

exemplary
residential
child care



COVID REPORTS BY DCEO OF ICHA

Introduction

When Covid-19 hit the world and the associated lockdown came into being, the ICHA wanted to know the effect it was having on children's homes. Initially this was in order to identify any needs or issues arising specific to the sector. As time has gone on, it has provided much valuable insight into the sector: its staff, its children, and its attitude to adversity.

The reports are shared with many local and national agencies as well as all our members and is hopefully enabling a better understanding of the sector's values and operations to all who read it.

Previous copies of the report can be found here:

Covid 41

Feedback from the residential childcare sector. Week ending 17th October 2021

Covid

Although the majority of respondents had no children with confirmed Covid 19 infection and no serious illness, some staff were off with contacts or actual infection. Others said that other illnesses are now beginning to affect staff. One stated that they have noticed some incidents where staff are reporting a positive LFT result but negative PCR and have some suspicions that this may be to get extra time off whilst waiting for the result!

Providers have incorporated Covid into their ways of practicing now and this has become 'normal'. Staff and young people are used to taking LFTs and are aware of all the necessary precautions to take when illness is suspected.

Respondents talked about staff who have been in contact with confirmed cases but have returned to work following a clear PCR and who then completed daily LFTs until all parties were free of infection. The impression was that providers felt more in control of the management of cases within their homes and staff teams.

Vaccination rates continue to creep up although one provider still reported around 50% of their workforce refusing or being vaccine hesitant. A few respondents said that their 'refusers' gave 'religious grounds' as the reason for not being vaccinated but were unable to explain them.

Young people in a number of the homes have received vaccinations.

Some respondents had homes regulated by the CQC as well as Ofsted homes. One has been able to offer redeployment to some staff who are required to be vaccinated and have refused but will not be able to do this for all. One spoke about having staff operating regionally across both types of home and this causing logistical problems with differing vaccination requirements.

Staffing and Recruitment

Providers continue to have significant recruitment and retention problems. They have described the current situation as “Horrific! Like I’ve never known”. Others echoed this sentiment. Only one respondent said that their recruitment was currently fine.

A provider spoke about other organisations offering high wages to lure qualified Managers away and that staff member subsequently recruiting all of her original team to the new organisation. This has left the company having to move staff around and use agency staff as recruiting a new manager is proving to be very difficult. As a result, they have had to turn down suitable referrals and leave placements vacant.

Providers spoke about Managers not wanting the stress of the role, being fearful about Ofsted outcomes and the high level of responsibility conferred on them. One respondent talked about a long-standing Manager who was child-centred and had some great outcomes for children, leaving the sector due to these pressures. Another talked about approaching a previous Manager with a job offer who cited the pressures as a reason to not return, preferring a role at a Covid test centre. The same respondent said that his son was a home Manager and had to work very long hours and late nights.

One provider felt that the current recruitment difficulties are compounded by the sector’s lack of professional status and the lack of progression opportunities-particularly with small providers although they conceded that it had been a ‘brilliant’ career for them.

Multi-home registrations.

Ofsted have recently introduced the ability for providers to register up to 4 homes under one registration, catering for no more than 6 children in total, under one Manager. Those spoken to had differing views whether this type of registration would be of interest to them. Some felt that the pressure on Managers was too high to maintain standards across all settings. This was especially important because if one home within the group is failing, then all would be negatively affected, although this is not currently the case with Managers registered over more than one property.

Others felt that it did not fit into their ethos whilst others still were weighing up what it might bring to their services.

Allegations against staff

It has been reported by some providers that allegations and complaints against staff have risen recently. Responses varied with less than 50% agreeing with this and most expressing the view that this is a recognised risk in the sector. However, two providers said that there has also been a slight increase in care experienced people bringing cases against companies’ years after they have left. No specific cases were discussed.

Ofsted

Homes are being inspected and outcomes are varying. The general feedback was that Ofsted are more rigorous since the lockdown. Some people said that registration was more difficult and appeared to be taking longer than prior to the lockdowns.

Some respondents again voiced the opinion that inspectors often acted as though the pandemic had not happened and had not had significant impact on businesses, especially in relation to the problems with recruitment, retention and staffing levels.

In all instances, providers are asked to raise concerns directly with Ofsted. However, at least half of the respondents were clear that they would not do that because there was a real fear that this would be somehow held against them in future inspections.

Covid 40

Feedback from the residential childcare sector. Week ending 12th September 2021

Covid

No respondents reported any current illness. However, due to leave, the response was limited. One provider reported that they had one home that had just come out of lockdown but that there was no active illness.

Providers continue to look for guidance in relation to staff vaccinations and those staff who choose not to or are unable to have a vaccination. Although levels are decreasing, the level of uptake varies greatly.

At least one respondent has made a decision to request evidence of vaccination for all new employees and have decided not to offer employment to non-vaccinated staff. They did this following attendance at a seminar relating to adult care homes requirements. Another respondent indicated that their company was working towards all staff having the vaccine as a condition of employment.

One provider reported that one of their two staff who has refused vaccination is currently off due to infectious contacts. They reported that the implications for this are that staff may begin to lose wages if they continue to have to isolate due to contact, which may be avoided if they were vaccinated.

Staffing and Recruitment

Every respondent reported issues in recruiting staff. One reported that out of 13 people invited to interview, only two actually attended and neither were appointable. Respondents have said that recruiting through agencies is also not yielding particularly good outcomes.

Two respondents spoke about their qualified staff being 'poached' for very high remuneration. One expressed concern as the staff member who they had trained, was not, in their opinion, sufficiently experienced to take on the responsibility required by the new provider and fears that this will become commonplace as qualified staff availability becomes less.

Opinions regarding the change in recruitment post Covid were expressed. Respondents talked about a change in attitude and perspectives from prospective employees and this now being an 'employee's market'.

One respondent said that they had held employment fairs at new homes where prospective employees came to the new properties and found out about the home and company that way. They had found this a particularly effective way to recruit. Others talked about personal recommendations from staff being the most effective recruitment strategy.

Another provider reflected that when the furlough fully lifts, they hoped that there would be an influx of staff/prospective employees. They further reflected that they were 'appalled' at the Labour Party's announcement that all employees should be able to work at home in the future-which of course does not apply to this, or indeed vast numbers of other professions.

Overall, respondents were worried about recruitment, but reflected that this was a national-if not global-issue.

Ofsted

Many of the providers spoken to had not yet had an inspection Two from a limited number of respondents reported positive experiences and only one reported a poor experience. They felt frustrated that the inspector did not appear to recognise that there was a national recruitment shortage and contributed to staff moves, or how Covid continued to affect some services. The Company is considering appealing or complaining.

We explored Ofsted's advice regarding the use of agency staff at the request of a provider who had been asked to secure their own references and checks. Most respondents had not had similar advice and the majority of inspectors appeared to accept that extensive information sent by agencies with their staff was sufficient. A number of providers expressed the opinion that requiring extensive secondary checks is both impractical and unnecessary, as agency staff are neither allowed to run homes nor left by themselves and they are furthermore often called in to cover an emergency situation. Other respondents felt that when they use the staff regularly or for an extended period of time, then this would be reasonable.

Another raised concern about an inspector making judgements on the suitability of placements when the home had carried out compatibility assessments and were attempting to work through more challenging behaviours. They expressed the opinion that this was a provider judgement and that with the current difficulties in placement stability for more risky young people, this should be supported. Again, they were looking to raise this with Ofsted.

Covid 39

Feedback from the residential childcare sector. Week ending 8th August 2021

Covid

The infection is still having an impact in our homes. Around half of those who responded have had one or more homes impacted by an outbreak of infection. Local Health Protection Teams have varied in their responses to homes, but all have continued to operate, often following a lot of negotiation! One respondent felt that the initial failure to clearly categorise children's homes has led to this ongoing problem of differing advice from different teams.

The levels of infection for young people are reported to be similar to those for staff but the effects remain muted. Only one provider said that a child felt unwell for a few days, all others have been aware of 'being ill' through testing only.

All providers reported that they had arranged breaks and holidays for their young people, and all were taking place within the UK. One respondent had their own caravans, and all of the young people were accessing them throughout the summer, with deep cleans taking place in between.

Referrals

The levels of referrals have increased across the sector. Some respondents said that referrals have doubled since the beginning of the year. All stated that the complexity of need was increasing significantly. Rises in referrals for children with Deprivation of Liberty (DOL) orders, CSE, CCE, violence, aggression and mental health problems are now overwhelmingly common. One spoke about a significant rise in referrals asking for 3 and 4:1 staffing levels per child.

Around half of the respondents said that they would be wary about accepting a referral for a child with a DOL order into a multi-occupancy home. This is because the restrictions placed on that child may inadvertently impact on the liberty of other children in the home. A number said that if the order was 'low level' such as restricting access to a phone, they might accommodate them. One provider felt that DOLs were not used or understood well by some local authorities, especially in relation to children with severe learning or physical disabilities. They expressed the opinion that DOLs were developed to protect the particularly vulnerable, but in fact those who may be non-verbal and/or lacked capacity are often overlooked when a DOL order would in fact increase their protection.

Most respondents said that they would not accept an emergency placement into their multi-occupancy homes. The major reason was their inability to safely match needs with their other residents and their perceived lack of support from Ofsted when/if these placements fail.

Commissioning

Respondents were asked what they would like to see in an ideal commissioning model. All wanted a relationship with the commissioner that meant they knew the service and could discuss placements appropriately instead of receiving hundreds of referrals per week that services could never accommodate. One commented that 'relationships are paramount'.

Many said that they would like more acknowledgement about the reality of the costs of placements. Commissioners and local authorities are aware of the true cost of a placement but continue to seek reductions and don't counter the rhetoric that all private providers are over-charging. As one respondent said, '4 or even 1:1 staffing requirements for a 24-hour period, 7 days a week does not come cheap.'

A further respondent said that commissioners can no longer realistically tender for 'EBD' beds as virtually none of the young people are that straight forwards, as the levels of complexity are vast. Nonetheless, frameworks continue to talk about 'core' and 'standard' placements.

One respondent said that they have requested a rise in fees due to the increase in costs of food and utilities, increased staff salaries based on the NMW, inflation rates, increased pension contributions and increased costs of Regulation 44 services. The response has been such that they are considering leaving the framework in favour of purely spot placements.

Recruitment

Respondents were struggling to recruit across the country. Respondents talked about setting up recruitment days with over 20 potential attendees and only 6 showing up of which 3 were employable. Another recounted offering 5 posts, none of which were taken up. Providers also spoke about recruitment agencies being unable to help them. One said that they had rung 2 recruitment agencies who were so busy that they refused to sign them up.

Care Review

Hopes for the Care Review were low. Respondents felt that the scope was too broad to achieve anything meaningful. Others talked about the lack of time actually spent in consultation-meetings were limited to an hour and nothing of value came out of them. Finally, one respondent expressed the opinion that 'It is a dumbed down discussion that doesn't get to the heart of things.'

In conclusion

We truly hope that the view of the Care Review is over pessimistic because the care sector is facing a lot of challenges. Providers are reluctant to engage with commissioning, struggling to get staff and are seeing high levels of referral and desperate need. Covid, it would appear is now the least of our problems.

Covid 38

Feedback from the Residential Care Sector w/e 4/07/21

Covid-19

Staff infection rates are rising, but currently not at an alarming rate. There is also a rise in children and young people's infection rates, but this does not appear to be directly linked to any staff infection.

One therapeutic community explained how all 10 of their young people tested positive-succumbing 2 at a time. The children were reported to display the symptoms of a mild cold, and all were fully well within a day or two. 6 staff subsequently became ill out of a cohort of 40+ but not all from the one home. The provider reported that the local Health Team, Infection Control and PHE were excellent and worked with them to enable staff to keep working without having to isolate either in or out of the home environment.

