

# COVID-19: GUIDANCE FOR FOSTER CARE AND SUPPORTED LODGINGS SETTINGS IN NORTHERN IRELAND

Version 4.0

Version Control

Version	Date	Summary of changes
1.0	01 April 2020	Document issued
1.1	27 April 2020	<p>Amendments to:</p> <p>Para 4 – new - COVID-19 111 telephone number added</p> <p>Para 10 – revised – Schedule 5 to the Children (Northern Ireland) Order 1995 re exemptions to fostering limits</p> <p>Para 11 &amp; 16 – revised – wording staying at home added</p> <p>Para 13 – revised – references to the Children’s Social Care (Coronavirus) (Temporary Modification of Children’s Social Care) Regulations (Northern Ireland) 2020 and accompanying guidance added</p> <p>Para 14 – revised – details of time extensions for emergency/ immediate foster placements added</p> <p>Para 19 – new – children and young people leaving home to attend school added</p> <p>Para 20 - 21 – new – sharing age-appropriate COVID-19 prevention guidance with children added</p> <p>Para 22 – revised – details of PHA’s dedicated point of contact for children’s and young person’s services added</p> <p>Para 24 – new – COVID-19 symptoms added</p> <p>Para 28 – revised - procedure to follow if a child or young person has symptoms of COVID-19 added</p> <p>Para 30 – revised – reference to other potential option for the transfer of child/ young person to single accommodation unit with outreach support removed</p> <p>Para 32 - 33 – new – testing for COVID-19</p> <p>Para 34 - 39 – new – cleaning and laundry</p> <p>Para 40 - revised – attendance at school for children with SEN</p> <p>Para 45 – new – guidance from Playboard NI ‘Coronavirus – Play matters more than it did’</p>

Version	Date	Summary of changes
		<p>Para 47 – new – physical activity</p> <p>Para 50 - new – mental health needs of children and young people added</p> <p>Para 51 – new – range of online resources to support children and young people</p> <p>Annex A – Kinship Care (Standards 1, 3, 4 and 5) – references to named social media channels/ video conferencing services replaced with generic reference to tele/video conferencing</p> <p>Annex A – Supported Living (Standard 6) – references to named social media channels/ video conferencing services replaced with generic reference to tele/video conferencing</p> <p>Annex B – para 1 – educational support and attendance at school for vulnerable pupils revised</p> <p>Annex C – new – contact numbers for support organisations added</p>
2.0	07 May 2020	Revised version issued
2.1	13 May 2020	<p>Amendments to:</p> <p>Annex C – revised – email address for Action for Children amended to reflect NI Office</p>
3.0	13 May 2020	Revised version issued
3.1	24 June 2020	<p>Amendments to:</p> <p>Para 11 – revised – wording updated to reflect latest public health advice on contact and visits for children with a disability</p> <p>Para 16 – new – approval of prospective foster carers added</p> <p>Para 18 – new – NI Executive’s, DOH and HSC Trusts approaches to easing lockdown restrictions added</p> <p>Para 19-20 – revised – wording updated to reflect latest public health advice on contact and visits</p> <p>Para 22 – revised – wording updated to reflect latest public health advice regarding the easing of lockdown restrictions and wording clarified for school attendance for vulnerable children</p> <p>Para 23 -24 – revised –references to guidance on Infection Prevention and Control added</p>

Version	Date	Summary of changes
		<p>Para 25 – revised - details of PHA’s dedicated point for public health advice for not for profit fostering providers added</p> <p>Para 27, 28 &amp; 31 – revised – wording updated to reflect latest public health advice on common symptoms</p> <p>Para 29 – revised – reference to PPE added</p> <p>Para 34 – revised – details of PHA’s dedicated point for public health advice for not for profit fostering providers added</p> <p>Para 37 – revised reference to towels used for hand drying added</p> <p>Para 50 – revised – wording updated to reflect enhancements to fostering allowances</p> <p>Para 54 – new – range of supports from PHA and Health and Social Care organisations to support mental health during lockdown added</p> <p>Para 56 – revised – wording updated to reflect record of decision making process where actions are taken in relation to relaxation of the minimum care standards</p> <p>Para 57 – removed as RQIA inspection programme has resumed.</p>
4.0	24 June 2020	Revised version issued

### **COVID-19: Key messages for providers of foster care and supported lodgings in Northern Ireland**

- **Protecting and maintaining current placements** must be a priority for Health and Social Care Trusts and independent/not for profit fostering providers.
- **Regular communication** with foster carers and host families is critical to maintaining placements and supporting them and the children and young people they care for.
- **Preparation and coordination is key** to ensuring there is as much capacity to provide foster care and supported lodging placements as possible. Providers should work in partnership to explore options to increase capacity where possible.
- **The PHA has provided** a dedicated point of contact for children and young people's services to provide detailed advice on health issues and infection prevention and control, this may be accessed through the relevant Trust Assistant Director or direct by the independent/not for profit fostering provider.
- **You are advised** to check the PHA and DOH websites regularly for new and/or updated guidance on COVID-19. These websites are the main source of public health advice.

