

PROTECTING CHILDREN AT A DISTANCE

A multi-agency investigation of child safeguarding and protection responses consequent upon COVID-19 lockdown/social distancing measures



RESEARCH BRIEFING

Key findings and recommendations: implications for inter-agency and cross-government collaboration

Key findings

- Arrangements for multi-agency collaboration for the protection of children are of heightened significance during periods of lockdown, but were subject to widespread disruption, particularly arising from redeployment decisions.
- Despite general agreement that the adaptations to the pandemic promoted greater inter-agency collaboration, the pandemic highlighted the importance of Safeguarding Partnerships ensuring that all relevant agencies are fully engaged.
- The value of joint risk assessments and enhanced scrutiny and/or sharing of information, data and trends within and between local areas became apparent from initiatives in response to the pandemic.
- The pandemic and associated financial and emotional stresses on families have exacerbated the strain on Early Help services.
- Elective Home Education is likely to increase in the wake of the pandemic.
- Safeguarding/child protection professionals expressed considerable concern about the impact of remote communication on digital poverty, existing inequalities, the identification of safeguarding concerns and access to services.
- While there is considerable scope to increase efficiency through greater use of remote communication methods, caution needs to be exercised to ensure equality of access and safe practice with children and families.
- The wellbeing of safeguarding/child protection professionals declined over the course of the pandemic.

Study overview

The strict measures taken to delay the spread of Coronavirus posed unprecedented challenges to child protection practice. These measures affected all stages of, and all professional disciplines involved in, the continuum from prevention of maltreatment to the protection of children at risk of serious harm, as well as the multi-agency procedures that lie at the heart of effective modern child protection arrangements. Meta-analyses of serious case reviews evidence the critical importance of inter-agency information-sharing and collaboration, which underlie the introduction of Safeguarding Partnerships. The study engaged safeguarding leaders from all professional disciplines involved in child safeguarding and protection. The first stage, which took place between June and September 2020, comprised 67 interviews with London-based safeguarding and child protection leaders within seven professional groups: Children's Social Care, Health, Mental Health, Police, Education, Law and Safeguarding Partnerships. Interviewees' priorities and responses informed the questions and response options for the second stage, a national survey distributed to similar professional groups in February–March 2021, which elicited 417 responses for analysis. Respondents represented all regions in

England, with London and the South East accounting for 45% of overall survey representation. Respondents were a very senior and experienced group of respondents with a predominantly strategic perspective, including Directors of Children's Social Care, Safeguarding Partnership Independent Scrutineers/Business Managers, headteachers or Designated Safeguarding Leads, Designated and Named Health and Mental Health Professionals, Police safeguarding leads at area level, and local authority and children's panel lawyers.

This briefing summarises the implications of our findings for cross-government collaboration to inform system-wide contingency plans in the event of future emergencies; address heightened risks to children and widening inequalities in access to services; and ensure that the professional workforce has adequate capacity and support.

Multi-agency working and Safeguarding Partnerships

The crisis appears to have fostered greater commitment to collaboration and promoted increased sharing of data and trends within and between local areas. 56% (n=269) of respondents agreed/strongly agreed that working relationships amongst the Safeguarding Partners and relevant agencies in their area improved as a result of professional adaptations in response to the social distancing measures, such as increased meetings, online communication and increased information-sharing. 70% of survey respondents agreed/agreed strongly that the shift to tripartite leadership/decision-making through the introduction of Safeguarding Partnerships was successfully achieved/maintained in their local area during the pandemic. Survey respondents were more likely to report that joint working between their agency and other agencies had improved than that it had deteriorated, and all agencies were more likely to report improvements in strategic working with Education than deterioration. However, Education respondents were more likely to report deterioration than improvement in joint working with all other agencies, both strategically (43% reporting deterioration) and operationally (51%).

'The pandemic acted as a catalyst to enhance partnership collaboration at both strategic and an operational level.'
– *Business Manager, West Midlands*

Joint agency risk assessments were more likely to be regarded as effective than those undertaken at a single agency level, and 98% of respondents (n=280) indicated that, from their experience during the pandemic, they would support introduction of a system by which all agencies could share pre-agreed safeguarding information. No agency returned less than 94% support. There was exceptionally strong support for greater involvement of relevant agencies in the work of Safeguarding Partnership sub-groups: 98% for education providers and Child and Adolescent Mental Health Services (CAMHS), 96% for health providers and 94% for housing (n=284-299). There was also strong support for greater representation of these groups at Safeguarding Partnership executive boards: 94% for Education providers, 88% for health providers, 84% for CAMHS and 73% for housing (n=255-304).