One large provider was able to report that in one region alone (East) 15% of staff had contracted Covid and approximately 14% of children since the beginning of the pandemic.

Providers spoke about continuing with LFT testing and how this was picking up infections early, preventing further spread. Most providers said that staff accept the use of regular testing and there was very little refusal.

Vaccination rates remain variable. Smaller homes often report 100% vaccination. Obviously, the more staff employed, the higher the levels of unvaccinated employees. Large to medium sized providers were reporting as low as 50% to 90%+

One provider stated that they expect staff to have both vaccinations and are working with Health Teams and HR to work with staff, raise awareness and increase uptake. They also provide adult care but believe that both sets of staff should be covered. They intend to try to find alternate employment for currently employed unvaccinated staff in the future if they are unable or refuse to have the vaccinations. However, they do not intend to employ unvaccinated staff going forwards. One other provider said that they are adopting the same policy whilst most are waiting to see what the government decides. Nonetheless, around 50% of respondents felt that it may become a necessity in the future.

Inspection.

Again, around 50% of respondents had undergone one or more (dependent upon the size of the organisation) full inspection. Feedback was generally positive with one saying that their focus was very much on the child's journey.

One respondent said that their managers were very disappointed that their actions to protect staff and children from Covid were not explored during the inspection. Their home had been hard hit by Covid and staff had worked hard to maintain the service. The sentiment expressed was that this was a safeguarding issue as well as a health issue and was and is a very important part of the child's care. When challenged, the inspector expressed the opinion that the temperature checks etc on entry demonstrated that the home was managing it well, but the provider felt that this was a very small part of their response to the pandemic and this first full inspection should reflect all aspects care taken and provided during this past year.

Education

Despite a rise in cases, most providers reported that there has recently been little to no disruption in young people's education. One RI from a larger provider reported that there were a lot of mainstream schools closing in their region and that a few of their children had been affected.

Most respondents who provided their own schools said that these continued to operate with minimal disruption.

Mental Health

One provider from a large organisation explained that she received all of the incident and accident reports and had the impression that self-harming behaviour had increased since the start of the pandemic. In light of this, we will explore this subject further when we next talk to providers.

Covid 37

Feedback from the independent residential childcare sector week ending 13th June 2021

Covid-19

Several homes have reported low levels of infection. Some children have tested positive and remain well. One home has 1 child with a positive infection and one pending. They have identified two sets of carers who will work continually 5 days on/5 days off to meet the children's needs.

Staff are mainly self-isolating due to contact with infected family members or through the Test and Trace app. Only 1 provider reported that they had staff who had brought the infection into the home-but that this had now been addressed.

Providers reported cases in Blackpool and Burnley, in the East of England and Rochdale.

Vaccination levels are generally high with an average of 80%+ reporting a first vaccination. One company reported that whilst uptake was good in one area, it was below 50% in the West Midlands. All companies reported that they are encouraging uptake.

Most providers reported that they are using Lateral Flow Tests with their staff and that children and young people are accessing theirs at school. One reported that their children who do not attend school have refused home based LFTs.

Several providers expressed concerns about how they will be expected to manage Covid if restrictions are lifted but reporting and isolation remains in place. There are fears that cases will rise exponentially, and staff will be isolated 'sitting at home, but not ill'.

Providers reported that children and young people seem to be largely unaffected by the lockdown experience at this time. The majority said that their education had not suffered as most had stayed at school or accessed online education. One said that two children who came to the home with no education benefitted greatly by accessing it online. Another said that one of their children had been rated as 5th highest achiever in school after coming to them unable to read at the start of lockdown!

One provider of placements for older children said that lockdown had 'freed one of his children to choose who to be with'. In other words, they chose friends and rejected family. Another had chosen not to see family at all during lockdown and had maintained this. Only one provider said that some of their children with severe autism now found it difficult to go out. However, they felt that this was due to change in routine rather than specifically Covid related. Overall, young people were reported to be getting back to normal with some attending scouts and cubs and others planning for summer vacations.

One provider spoke about revisiting their holiday policy to reflect the RAG rating of countries and had needed to refuse some holiday requests in light of government guidance.

Ofsted

Some providers have had 1 or more inspections and their outcomes varied greatly. Some had specific issues with their inspections and were considering appealing, others found the experience 'excellent'. Ofsted have previously told the writer that any concerns about their service should be raised with them to enable resolution, and this has been passed on to respondents.

One provider has been trying to register a provision 'since last February' (2020) but was finding it difficult to get a response from Ofsted. Again, they have been advised to raise this directly.

Again, respondents reported that the effects of the pandemic were largely not recognised or considered during the inspections.

Transitions

We asked providers about their experiences of children initially coming to their homes and whether any had arrived having been restrained en-route. The majority spoke about this happening 'historically' or 'in the past' but not more recently.

A number said that in the past, young people would be brought to the home at 2am in handcuffs. One spoke about a more recent example where a child said they had been moved into accommodation 'in a blindfold'. One stated that part of their pre-admission impact risk assessment includes assessing how they would be transported, and that restraint would not be accepted. One provider said that when a local authority recently tried to move a child using restrictive measures, they challenged it and went to the other end of the country to collect the child themselves. All respondents were clear that they did not find this type of transportation acceptable.

Covid 36

Feedback from the residential care sector. Week ending 2nd May 2021.

Covid

Yet another week with no reported infection! Concerns have been raised about the role of Test and Trace after 21st June. If restrictions are all lifted and non-harmful infection rates rise once again, providers are looking for guidance that the vaccine will be considered sufficient to prevent teams being decimated as happened during this lockdown and are looking for reassurance that perfectly healthy staff will not be required to remain at home whilst providers struggle to maintain services.

There has been some post-covid reflection. Comments were made that the pandemic has highlighted how little is known about our sector and the work we do. As a result, little importance has been placed on our work and recognition has been limited. As a result, advice and sector specific guidance has been delayed and as one said, 'it's been like getting a fire blanket after your house has burned down'.

Vaccine uptake rates are steadily climbing with many companies having only isolated people refusing, for various but mainly health-related reasons.

Respondents reflected that the availability of LFDs was reassuring for staff and one described them as 'Lifesavers' but again, that they were provided too late in the pandemic.

Ofsted

Several respondents had received an inspection since the beginning of April. Two had received outstanding grades and one described the inspection as the best they had ever had. They found the inspector to be professional and reasonable.

On the flipside, others felt that they had been unnecessarily harsh. One concern raised with some respondents was the lack of face-to-face Reg 44 visits since September. One involved felt that 'Ofsted's hypocrisy was breath taking' as they themselves have largely conducted online visits throughout the lockdown, and there were often legitimate reasons why Independent Visitors were unable to attend homes.

Another respondent reported further issues with registration delays having now received several emails from Ofsted saying that they would have to delay their application process. The respondent found this 'disrespectful' and lacking in awareness of or interest in the knock-on effects on the business.

Most worrying was the number of respondents who were not confident in raising their concerns about Ofsted as they were worried that this would elicit a punitive response and possibly affect their other home's grades.

Some respondents talked about recruitment difficulties for Registered Managers in particular. One respondent reported that a recruitment agency had said that Ofsted had 'taken about 100 managers out of the system' to fill their posts. Obviously, this is speculation.... but the rumours are gathering!!

Those respondents who had been inspected spoke about Ofsted's lack of interest in what they had done during the lockdown. Some felt that this was missing an opportunity to reflect the excellent work done in this last year.

General

As we come out of lockdown, ICHA is looking to their future operations. Whilst respondents had an appetite for some face-to-face meetings, most reflected that they were able to get more done virtually and cost savings in travel and wasted work hours were high. Nonetheless, the desire for contact and networking remains high and as an organisation, we will be looking to have a blended approach over the coming months.

One respondent said that they no longer have a head office because of the pandemic and find it a more efficient way of working and all respondents acknowledged that online working will remain a key aspect of their operations from now onwards.

Covid 35

Feedback from the Residential Care Sector week ending 18th April 2021

Covid

No providers have reported any cases of Covid during this survey. Respondents said that no children appeared to be bringing infection back from schools as happened following the first lockdown.

All of those spoken to said that they were using Lateral Flow Testing and found it beneficial. Most homes were testing staff twice weekly, and there appeared to be little concern or evidence of false positive results. Respondents said that staff were reassured by the tests. Only one home had a member of staff who refused to be tested. One company in the Northwest continues to have issues accessing sufficient supplies of lateral flow tests whereas all other respondents reported no issues.

Members in Wales have been receiving routine PCR tests for a number of months now and more recently, were also given access to LFTs. Providers reported no difference regarding the outcome of the two types of tests.

Staff in Welsh homes are receiving a second 'thank-you' from their government this week of £500 in recognition of their work and dedication during the pandemic. This is being well received and we suspect a similar gesture from the UK government would be equally welcome!

Respondents expressed little concern regarding the effects of easing the lockdown. They appear to be fairly sanguine as there is little they can do to mitigate people's actions. The children are reported to be very sensible and continue to maintain sensible precautions.

One respondent who last had a case of infection around 3 weeks ago expressed concerns regarding PHE's perceived change in attitude at that time. They reported that there had been a shift in their officer's attitudes towards staff. Whereas they had initially been supportive, helped risk assess the situation and worked towards a common goal of maintaining children in the home, their most recent contact had been that staff needed to go off duty, children might have to leave and finding a working solution was not part of their remit. This does not bode well if any significant return of infection happens.

Only 1 respondent said that children are now being tested as part of their admission criteria to their homes.

Vaccines

One northwest provider said that access to vaccines was now more difficult with the link to the main centre at the Ethiad Stadium no longer viable. One other reported that staff had received notification of their second vaccine being cancelled due to lack of supply with no

new date put in place. This will take them over the 12-week gap between doses and questions are being asked whether it will limit the effectiveness of the initial dose.

Providers are reporting mixed levels of uptake still. One provider with homes in the North and Midlands reported a 60%+ uptake up North but around 40% in the Midlands. They reported that when a home manager refuses to have the vaccine, this has a significant effect on the uptake in the rest of the team. Most providers are reporting much higher levels of uptake with pregnancy and IVF being the main reasons for not having it.

Some providers are beginning to look at insurance implications about employing unvaccinated staff.

Ofsted

One respondent raised concerns regarding Ofsted's registration process having made an application in December and receiving many contradictory messages from the registration team. This has included but is not limited to denying any knowledge of submitted information and not passing completed and paid for applications on to the relevant inspectors. The ICHA has heard similar concerns from other providers during the pandemic.

One respondent raised concerns about Ofsted using compliance notices where they had previously used requirements in their homes once one home in a company was identified as having issues. Whilst they accepted that Ofsted would inspect their other homes more thoroughly, they felt that their approach was significantly disproportionate.

General

Some respondents said that social workers are still not visiting their homes, preferring to use remote methods of engagement. One was told that their local authority was not planning on having staff back in the offices until at least September! Other providers spoke about the ongoing frustration of trying to contact local authority staff who are working at home.

Covid 34

Feedback from the residential childcare sector, week ending 4th April 2021.

Covid

Only 1 provider has reported a Covid case, and this was for 1 of their staff. This was out of at least 300 provisions up and down the country.

Some providers are apprehensive that staff may 'go mad' over the Easter weekend as the lockdown restrictions ease, with a couple commenting that the young people seemed to be taking it more seriously than some of their staff. However, an equal number were fairly sanguine about it, with one saying that they deserved the opportunity to let their hair down due to the incredible hard work they have put in throughout the pandemic.

Vaccination uptake is generally good with some smaller providers having 100% uptake. A few respondents are considering making vaccination a condition of employment for new starters although others felt that this might contravene employment law and were hoping for some clarity from central government.

Homes now have access to lateral flow tests for their staff. Only one respondent was having difficulties getting these. Those that have them are generally testing staff twice weekly. Staff are reported to be reassured by the tests and only two respondents had any false positive results-one case per respondent. Overall, there was little concern expressed about false positive results as access to PCR tests remains good and rapid.

