#### TRAFFORD COUNCIL

Report to: Children and Young People's Scrutiny Committee

Date: 16/3/21
Report for: Information
Report of: Anna Lomas

## **Report Title**

## The impact of the Covid-19 pandemic on foster care in Trafford

The purpose of this report is to provide an overview of the impact of Covid19 on foster care in Trafford.

Without doubt the Covid-19 pandemic has been challenging for families, foster carer families are no different. They have been affected by Covid19 in their own families and communities as they have navigated lockdown impact from people having caught the virus, been hospitalized from it, supporting their own children and grandchildren as well as their foster children.

It has been challenging.

However they have continued to go over and above in meeting the needs of our children. In Children's Services we have constantly been asking the question of what can we do to do to manage and mitigate the impact of Covid19 for our children and carers through our social work teams and the work of Virtual School.

### **Summary**

### 1.0 Introduction

**1.1** At the beginning of Covid-19 pandemic at the end of February 2020 we had **90** general fostering households and **63** Connected Carer households in Trafford.

Our key strategy at that time was to

- communicate and support by building the strength of our fostering community
- enhance emotional resilience and therapeutic training responses through training for our carers and practitioners
- providing practical and emotional support through a multi-agency response.

As such we introduced a new model to assess risk to focus appropriate level of support for foster carers from their Supervising Social Workers, our children's social workers, Virtual School and health.

Where children/young people were struggling we held placement support meetings to harness a multi-agency team approach and look at what additional support was required.

A one off Covid19 support allowance equivalent to the Holiday Allowance was paid for each child in placement for at least a 6 week period between 1 April and 31 August in recognition of impact of carers adapting to the changing demands of Covid-19.

A weekly bulletin is sent to all of our carers outlining latest developments and information and building connection and a community of practice at time when face to face contact was limited. We have had some positive feedback about the helpfulness of this.

1.2 At a more strategic level a weekly (if required twice weekly) Covid19 Education, Health and Social Care meeting chaired by the Corporate Director took place where communication availability and support to children and carers was considered. Underneath this a specific the Placement Sufficiency Sub group was established which had representation from all services areas has undertaken a tracking and monitoring function to manage and assess sufficiency and achieve stability for our children and young people and in particular to manage the impact of the Covid19 Pandemic regular line of sight to senior leads.

## 2.0 Current Fostering Households (1st February 2021)

Of 396 children in care in Trafford. These children are cared for in a range of settings – most in a family. In terms of internal fostering provision we have two types of carers – **connected persons** who are part of the child/families network of family/friends who have been approved as foster carers and matched to children in our care. We have more of these arrangements in Trafford than our regional and statistical neighbours. The second is referred to as **mainstream or general** foster carers. These are carers who have been recruited from the community to care for children to whom they are not related as foster carers. A summary is provided below of each section.

- 2.1 Connected Persons Total placements **119**: The number of children in Connected Persons fostering placements has been on an upwards trend since February 2020. These are in house foster placements with existing family members or friends who have been approved specifically for children known to them. 69% have been in their placement for at least 1 year and 55% have been in their placement for over 2 years. 74% were placed in Trafford, and a further 27 placed elsewhere in Greater Manchester. 4 were placed elsewhere in the region and 1 placed further afield. 95% are placed within 20 miles of home. 20 are placed within neighbouring authorities. The average cost is £296pw.
- In-House General Fostering Total placements **101**: The number in In-House foster placements has been relatively stable over the last 12 months, although this briefly rose in September 2020. 62% have been in their placement for at least 1 year and 50% have been in their placement for over 2 years. 70% (71) were placed in Trafford, and a further 22 were placed elsewhere in Greater Manchester, 5 children were placed elsewhere in the region. 94% are placed within 20 miles of home. 19 are placed in neighbouring authorities. The average placement cost is £384pw.
- 2.3 Independent Fostering Agency (IFA). These are externally approved carers who are approved by IFAs and commissioned by Trafford to care for children we are not able to place in house. These carers may be living in the Trafford area. Total placements **45**: including 3 in placements supported by Complex Needs team.
- 2.4 We have limited in house fostering capacity for brothers and sisters at present. This was an issue for us prior to Covid19 especially for brother/sister groups over 2/3 but it has been further exacerbated as a result of Covid19. Our fostering recruitment strategy focuses attention on recruiting carers for siblings as well as older children and carers from BAME communities.