1. This guidance sets out key messages to support planning to prevent the widespread transmission of COVID-19. The information and advice it provides has been developed in consultation with a number of representative bodies, and the guidance may be updated to reflect the changing situation.
2. The guidance applies to foster care and supported lodging settings. The guidance is aimed at Health and Social Care (HSC) Trusts, independent/not for profit fostering providers, foster carers (this includes kinship carers and those involved in the Going the Extra Mile (GEM) Scheme) and their families, and providers of supported lodgings and host families, and should be used in

conjunction with any advice already issued by HSC Trusts or independent providers to their hosts.

3. As far as possible every effort should be made to ensure that services continue to be provided during the COVID-19 pandemic. It is essential that a collective leadership approach is adopted with effective multi-agency collaborative working, where necessary.
4. The guidance is in line with, and should be read in conjunction with, advice from the Public Health Agency (PHA) available at:  
<https://www.publichealth.hscni.net/covid-19-coronavirus>. For **general advice** on COVID-19 call **111**.

### **Communication**

5. Good communication with foster carers, providers of supported lodgings and host families is particularly important at this time. HSC Trusts, independent/not-for-profit fostering agencies and supported lodgings providers must ensure that they maintain regular contact with foster carers and host families, and ensure that families know where to get up-to-date information about issues that may affect them. The PHA website is a good source of information about the COVID-19 pandemic and steps that should be taken to prevent the spread of infection. Supported lodgings providers and agencies providing fostering services should also ensure that their own websites and social media pages are updated regularly.

### **Capacity**

6. Providers should ensure that details of foster carers and host families are up to date, and should provide the Regional Emergency Social Work Service with daily updates on the availability of emergency foster carers.
7. A number of steps have already been taken to ensure that contingency arrangements are in place. Supervising social workers and independent providers have been working with foster carers and hosts to identify what alternative arrangements could be made with family and friends for looked after

children should the carers become ill, and it is important that these plans are updated on an ongoing basis. Where such alternative arrangements are not possible, HSC Trust Family Placement Teams and independent providers should prepare contingency plans to provide additional support to carers and hosts.

8. The welfare of children and young people must remain of paramount importance. However, during the peak of the COVID-19 pandemic new admissions to care are likely to take place only in cases of extreme need. HSC Trusts should work with families, and partners in the community and voluntary sector, to explore all possible alternatives consistent with safeguarding the child and promoting his or her welfare.
9. In a period of surge, it may be necessary to limit new foster care and supported lodgings placements to those children and young people who are assessed as being in priority groups and for whom all other alternative arrangements have been explored and ruled out. For 16+ services and services for care leavers, available resources will be targeted at those young people with high support needs.
10. All providers are encouraged to think creatively about how they can meet any additional demand, in line with their own contingency plans. Schedule 5 to the Children (Northern Ireland) Order 1995 currently allows for some flexibility in placing multiple children together by allowing authorities to grant exemptions to the usual fostering limit in specific placements. Consideration should be given, for example, to whether existing fostering households may have the capacity and willingness to offer new or additional placements, including for short breaks or for emergency placements; or whether foster carers who have recently stopped fostering as a result of personal or environmental factors, such as work pressures or retirement, could come back into the service temporarily. It may also be possible as a result of business closure decisions arising out of the COVID-19 pandemic.
11. Given the NI Executive's latest advice around staying at home and social distancing (see paragraph 22 below), short breaks for fostering households may

cease or be reduced, unless in cases where the stability and continuity of the placement is at risk. It is recognised, however, that children with a disability and their families face particular stresses during this period. Support services to this group of children remains essential in preventing a family breakdown and additional arrangements should be considered to provide more face to face contact support based on a risk assessment. Advice should be sought from the PHA in order to introduce and maintain social distancing principles for this vulnerable group which is also consistent with safe practice for staff and service users.

12. Individuals who currently provide short breaks have valuable skills that could be put to use elsewhere in the system given the current demands on capacity, either as additional support for foster families, or as emergency carers for example. Providers should consider how they can draw upon the experience and skills of short break carers when looking at how they can continue to best support children and their foster families.
13. The DOH has developed additional guidance on relaxation of some minimum standards to provide greater flexibility to providers at this time. This guidance is provided at the attached Annex A.
14. In addition to the arrangements for relaxation of minimum care standards which apply to kinship care fostering and supported lodgings settings detailed in the attached Annex A, the DOH has made legislation, "[The Children's Social Care \(Coronavirus\) \(Temporary Modification of Children's Social Care\) Regulations \(Northern Ireland\) 2020](#)", which modifies relevant children's social care Regulations. These Regulations are intended to be in place for a period of 6 months but may be revoked at an earlier stage if possible. [Guidance](#) to accompany the legislative modifications has been published on the [DOH website](#).
15. To enable quicker approvals of foster placements and provide greater flexibility to HSC Trusts in seeking to place a child, the time limit for emergency foster placements with approved foster carers has been extended to **14 days** (rather

than 24 hours as is normally the case), and the time for which an immediate placement may be made before the placement is required to be fully approved has been extended to **20 weeks** (rather than 12 weeks as is normally the case). This is intended to provide additional time to make a decision about a placement before a child is moved and to provide HSC Trusts with additional time to get approvals in place, if additional time is required.

