **Prospective Foster Carers subject to Assessment**  Assessments of any prospective carers/ providers including emergency Foster Carers will be conducted via telephone/ video conference calls in the main but there must be at least one visit to the house to check household arrangements, health & safety, bedrooms etc before the assessment is completed and presented to Foster Panel. Where a child’s team is involved and undertaking a visit, the Fostering worker should liaise with them to potentially undertake this at the same time, providing clear guidance on information needed in order to reduce visitors to the household. The timing of this is to be considered alongside the self-declaration by the “carers” regarding COVID-19 risk factors. |
| **10.** | **Post Order Support** |
|  | A decision will be made in every individual situation giving due regard to the needs of the children and adopters/SGO carers in addition to the safety needs of staff. Where a child is subject to a Child in Need Plan in addition to the SGO/Adoption Order, Child in Need Visits guidance need to be followed.  Visits may be needed where there is a risk of adoption or placement breakdown – in such situation, a risk assessment will need to be undertaken before a visit is completed. Visits can be completed via home/face to face visits or welfare checks through telephone or video call. |