2.8 24 young people age 18+ remain living with their former foster carers under Staying Put arrangements. These carers are approved and supported through the Staying Put team with a Staying Put allowance and support visits enabling young people to remain in family based care.

## 3.0 Covid19 Risk Assessments

3.1 Across the service we assessed all of our children/young people receiving a service and their carers in terms of the support that they would need from us. This was particularly important in the first lockdown when the 'norm' was for contact/visits to take place virtually where safe and appropriate. This is no longer the case in the current lockdown as the 'norm' is face to face visits where safe. The Fostering Service uses a RAG Rating Risk Assessment [red/amber/green] in respect of how individual Foster Carers are affected by Covid19 to inform decision-making related to the level and frequency of support required by the Supervising Social Worker.

Where it is safe to do so, face to face visits continue to take place within the parameters set by the Covid19 guidelines determined by the Government through the Department for Education guidance to Local Authorities. Where the risk of face to face visits is deemed too high, virtual visits take place. A review of placement capacity is updated on a weekly basis. Where there is anyone in a household classed as 'extremely clinically vulnerable', they are given a RAG Rating of red. This results in additional contact and support being provided by the Supervising Social Worker bespoke to the needs of the children and carers.

There are a total number of **31** General Foster Carers rated 'red' and **43** foster carer households where at least one carer is over the age of sixty. Of these there are **23** (27%) general carer households in which at least one carer is over 60. We have one general carer who is over 70. There are **20** (30%) Connected Carer households with at least one carer over 60 and there are 4 with at least one carer over 70. The average age of our general carers is **54** and of Connected Carers **52**.

Work across social work teams, Virtual School and the fostering service identified 14 households (12 Connected carers and 2 General carers) including 28 children requiring wraparound support as a result of carer anxiety or vulnerable health needs in relation to Covid19. The service has used Placement Support meetings to coordinate support for these children and families.

#### 4.0 Training

- 4.1 We have adapted our training offer during Covid19. There are a number of minimum requirements for all foster carers to complete prior to approval. Following approval all carers are required to complete Mandatory Training. Training has continued using virtual group training methods during Covid19 and we have continued to offer our online courses which were already established. Some foster carers have found this helpful as it reduces travelling time but others have missed the opportunity to meet in person with carers.
- 4.2 Given the particular pressures and worries that foster carers are managing these unprecedented circumstances and as they continue to care for Trafford's looked after population during a time when both children and young people are trying hard to adjust and maintain relationships, there has been a particular focus on providing training opportunities that build resilience and specialist training to improve carers'

understanding of emotional regulation, resilience and trauma informed practice has been the focus of our recent programme. CAMHS and the service, have adapted our long term training programmes; Nurturing Attachments and KEEP for a virtual platform and these have been well received.

- 4.3 PACE (Playfulness, Acceptance, Curiosity, Empathy) is our foundation for therapeutic parenting and communication and during the autumn 2020 the CAMHS CLA service ran a series of training sessions for carers to reinforce this approach. In response to an identified increase in concerns about the emotional wellbeing of our children and young people the quarterly Children in Care service workshop focused on strengthening confidence and competence in using a PACE approach. This was attended by around 60 practitioners from across the children in care service and has been followed up with a further 2 virtual sessions to further embed and develop the PACE approach.
- 4.4 In our annual foster carer survey in January 2021 100% of carers completing the survey said they felt that training and support they had received had helped them to work positively with children and young people and manage difficult situations well.

## 5.0 Supervision

Foster carer supervision is a key intervention to support, supervise and develop our foster carers' practice. Formal supervision should take place at least 6 weekly unless agreed by the team leader that less frequent supervisions are more appropriate. For these carers supervision should take place at least 3 monthly.

From November 2020 we have amended our case note recording to differentiate between virtual and face to face supervision. We want supervision to take place face to face where possible and so virtual supervision requires agreement of the team leader.

In some fostering households where carers (often male partners) previously worked away from the home environment, there has been increased involvement of these jointly approved carers in supervision visits and review meetings.

Through developing improved performance reporting we can see that only 50% of our foster carers have had supervision recorded on their case file in the last 6 weeks. Improving the timeliness and quality of supervision is a priority for development.