16. In order to build capacity within fostering services in case of additional demand and to minimise delays to the approval of foster carers, HSC Trusts and independent/not for profit fostering providers can approve foster carers in advance of a foster carer's medical and full enhanced disclosure certificate being received. Where there is an absence of a full medical, approval should only be given in extenuating circumstances. The HSC Trust or independent/not for profit fostering provider must have received confirmation from an enhanced criminal record check that the individual or any adult members of their household are not included in the Children's Barred List held under the Safeguarding Vulnerable Groups (Northern Ireland) Order 2007. However, upon receipt, if either the medical report or enhanced disclosure certificate are unsatisfactory, the HSC Trust or independent/not for profit fostering provider reserves the right to change their approval decision.
  
17. Where necessary, the use of assessed prospective adoptive carers and experienced childminders will be considered to provide support in the event of a shortage of foster placements.

### **Easing of restrictions – general**

18. On 12 May 2020, the NI Executive announced a [5 Step Plan and Approach to Decision Making](#) towards easing lockdown restrictions. Based on medical and scientific advice and the prevailing local circumstances of the pandemic, the NI Executive have announced a series of relaxations to lockdown since that date. It is therefore important to check the PHA and DOH websites regularly to ensure the correct advice is being adhered to. In addition on 9 June 2020, the Health Minister published a [Strategic Framework for Rebuilding Health and Social](#)



[Care Services](#). Aligned to this HSC Trusts have published their individual [Rebuilding Plans Phase 1](#) which outline their aim to return to usual services. The content of this guidance will therefore eventually be replaced by the resumption of normal services.

### **Contact arrangements**

19. In light of the advice around staying at home and social distancing, all regular face-to-face contact between family members living in different households should be in accordance with latest public health advice in order to prevent the spread of infection. During the period of ongoing restrictions it will be important to find ways of ensuring that children and young people can remain in contact with their families and friends, as appropriate, for example through daily or regular phone calls, video chats, the use of social media platforms or other means as permitted.
  
20. Face-to-face contact should only take place in accordance with public health advice. Visits by family members and others should be managed in a way that is safe, taking account of social distancing and hygiene measures and children should be supported to manage this according to their specific needs. If further advice is required around the safe facilitation of visits by family members and others, the foster child's appointed social worker or nominated lead within the independent/not for profit providers should contact the Trust Designated Nurse (and/or other appointed individual) in the first instance, who may in turn seek advice from the PHA's dedicated point of contact for children and young people services. Good communication between social workers, the child or young person's family, foster carers and host families will be essential to ensure that contact is maintained as much as possible and that alternative arrangements are agreed by all parties.
  
21. Contact arrangements should be reviewed by the responsible social worker on a weekly basis. Where there are issues with contact which cannot be mutually agreed, HSC Trusts should seek clinical and legal advice.

## Current public health advice

22. NI Executive advice for all households—including foster families and supported lodgings—is to stay at home. You should only leave the house for limited purposes, including:

- shopping
- exercise
- any medical need, including to donate blood, avoid or escape risk of injury or harm, or to provide care or to help a vulnerable person
- travelling for work purposes, but only where you cannot work from home
- attending a drive-in concert, theatre or cinema
- attending a place of worship, funeral or outdoor wedding
- taking children to school, childcare or to meet a parent.

Groups of limited people who do not share a household can meet:

- outdoors, whilst maintaining social distancing at least 2 meters apart, in a garden, park or outside space; and
- indoors, whilst maintaining social distancing at least 2 meters apart, along with other mitigations such as
  - limiting the duration of the visit
  - ensuring good ventilation
  - maintaining good hand hygiene
  - wearing a face covering is advised to protect others.

Visits should be kept short where possible and overnight stays are not permitted. Meeting friends and family indoors carries a higher risk than meeting outdoors. If possible you should continue to arrange meetings with family and friends outdoors. **The PHA website should be checked for the latest information and advice on meeting in these circumstances.**

In addition, those that live alone are permitted to visit one other household indoors to form a small support unit (a 'bubble'). The bubble would therefore contain two households forming a single unit, that is the person living on their own and members of the other household, where social distancing between them would no longer be required. This enables the person who lives alone to

visit, stay over and spend more time with the second household. The second household can be of any size. To contain the risk of spreading the virus, a household cannot be part of more than one bubble. They should maintain social distancing from people outside of their bubble. If anyone within your bubble develops symptoms, all members of the bubble should self-isolate. Particular care needs to be taken if any member is regarded as a vulnerable person in terms of the virus.

