

Written evidence submitted by Bea Gardner

Introduction to submission

1. This evidence consists of initial findings from an ongoing, longitudinal qualitative study (n=23) examining the experiences of delivery-level workers during the COVID-19 pandemic across multiple agencies, including education, health and children's services. The research examines how delivery-level practitioners are managing and responding to the unprecedented challenges generated by the pandemic 'on the ground', including mechanisms agencies have developed to continue providing services to children. The research has a cross-agency safeguarding focus, exploring how the pandemic implicates processes of multi-agency children's safeguarding interventions.
2. Semi-structured remote, video interviews were conducted with 23 delivery-level practitioners between April and July 2020. Additionally, seven participants from education have recorded fortnightly audio diaries from June onwards. All participants will be re-interviewed in December 2020. The research received ethical approval by the University of Southampton's research ethics committee, which also ensures GDPR compliance.
3. This evidence is submitted by Bea Gardner, a doctoral researcher at the University of Southampton, funded by the Economic and Social Research Council through the South Coast Doctoral Training Partnership. Bea is a former children's advocate and has an MSc in Sociology and Social Policy from the University of Southampton and a BA (Hons) in Childhood and Youth Studies, awarded by the University of Portsmouth. The evidence is submitted to support the questions put to witnesses and inform the committee's fact-finding.

Summary of evidence

4. This submission comprises the main findings of the research relevant to the terms of reference for the inquiry, with particular relevance to the effect of the pandemic on disadvantaged groups, the capacity of children's services to support vulnerable children and families, and the implementation of critical worker policy.
5. **Key findings include:**
 - Reduced staff morale over time
 - Contradictory pressures and role ambiguity generated by COVID-19
 - The increased pastoral role of schools
 - "Unworkable" local and national guidance
 - Prioritisation of adult needs over child needs
 - Limitations of technology, particularly for the 'voice of the child.'
 - Increasing tensions across agencies

Outline of key findings

6. **Staff morale has reduced over time**, and practitioners are becoming increasingly fatigued by the ongoing instability of working arrangements. Social distancing arrangements are increasing workloads, particularly for junior staff in schools who are taking on additional responsibilities. Homeworking and 'bubble' arrangements have reduced the contact practitioners have with other team members, leading to increased isolation of practitioners and reduced opportunities for informal peer support. Tensions between agencies are beginning to emerge as practitioners seek to overcome the inherent challenges of meeting child and family needs while adhering to social distancing restrictions.

- 7. Contradictory pressures** Practitioners are confronted by a dual tasks of responding to and implementing measures to reduce the spread of the virus, while continuing to identify and protect children from other potential harms, including those exacerbated by virus containment measures. In the process of navigating this dual task, contradictory pressures and tensions have emerged, with practitioners needing to determine the correct balance between responding to children's safeguarding vulnerabilities while also limiting the potential spread of COVID-19. This tension is putting increased strain on delivery level practitioners who report feeling unsupported by senior managers in this decision-making process.
- 8. Role ambiguity and increased pastoral interventions by schools.** Universal services feel increased pressures to be in regular contact with families who were 'on their radar' as having difficult home circumstances before lockdown but didn't meet thresholds for specialist support. Heightened fears of a child coming to serious harm have resulted in many school-based practitioners taking on greater pastoral and safeguarding orientated roles. Schools have also felt pressured to respond to children's emotional needs which have made a return to school operations more challenging, especially given the limited opportunities for transition work before the summer holidays. Examples of increased welfare role include the launching of foodbank initiatives, delivering food parcels, making welfare calls and conducting 1:1 pastoral meetings with pupils. Education staff recognise the importance of such interventions but report lacking sufficient training to carry out greater pastoral and mental health interventions with children. They also question the longer-term sustainability of these initiatives while continuing to meet the educational needs of pupils.
- 9. 'Unworkable' guidance which does not prioritise individual need.** Challenges interpreting local and national guidance to specific delivery circumstances is resulting in significant variation of approaches across agencies and local areas. Delivery staff express frustration, fear and anxiety about "inappropriate" or "unworkable" guidance as well as lack of local authority oversight and support. There is a real potential that the individualised needs of children are insufficiently considered within agency-specific covid operation planning. Challenges adhering to covid-19 procedures are particularly acute for children who have additional needs or vulnerabilities, including speech and language developmental delays and visual impairments. Participants report being required to breach aspects of government and local guidance in the course of their daily work by breaching 1-metre distancing and removing PPE so they can communicate effectively with children. They express feeling "left" to figure out contradictory guidance on their own with a range of consequences detrimental to children resulting from this. For example, one participant described a 7-year-old child spending a whole school day sat on a single desk outside the classroom with minimal supervision due to the class bubble being "too big".
- 10. Prioritisation of adult needs over child needs.** There is also concern that the overall emphasis is on protecting adults at the expense of children's needs. Lower priority appears to be given to children's wishes about working arrangements compared with parent or guardian views. There are concerns that the voice of the child is missing within online meetings, and protection planning is orientated around service arrangements rather than child needs. Additionally, participants in the study expressed concerns that not enough was done to increase the number of vulnerable children in school or to ensure children continued to attend medical appointments at the height of the pandemic. A final example is chaperones in local authority taxi provision have been reduced to reduce in-person contact during school runs. However, responsibility for safe child handover is now placed on drivers despite them lacking adequate training on transferring children with disabilities safely while maintaining distancing.
- 11. Possibilities and limitations of technology.** There are widely recognised benefits of technology during the peak of the pandemic, enabling the continued delivery of services remotely, including

