

Service Plan for Alert Level 4 Restrictions

Level 4 / Very High Risk: Restrictions at this level would be equivalent to the 'firebreak' regulations or lockdown. These could either be deployed as a 'firebreak' by doing so in advance, or as an emergency 'lockdown' measure if advance notice is not possible.

When further operational guidance is provided by Welsh Government the senior management team will review and update the Service Plan as required.

All staff are to use effective infection prevention & control measures including social distancing, hand hygiene, correct and appropriate use of PPE.

Child Protection Visits

Visits to children who are on the Child Protection Register should be carried out at least every 10 working days and it is expected that these will ordinarily be undertaken face to face. If following a two stage risk assessment a decision is taken that this requirement should be met through other remote/virtual contact then this decision must be agreed by a member of the senior management team and the rationale for it must be recorded.

Core Groups

Core groups should take place using virtual means such as Skype or Teams wherever possible. If a parent of professional does not have this technology they should be encouraged to use the phone the SW who can speak them on speakerphone to enable them to engage within the meeting.



Visits to Children Looked After

Statutory Visits to children who are looked after should take place virtually during Alert Level 4. If a face to face visit is deemed to be necessary then the two stage risk assessment should be completed and agreement given by a member of the senior management team before it takes place.

Visits to Children who are the subject of a Care and Support Plan

Visits to children who are the subject of a Care and Support Plan should take place virtually during Alert Level 4. If a face to face visit is deemed to be necessary then the two stage risk assessment should be completed and agreement given by a member of the senior management team before it takes place.

Care and Support Meetings

Care and Support meetings should take place using virtual means such as Skype or MS Teams wherever possible. If a parent of professional does not have this technology they should be encouraged to use the phone the SW who can speak them on speakerphone to enable them to engage within the meeting.

Face to Face Contact

Where there were prior arrangements in place for children who are looked after to have contact with their family, the contact can continue. Arrangements will need to be established wherever possible for contact to take place using remote facilities such as face-time, telephone calls etc. and for carers to supervise as appropriate. In instances where contact is considered to be necessary the two part necessity/risk assessment will need to be completed and agreement be given by a member of the senior management team, prior to the contact going ahead. Key priority groups for direct contact that may be assessed as necessary include:



- Infants in care proceedings
- Children with communication difficulties
- Children whose care plan is reunification
- 'Goodbye contacts'
- Contacts for the purpose of Social Work assessment

Respite/Short Breaks

While there is ongoing community transmission of the virus it is important to avoid contact with others as far as possible which includes visits or overnight stays in other households. This would mean that respite care is best avoided other than in exceptional circumstances. Where respite care is judged to be in the best interests of the child, the guidance in the document 'PHW Advisory Note - Use of PPE in Social Care Settings' should be applied. Where a short break is to be provided the two part Risk Assessment will need to be reviewed and updated as appropriate.

Access to Office Accommodation

At Alert Level 4 all staff are required to work from home wherever this is possible. Only staff working within MASH can attend the council offices at Ravens Court. Office accommodation will also be made available at CCYD to staff who in between visits (where it is not practicable for them to return home) need a space from which to work.

Initial Child Protection Conferences

At alert level 4, ICPC's will be held virtually using Microsoft Team (MS Teams) as the primary form of communication but the IRO will ensure family members are able to participate fully by another means if required.



Review Child Protection Conferences

At alert level 4, RCPC's will be held virtually using Microsoft Team (MS Teams) as the primary form of communication but the IRO will ensure family members are able to participate fully by another means if required.

The RCPC will be a multiagency meeting and as such decisions will be made in relation to Child Protection registration, children will be permitted to be de-registered providing the majority of professionals determine this is the appropriate course of action and the child is no longer considered to be at risk of significant harm.

Combined Looked After Children Reviews and CPC's

At alert level 4, these meetings will be held virtually using Microsoft Team (MS Teams) as the primary form of communication but the IRO will ensure family members are able to participate fully by another means if required.

Looked After Children Reviews

At alert level 4, these meetings will be held virtually using Microsoft Team (MS Teams) as the primary form of communication but the IRO will ensure family members are able to participate fully by another means if required.

Any actions/recommendations are recorded and forwarded to the Team Manager & case holding Social Worker as usual practice.

IRO Contact with children & young people

Contact between the IRO and children & young people who are looked after should now be undertaken virtually using Microsoft Team (MS Teams) prior to the LAC review.



Fostering

Undertaking Medical Assessments for Prospective Foster Carers

In line with most recent Welsh Government Guidance:

- 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 selfdeclaration 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

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

When considering in-person and face to face contact, The Fostering Service should continue to risk assess on a case by case basis. In instances where in-person/face to face contact is considered to be necessary the two part necessity/risk assessment will need to be completed and agreement be given by a member of the senior management team, prior to the contact going ahead. Such instances 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.

Residential Care

- Where there is a plan for a child to be placed into Residential care the child/young person should be tested prior to admission.
- For urgent situations, where delaying placement would likely have an adverse impact on a child's health and wellbeing routine testing of asymptomatic children prior to urgent placement is not required.
- In the event of an urgent placement testing should take place as soon as
 possible and a multi-agency risk assessed approach should be taken. Public
 Health Wales will provide specialist health protection advice to support a risk
 assessment.
- All Residential Care Homes must operate in line with "Guidance to Prevent COVID-19 Among Care Home Residents and Manage Cases, Incidents & Outbreaks in Residential Care Settings in Wales" published by Public Health Wales.
- All staff working and visitors will be expected to wear PPE in line with "Personal protective equipment (PPE) – resource for care workers working in transmission in England" published by Public Health England.



- All Residential Care Homes will need to operate effective Infection and prevention control in line with recommendations set out in "Covid-19: Guidance for the remobilisation of services within health and care settings – Infection prevention and control recommendations" published by Public Health England.
- All Residential Care Homes will need to operate in line with the expectations set out under Level 4 in the attached Welsh Government Guidance:

https://gov.wales/sites/default/files/publications/2020-12/coronavirus-control-plan-alert-levels-in-wales-for-social-care-services-for-adults-and-children.pdf

Multi-Agency Panels

At Alert Level 4 all multi-agency panels will continue to be held virtually.