Arrangements will be made for people who are in the shielding group to also form a bubble with another household. In addition, they will be able to meet with a limited number of people outside of their home, whilst maintaining social distancing at least 2 meters apart. **The PHA website should be checked for the latest information and advice on meeting in these circumstances.**

In addition, for children and young people in foster care, they may leave their home to attend school or to attend childcare where it has been agreed it is in their best interests to do so – see paras 42 to 48 and Annex B for further detail on access to schools.

If members of the household go out, they should:

- observe social distancing rules, that is, stay 2 meters (6ft) away from other people at all times
- avoid touching their face and wash their hands as soon as they get home.

They may also wish to consider the use of face coverings for short periods in enclosed spaces, where social distancing is not possible. Hands should be washed after removing a face covering.

23. Everyone in the household should practice good personal hygiene to minimise the risk of infection or to prevent further spread. If you cough or sneeze, use a tissue to cover your mouth and nose, dispose of it carefully after use, and wash your hands. Washing your hands regularly, for at least 20 seconds, can help to prevent the spread of infection. More information is available on the [PHA](#)

[website or in the Regional Infection Prevention and Control Manual](#). Carers can help children understand why any of the measures put in place to minimise the spread of infection are necessary. They may want to use age and developmentally appropriate ways to encourage children to follow social distancing, hand washing and other guidance, including through games, songs and stories, visual supports and videos.

24. This will help children understand the pandemic and support them through the period of the pandemic. Further guidance is available through [the Infection Prevention and Control – best practice advice for nurseries and childcare settings](#).
25. For detailed advice on health issues and infection control, the PHA's dedicated point of contact for children and young people's services is Deirdre Webb, Assistant Director of Public Health Nursing ([deirdre.webb@hscni.net](mailto:deirdre.webb@hscni.net), tel: 07920 186497) and she may be contacted by the relevant Trust Assistant Director or nominated lead within the independent/not for profit fostering providers. Each HSC Trust Family Placement Services will establish a link with their health/nursing colleagues to enable prompt access to advice and guidance where concerns/queries arise regarding COVID-19. In addition, the PHA duty room contact number is 0300 555 0119.
26. The Northern Ireland Social Care Council (NISCC) has published a [free online resource on infection control](#). Although developed to support social care workers, families and young people may also find it helpful.
27. The most common symptoms of COVID-19 are a high temperature and/or a new and continuous cough, even if it is mild, or a loss of or change in sense of smell or taste. For most people COVID-19 will be a mild infection, however in some people it can lead to severe pneumonia, shortness of breath and breathing difficulties. Those who may be at higher risk of severe disease include:
  - Over 70s

- Those with underlying chronic health conditions, including those who are entitled to receive the seasonal flu vaccine from their GP
- Pregnant women

Anyone in any of these groups should follow [advice provided by the PHA](#) and their own healthcare professionals.

28. If any family member develops a new, continuous cough and/ or a high temperature, or a loss of or change in sense of smell or taste, [PHA guidance](#) should be followed.
29. Foster carers and host families should contact their appointed social worker to advise them if a family member is unwell or is self-isolating, and request personal protective equipment (PPE), if needed.
30. Where anyone living in the foster home or host family has symptoms of COVID-19, no further placements should be made until medical advice indicates that placement can be resumed. HSC Trust Family Placement Services should seek advice from the PHA, through the relevant Trust Assistant Director, in line with the arrangements described at paragraph 25 above.

### **What to do if a child/ young person has symptoms of COVID-19**

31. Where a child in foster care, or young person living with a host family in a supported lodging, has symptoms of COVID-19 (ie. becomes unwell with a new, continuous cough and/or a high temperature, or a loss of or change in sense of smell or taste), [PHA guidance](#) should be followed. The child or young person SHOULD NOT visit their GP, pharmacy, minor injuries unit or a hospital. For medical advice, please ring the GP or GP out of hours. Call 999 if a child or young person is seriously ill or injured or their life is at risk and ensure the emergency services are made aware the person has symptoms of COVID-19. The child or young person's social worker should also be informed. The [PHA website](#) also includes advice for individuals, their families and informal carers about what they should do to maintain support in their own homes and keep themselves as safe as possible, if they are advised to isolate themselves.

32. Children and young people who are required to self-isolate should be supported by their foster carers or host families to do so. Where a child/ young person refuses to self-isolate, the foster carer or host family should contact their social worker.
33. Additional support will be made available where necessary to educate children/ young people about the importance of self-isolation for their own and others' safety. Where necessary, HSC Trusts will arrange additional support from the HSC Trust's Therapeutic Teams for Looked after Children and will explore any additional support (including sufficient meaningful activities and therapeutic interactions) that may be required to help children and young people at this difficult time.
34. Specific legal powers are in place which may be exercised in relation to the protection of public health and potentially infectious persons. However, utilising these powers in relation to children and young people will be a measure of last resort, and will only be taken where all other possible options have been tried and the child or young person continues to refuse to self-isolate

### **Testing for COVID-19**

35. If a child/ young person in foster care or supported lodgings displays symptoms of COVID-19, the foster carers and host families should contact their appointed social worker immediately to advise them. The Trust will advise, in consultation with PHA, whether it is appropriate for testing for the child/ young person, carers and household members to be carried out and will also advise on the arrangements to do so should this be necessary. If a foster carer approaches an independent/not for profit fostering provider direct, they may obtain advice from the PHA on their behalf and should also advise the placing Trust of the situation.