multi-agency meetings. Social workers are keen to utilise aspects of technology to engage with hard to reach young people and reduce travel time, giving greater efficiency to their work and reducing their carbon footprint. However, participants based from health and education expressed concerns regarding the voice of the child in remote meetings and the accessibility of meetings for parents, with few attending child protection conferences online. All agencies do not want to see an increase in hot-desking arrangements and dismantling of physical team structures as a result of the pandemic, with the importance of colleague support emphasised by home working arrangements. Many practitioners continue to experience difficulties and delays with technology remotely which has implications for consistency of delivery.

- 12. Tensions in multi-agency working.** The reducing staff morale alongside contradictory pressures and role ambiguity is fuelling inter-agency tensions. In particular, health and school colleagues are dissatisfied by the response of social care during the peak of the pandemic with participants in the study believing social care were downgrading cases inappropriately and not making adequate attempts to carry out in-person conversations with children or families. Meanwhile, many social workers in the study reported frustrations that partner agencies such as respite services closed and not enough children were attending schools during the height of the pandemic. Overall, it remains unclear if appropriate attention was given by children's services to the unique circumstances of the lockdown when processing referrals and conducting section 17 and 47 assessments. For example, whether the restricted access children had to protective factors such as universal and early help services was widely factored into assessments and threshold decision making. Given that social care involvement unlocked school places for many children during national lockdowns, the outcome of these assessments had even greater weight.
- 13. There are increasing fears for the prolonged implications of the pandemic.** In particular, social care is dealing with increased referrals since schools have reopened more fully, but fear "overwhelming" numbers of referrals as the economic effects of the pandemic develop and unemployment rates rise. Additionally, all agencies continue to express fears regarding the extent of the developmental impact on children, particularly those most vulnerable. They express concern that without adequate investment in support to help the most vulnerable to catch up, including for those who experience digital poverty, then existing inequalities will widen.

Recommendations

- 14.** As a longitudinal study, the findings of this project are conditional with participants responding to an ever-changing situation. However, some key themes have emerged which should be taken on board in future contingency planning for education and children's services:
- 15. The importance of providing opportunities for informal and formal peer support.** Peer support provides a significant opportunity to share informal knowledge, best practice and discuss the overall emotional challenges of working during the pandemic. In pre-COVID working arrangements, such conversations might have taken place in corridors, leaving meetings or within shared offices. The continued requirement for home working necessitates attention to team communication structures, ensuring opportunities to continue to exist for informal and formal collegial support. Such communications can offer solutions to complex problems, overcome obstacles and is especially important for newly qualified practitioners who learn from the wisdom and experience of colleagues.
- 13 There should be appropriate flexibility in guidance to provide for those with additional needs.** Measures implemented to ensure COVID-19 safety compliance must give due regard to the individual needs of vulnerable children and those with additional needs. Improved information sharing between agencies and delivery level practitioners is required to rapidly develop practical

best practice guidance which allows for children's individual needs to be met while maintaining the spirit of social distancing measures and maintaining safe workplaces.

- 14 Appropriate flexibility around thresholds for specialist intervention is needed during emergencies like the covid-19 pandemic.** In periods of 'stay home', isolation or lockdown social worker assessment should not assume support of universal services such as schools as a protective factor, especially where specialist intervention could be the difference between some contact with professionals and none.
- 15 Increased training is needed for teachers and support staff** to increase their confidence in responding to pastoral issues, including responding to the mental health needs of children and young people. **In addition, further resources and new partnerships, are also needed to respond specifically to the increase in the emotional and developmental needs of children as a result of the pandemic.**

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