No staff have been reported as refusing LFTs.

Visitors currently have temperatures taken in most cases and are required to wear masks and maintain social distancing by homes. Providers welcomed the opportunity for LFTs for visitors too. Some are already sending out testing kits to their Reg 44 visitors and contractors when visits are planned.

Sleep-in judgement

Providers reported that they were well prepared for either verdict in respect of the sleep-in judgement as they were already paying above the minimum wage. Since the outcomes, most respondents said that they were 'relieved' that it was over. A small number are seeking legal advice regarding the earlier actions of the HMRC.

Regulation 44

The ICHA was recently informed about concerns regarding the actions of an unknown home in the management of their Regulation 44 reports. As a result, advice was circulated to members which respondents have mainly said they are using or already had in place. However, a number expressed the opinion that the current Regulation 44 system is open to abuse and should be reviewed. One respondent was able to provide an example of known abuse of the system. Concerns were raised about the lack of qualifications required, the lack of accountability and the lack of autonomy as they are paid by the employer to carry out the visits.

Government Schemes

A few mainly smaller providers said that they have accessed the Government 'Bounce Back Loan' scheme, the Job Retention Scheme, and the Statutory Sick Pay Rebate Scheme. All were reported to be of great help to the organisations concerned. Some respondents talked about the costs incurred through Covid. One estimated that they had spent an extra £40 000 at least on covering lost workdays, using enhanced overtime to attract people to work etc.

Overall, it would appear that government strategies have worked as the levels of infection are now minimal in the homes-however, many are waiting to see what the difference will be once people start going out again. People are finding the addition of LFTs a useful tool in

fighting infection in the homes and staff in the sector are taking up the vaccine in larger numbers-possibly due to the fear of not being able to travel abroad!

Covid 33

Feedback from the residential childcare sector, week ending 14th March 2021.

Covid

Out of all the respondents today, nobody reported staff or children infected with Covid. Respondents ranged from some of the largest providers to solos.

All the homes had secured access to vaccines with only one provider in Leicester experiencing difficulties accessing them for their staff.

Uptake of vaccines ranged from 50% to 100% and a higher level of refusal remained amongst workers from the BAME community.

Reasons given for refusing vaccines included not trusting it; 'rushing it through'; concerns about the effects on their fertility; wanting to see how others are affected by it and religious grounds. Interestingly, the staff member reported to be refusing on religious grounds later changed their mind as they wanted to be able to go on holiday!

One home had a high number of staff who had contracted Covid in the last few weeks so are currently ineligible but are eager to have the vaccine when able. Some companies do not know the level of uptake as they have taken the decision that as it is not mandatory, they have no right to know.

Concerns around lifting the lockdown were few. Most respondents were just eager to regain some aspects of their former lives', but a few were very happy to carry on with this 'new normal'.

One respondent reflected that their staff had been more stressed during lockdown due to the increased demands placed upon them and were hopeful that easing the restrictions would ease this.

Some concerns were raised that staff may have become complacent and were less likely to remain risk averse which might cause an increase in infection rates.

Children

No infection was reported for any of the children.

Everyone reported that their children were at school although the vast majority had remained in school throughout the pandemic. Some reflected that the increase in class sizes could negatively affect their young people. One respondent said that one of their children had attended throughout, gone to school yesterday and refused to return today.

Several respondents said that they have concerns about the easing of lockdown as their young people have been very settled and content during the restrictions. Some talked about the lack of pressure on children to engage with families and peers during lockdown and how some were already showing some anxiety about this potential increase in social contacts.

Discussions were held about the learning that is needed from this time and how some conventions about children needing to be near family and peers and to maintain these relationships may need to be revisited. Many spoke about children being less anxious during lockdown, however, a smaller number of respondents said that their children were 'going crazy' being restricted and wanted to get out with their friends again.

Another respondent shared their view that their children coped well with the lockdown rules as everyone was expected to do the same, so they did not feel like they were being singled out.

One provider who cares for children with autism said that they were particularly anxious about going out again and that they have preferred being at home. They also spoke about the children being locked in with the same staff group for almost 3 weeks during an infection and their challenging behaviour subsequently decreasing enormously.

Care Review-Call for advice and evidence.

Some Providers offered areas that they feel the Care Review needs to focus on. These include: Mental Health; the ineffectuality of frameworks; why residential care is the last placement of choice and children are expected to go through many placement breakdowns; the effects of Covid and how this can inform future practice; education and how disadvantaged children are treated; provision for 18+ who are not ready for independence and the practice of putting children into semi-independent provision from 16-using chronology instead of emotional intelligence to assess suitability.

Other

One provider said that a lot of their Diploma progress was stopped during lockdown with students unable to have an end point assessment of their work. Consequently, there may be an increased number of staff/homes not meeting the regulatory requirements.

One provider commented that they had seen 40% less referrals in February and wondered what level of increase is coming.

In conclusion

Infection rates continue to drop but as we return to normal, there is a hope that a lot of learning will be had that underpins changes in policy and care practices going forwards.

Covid 32

Covid 19 and the Residential Childcare sector. Week ending 21st February 2021.

Infection

The infection rate amongst staff and children continues to decline. Many respondents had no infection or low rates. Although individual homes are affected, the picture is much more positive than in recent weeks.

One provider who has been badly affected in one home had staff locking down with their children. Public Health officials, at day 5 of their lockdown told the home that they would not support this action and that everyone had to go home. Staff refused as they would have had no care for their children and there were no alternate places offered. The following Sunday evening, Public Health again contacted the home and instructed them to remove all the children. The home, with ICHA support, successfully challenged this, and the home currently remains in lockdown. They commented that they are now at the stage where they will avoid all contact with PHE wherever possible.

Vaccinations

The vaccination programme had reached all our respondents and most staff had been offered or had received a vaccine.

There are a significant number of staff who have refused to have the vaccine. Many reasons are not yet understood although some include a general anti-vaccine stance and concerns about effects of fertility.

A disproportionate number of staff from the BAME communities were reported as refusing the vaccine but the general reasons for this have not yet become clear.

One company has several vegan staff and reported that they have also refused to have the vaccine.

Discussions were held with respondents regarding insurance implications from non-vaccinated staff and the implications of this in the months and years to come.

One large provider said that some local authorities have approached them asking for records of vaccine uptake amongst their staff teams. The reasons for this are not yet clear.

Ofsted

In the lead up to April, all but 1 respondent expressed that they want Ofsted to resume graded visits. Many respondents talked about Regulation 44 visitors continuing to visit and said that they view Ofsted's responsibility to be in the homes as no different-especially as many Reg 44 visitors also go to many different establishments. A further opinion was expressed that people know how to best guard against infection now and can minimise the risk from and to inspectors.

Overall, infection rates appear to be decreasing and vaccine uptake increasing, which can only be good for the sector, as a whole.

Covid 31

Covid 19 and the Residential Childcare sector. Week ending 7th January 2021

Infection

It would appear that rates of infection are dropping, but as this is a snapshot, it should not be taken as indicative of the whole sector. Infection patterns vary but since the new variant, whole staff teams and children have been affected whereas previously, only individuals became ill. For example, one responder reported that her whole school staff went down and other care staff, including herself subsequently rapidly succumbed.

A large provider spoke about the rapid spread during this lockdown and that they had not had any infection prior to the schools returning in September.

Discussions with Welsh providers indicated similar issues with advice from Public Health as experienced by English counterparts. One recounted having instructions to send all their staff home and use agency staff-despite having a significant cohort of staff who had tested negative. Welsh members also spoke about the differences in responses. Some talked about accessing some PH officers who were able to discuss the management of their cases sensibly but felt that advice was down to the individual concerned.

Vaccination

Many homes have now received the vaccine. Local authorities appear to be interpreting the JCVI differently with some accepting children's home staff as frontline social care workers. One company that had been approached by their local authority to have their staff vaccinated, subsequently received an email saying that they had been recategorized and would only become eligible in the third stage of the programme. The provider was disappointed but accepted that other groups were probably at higher risk.

Most responders employed some staff who refused to have the vaccine when offered. One provider had a home with all staff from the BAME population, and all of them refused to have the vaccine. This was echoed by another provider. However, refusal is not limited to this group. Reasons for refusal were, pregnancy or wanting to get pregnant, wanting to wait and see, fears raised through the internet, objections to vaccines per se, and fears of adverse effects.

Welsh members have received the vaccine and have similar issues with staff refusing or waiting to make a decision about having theirs.

A responder who also provides elderly care reported that residents are dying and as a result, those staff were particularly fearful. They had all been vaccinated and told that it would take three weeks for the vaccine to become effective. A large number of staff subsequently

went off sick until the virus 'kicked in'. This has not, to our knowledge, been echoed in children's services

One provider voiced personal concerns about whether having non-vaccinated staff will have an effect on their insurance in the future.

Other

Commissioning

We talked to providers about commissioning and their use of frameworks. The majority of respondents took most placements on a 'spot purchase' basis. Some providers were aware that they were on frameworks but didn't know which ones and still relied on spot purchase.

Some felt that local authorities were wasting money developing frameworks that providers had little faith in. Another recounted that they didn't use frameworks but still received the same referrals as their neighbour who did.

Another stated that 'I haven't got the days and weeks available to do them'. A larger provider commented that it wasn't economically sensible to go on a framework.

No respondents were wholeheartedly supportive of frameworks and many called for a return to relational commissioning where social workers or commissioners knew the homes and knew the children and were able to make more informed choices. One provider called for a national matching process.

Some concerns were voiced regarding the standard of referrals. Some gave examples of inaccurate information with one responder accusing some commissioners of lying on the referrals in order to place children. This causes ongoing issues for the child themselves and the children already in the home. Both opening and closing placements can be particularly difficult during the lockdown and inaccurate information exacerbates the situation.

In conclusion

The sector continues to maintain their homes and deliver care to their children despite the current lockdown. Frustrations remain regarding advice and vaccines but there is recognition that this is not restricted to their own sector.

Covid 30

Covid and the Residential Child Care sector. Week ending 31.01.21

Infection

The level of infection reported by respondents was lower than in previous weeks. Most of those who had been previously badly affected now had their staff back in work and were largely infection free. Only one larger provider reported that their infection rates remain high. One commented that it was as though they had peaked and were now levelling out again.

Infection rates amongst children were again reported to be low. One young person who had been sent home from school due to possible contact, was reported to be writing to Boris complaining that his 'bubble had been burst yet again' and that he just wanted to get on with his education!

One provider reported that his staff were angry at not being considered eligible for the government help when self-isolating and commented that in some cases 'it pushed people over the edge'. Although the provider was able to allow staff to take annual leave, it took away the element of choice and autonomy regarding this valuable commodity.

The numbers of BAME staff across the country seem to be focussed in certain areas and most respondents employed low numbers from this community. One respondent whose staff group was largely from this cohort reported that two had experienced Covid related deaths in their families, although their level of infection in comparison to other staff was not significant. No other providers with staff from BAME backgrounds reported any significant increase in infection amongst those workers.

Vaccines

Respondents told us about Councils such as Barnsley and Wakefield who were reported by council staff to have given their own children's home staff vaccines but were refusing to respond to requests for the same from independent homes-despite them caring for their children.

Luckily, this seems to be the minority and many councils such as Lancashire are offering vaccines or planning to make them available, and a home in Cambridgeshire was contacted by a GPs surgery for staff to access vaccinations. Further to this, Blackpool have opened weekly testing to children's home staff.

A provider who had Welsh and English homes reported that all their home staff in Wales were vaccinated 2 weeks ago, and their sector was a priority there and reflected that it had been 'like hitting a brick wall' trying to get the same for his homes in England.

Those respondents who have not been offered the vaccine or have had no contact about it from their council, are frustrated at the inconsistency across the country.