## **Cleaning and laundry**

36. Usual household products, for example detergents and bleach, should be used as these will be very effective at getting rid of the virus on surfaces.
37. Clean frequently touched surfaces often, such as door handles and handrails. Towels used for hand-drying should be regularly changed. Personal waste (for example used tissues) and disposable cleaning cloths can be stored securely within disposable rubbish bags.
38. If cleaning an area where an individual with suspected or confirmed COVID-19 has been, personal waste and disposable cleaning cloths etc. should be placed into a rubbish bag, and then placed inside another bag (i.e. double bagged), tied securely and kept separate from other waste in a secure location. This should be put aside for at least 72 hours before being put in the usual household waste bin which can be disposed of as normal.
39. Dirty laundry should not be shaken. This will minimise the possibility of dispersing virus through the air. Items should be washed as appropriate in accordance with the manufacturer's instructions. Dirty laundry that has been in contact with an ill person can be washed with other items. Items heavily soiled with body fluids, such as vomit or diarrhoea, or items that cannot be washed, should be disposed of, with the owner's consent.
40. Wash items as appropriate, in accordance with the manufacturer's instructions. Use the warmest water setting and dry items completely. If providers do not provide support with laundry, they should provide laundry advice to young people, in line with this guidance.
41. Clean and disinfect anything used for transporting laundry with your usual products, in line with the cleaning guidance above.

## **Education**

42. Some schools are currently open for vulnerable children and children of key workers, including children with a statement of special educational needs.

Children in foster care should be facilitated to continue to attend school where it is in their best interests and safe and appropriate to do so. Further information on the key principles underpinning the educational support of vulnerable pupils known to social services is provided at Annex B. Details of schools which are open will be updated regularly on the Education Authority website.

43. The Department of Education has published [guidance](#) which defines vulnerable children. The definition includes children receiving support from social services and looked after children, including those in foster care or in supported lodgings. Schools will work in partnership with parents and carers to ensure that, in making decisions about whether a child in foster care or in supported lodgings should attend school, the best interests of children take precedence. If you have any concerns about whether the child/young person you care for should attend school during this time, you should discuss these with your school or social worker.
44. Where children and young people are not attending school, they should be supported to maintain their education at home by availing of home packs and online schooling opportunities as much as possible. Schools will have assisted to put these arrangements in place.
45. The Education Authority has established a helpline, open to all foster carers, to provide support for learning. The Helpline number is 028 7051 1086 and will be operational from 8.00am to 5.00pm Monday to Thursday and 8.00am to 4.00pm Fridays. Alternatively, email queries can be addressed to [Lookedafterchildren@eani.org.uk](mailto:Lookedafterchildren@eani.org.uk).
46. Foster Carers can also access `Putting Care into Education` through the following link <http://www.education-ni.gov.uk/publications/looked-after-children>  
The purpose of the resource booklet is to give school staff an insight into how early relational trauma affects child development, why school can be challenging for care experienced children and how to help to improve the education of all children by paying attention to the needs of the most vulnerable.



Although this booklet focuses on the school environment, the information is equally relevant to home schooling.

47. Playboard NI in cooperation with the Department of Education's Play Matters Programme have produced guidance '[Coronavirus – Play Matters more than it did](#)' to assist teachers, playworkers, parents and those offering care to children in these challenging times to consider how they may provide quality play opportunities and experiences.

### **Daycare**

48. HSC Trusts will approach local childminders to assess whether they can provide childcare. Where group daycare provision is maintained, it will also provide places for vulnerable children. Where a Trust considers that childminding or daycare is in the child's best interests then this should be pursued.

### **Physical Activity**

49. Children and young people should be encouraged to maintain as much physical activity as possible, within PHA guidelines about self-isolation and social distancing.

### **Additional support**

50. Payments to foster carers will be prioritised to ensure that carers continue to be supported. It is recognised that it will be particularly difficult to keep children and young people entertained at this time. HSC Trusts have made an additional payment of £100 per household to enable carers to purchase arts/crafts material, board games etc. A further enhancement of foster allowances will be made for a temporary period of up to 12 weeks.
51. This is also an anxious and worrying time for children and young people. HSC Trusts are working to develop aids to help carers and families talk with children and young people and these will be shared with foster carers and host families as soon as possible. In the meantime, carers and families should try to be as

positive and honest as possible if asked questions, and also to offer assurance where required.