In response to carer concerns about visits by professionals to their household we have provided each carer with a payment towards the cost of PPE they can use during these visits.

# 6.0 Staffing

6.1 Capacity in the Family Placement Service was impacted last year as a result of sickness and delays in recruitment of suitable agency social workers to cover sickness and vacancies. Some sickness was as a result of Covid19 and the lack of suitable agency applicants is likely impacted by Covid19 which impacted on how quickly we were able to recruit to cover these vacancies. When leadership capacity was reduced, a team leader was seconded from another team to support the service. Staffing on the team has significant improved in recent months and the team has 1

remaining permanent vacancy which has been recruited to and will be filled by May 2021.

6.2 The impact that this has had has been that the number of mainstream foster carers that we have recruited has been limited. Feedback that we received from foster carers highlighted that on occasions when supervising social workers have been on sick leave they did not find it helpful to be contacted by different 'duty' workers who did now know them. In response to this if a supervising social worker is going to be absent for more than 2 weeks an alternative supervising social worker is allocated to support that carer. This provides a consistent point of contact underpinned by a more relational approach.

# 7.0 Placement stability

Across all children in care placement stability has improved during the pandemic however our aspiration is to continue to improve this further by strengthening permanence planning, support and sufficiency. 1 April 2020 65% of under 16s who had been looked after for over 2.5 years had been in their latest placement for over 2 years, 1 March 2021 this has increased to 72% of this cohort who had been in their latest placement for over 2 years. In total, 35 young people have had 3+ placements in the last 12 months – 6.9% of the current cohort and those that have left care in the period. This is slightly lower than the proportion seen at the same point last year.

28 (5.8% of the relevant cohort) have had 3+ placements this reporting year.

Both these measures compare well to regional and national data.

### 8.0 Foster carer feedback.

Foster carer feedback is heard dynamically throughout the year through supervision visits, support groups and meetings and more formally through the regular foster carer forum (Have Your Say Forum) foster carer annual reviews and the annual survey. A You Said We Did log is shared annually with the survey. We also have foster carer representatives who sit on the Corporate Parenting Board. In addition we are also engaged in the region with a piece of work to look at our recruitment, retention and utilisation of foster carers which includes specific consultation with foster carers.

8.1 Foster carer administrators of the Trafford Foster Carer Facebook group worked with us to develop 2 surveys undertaken during the early months of the pandemic to collate feedback and learning and help shape our service response. The results of these were used in particular to shape the content, style and approach used in the bulletin and in planning our training programme. We followed particular interest from carers in Zoom training, support groups and learning together from peers through shared experienced.

Our annual survey closed in January 2021 and so gives us a useful over view of carer feedback during the pandemic. The response rate (26 returns) was lower than we would want. Foster carers are an important part of our team around each young person and 80% reported that they felt they were treated as a professional in this team and 85% said they felt the support the fostering service gives them helps them to build strong relationships with the child(ren). Areas for improvement were included

work to improve communication with children's social workers, work to improve support for birth children in fostering families, to improve information sharing when children are first placed and when carers are first approved.

8.2 A review of the foster carer feedback provided at their annual reviews between October and December 2020 identified mixed experiences and that some foster carers had experienced positive support from the service with weekly telephone/video calls and prompt responses to queries or concerns. However for some they reported inconsistent support from the service as a result of changes of supervising and the child(rens) social workers or gaps in support when staff were on sick leave. Some foster carers said they missed face to face training and others preferred virtual training finding it easier to combine with childcare.

Listening and engaging with our foster carers will enable us to build a responsive partnership. We will continue to review and collate learning from our foster carers' review reports. Following discussion with carers at a recent Have Your Say Forum we will pilot themed, short, punchy survey snapshot on a monthly basis sense check on a range of issues starting in April 2021.