Care Review

Some respondents are excited about the Review and hope that it will bring about some positive actions. Respondents want to see the following issues explored further: a fresh look at Martin Narey's recommendations; a decision on unregulated services; the positive use of IT in services for staff and children; more consideration for post 18; appropriate social care funding; increasing the numbers of foster carers and the registration of all children's home staff.

Some respondents were unsure that the Review would or could have much of an impact as it is only running for 1 year. Others who had been in the sector some time were more sceptical whether anything would change.

Sleep-in judgement

The sector is awaiting the latest judgement on payments for sleep-in shifts. Around half of the respondents had some concerns about liability if claims go back of several years and a small number felt that their viability could be a risk. Remaining respondents felt that they were paying salaries that complied with wage requirements and were unconcerned about the possible ruling.

Transitions

Respondents who work with younger children who aim to step down to fostering reported that transitions are being blocked due to a lack of fostering vacancies or a perceived lack of action by the placing authorities. One commented that the young people feel betrayed and have regressed somewhat when their original placements plans did not come to fruition.

General

A few respondents spoke about staff anxieties and the difficulties in managing different staff beliefs about Covid. Some have wanted to wear PPE as it is a workplace and have been upset by those who see the home as a 'Home' and have advocated keeping everything as normal as possible for their young people. Others who run education facilities commented that higher levels of anxiety and opposition came from their teaching staff and felt that the unions and media had heightened these.

Covid 29

Covid and the Residential Children's Home Sector. Week ending 24th January 2021.

The pandemic continues to affect the sector and although most respondents were confident of their ability to 'buckle down and carry on' inconsistent advice continues to make this difficult.

SSP

As the numbers of staff having to self-isolate rise, concerns have been expressed for the inadequacy of statutory sick pay for their maintenance-especially those having to isolate more than once. Owners are sometimes able to maintain full payment but the costs of covering shifts make this prohibitive for the majority of providers.

No respondents were aware of staff being able to access any extra government monies through the 'Track and Trace notification payment' of £500 or in specific circumstances through ESA.

A call has been made by some for parity with care home workers to ensure their SSP is topped up in the same way.

Virus transmission

Several respondents reported that in some cases, the rate of transmission in the homes has increased dramatically, going through their homes 'like wildfire'. Whereas at the beginning of the pandemic linked cases were relatively rare, many more cases of multiple infections are now happening. Some have also reported that although infected children are rarely very ill, they are currently showing more symptoms.

A few respondents have commented that symptoms are no longer restricted to sore throats, coughs, and a loss of the sufferer's sense of smell. They are reporting headaches, sickness and other varying symptoms preceding a positive test.

In this respect, providers continue to call for access to regular rapid testing to prevent such staff entering the premises/responding rapidly to suspected cases.

One large organisation has 10% of homes in one region in isolation which, scaled up indicates the rapid spread of the virus in this lockdown.

Vaccinations

Access to vaccines has been reported as a 'postcode lottery'. A growing number have been contacted by their local authorities to provide staffing information but have not been given dates for vaccinations. Others have local authorities that have prioritised them and their staff have been given vaccines already, but this is a much smaller number. Yet others have been individually vaccinated by their GPs. One provider commented that counterparts in Wales have already been vaccinated.

Those with no access or contact from their local authorities have expressed the desire for a more consistent approach and for confirmation of the sector's status and thus, level of priority.

Further to this, a few providers were unsure of their right to ask staff to have a vaccine or and whether they would be able to refuse employment to new applicants who refused vaccination.

Others expressed their concern that if staff refuse the vaccine, the risk of ongoing infection will not be appropriately reduced.

Education and Family Time

Many of our children remain in school and continue to have face to face family visits. Some providers have taken steps to home school their children due to concerns about introducing infection into their homes. However, family time has been protected as much as possible.

Specific Concerns

We have recently been involved with two providers who care for children with learning difficulties and complex needs, some of whom are non-verbal. Each required intensive staffing levels which precluded the ability for staff to sleep in at the home. Both had children who contracted the Virus, and both were instructed to send virtually the whole staff team home by Covid officials.

Both homes had to be engaged in regular, long meetings with officials from PH, local authorities, and other officials, engaging already stretched resources. Both found that national guidance for children's homes were not accepted by officials and care home guidance was used to support their instructions on managing their children's care. Officials were intransigent and although they acknowledged the children's needs, were unsympathetic in helping the homes find ways to maintain their own staff teams.

As a result of these meetings, staff were threatened with prosecution, homes were unnecessarily disrupted and were instructed to get help from local authorities and agencies for extra staff or move children.

Local authorities were universally unable to offer any help and agencies are reluctant to enter homes where children are infected. The children's complex needs made it necessary to maintain regular, skilled staff and moving them would be equally traumatic. Even though decisions were taken with all officials present, there was a refusal to accept any shared responsibility for the outcomes for the children, with all responsibility being put on the home.

Whilst both homes were eventually able to resolve these issues, both were left feeling that they were poorly treated and frustrated at having to fight to be allowed to care for their own children.

These cases do not reflect the situation throughout the whole of the sector and the majority of officials are working positively with homes. However, with infection transmission increasing and more homes being affected, we call, again, for consistent interventions from officials who all understand the needs of the children in the sector and are prepared to prioritise them appropriately. We also call for all involved in these discussions to be prepared to offer joint solutions and accept shared responsibility for the ongoing care of these children.

Covid 28

Covid and the Children's Residential Care sector week ending 17th January 2021.

Reported by: Liz Cooper - Deputy CEO

Endorsed by: Peter Sandiford - CEO

Infection and its management

Infection rates amongst staff remain low although contact with others who may or may not have the virus remain high and this is partly what is impacting on homes and their capacity to retain a stable staff team. Most respondents have had small outbreaks that have been restricted to one or two staff losses. However, a smaller number have sustained significant losses.

Some respondents were very frustrated at the lack of acceptance by PHE or Contact and Trace of the use of Lateral Flow Tests even when these have been available through their own schools and staff were trained in their administration. In one case, PH insisted that 17 staff isolate even though the provider had a school and was able to test all the staff. Whilst the PH officer accepted the LFT results for their school staff, they refused to consider those carried out on home staff. The same office refused to discuss risk management and help the home find a way forward. The Provider also found that Contact and Trace had dates wrong resulting in staff potentially being off for longer. Their biggest concern was that these departments were unconcerned about the impact on their children and their businesses and disregarded the guidance for children's homes.

In contrast, another provider reported their Health Protection Team's help as 'fantastic'. They found them to be accessible and sensible. The officer is securing Lateral Flow tests for the homes and has recognised that sending a swathe of staff off, was damaging to the children and unnecessary.

Yet another respondent had been allocated a regional case worker to help them with their outbreak who had worked with them and supported their service well. A further provider spoke about St Helen's PH team as 'Outstanding'.

One provider reported that neighbouring homes had received LF tests and their use was accepted by their PH team. Another had 20 staff off in one home. Some of their staff were accessing LF testing and returning to work when they received a negative result, which is not being accepted elsewhere.

More homes are reporting the regular use of PPE as a preventative measure against staff being sent off. Again, whether this is accepted as offering protection from isolation varies dependent upon the 'Covid official' that they talk to.

One provider said that they have been advised to report Covid outbreaks under RIDDOR although this is not universal practice.

Many respondents would welcome access to Lateral Flow tests. One recommended that some are recouped from closed schools and redistributed! A small number of local authorities are already making tests available to homes.

One provider raised concerns about the new concept of 'cumulative contact' introduced in current guidance where 15 minutes of contact is added up over three days, making it far more likely that more staff will be sent off by 'Covid officials'.

Vaccination

Four providers have been offered vaccinations for some or all their staff. Three have been approached by their local authorities directly. The remaining home looks after children with health issues and all their staff have been offered a vaccination.

Three of the homes reported that not all their staff have agreed to have the vaccination. One said that staff of a childbearing age have raised concerns about any potential effects on a foetus.

Those that have been offered the vaccine are very grateful and feel that this will boost staff morale. However, they believe that it will not stop staff having to go off if there is an outbreak in their homes, and one spoke about the potential for making recipients feel that they are free from the danger of infection and may be riskier in their behaviour outside of work.

Children

Several respondents reported infected children or those self-isolating due to contact with infected others. None were reported to be ill.

One provider spoke about a child who had been sent home from school and asked to isolate as 'going insane' due to the changing conditions and rules and the restrictions placed on them.

Those homes that are using PPE report that they have been discussing it with their children and that their acceptance has been generally good.

Most children who were eligible were attending school.

Other

As we approach the last financial quarter for most companies, some have started to assess the cost of Covid and have found that they have generally increased during this current outbreak/lockdown. These increases are mainly staffing related with a higher use of agency and overtime. It also includes increased management oversight and input.

Insurance renewal has resulted in an increase in premiums. This has varied between 100% and 20% although these were not all Covid related uplifts.

Some providers have reported that schools have been refusing places to their staff if both parents are not key workers-which is not government guidance. As a result, a small number of staff have stayed off generally because their partner earns more. One respondent spoke about personally successfully challenging this with her own child's school. Many said that tighter restrictions on schools and nurseries could have a significant negative impact on their staffing capabilities.

In Conclusion

Whilst we applaud those local authorities who have provided lateral flow tests and vaccinations to homes, the external management of Covid in children's homes appears to be in chaos and the potential effects on the staff and children is unacceptable.

The variation in advice from one Public Health office/Contact and Trace team to another is unsafe and unfair and must be addressed, if necessary, at Secretary of State level.

As Lateral Flow Testing is available in schools and adult care homes, it must be introduced into children's homes to enable providers to plan and maintain a consistent staff team, which is universally accepted as vital for our children.

Our sector is relatively small, but we care for some of the most vulnerable children in our society. These children have nowhere to go if our homes are unnecessarily stripped of staff. As a sector we have maintained low levels of infection, have formed protective bubbles around our children and have largely done all of this unprotected and in isolation. We now expect, and indeed demand, that we are enabled to maintain this through proper, consistent advice and the provision of the means to manage our own sector safely and responsibly and to ensure that this situation does not deteriorate any further.

Covid 27

Covid and the residential childcare sector week ending 10th January 2021

New year, new lockdown!

Infection

Covid infection rates are definitely rising amongst children's home staff. However, actual illness does not appear to be rising at a similar rate. The largest number of staff affected are those who have relatives with positive tests and those who have been contacted through Contact and Trace. In response, some providers are advising staff to only provide the home manager's details to Contact and Trace to avoid high staff levels being instructed to self-isolate.

Contact and Trace teams have been greatly criticized by many respondents. Their advice has varied greatly from area to area and person to person and their lack of knowledge about the sector has been reported as 'minimal at best'.

A number of providers spoke about their staff's financial problems arising from being made to isolate with a resulting incentive to not let homes know if they are ill or have been contacted. One commented that they are sure that this is being repeated in every industry throughout the country.

Some providers pay staff throughout periods of self-isolation and enable them to pay it back over time through extra shifts. Others provide online training and allow emergency leave to ensure a continued income. However, this relies on the company's ability to cover shifts and many smaller providers do not have the capacity or financial reserves to do this.

Providers expressed their frustration regarding the response of some Public Health officials. Some have had large numbers of staff sent off for 10 days against national guidance. This has happened in Essex, Lancashire and Cumbria to our knowledge. In others, staff were wearing PPE, but this was not accepted by PH officers as appropriate protection and have insisted that staff go off duty.

Some providers have been told that they cannot lockdown with ill children-which has been proven to keep homes running and maintain consistency-and have been threatened with potential prosecution if they do so, saying staff need to go home and isolate-thereby spreading any potential contacts even further.

Conversely, some PH officers have worked closely with the homes to find a mutual solution that keeps people safe and maintains a service for the young people. Another praised their Health Protection team as knowledgeable and sensible.

However, as a result of all these factors, a number of respondents said that if they can avoid any contact with PHE or Contact and Trace teams, they will do so.