52. Particular account should be taken of the mental health needs of children and young people during the pandemic period. Here are some key points to consider<sup>1</sup>:

- Listen and acknowledge: Children and young people may feel less anxious if they are able to express and communicate their feelings in a safe and supportive environment.
- Provide clear information about the situation: The best way to help children feel safe is by talking openly about what is happening and providing honest answers to any questions they have.
- Acknowledge the situation: This is their home, but because they are cared for by foster carers they have to work together to understand how to apply government guidance in the family home.
- Be aware of your own reactions: Remember that children and young people often take their emotional cues from the important adults in their lives.
- Create a new routine with the children and young people: Routine gives children and young people an increased feeling of safety in the context of uncertainty, so think about how to develop a new routine – especially if children are not attending school.
- Consider their exposure to media coverage of the crisis, and encourage them to talk about what they have seen and heard.

53. There is a wide range of online resources available to help to support children and young people of all ages throughout the pandemic period. Some useful

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<sup>1</sup> <https://www.gov.uk/government/publications/covid-19-guidance-on-supporting-children-and-young-peoples-mental-health-and-wellbeing>

links are provided below<sup>2</sup>. In addition, organisations like VOYPIC<sup>3</sup>, Extern<sup>4</sup>, Fostering Network<sup>5</sup>, and Action for Children<sup>6</sup> are regularly updating their social media channels with details of available resources and are using these channels to maintain communication with children, young people and carers and to provide them with ongoing practical support such as self-care tips and suggested activities. Contact details for VOYPIC, Extern, the Fostering Network for NI and Action for Children in Northern Ireland is provided at Annex C.

54. A range of action has been taken by the Public Health Agency and Health and Social Care organisations to support mental health during lockdown. The Public Health Agency's guidance '[Take 5 steps to wellbeing: looking after your mental health while you stay at home](#)' offers tips on supporting mental and emotional wellbeing while staying at home during lockdown. In addition, the HSC in partnership with Organisation for Review of Care and Health Apps (ORCHA) have developed a [new Apps library](#) to support health and wellbeing during these difficult times. Stress Control<sup>7</sup> are also running a free 6 week cognitive behavioural therapy class which can be accessed by all residents within Northern Ireland.

### **Standards and inspections**

55. Compliance with the range of standards which apply to kinship care fostering and supported lodging settings should continue as far as possible. However, it is recognised that, during the COVID-19 response period, services require to be flexible and responsive. To facilitate this, it will be necessary to temporarily suspend certain requirements and standards to ensure the continued provision of safe services. Details of how compliance with minimum care standards for kinship care and supported lodgings may be relaxed are set out in the table

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<sup>2</sup> <https://www.childrenscommissioner.gov.uk/publication/childrens-guide-to-coronavirus/>  
[https://nosycrowcoronavirus.s3-eu-west-1.amazonaws.com/Coronavirus\\_ABookForChildren.pdf](https://nosycrowcoronavirus.s3-eu-west-1.amazonaws.com/Coronavirus_ABookForChildren.pdf)  
<https://www.macsn.org/helpful-hints-tips-during-covid-19/>  
<https://youngminds.org.uk/find-help/for-parents/supporting-your-child-during-the-coronavirus-pandemic/>  
<https://hospicefoundation.ie/bereavement-2-2/covid19-care-and-inform/grieving-in-exceptional-times/>

<sup>3</sup> VOYPIC [Twitter](#) VOYPIC [Facebook page](#)

<sup>4</sup> <https://www.extern.org/Listing/Category/latest-advice>

<sup>5</sup> <https://www.thefosteringnetwork.org.uk/advice-information/coronavirus-covid-19>

<sup>6</sup> <https://www.actionforchildren.org.uk/what-we-do/our-work-in-northern-ireland/>

<sup>7</sup> [www.stresscontrol.org](http://www.stresscontrol.org)

attached at Annex A. While the standards for non-kinship foster care require updating and have not therefore been included at Annex A, the principles of relaxation outlined in the standards for kinship care may also apply.

56. Any actions taken in relation to the relaxation of minimum care standards, in line with Annex A, **should be temporary and proportionate to the threat services face, and should only be used when necessary and remain in place only for as long as is required.** All managerial decisions in relation to relaxation of compliance with standards must be informed by robust risk assessment and professional judgement (including recording of decision making process) and subject to ongoing monitoring and review.

### Arrangements for Relaxation of [Kinship Care Standards \(January 2019\)](#)

Note: Throughout this table, CYP refers to “children and young people”

STANDARD [KINSHIP CARE]	EXTENT OF RELAXATION
Standard 1- Kinship Care Policy	<p>Family Group Conferences should take place using alternative formats of communication and participation eg. through tele/video conferencing. Face to face meetings should be minimised/suspended in light of public health advice.</p> <p>Depending on the escalation of the surge plan, the system of comprehensive data collection should be proportionate to the emergency circumstances.</p> <p>Standard provides sufficient flexibility in other areas.</p>
Standard 2 - the centrality of the looked after child	<p>The range of services to be provided will need to be reviewed in light of public health advice, as there may be constraints around the ability to take account of the CYP’s wishes and preferences, particularly on which carers, family or friends are best placed to meet their needs.</p> <p>In circumstances where carers have COVID-19 and have been advised to self-isolate or are hospitalised, every effort should be made for the CYP to remain within the household and self-isolate for 14 days. It is anticipated in exceptional circumstances that an alternative carer may need to be identified to be responsible for the CYP in the interim period and professional judgement exercised in terms of any options presented.</p> <p>Access to advocates should be managed using alternative formats of communication.</p> <p>Standard provides sufficient flexibility in other areas.</p>