## 9.0 Recruitment and Sufficiency

- 9.1 There have been delays in the allocations of some fostering assessments due to Covid19 initially as a result of assessment capacity in the service and our prioritisation of supervision and support for existing carers as well as delays in the return of some statutory checks and medicals. This was mitigated somewhat by commissioning external assessors to complete assessments however these have also been impacted by delays in statutory checks. We have approved 7 new fostering households since 1 April 2020 which is significantly lower when compared to the last three years- April 17 to March 2020) where 17, 18 and 17. Some of this is due to impact of Covid19, alongside vacancies in the team and an increase in Connected Carer assessments to complete. However we do have a number of further assessments underway which we hope to present to Fostering Panel by the end of the year which will lift this slightly but it does remain lower than previous years. Commissioned assessments recently began to be managed through a Monthly Contract Monitoring Meeting with the provider. Key Performance Indicators will provide a basis on which to report on a quarterly basis and monitor compliance and quality against cost. A new fostering recruitment clinic will track all assessment activity.
- 9.2 Whilst we need to increase the number of in-house foster carers we also need a focus on retention planning as only 7 new foster carer households were approved this year to date, but there have been 10 foster carer households deregistered during the period, resulting in a net decrease.
- 9.3 Recruitment activity has continued despite Covid19 and we have refreshed our fostering recruitment strategy informed by an analysis of need and sufficiency and have partnered with a digital marketing agency to use data intelligence and focused social media communications to improve our communications. This will include an approach to reach potential carers who may be open to new career pathways as a result of Covid19.
- 9.4 A new partnership across Greater Manchester Local Authorities is developing a fostering community of practice with 3 work streams on recruitment, retention and utilisation. This work will bring a collective approach to improving the efficiency of our recruitment activity along with maximising our use of our existing foster carers. Part of

this will include work to increase capacity through extending foster carer accommodation so that our skilled, experienced foster carers can care for more children.

9.5 Recruitment has been significantly hindered by the fact that many GPs are currently prioritising other Covid19 related / impacted work over these medical reports. This has caused delay in 11 cases where consideration at Fostering Panel has not been able to take place in the agreed timescale. We have taken steps to write to GP's advising them of the national guidance that this work should still be prioritised, much of this delay had built up before national guidance was issued.

The Fostering and Adoption Service Manager has been working closely with colleagues in the NHS including the Named GP for Safeguarding Children/CCG Clinical Advisor and the Designated Nurse for Safeguarding Children and Children in Care. A collaborative approach has been taken to addressing this matter:

The Named GP for Trafford is informed where there has been a refusal/delay and will contact the relevant GP and the GM Named GP to directly to urge completion of Medicals.

Applicants are provided with a letter for their GP outlining the statutory requirement and the impact on delaying the placement of some of our most vulnerable children and young people. This has been signed by the Directors from both Children's Services and the NHS, and has been included in all Induction Packs for prospective Foster Carers so that they can present this to their GP.

The Director for the NHS distributes reminders via a regular bulletin that is sent to all GP's relating to this requirement.

The Fostering Service is currently exploring alternative approaches to complete medicals [for example, commissioning a private GP or pharmacy] having taken advice from Foster Talks Practice Support Consultant.

9.6 The table below denotes the gross number of placements available in the Fostering Service for each month over a four month period and the number of vacancies during the same month. This is overall a lower percentage rate of vacancies than over the last three years where the vacancies have ranged between 15%-28%.

Placements / vacancies	Aug 2020	Sep 2020	Oct 2020	Nov 2020
Total Number of Placements	107	102	101	95
Number of Vacancies Available	12 (11%)	13 (12%)	10 (10%)	12 (13%)
Total	119	115	111	107

Capacity is affected by some carers being understandably apprehensive about taking new placements during Covid19 and therefore making a choice not to provide placements at this time. Some carers have complex health needs and have chosen not to take new children into their homes.

Please see below regarding 'Foster Carer Support' for details of how Foster Carers are being helped and supported with this. Some placements are not available as due

to matching considerations or as a result of the profile of the children they have in placement e.g. they may have a large bedroom that can be shared by siblings but have only 1 child placed.

In February 2021 we were able to allocate Coronavirus vaccines to support foster carers with capacity to care for new additional children and who were caring for children where there was a higher risk of Covid19 being brought into the household.

## 10.0 Fostering Panel

Fostering Panel has continued to take place with quoracy of six members during Covid19. Capacity has been impacted by the move to this virtual format however and this has slowed some review and assessment activity. Two new members have been recruited by the Service Manager since August 2020, a Care Leaver who is a journalist and a black male who is an experienced Foster Carer, to extend the diversity of membership. Recruitment on this basis is ongoing and has been progressed well despite Covid19.