Some smaller providers fear that if they have to send staff teams off in the levels demanded, it will not be long before their companies close. When this has been raised with Public Health, some have been told to get assistance from their Local Authorities. This has largely been condemned by providers as the LAs are under pressure, most homes have children from different authorities in one house and the LA staff are unlikely to work in the way that is required by the home or is beneficial to the children. Some respondents also have concerns about using agency staff as they 'don't know where they've been' and there are restrictions on the numbers allowed on shift at any one time.

Larger organisations were more sanguine but recognised that they are in a better position for finding cover for shifts. However, many reported receiving the same inconsistent advice.

Children

Levels of positive testing remains very low. However, management of positive cases is proving difficult. One provider was told by Ofsted that children cannot be 'encouraged to stay in their rooms' and must be enabled to access all areas as previously. This goes against the instructions being given by Health Protection Teams and Public Health and obviously increases the chances of infection, especially where homes are being prevented from locking down with these children.

Some children are back at school, but one provider reported that their local special school had unilaterally decided to lock down because their teachers felt at risk. These children are unable to access online learning leaving them with no education input.

Respondents talked about their own staff being unable to work if all schools close.

Most children who had family time planned over the holidays were reported to have maintained their visits. A small number had them cancelled and one respondent reported that this is causing their child a lot of distress. Most respondents said that they will try to keep family time going for their children throughout the lockdown.

Whilst homes continue to accept referrals, some now require a negative Covid test before a child can be admitted. Others are consequently struggling to move children on to new placements, because of their admission restrictions.

Around 60% of respondents said that they were unlikely to accept a child known to have Covid although most conceded that they were unlikely to ever be sure that a child was Covid free on admission.

Prevention

Respondents wanted to know where they were in the vaccine regime. This was mainly because of concerns for who would look after their children if their homes close or cannot be adequately staffed. The inconsistent advice was adding to these concerns.

Others have requested lateral flow tests so those coming on shift after time off, could be tested. This would potentially enable homes to alter shifts to allow them to comply with the 48-hour contact rule, and thereby ensuring adequate staffing levels and continued care for the children. Others have suggested routine anti-body testing. All wanted some form of reassurance for their staff and children.

Overall, the respondents want clarity, consistency and common sense from advisors, as there are fears that children will be left more vulnerable by home closures which could be easily avoided.

Covid 26

Feedback from the residential childcare sector. Week ending 20th December 2020.

With Christmas coming, it has been difficult to contact many of our providers. However, we have had good feedback from small and medium sized providers totalling around 100 homes.

Children and Young People

Children were continuing to cope well with the current situation.

One child was reported as testing positive amongst all the respondents. Other children were self-isolating due to parental infection or infections at school. None were ill. Providers reported that they were using PPE when children were positive or isolating and children were largely accepting of this.

Children were preparing for Christmas and those who were hoping to go home were reported to have had their plans finalised.

Covid-19

One home reported two staff who were physically ill with Covid and their specific illnesses had been ongoing for a few weeks. Whilst some homes had staff who had tested positive or been in contact with positive cases, nobody reported any actual sickness. Homes were coping well with any staffing issues arising from isolation, and most respondents had no infection at all.

Respondents welcomed the reduction in isolation periods from 14 to 10 days.

One provider expressed concerns regarding the movement to a lower tier in his local authority just before Christmas. Whilst he understood the reasons, he felt that this might result in the likelihood of more staff testing positive over the festive period.

Respondents had mixed views on vaccinations. Some expressed the opinion that homes and their staff should be prioritised as the constant staff changes that would be caused by an outbreak would affect the children negatively. Another stated that staff had elderly relatives and working in an unprotected environment without a vaccine was unfair. However, others believed that those at most risk of dying or contracting it through direct contact with patients should receive it first and foremost. One said that they believed that it will be a long roll out and did not expect to access vaccinations for some months.

Homes had applied for testing kits through the Ofsted/DFE portal. Most had found the process easy although there had been some teething problems. Only one provider reported that they have since received the kits.

One provider had been offered rapid testing kits for their home but was reluctant to access them as all staff were well, and a rash of positive testing would result in major staffing issues. Others spoken to indicated that they would also be reluctant to use them-especially so close to Christmas! However, some indicated that they would like to have this opportunity. One Merseyside provider felt that the mass testing in Liverpool had contributed to their falling rates of infection and felt that it should be extended to the rest of the country.

Court Proceedings

Only one provider said that delays had caused issues for a child. They were waiting for a decision on a care order and in the interim, the high levels of contact were causing distress and confusion for the

child concerned. Other respondents who had been involved with the courts reported that there had been no delays at all.

Brexit

Providers were largely not making plans around Brexit. Two said that staff who had to apply to stay in the country had done so and no others had foreign nationals on their staff teams. However, a number expressed concerns about potential cost of living rises. They were unsure whether this would affect their fees or whether current rates would continue to cover costs. Other spoke about mild concerns regarding the availability of medicines but those spoken to did not have children on specialist drugs that they thought may be affected.

It was apparent that providers, like the rest of the country, do not know what is likely to happen or what the effects on their businesses may be. As one provider said, "It will just be about readjusting, as we've been doing all year."

Overall, children and staff are preparing for Christmas as usual. Providers remain sanguine and are carrying on regardless.

Unless anything drastic happens, we do not intend to carry out a further survey until the new year, so all that remains to be said is Merry Christmas and a Happy New Year from the ICHA!

Covid 25

Feedback from the residential care sector week ending 6th December 2020

Infection

Infection rates for children and young people remain low. A number of respondents had staff and children who had recently come out of isolation and had no new cases to report, but the levels of fresh infection were felt to be lower than previously.

The DfE have introduced a method of accessing testing kits for homes this week. Managers are applying for 10 tests per home to be used in emergencies when local testing cannot be accessed. Most respondents welcomed this, feeling that it offers them a greater ability to respond to potential infection in a timelier manner. Some felt that specific staff may try and access it for their own reassurance and were therefore aware of the need for home managers to control access to the tests.

Public Health guidance remains variable with some reporting excellent advice and others left frustrated at a seeming lack of awareness of the way the sector operates, leading to advice that would leave children without staff to care for them. As one respondent put it "They don't get it that when our children lose their staff, they are losing their family". A number of respondents repeated frustrations at being kept waiting for an hour or more for calls to be answered, others that officers did not return calls as agreed. However, most officers seem to be working well with providers.

Overall participants are finding access to testing is greatly improved and results are being received within 48 hours.

One local authority has sent out information demonstrating a lack of understanding of how homes operate and disregarding the fact that these are the children's homes. This was highlighted by instructions on the use of Christmas decorations that were unreasonable and would not be followed in private houses. Participants reported that this is not being repeated across other authorities and respondents are generally decorating their homes as in previous years.

Young people

One provider raised concerns that their children were reluctant to go out now and found staying within the premises 'the norm'. However, this was not reflected by the majority of participants. One commented for example, that their children had continued doing their own food shopping throughout and found that this was something they looked forward to.

Most respondents had children planning on going home or having home visits over Christmas.

One respondent reported that 3 of their children had not seen their social worker face to face since the pandemic began although this thankfully appears to be the exception.

Brexit

A very few participants had foreign nationals in their employ and felt that they had all the information required to continue their employment beyond when Brexit changes take effect. The vast majority of participants had no staff who would be affected and no concerns about Brexit affecting their business.

Recruitment

The ability to recruit staff appears to vary in different parts of the country. Some respondents say it remains buoyant whilst some in Yorkshire are struggling to attract applicants. One participant said that many staff employed following lockdown and who may have applied due to changes in their usual employment, have subsequently left-but this does not appear to be a national picture.

Many participants reported a problem recruiting managers. Some talked about very high wages being offered but still not attracting candidates. Some that have attracted external candidates have significantly increased their wages since last year. A number of participants said that internal staff are becoming more reluctant to look for promotion as they believe the current Manager role to be particularly difficult and unattractive. Still others have reported recruiting Managers that they consider suitable who were subsequently refused registration by Ofsted. It was apparent that this is becoming a significant concern in the sector.

Home Closures

A few participants raised concerns that homes appear to be closing more at this time. A number of respondents talked about closing or 'mothballing' provisions within their own services since the pandemic started. Others reported receiving referrals for '4 or 5' children at one time whose homes had closed. Others expressed the opinion that Ofsted compliance actions seem to have increased during this same time period and that local authorities have approached them voicing similar concerns.

Referrals

One participant who track all their referrals said that they have seen a 50% decrease in new referrals in the last 2 weeks and an overall drop of 30-40% over the whole of the pandemic. They compared their figures to the past 3 years. Another, however, felt that new referrals had increased in their area over the past 2 weeks. All respondents who talked about referrals commented on the very high number of repeat referrals being received.

The next survey will take place in a fortnight's time.

Covid 24

Feedback from the residential care sector week ending 29th November 2020

The sector continues to manage well. Little has changed regarding day to day operations and it is apparent that Covid precautions have largely become a way of life in homes.

Infection

One provider who ran both schools and residential homes commented that staff isolating is higher in the schools than elsewhere although sickness remains low. Most staff were off due to receiving alerts from Test and Trace. All small to medium sized organisations that responded had no sickness. Two large organisations had low levels of infection and even less illness but one of them felt that they were beginning to see a rise in infection rates.

One respondent said that a number of their staff were getting very fed up with isolating based on Test and Trace information, as no sooner were they back at work, they received alerts to re-isolate.

Very low levels of young people were self-isolating, and no children were reported as being ill. One respondent reported that one of their children had self-isolated 4 or 5 times, convinced that they had Covid although this has not yet proved to be the case!

A large provider said that they had received very different advice from Test and Trace and Public Health in the same region. T&T had advised that a staff member who had tested positive should stay in the workplace and PH advising that any infected staff could only remain in a lockdown house, if they had exclusive access to a toilet. As one commented, "They seem to be making it up as they go along".

Contact with and visits to the homes

Social workers and IRO visits were very varied. Some respondents felt that the levels of face to face interaction were being determined on a case by case basis. Others that it was down to the individual professional involved. One felt that IRO input had dropped but this was not reflected by other respondents.

A number of respondents felt that social workers were generally more difficult to get hold of and that sickness seemed higher. However, another reflected that the good social workers remained accessible whilst the poorer ones remained poor!

Regulation 44 visitors are largely reported to be back on site. Some attend homes when there are safeguarding concerns and others talk to children in the gardens. Some providers reflected that these visits have become more important during lockdown.

Children are seeing their families face to face or remotely depending upon local authority stipulations and the family member's situations. Two providers enable young people to set up their own bubbles of the people who are most important to them. This includes boyfriends and girlfriends and perhaps best friends to enable a degree of social contact and normality.

Christmas

Homes are expecting to enable their children to go home, where possible and appropriate over the festive period. All respondents said that they were preparing on this premise and that children do not appear to be worried about any potential change in plans due to Covid.

All acknowledged that 'usual' activities such as staff and home meals out and trips to pantomimes are unlikely happen.

Education

Attendance at school was reported to be high for all of the respondents' homes. Although children are being sent home due to outbreaks of infection, a number reported that this was lessening. One respondent said that a school used by them takes the children's temperatures in the mornings on arrival and regularly sends children home despite the homes being able to prove their temperatures are fine once they've cooled down from running around and removing their coats.

The same respondent said that missing school was having an impact on the young people's routines, sleep and subsequent behaviour. Another issue raised was that children did not always engage in education when sent home. As such, they expected to have access to Wifi and other things normally reserved for out of school hours and again, this causes disruption to routines and behaviour. However, overall, respondents said that children and young people continue to manage very well with the restrictions and comply with the use of masks on transport and in school.

One respondent told me about a school that had sent a bubble home as the teacher had D&V and there were insufficient staff to cover. This appears to be the minority but suggests that schools may be under their own staffing pressures.