STANDARD [KINSHIP CARE]	EXTENT OF RELAXATION
Standard 3 – effective and proportionate processes of assessment, approval, monitoring and review	<p>This Standard recognises that any processes have to be proportionate to the particular circumstances pertaining to the kinship household. It is possible that members of that household may be required to self-isolate and in those circumstances, any contact with social care services needs to be maintained remotely and mindful of the health requirements of that household.</p> <p>3.2: Arrangements relating to viability visits can be relaxed from within two working days of the commencement of the placement to within <b>5</b> working days. As face to face meetings should be minimised/suspended in light of public health advice, the ‘visits’ should be reconstituted using alternative formats of communication and participation eg. through tele/video conferencing.</p> <p>3.4: See Standard 1 for relaxation with regard to Family Group Conferences.</p> <p>3.6: In relation to immediate placements made in exceptional circumstances, the following relaxation will take place:</p> <ul style="list-style-type: none"> <li>- the interview with the kinship carer can take place remotely;</li> <li>- the requirement to inspect accommodation will be suspended and instead a request made to the carer to video shared space and bedroom accommodation and share with Trust if available;</li> <li>- the written agreement with the carer can be agreed and exchanged electronically.</li> </ul> <p>3.9: Where a HSC Trust Assistant Director (or a nominated Deputy in line with the surge plan) approves the continued placement of a child with carers beyond 12 weeks, a full fostering assessment may be completed in line with arrangements under the surge plan.</p> <p>3.11: The training of kinship carers will take place in accordance with availability as per the surge plan.</p>

STANDARD [KINSHIP CARE]	EXTENT OF RELAXATION
	<p>3.13: Interim vetting procedures will be introduced ie. A check of the Barred Lists only.</p> <p>3.13: The requirement to interview referees should be conducted remotely in light of public health advice to minimise/suspend face to face meetings. The requirement for both kinship social worker and child’s social worker to carry out assessment is relaxed to allow a social worker to complete assessment.</p> <p>3.16 – 3.18: as surge escalates, Panels can be stood down and approval conducted as per 3.9 above.</p> <p>Standard provides sufficient flexibility in other areas.</p>
Standard 4 – support for kinship carers	<p>4.3: The requirement under the Kinship Care Agreement for agreement in relation to contact with parents may be relaxed subject to public health advice due to restrictions on movement and availability of staff to supervise contact etc. Due to advice on social distancing, face-to-face contact between family members living in different households may cease for a time in order to prevent the spread of infection. Nevertheless, it will be important to find ways of ensuring that contact between CYP and their families can continue. Good communication between social workers, the CYP’s family and foster carers will be essential to ensure that contact is maintained as much as possible and that alternative arrangements are agreed by all parties. Any changes to Court-directed contact will need to be notified and agreed through DLS in accordance with the escalating surge plan. The reasons for any restrictions should be fully communicated to the CYP and their family. Alternative forms of communication, such as tele/video conferencing secure can be explored and used.</p> <p>Standard provides sufficient flexibility in other areas.</p>

STANDARD [KINSHIP CARE]	EXTENT OF RELAXATION
Standard 5 – support for looked after children in kinship care	<p>5.1 and 5.2: Arrangements relating to Looked After Children reviews can be reconfigured to be undertaken using remote communication eg. tele/video conferencing to ensure there is a balanced approach to care planning for CYP.</p> <p>5.3: The requirement for each child to have a full health assessment <u>prior</u> to admission to kinship care can now be undertaken <u>as soon as practicable</u> after admission to kinship care in accordance with escalating surge plan.</p> <p>5.4: It is recognised that in light of school closures, arrangements should be put in place and the CYP encouraged to participate in remote learning where it is available. If a school is opened close to the kinship household, it may be possible to facilitate the CYP's attendance for supervised learning.</p> <p>Standard provides sufficient flexibility in other areas.</p>



Arrangements for relaxation of [Minimum Standards for supported lodgings for young people and young adults \(Aged 16-21+\) in Northern Ireland \(December 2016\)](#)

STANDARD [SUPPORTED LODGINGS]	EXTENT OF RELAXATION
Standards 1, 5, 9 and 10	No relaxation required.
Standard 2 – Service Referral, assessment and placement of young people	<p>The requirement for each YP to have a lead worker may be relaxed. The reasons for this should be communicated to the YP.</p> <p>Standard provides sufficient flexibility in other areas.</p>
Standard 3 – placement agreement and support planning	<p>For unplanned or emergency placements the requirement to have an immediate Risk Assessment and Risk Management Plan agreed can be relaxed to <b>within 5 working days</b> of placement, (professional judgement will need to be exercised where there is the potential for cross-contamination of COVID-19).</p> <p>Where continuation of the unplanned or emergency placement is agreed, the requirement to have a Placement Support Plan agreed within 5 working days can be relaxed to <b>within 10 working days</b>.</p> <p>Standard provides sufficient flexibility in other areas.</p>
Standard 4 – ending or leaving the placement	<p>In the event of an unplanned move, the requirement of contingency arrangements to be made in advance with the YP's lead worker may be relaxed due to staff shortages or availability.</p> <p>The end of placement interviews with the young person and host can take place remotely.</p>