More than three quarters of respondents (n=276-286) agreed with statements that safeguarding midwives, health visitors, and designated safeguarding doctors and nurses should never be redeployed; 92% (n=288) agreed that plans for redeployment of universal staff should be made in conjunction with safeguarding leads in the relevant agency; 82% agreed that plans for redeployment of safeguarding leads staff should be agreed by

Safeguarding Partnerships; and 72% agreed that plans for redeployment of universal health staff should be agreed by Safeguarding Partnerships.

‘Decisions were made regarding redeployment of staff from children to adult services without any consideration of the impact. If Safeguarding Partnerships had been consulted some of the pitfalls might have been recognised and action taken to mitigate the risk.’

– *Designated Nurse for Safeguarding, East of England*

Early help/early intervention

Levels of Early Help (EH) needs were reported to be rising due to parental stress and economic instability. 89% (n=193) of survey respondents noted increased EH needs locally, with similar perceptions across agencies. 39% (n=153) reported that EH services were cut in favour of statutory services. Increased provision and funding of EH was mentioned repeatedly as a priority for central government policy in order to prevent escalation of cases, especially in relation to resources targeting Domestic Violence and Abuse and preventing children from becoming recipients of statutory services. 94% of respondents (n=196) reported that most EH provision shifted to online delivery and only 53% (n=108) felt that online services were effective. 68% (n=173) felt that the onus on families to contact services had increased. These findings present concerns as to the suitability and accessibility of online EH services for families in digital poverty or with additional needs such as learning disabilities. A related concern relates to the invisibility of children not attending school and emerging evidence of higher numbers of home-educated children in the wake of the pandemic.

‘There needs to be policy change to improve investment in prevention and supporting families at the very beginning of their journey into parenthood.’

– *Designated Nurse for LAC and Safeguarding Children, North West England*

Communication

The shift to virtual communication methods was found to have significant benefits for engagement with some groups of children while facilitating better attendance by professionals at inter-agency meetings and enabling more efficient use of professionals’ time. But there is significant disquiet about the identification and assessment of safeguarding concerns; the implications for building supportive relationships with children and families; and the exclusion of children and families due to digital poverty. While there is considerable scope for greater use of online communication and hybrid meeting formats, caution is needed in ensuring equality of access and coordinated approaches and that children’s safety is not compromised.

‘Huge increased risk due to lack of face-to-face contact with any professional...several cases of life-threatening medical and safeguarding problems not detected. Remote working makes it far too easy for the CYP to not be seen or spoken to.’

– *Designated Doctor for Safeguarding, East Midlands*

Professional wellbeing and capacity

The impact of the pandemic and associated working conditions on the wellbeing of safeguarding and child protection professionals was highlighted in both study stages as a key concern across all seven disciplines. Interviewees described exhaustion from increased

workloads and managing backlogs, continuous online meetings, worrying about the impact of the pandemic on children and families, covering workforce gaps and being unable to take leave. Survey respondents reported reduced numbers of staff within their agency or organisation, increased staff caring responsibilities, loneliness, mental health concerns and staff illness. 75% of respondents indicated that over the course of the pandemic the wellbeing of safeguarding/child protection professionals in their agency or organisation had decreased. Regular individual supervision, individual manager contact, ensuring opportunities for informal peer support and regular group supervision were regarded as the most effective strategies for supporting staff wellbeing.

‘The wellbeing of our practitioners remains a key factor in delivering high quality services. Good links to managers and peers has been crucial to maintain oversight and quality of services to children and families.’

– *Children’s Social Care, East Midlands*

Recommendations

1. Robust safeguarding contingency plans should be prepared in advance of any future crises, including in relation to redeployment of any staff with safeguarding responsibilities, with full input from Safeguarding Partnerships at local level.
2. In accordance with evidence also provided to the Wood Review (2021), ongoing work is required to ensure that all relevant agencies are fully engaged in the work of Safeguarding Partnerships. The implications of the introduction of Integrated Care Systems for inter-agency safeguarding arrangements should also be addressed.
3. Consideration should be given to extension of the NHS Child Protection-Information Sharing Programme to a wider range of agencies.
4. Stronger Early Help services require evaluation of the sufficiency and effectiveness of provision; attention to ensuring equality of access, particularly for those in digital poverty or with social/learning vulnerabilities; and contingency planning to ensure core provision such as children’s centres remain accessible and safe.
5. Elective Home Education should be subject to greater regulation.
6. The impact of digital poverty and increased inequalities on identification of safeguarding concerns and access to services needs to be addressed in ‘levelling up’ initiatives.
7. Clear evidence-based guidance should be drawn up to help practitioners identify when in-person engagement is necessary and when digital contact is appropriate or preferable.
8. Professional capacity and wellbeing must be prioritised in workforce planning decisions, including through investment in regular individual supervision and contact with managers; opportunities for informal peer support; group supervision and discussion; and active management of leave.

For more information about this study and to download stage 1 and 2 summary of findings reports and the final report, please visit the study project page:

<https://www.kcl.ac.uk/research/protecting-children-at-a-distance>.

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