Children's Commissioner

Very few respondents were planning to watch the Commissioners' presentation, although most had read the reports. Those that had read them were disappointed by their content, although most agreed with issues such as regulating currently unregulated provision. One respondent felt that the negative press that originated from the report was likely to get back to their children and that this was potentially very damaging for their wellbeing and feelings of security.

Covid 23

Residential childcare during lockdown. Week ending 22nd November 2020

Report number 23 and things are getting very confusing in our sector! The format this week is slightly different to better reflect the focus of the report.

Illness and advice

Positive test rates remain low for both children and staff. Any infected people were generally reported to be remaining well throughout. Testing is largely being prompted through being in contact with known cases with most people remaining off work through being traced and told to stay off. However, the effect on respondents varied greatly depending upon the size of the provision. Small providers were more concerned about their ability to maintain a service when they lose 2 or 3 staff out of a cohort of 7 or 8.

Once cases have been identified, respondents stated that they often contact Public Health England to agree a way forward and most respondents have had pragmatic and sensible advice. However, the most common comment has been that the PHE officers have no concept of the work they do, how it differs from care homes and the ultimate need to retain a staff team that know the child and can continue caring for them. Once this has been established, providers reported that a mutual way forward was then established. This was helped through referring to the guidance provided PHE and the DfE specifically for children's homes.

A smaller number of respondents reported problems obtaining practical advice from local PH officers. A number reported being passed from department to department when they have rung for advice and in the North East, local public health officers had adhered to care home guidance despite this being accepted as unapplicable to children's homes as these are complex settings. This has resulted in instruction to wear full PPE all of the time "probably until a vaccine has been obtained,". All respondents were adamant that this would be detrimental to the mental health and wellbeing of their children and that this is not something that they are prepared to do in the absence of illness. Respondents talked about their children being scared of the protective clothing whilst another spoke about their children ripping masks and aprons off staff. Yet another spoke about a child who had been restrained by teachers becoming entangled in an apron and nearly choking whilst others ripped at the plastic and put it in their mouths.

Two respondents were visited by infection control nurses. Their advice was also in line with the care homes advice and some of it was found to be impractical for children's homes. For example, one respondent was told that staff should not be sitting down for meals with children as they should wearing PPE and would have to remove masks to eat.

Despite homes being praised throughout the pandemic for remaining with their children when ill, sometimes for the whole 14 days, some providers have now been told that this may be 'illegal' as test and trace rules say that people who have been in close contact with an infected person must remain in isolation at home. Other respondents said that their local PH officers have accepted this as an effective way of containing the contamination.

One respondent with a large number of homes was surprised to have their company classed by PHE as having an 'outbreak' as they had 2 positive tests in different parts of the country. The staff and children did not meet and there was no common factor between them. Their infection rate is less than 1% for both children and young people.

One participant said that some restrictions advised by PH NE could see them losing up to 60% of their staff despite none of them testing positive. Respondents were clear that when approached, local authorities had been clear that they would not look after their children if their homes were forced to close because of pandemic restrictions. Indeed, one respondent told how they had received an email from a local authority asking if they had any spare staff as they did not have sufficient to keep their own homes open.

As a result, some respondents have admitted that they would be reluctant to seek advice from PHE following any other reports of illness in their homes.

Sufficiency and referrals

There are placement vacancies in the sector, but this varies amongst providers with some reporting up to 50% vacancies. However, the majority spoken to were operating at around 80-85% capacity.

Referral rates remain high. However, most respondents reported that the complexity of cases was also very high including multiple placement breakdowns, gang related violence and repeated requests for placements for the same children. Respondents did not feel that Covid has specifically impacted on their capacity to take children unless the house was in lockdown.

Sleep Ins

As the sector is awaiting the outcome of a further review of sleep in allowances, respondents were asked about their current arrangements. These varied across the respondents with a number of providers using waking staff or a combination of both. Where sleep in allowances were paid, rates varied from £35 with enhancements to £67. A small number of respondents paid all hours at the same rate whether for waking or sleeping duties.

Conclusion

Respondents asked for clarity and the recognition that their provisions are their children's **homes**. Their staff were acting in loco parentis and many expressed concerns about isolating children in their rooms or staff wearing PPE in their houses. It was said by many respondents that the children should not be treated in a discriminatory manner because they are unable to live with their parents. Many other respondents also expressed their concern about who will look after these children if our staff are forced to isolate although well, and local authorities have no capacity to provide the care. The ultimate solution of returning many of them to their families, is neither safe nor desirable.

Covid 22

Report on the independent children's sector and the affects of Covid week ending 15th November 2020

Due to the current situation of a full national lockdown, this week's report focusses mainly on Covid and related matters.

Staff

Infection levels remain very low across the country although localised pockets still remain. The company experiencing staff shortages reported on in previously reports has had a decrease in sickness levels although they still have staff off sick. Nonetheless, Managers and Senior staff are still covering shortfalls as needed.

One large company has 4 homes in isolation. 2 children had been affected and a small number of staff but contact with those infected had meant staff teams had to isolate. The Company operates a system of 'Covid Heroes'. When a positive test is identified, staff move in for an extended period to minimise cross-contamination. The staff from the home who may not be infected but are unable to stay in the homes for extended periods are put on 'reserve' for their home. In essence, this means that staff are being paid not to work and for those on zero hours, are losing their income. This is causing hardship for some and increased costs for the Company, which they have chosen to absorb.

Yet again, staff or children were not particularly ill as those who were poorly mainly had aches, headaches and felt flu-like. Across the respondents, 1 infected staff member had a heart attack. He had pre-existing heart issues that were reported to be worsened by his infection.

Some owners spoke about some staff not being able to meet their bills when unable to work and the resulting potential for them coming into work when ill.

Other contingency plans for managing staff absences include having staff teams working in bubbles to enable one bubble to isolate if required, leaving the other team free to cover shifts. Two small providers struggle with any contingency as they do not have the financial reserves to bring in agency for any protracted length of time or 'mothball' their homes. Further to this, they do not have any significant reserve bank of staff to call on. A large provider reported that each home had its own service disruption plan and if needed, senior management staff would be expected to cover shortfalls. Another spoke about specific staff agreeing to stay should the worst come to the worst.

Many respondents talked about staff anxieties being raised at the current time. One spoke about staff refusing to have a staff member back who they suspected of having Covid due to a runny nose.

Respondents were split regarding the introduction of regular testing. Those in favour felt that it would offer reassurance to staff, demonstrate that staff were valued and reassure

placing authorities. Others felt that it increased the chances of more staff having to go off who were unknown to be currently positive but remained asymptomatic.

Both viewpoints were expressed by small and large providers.

A small number of respondents talked about groups of staff who did not accept the lock down measures or believe the science behind it. One expressed the view that they would possibly refuse to take tests.

One provider was totally against regular testing for children feeling that this would be discriminatory and a violation of their rights.

Children

The level of infection for the children was only 2 across all respondents.

Children are reporting to be attending education and the feedback on schools was mainly very positive with very few children being sent home.

Children are continuing to see family and those who are most important to them either face to face or remotely.

General

Current DfE guidance was felt to be generally 'ok' but most respondents still found that it lacked specific clarity for the sector. Respondents spoke a lot about just using their common sense now and relying on previous experience.

Most respondents found PHE advice ok, but conflicting advice was still being given, sometimes from officers within the same locality. One respondent commented that some PHE officials had no concept of how their advice would affect homes but were consistent on government guidance.

The App was not popular amongst many respondents and very few encouraged their staff to use it or found the alerts useful. One did say that it helped homes identify their local 'Tier' rating but thought that this was perhaps now irrelevant due to the national lockdown.

One medium sized company rated good and outstanding has almost 50% vacancies. They are receiving very high levels of referrals but most of them are extremely challenging young people who they can't accommodate. When they have indicated that they could take a child, they have been unsuccessful, and suspect that this is because the volume of applications for these children is very high.

In conclusion, infection remains low, serious illness, even lower, and homes continue to carry on regardless!

Covid 21

Covid 19 and the residential childcare sector. Week ending 8/11/20

Today, only a brief ring around was carried out with a very limited focus, in light of the fact that people are preparing to lockdown.

Staff

All but one respondent had no staff with a positive infection.

One company with a few staff off with Covid had a complicated scenario as they employed couples who reinfected each other- as has been reported previously. They were struggling to staff their homes due to the staff shortages. This respondent was happy with the new lockdown as they believed that it might stop some of their staff from going out and possibly bringing the infection into their homes.

Another provider said that they will be telling their staff that they must comply with the lockdown in order to ensure that their homes remain open. They also, however, accepted that they had no authority to insist or way of ensuring that this is complied with.

Providers expressed the opinion that they were generally well prepared for this next lockdown and reported that measures already in place or instigated at the previous lockdown were sufficient to cover the next one.

A couple of respondents remain unhappy with the levels of guidance, in particular, around who might be considered 'essential visitors' to homes. Others stated that they are waiting for further guidance that they expect on Friday.

Respondents mainly had no fears about the new lockdown-one just stated that they had run out of the energy needed to try and 'gee up' his team again!

Children and Young People

Children were largely aware of the new restrictions. Whilst most believed that their young people would be largely unaffected, one respondent who cares for older children expressed the frustration by saying that it 'was like the government had recanted on their word to them'. They had all complied really well throughout this time, but now, in their eyes, for nothing.

Respondents again confirmed no child illness although 1 was self-isolating.

Most providers had contingency plans that should allow young people to maintain a degree of contact both face to face and online.

All respondents were happy that schools remain open to enable children to retain some sort of routine.

One respondent spoke about two children whose placements should have ended but remained in placement due to the local authority's inability to find a new placement, possibly due to Covid. These children were now blocking the company's ability to fill the other beds in their homes.

The same provider spoke about a sudden surge in referrals over the last day or so but that most of them were very high end, requiring 2:1 staffing or solo placements.

Another respondent spoke about small matters being an issue to their children. For example, one smoked and their cigarettes were provided by family. They were reported to be concerned that they wouldn't have any supplies during this lockdown.

Another spoke about a child who was doing reunification work with her family that she did not want to stop because of the upcoming situation. The home has looked at the guidance and believes that they will be able to manage this within current restrictions.

Overall, it would appear that the sector is ready for the next lockdown.

Covid 20

Feedback from Independent Residential Care Providers. Week ending 1/11/20

This report has been completed since the introduction of new Tiers and guidance. Homes from all areas of the country from the lowest to the highest Tiers are represented in this report.

Staff

There has undoubtedly been an increase in the number of staff off for Covid related purposes. Some live with someone who is positive, others are self-isolating because they received a message through the test and trace app and a small number are showing symptoms.

One company with homes in both Tier 2 and Tier 3 areas has been particularly hard hit. Concerns were raised that some of the staff had been off more than twice with one self-isolating 4 times since March. Not all staff were displaying symptoms, and none have required hospitalisation although they reported being ill. The provider commented that the test and trace app had been particularly impactful.

Most providers, including those with over 600 staff have very low levels of positive testing and reports of actual symptomatic illness are lower still.

Only two providers felt that positive testing and self-isolation were beginning to rise to similar levels experienced at the beginning of the pandemic.

Providers spoke about having teams of staff who have agreed to stay in lockdown with their children should they become ill. The most hard-hit respondent spoke about staff doing excessive shifts in order to cover their homes.

A few smaller providers fed back that annual leave continues to accumulate, and they are having to make decisions about carrying leave over to 2021 or offering financial remuneration.

Concerns about the continuing viability of one medium sized company was raised and part of this was whether local authorities would be reluctant to place children in a high Tier area or in one where staff had tested positive.

Two respondents were very complimentary about the advice and support received from their local Public Health England (PHE) Health Protection Teams (HPT). These included Darlington and Lancashire and Cumbria. They were described as being sensible and being pragmatic about how the homes can safely manage any concerns.