STANDARD [SUPPORTED LODGINGS]	EXTENT OF RELAXATION
	<p>The requirement for a review of documented evidence on all moves by Service Provider and Service Commissioner on a quarterly basis is relaxed to a <b>6-monthly basis</b>.</p> <p>Standard provides sufficient flexibility in other areas.</p>
Standard 6 – engagement, participation and involvement	<p>Requirements around participation in planning, decision making and improvement with YP should be relaxed in light of public health advice. As face to face meetings should be minimised/suspended in light of public health advice, alternative forms of communication and participation should be adopted eg. tele/video conferencing.</p> <p>Standard provides sufficient flexibility in other areas.</p>
Standard 7 – accommodation	<p>The requirement for each YP to have a bedroom and access to a communal area may need to be relaxed. For example, shared space may need to be converted to bedroom space (such as for self-isolation purposes) or siblings may be willing to share bedroom accommodation.</p>
Standard 8 - hosts	<p>The requirement for the service provider to appoint a named worker for each host may be relaxed. The reasons for this should be communicated to the host.</p> <p>The requirement for an annual review of host approval will be conducted remotely and in accordance with escalating surge plan.</p> <p>The training of hosts will take place in accordance with availability as per the surge plan.</p>

## Key Principles on the Educational support of vulnerable pupils known to Social Services

### 1. Attending School/Provision

Pupils who are deemed to be vulnerable should be in school and encouraged to attend where it is in their best interests; the ultimate decision on attendance rests with the HSC Trust /parent/carer. If the pupil's named school is closed the children and young people should be notified that a partner school, which is within the schools cluster school arrangement, will provide a placement. School attendance is recorded daily in the school of attendance. When a vulnerable pupil is attending a partner school, the pupil's IEP/PEP should be shared to support a positive transition. School leaders should complete a risk assessment in partnership with HSC Trust/ parent/ carer on the most vulnerable pupils as required.

### 2. Education other than at School (EOTAS)

The same principles above apply to pupils in EOTAS provision (contact details for Primary [andrea.kelly@eani.org.uk](mailto:andrea.kelly@eani.org.uk); post Primary [shauna.eastwood@eani.org.uk](mailto:shauna.eastwood@eani.org.uk)).

### 3. Exceptional Teaching Arrangements (ETA)

Exceptional Teaching Arrangements ETA provision is being completed through online platforms (contact Nicola Topping; [Nicola.topping@eani.org.uk](mailto:Nicola.topping@eani.org.uk)).

### 4. Safeguarding and Child Protection

Normal Safeguarding processes remain in operation (EA CPSS telephone contact is operational **02896 985590**).

### 5. Single Point of Contact

The EA named officer for looked after children for social work/school leaders is Anne Marie Bagnall; [Anne-Marie.bagnall@eani.org.uk](mailto:Anne-Marie.bagnall@eani.org.uk) .

The EA named officer for social workers (non-looked after children) is Adrian Nugent; [Adrian.Nugent@eani.org.uk](mailto:Adrian.Nugent@eani.org.uk) .

## **6. Transport**

EA will consider requests for transport on a case by case basis for those pupils who were normally transported by EA contact: Eve Bremner;

[eve.bremner@eani.org.uk](mailto:eve.bremner@eani.org.uk) .

Information required includes:

- Name of Child/Young Person
- DOB, Address
- Field social worker/parent/carer details (name address, mobile and email address)
- School/Provision enrolled
- Form of transport taken until now (if known)

## CONTACT NUMBERS

### Fostering Network and Information Service for Northern Ireland

**NI Advice Line** Telephone: 028 9070 5060 / 07918748415

Email: [ni@fostering.net](mailto:ni@fostering.net)

The helpline is operational Monday to Thursday from 9.30am to 2pm, and on Friday 9.30am to 11.30am.

For urgent queries outside these hours, email [ni@fostering.net](mailto:ni@fostering.net) or call 028 9070 5060.

### VOYPIC

Belfast Office Telephone: 028 9024 4888

Ballymena Office Telephone: 028 2563 2641

Derry/Londonderry Office Telephone: 028 7137 8986

Lurgan Office Telephone: 028 3831 3380

### EXTERN

Telephone: 028 9084 0555

### Action for Children in Northern Ireland

Telephone: 028 9046 0500 (9am to 5pm, Monday to Friday)

Email: [nioffice@actionforchildren.org.uk](mailto:nioffice@actionforchildren.org.uk)