## 11.0 Retention and sense of community

- 11.1 Trafford's Foster Carers continue to do an amazing job despite the challenges currently faced. The Fostering Service views providing the support that they tell us is needed as critical. There are a number of Forums, communications that help this to be provided
- 11.2 We have increased the frequency during of the foster carer bulletin during COVID to build a sense of fostering community. It includes key training information, signposting to community and multi-agency support, contact information and details of Supervising Social Worker absence. If a Supervising Social Worker is absent for more than two weeks, cases are temporarily re-allocated and this information is also provided.

Shout Outs about good practice and going the extra mile in working with children and young people are included.

## 11.3 Foster Carer Support Group

These monthly virtual support groups provide an opportunity to meet other Foster Carers and for peer support. The impact of COVID has been to move these from a face to virtual format.

Presentations of various subjects and issues are delivered by area experts such as Public Health, the Virtual School and the Care Leavers Forum.

### 11.4 Have Your Say Forum

This is a more formal service engagement meeting of Foster Carers with a regular/named Chair Person which has been reshaped during COVID as a virtual meeting. Senior Management and the Senior Leadership Team regularly attend to directly engage with Foster Carers to update on engage on developments, service issues, share information, respond to concerns raised and/or answer questions. Where Foster Carers highlight specific needs to assist them within their role. At a

recent meeting the cost of extra PPE needed for visits by various professionals. In response each Foster Carer was given a one off payment of £15 to cover this.

### 11.5 Public Health Presentation

A presentation was delivered by Public Health in November 202 to foster carers and an update has been scheduled for March 2021. A representative from Public Health will meet with Foster Carers to talk with them about Coronavirus. This will focus on clarifying the facts and 'myth busting'. Foster Carers will be able to ask questions and should leave with a better understanding. It is hoped that this will encourage those carers not currently taking placements to be able to reconsider on a better informed basis.

## 12.0 Conclusion

Through the Covid19 pandemic the service has maintained stability across placements for the majority of our children in care. We have seen recent increases in IFA placements and this relates to a particular lack of capacity for fosters for sibling groups, but have been able to reduce the numbers of children living in external residential care and unregulated provision.

Reduced face to face contact with our foster carers as a result of Covid19 both as a result of moving training and meetings to virtual platforms and also due to some supervision visits taking place virtually, presents both opportunities and risks. Working from home has increased the presence during the day in fostering households of some partners who would previously have worked away from home. Some carers report virtual communication is easier to manage alongside childcare and more male carers have engaged in meetings who would previously have been out at work elsewhere.

Fostering recruitment, supervision and training has been impacted by Covid19 and this presents a risk in the immediate and longer term in terms of sufficiency although we have taken action to mitigate against this risk where we can, some risks remain regarding delays in statutory checks and medical reports that are provided by partners. Our focus will be to improve our fostering recruitment, retention and utilisation.

### Next steps

- Launch refreshed fostering recruitment strategy. To be presented to SLT on 23 March 2021.
- PACE training to continue to be delivered to all practitioners in the Children in Care service through March 2021 following PACE training for foster carers in autumn 2020 to embed this whole service approach to connect before correction and use empathy and understanding to support change. March 2021.

- We will refresh the service plan with learning from the foster carer survey. April 2021.
- We will launch our new LCS electronic end to end fostering functionality and develop a performance dashboard to improve performance management of the key functions in the service. April 2021.
- We will identify a solution to address the risk of ongoing delays in medical reports to inform fostering approvals. April 2021.
- We will launch the Trafford Sufficiency Strategy to achieve a clear direction to further improve sufficiency. April 2021.
- We will progress GM Fostering Strategy on recruitment, retention and utilisation. Initial self-assessment, engagement sessions and data set completed. Plan to be in place by May 2021.
- A review of the fostering service and the wider service redesign has provided an
  opportunity to modernise the service and align protected resource to the functions of
  supervision, recruitment and assessment. Reshaping of the service will take place
  during the next 6 months to protect functions of supervision and assessment.
  September 2021.
- Supported by Organisational Development we will continue work to redefine the culture of the service to achieve high challenge along with high support. September 2021.

Contact person for access to background papers and further information:

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