Children and Young People

Infection rates for children remain low. It was reported that there was 1 positive infection reported and 1 who was awaiting the outcomes of a test, neither were ill. Staff said that they 'were just being sensible' in response to child illness. PPE was not being used due to the age and needs of the children involved. This was not enforced on staff.

A few providers said that some of their young people are now beginning to suffer mentally from being kept apart from relatives from high risk areas, especially where other children in the homes have been able to maintain face to face contact with their families. One spoke about a young child who normally has an overnight stay at Christmas already fearing that this will not happen.

Another spoke about the unacceptably high turnover of social workers experienced by their children and how this was also impacting negatively on them, but this was not explored further with other respondents at this time.

Other providers spoke about maintaining contact for their children as they considered it essential for their mental health.

One provider felt that a local school was using Covid as an excuse not to maintain a school placement-and they had successfully challenged this. However, no other providers were reporting poor school experiences prior to the current school holidays.

DfE Guidance

Clearer guidance specific to this sector was issued by the DfE on 26/10/20. Over half of the respondents had received and read it. The view as to whether the guidance was clear enough was mixed. The ICHA will resend it in its next update and seek further feedback at the next 'ring around'.

Ofsted

The majority of respondents had received an Assurance Visit. A significant number found the visit to be at least as rigorous as a full inspection and those still in RI or Inadequate reiterated the view that this could have been a graded visit.

Those providers who use electronic recording systems were generally happy to offer Ofsted either unlimited or restricted access. None of those who took part today said that inspectors had required them to print off information as reported by one previous respondent. Concerns were raised regarding privacy and GDPR but most were happy that they could trace which records Ofsted had accessed and if they had concerns, would challenge accordingly.

Local Authorities

Recent news articles have suggested that providers have been requesting increased funding from local authorities due to Covid. None of those spoken to had made such an application and two described such an application as 'morally repugnant'.

Some providers confirmed that they have applied for usual annual uplifts due to increases in the minimum wage or because it was part of contractual agreements.

Overall

Although infection rates are rising, there does not appear to be an overwhelming rise in illness. This was expressed with some frustration by some participants as it was felt that in any other circumstances, staff would be working, and they would naturally go off if worse affected. Regardless, this snapshot of the sector suggests that it continues to remain fairly robust, and there were reports of providers opening new homes. However, where companies are badly hit, the potential devastation to businesses and the children receiving care remains of concern.

Covid 19

Feedback from Residential Care Providers. Week ending 11/10/20

It is an interesting situation to be back in England following a sojourn in Jersey where the level of infection is low, and people have freedom to get on with their daily lives. This ring around has, more than any previous ones begun to really highlight people's frustration with the ongoing situation.

Children and young people

There were no reports of children testing positive.

Many, but not all respondents have sadly reported that exposure to previous influences has begun to show a rise in challenging behaviours amongst our children.

However, all participants said that their children are back at school and generally doing very well. Children are largely reported to be enjoying being back with their friends and peers and experiencing a slight return to normality.

Children are generally seeing their families again although some respondents spoke about the difficulties of having children in the same homes who originally come from different areas, one of which may be in lockdown. They have seen their renewed contact with their families curtailed again whilst others continue to have their family time.

One provider said that they are experiencing difficulties arranging contact for a child who uses a contact centre-as they are currently closed. Although the home has offered to monitor the contact, they are finding it hard to reach an agreement with the placing authority.

One participant said that all but one of their social workers was back in their home with one maintaining virtual contact only despite neither the home nor the social worker being in lockdown areas. The provider expressed the opinion that the social worker found it easier to do their job virtually. All other participants reported that social workers were back to normal.

Staff

There have been a few staff testing positive or encountering someone who tested positive, but no reports of illness. Respondents report a lack of clarity regarding the guidance resulting in some anxiety from staff.

Respondents reported that there are still difficulties getting access to tests. One provider spoke about a child having to travel from Norfolk to Milton Keynes for testing.

Regulation 44 visitors were reported to be back in the homes even in lockdown areas.

Track and Trace

One participant reported being told personally about being in contact with an infected person but receiving no notification from Track and Trace, despite their being informed.

Some providers spoke about problems with the app. One's phone shut down completely and other's phones had their batteries drained after uploading it.

A few providers expressed frustration about the lack of specificity of the information sent through on the app which makes it difficult to make informed decisions about whether people are at risk or not.

One questioned the accuracy of the app as he stated that he had been travelling the country and using the underground 'for the last couple of weeks' but had no notification of potential contact with any infected person which he found hard to believe..

As a result of all this, a few respondents have said that they will not be advising their staff to upload the app.

Ofsted

One provider spoke about difficulties with registering a new property around conflicting information and a lack of updates from Ofsted staff. However, others have said that they have had no issues registering their new services.

Assurance visits have started. One company said that there was a difference in process with one home having an unannounced visit with the other following the protocol. The unannounced visit was in a lockdown area which the provider felt compromised the home somewhat.

General

One respondent who had been in contact with Public Health England found their advice contradictory and confusing and their local office was hard to get hold of, but most respondents have had no contact.

All respondents had sufficient PPE and were finding it easy to access.

Participants were asked their opinion of available government guidance. Whilst a few were happy with advice, the majority found it confusing and conflicting and felt that it offered little constructive help when positive tests were reported. As one provider said, "We have a duty of care to our children, we can't just go off because they (staff) had just received a message saying they'd been in contact with someone, somewhere, at some time who had a positive test."

Covid 18

Covid and the Residential Childcare Sector Week ending 6th September 2020

This report reflects the first ring around for a few weeks. Covid restrictions are changing daily with local lockdowns being applied and lifted, and holiday plans remaining precarious for most of us. However, feedback from the sector suggests that most people are managing the situation well.

Staff

1 organisation reported 2 positive cases amongst their staffing cohort of nearly 500. Both were from separate homes, but the infection appears to have been contained. One of the staff lives in shared accommodation and although they have not been ill, they have been in contact with someone who was. It would appear that members of the household are being infected at different times/ re-infected, and she has had 2 positive readings. The company cannot require her to remain off until she receives a negative result due to employment law, and she insists that she will not get retested and wants to return to work-potentially infecting others. This is the only such case we have come across, but it demonstrates the complexities of managing this new situation.

Most homes are reporting that face to face meetings are starting to happen, with the option for some participants to join virtually. Almost all respondents had seen an increase in attendance as a result.

Staff holidays have built up in some companies and these are being managed through carrying them over, paying them or coming to local arrangements. A small number of participants reported that some staff have fallen foul of the change in quarantine whilst away. Most companies have pre-empted this issue by introducing temporary travel rules where knowingly travelling to an infected area may result in 2 weeks unpaid isolation on return. One small company that was affected by this felt that the Government should offer a level of compensation as it is outside the control of the providers.

One home in a local lockdown has found that social workers and Reg 44 visitors have been unable to visit as they are not allowed to have visitors in their homes or gardens. This also affects contact for these children.

Recruitment remains good. One participant reflected that they normally have 3 or 4 responses to adverts but their latest one yielded 25 applications. A good number came from retail backgrounds who expressed concerns that their industry was now moving online. A number also stated that they previously hadn't known how to get into the profession or felt that they hadn't got the right background. The pandemic has made them re-evaluate and take the risk.

Young People

Participants are reporting that there has been no return to previous challenging behaviours for most of their children, despite restrictions being lifted in many areas. One large provider

reported that she 'can't fault them' and reflected that many have enjoyed the lockdown experience.

Face to face family time and overnights stays are now becoming more usual for children, excepting where they have been returned to lockdown due to infection of local conditions.

Many areas have not returned to school, but preparations are well underway in schools. One participant reported that at least one child could not understand why he couldn't continue with online education. A number felt that their young people had achieved far more without the distractions and social issues that come with schools and were concerned about the effects of a wholesale return. Some young people remain anxious about going to school, but it was also reported that as many are eager to meet up with friends again or pick up their studies.

A small number of participants said that it is becoming difficult to get some children to leave the home at all, but thankfully this seems to be the minority. One reported that children's habits have changed with one previously being obsessed with online gaming, now showing more interest in gardening!

Older children are beginning to now move on from placements freeing up beds. Referral rates are generally good but are reported to fluctuate.

Other

One participant has had an Ofsted Assurance Visit. She found little difference to a full inspection and felt it should have therefore attracted a grade.

One participant reported that 2 commissioners had refused to consider their application to take a child as the home was rated RI despite Ofsted's encouragement to revisit their placement criteria. They have been encouraged to share this information with Ofsted.

All in all, the sector continues to manage well. Children are proving to be very resilient and are maintaining their 'lockdown behaviour'-whether this will continue once schools are back will be reflected in the next report!

Covid 17

Covid and the Residential Care Sector. Week ending 16th August 2020

This is potentially a new phase for the sector as more areas go back into a form of lockdown and children and staff who would normally be sunning themselves abroad, find their options severely limited.

Staff

One positive test was reported by our participants. Unfortunately, that staff member came in to work knowing that she was waiting for a test result based on contact with a known sufferer. She subsequently tested positive. As a result, the home went into lockdown, the staff team has been isolated for 14 days and young people have had to curtail and change all their plans. Staff, classed as 'Covid Heroes' by the company have agreed to cover for extended periods from other homes. Unfortunately, under the new employment rules, the staff cohort in isolation no longer qualify for SSP for the whole of their time off, and there is a lot of anger and frustration across the board.

No other reports of illness were shared.

Participants have nearly all discussed or considered asking their staff to get the flu vaccine. The majority intend to fund this if necessary.

All shielded staff had returned or were in the process of returning.

Participants continue to recruit and most report that the level of applicants remains high. However, one found the process of recruiting massively time consuming and difficult for a small provider.

Apprenticeships were discussed. The response was largely split. Whilst some say they would welcome them, others felt the young age would be prohibitive and other, smaller providers, that it would negatively affect their percentage of qualified staff against regulations.

3 participants were from lockdown areas. One commented that it had little effect on their immediate area with people gathering as before. All commented that it had little to no effect on their operations.

Participants were asked about their response to the recent ruling on the challenge to Si 445. Overall, they were happy to wait for the lapse of changes in September.

Young People

No young people were reported as testing positive for Covid.

A couple of participants had noticed a slight deterioration in young people's behaviours, with one commenting that trying to implement Covid related matters was especially challenging for some of their children. The other felt that this was largely due to a group of young people 'living on top of each other' during the lockdown.

Children are on holiday still and some are now able to spend more extended time with families with overnight stays happening more often.

Participants were asked about accepting children on Deprivation of Liberty orders. The majority of participants said they would not consider a referral for a child on a DOL if the home accommodated other children, as they would be hard to enforce. Another felt that they had no place in 'normal' residential childcare and should only apply to secure orders. Another felt that they were receiving mixed messages from social workers regarding their potential uses and that they were encroaching on good parenting decisions. Only 1 participant had looked after 2 children in the same home at the same time on these orders and had found them easy to manage within the environment as they were limited to telephone usage.

Other

One provider had received a referral from Lincolnshire that morning that stated that they would consider homes requiring improvement and those who had demonstrated improvement on previous inspection outcomes. This is great news although other participants did not report similar.

Other participants reported ongoing difficulties contacting local authorities with many offices remaining closed with poor systems in place to divert calls accordingly.

In conclusion

Overall, the feedback from participants remains mainly positive and there is still a lot of the Dunkirk spirit out there!

Covid 16

Covid 19 and the RCC Week ending 2nd August 2020

A decision has been taken to reduce the frequency of these reports to fortnightly for the foreseeable future.

Staff

Despite local media reports in Northampton of positive test results in one of its local authority children's homes (10th June), we are not witnessing a similar outbreak in the homes who have participated in our ring around. Again, no participants reported any infection amongst staff or children.

One participant reported that all tests were returning in 24-48 hours. They recently tested a young person and received the negative result the following day.

Participants are reporting that staff remain largely positive despite the potential of a second wave. One commented that they were 'buoyed up' by how well they had coped with the initial infection.

One participant commented that he had been reflecting on his staff's dedication and positivity during the pandemic. He believed that this would affect decisions made in the future, in particular around working conditions.

A very few staff have ventured abroad, but as yet, have not been caught up in any quarantine on return. However, one did say that they currently have staff in Spain and are concerned about the potential of them being off work on their return. Others said that they expect staff to check out restrictions before travel now. Some participants are still concerned about untaken holiday entitlement and many are looking at different ways of dispersing it.

One provider is opening a new home and reported that the response to recruitment adverts was better than ever. They had noted a lot of applications from people from within the sector leading them to believe that not all providers have been coping well during this difficult period.

Shielded staff are back or due back on 1st August.

Social workers attendance at homes is patchy with many continuing online visits. However, more face to face visits are now taking place.

All participants felt confident about their planning for any second wave. Supplies of PPE were robust and one reported that they were still working through their food stock from the initial lockdown.

One participant had reviewed referrals during the lockdown and found that they had almost halved although they had picked up more recently. The same participant had noted that some commissioners had started asking for references from other authorities prior to placing, a practice that they believed had stopped.

Children

Children and young people continue to do well. They have broken up from school and one participant commented that his young people appeared to visibly relax on hearing school was out despite not participating in education for most of the lockdown. Possibly relief from not having to refuse each day!

Some children and young people are already on holiday at caravans and campsites and many participants reported that they have booked or are planning their summer breaks too. All stated that they will not consider foreign breaks for them this year.

A number spoke about trips to theme parks having already taken place.

Face to face family visits are taking place but again the picture is patchy. A small number of participants reported a blanket ban being imposed by their local authorities that has not yet been lifted.

Direct contact with children and young people is increasing across the board but one participant commented that a lot of their children had benefitted from being shielded from people who cause them stress and anxiety and would like to see this ability retained.

Many young people were reported to be venturing out using masks and hand wash under their own recognisance and were found to be very responsible and keeping themselves and others safe.

General

A few participants are becoming frustrated and are eager for things to return to normal.

A number have been following the court case to try to overturn Statutory Instrument 445 and support their endeavours. However, some would like to see the ability to have virtual contact retained if appropriate.

Assurance visits by Ofsted continue to receive a mixed response. One participant had been told by commissioners this week that they do not consider homes that are classed as requiring improvement regardless of monitoring visits and outcomes and therefore feel that Assurance visits without a grade are of limited value to them. A few participants said that they struggled to understand the rationale behind these visits whilst others expressed relief at knowing that they won't see Ofsted until September!

A few participants said that Ofsted have been very vigilant during lockdown, responding to Reg 44 findings swiftly and another was impressed by their registration experience.

Covid 15

Covid -19 and the residential childcare sector. Week ending 21st July 2020

Staff

Again, no confirmed infection has been reported.

One small provider reported that staff sickness since the easing measures began has been very high with all her staff going off sick at some time. No one has had Covid symptoms. However, this was isolated across all our respondents.

One larger provider spoke about possible mental health issues for their staff due to a number of factors: changing shift routines during the pandemic, an inability to use their normal 'release' mechanisms such as the gym or the pub, not seeing families and then being anxious about returning to work. Shifts had sometimes changed from 8 to 24hours but when they reverted, staff became more negative and emotionally labile.

Anxieties came out in other ways such as a staff member continually refusing to return to work and finally using the excuse that they had no dog walker due to Covid.

One respondent commented that they had 'seen a different degree of resilience' from their staff. They have been mindful of personally reflecting this and rewarding efforts with their teams.

One small provider has initiated psych sessions for all their staff during this time.

Children

No reports were received about children being inspected.

Children have now started their school holidays but their experiences of securing a return to education has been variable. Several respondents reported that some schools have not offered placements unless homes have rigorously challenged them, despite children having EHCPs.

Some schools have told providers that children are 'safer' at home than school but provide no evidence to substantiate this assessment.

A few providers talked about ongoing struggles to secure placements for children with a number talking about struggles of 6 months or more.

One provider said that all the schools in his area are academies and refuse to accept looked after children.

Most respondents reported that children are beginning to have face to face visits with family, friends, and social workers.

One respondent noted that online contact with people was not suited to their younger children as they did not fully understand the medium and struggled to concentrate on it.

The same respondent said that the children wanted to hug their relatives so were struggling with continuing restrictions on face to face contact.

One commented that their children had become extremely dependent since the lockdown. Despite

General

Respondents were generally very sanguine regarding a 'second wave'. One commented that they did not feel that the sector had really been hit by the first one, but all confirmed that they already had everything in place from the initial lockdown measures.

A number commented that if a second wave were to happen, they would like more specific guidance from the DfE instead of being included with schools and care homes- none of which operate in similar ways to children's homes.

Respondents mainly had or intended to respond to the Government's consultation on the relaxation of amendments to regulations.

Social workers and regulation 44 visitors are coming back into the homes more.

Many respondents felt that Ofsted should at least inspect and grade the inadequate homes in September. Providers spoke about the negative effect on staff morale when their homes were graded as RI or Inadequate and one said he felt a personal need to continually justify himself since being graded in this way.

Overall, no infections were reported and things are beginning to get back to a degree of normality.

Covid 14

Covid -19 and the residential childcare sector. Week ending 12th July 2020

There will be no ring around next week as I'm having a welcome rest. Nonetheless, this week has included some new participants and some interesting feedback.

Staff

Again, no active infection has been reported.

Homes who have staff who have been exposed to Covid have had a mixed experience of Track and Trace. 3 participants either had infected staff or staff who had been in contact with infected people whilst Track and Trace was in operation. Of these, only one set of staff were contacted by them. This has led to some concerns as to the efficacy of the service.

A couple of providers have staff who have taken antibody tests. Both appeared to have particularly high levels of antibodies present. While this may just be a coincidence, speculation has arisen as to whether this is as a result of staff's prolonged, unshielded exposure to children and each other throughout the pandemic.

One small company raised concerns about their staff now having holidays that they will struggle to accommodate or carry over to next year.

No participants with homes in Leicester reported any infection. All stated that their homes were not in the 'hotspot' areas but suspected/had staff who lived in those areas. Regardless, they all continue to attend work and there have been no adverse outcomes.

One participant expressed the opinion that some of their furloughed staff may be reluctant to return now and that this may be a combination of being paid whilst not working, and fear.

Children

Homes were asked whether they accommodated any children who were classed as unaccompanied asylum seekers, as some local authorities have seen an increase in their numbers. None of those who took part had any children from that background currently living with them, but most were open to the possibility. Some potential issues identified were language barriers, degree and complexity of trauma, lack of paperwork and culture.

Concerns were expressed about the decision to empower Public Health England to instruct homes to restrain Covid infected young people, who may leave their home against advice. Providers generally do not consider this an appropriate use of restraint. They also expressed concerns that PHE officers have no knowledge of our children and the potential adverse effects that may come from this. A number further stated that if the child were ill, they were unlikely to want to leave and if they were asymptomatic, staff would be unlikely to know that they were infected. One participant felt that PHE's involvement was appropriate as a last resort. One participant said that they would only comply with this if Ofsted gave their approval.

A small number of participants spoke about their frustrations with schools. One provider had been told that their child would not be offered a placement because they were from a children's home and he would 'be safer there'. Another was offered an hour a week 'sand play'. Both children have EHCPs. In contrast, another company had a lot of praise for mainstream schools who were happy to take their children back despite not having EHCPs. Another provider spoke about how risk averse their children's schools were.

Participants spoke about continuing difficulties attracting referrals to RI and inadequate homes. Although Ofsted is of the opinion that RI homes could still be used, local authorities appear to remain unwilling to place with them.

One provider had noticed that younger referrals are now becoming more frequent whilst another noticed an increased number of children with Deprivation of Liberty orders due to gang involvement and other dangerous activity. She had received 15 such referrals today alone.

General

Providers expressed frustration that Ofsted will be visiting homes but not grading. One talked about a home that has not been visited for over 2 years even though it is graded as requiring improvement. Others felt strongly that RI and inadequate homes should be inspected and graded from September onwards and Good and Outstanding ones left until April 2021.

A few participants expressed their concerns at the sheer volume of contradictory information and guidance regarding Covid that has made planning, best practice and potentially safeguarding issues difficult to address. One participant commented that it left people overwhelmed and not knowing what to do.

Overall, homes continue to do well. Nonetheless, there is a growing air of frustration and concern about the lack of clarity and appropriate guidance available, and a feeling of there being no end in sight to our current situation.

Covid 13

Covid -19 and the residential childcare sector. Week ending 7th July 2020

The focus of questions this week was mainly on the impact of changes in regulations and management of children with signs or diagnoses of Covid-19.

Staff

Yet again, no new infections have been reported amongst staff. Some participants have reported that general sickness is creeping up again-but feel that this is probably to be expected with continuing easing of restrictions and schools reopening.

Homes are looking at returning shielded workers with many offering staggered returns to work. Some respondents reported that this group is showing some anxiety about returning.

Most participants are planning for Reg 44 visitors to return to their homes in July and a number had already had visits from social workers.

Children and Young People

No infections have been reported. One respondent had a child who was waiting for a test result as someone at their school was infected. He is showing no symptoms and remains well.

A number of respondents reported that they are struggling to get their young people to go out. Their preference has become remaining in the home with staff. One commented that attachments with staff have increased significantly, they feel safe in the home and almost require an excuse to go out now.

Children are attending schools on reduced timetables. Individual homes reported difficulties re-engaging their children with education-but this was also an issue prior to lockdown.

Respondents were asked whether they would be prepared to restrain a child who was showing symptoms or had a diagnosis of Covid-19. All respondents felt that if the restraint was absolutely required, then the illness would not stop them intervening. Most reflected that they carry out very few restraints, so it was unlikely to be an issue. A few commented that staff would probably already be using PPE due to the child's health status.

Respondents were also asked what they would do if the same child was insisting on leaving the home. The vast majority of respondents said that they would use their relationships to try to dissuade the child from leaving, they would follow them-utilise all MFH procedures as appropriate but there was no appetite for restraining children to stop them from leaving. Most reported that MFH was very low. Children were, on large, happy to stay at home or near staff and those going missing were generally isolated cases.

One participant reflected that they were still seeing very few younger referrals and expressed concerns that they were 'trapped' during the lockdown and speculated that there could be an increase once home visits, courts etc return to normal.

General

Participants were asked about the effects of regulatory changes (Si 445).

Most participants felt that there had been an increase in social work contact, and they had been more available during the lockdown, although a few felt that there had been no change in availability or frequency of contact.

A number (although not all) of the participants spoke about the reduction in anxiety they had seen in their young people when talking to professionals and family remotely. They felt that the lack of physical presence of others made them less intimidating. One also reflected that children have largely engaged better with remote psychological therapies too. These participants would like some form of amendment to legislation to enable remote visits and contact to take place ***where the decision was based on the needs of that individual child.***

Around a third of our respondents wanted Si445 retracting completely. One commented that professionals need to be back in the homes in order to lay eyes on the children and the environments. They were strongly of the opinion that you cannot adequately safeguard remotely.

A number expressed the opinion that allowing some remote working may increase the contact that Ofsted could have with homes.

All respondents were expecting Si445 to be repealed on 25th September 2020 and none felt that the changes should be retained.

Only two providers said that they had asked for any help with Covid-19 expenses from local authorities. One was successful the other not. No one reported asking for a blanket Covid-19 uplift. A small number of providers had applied for a general annual uplift based on cost increases.

One provider spoke about being surprised that their local authorities were suddenly paying on time where another from the middle of the country said that the situation on late payments throughout the lockdown had been 'horrendous', making operation difficult.

I spoke with some providers from Leicester. Most had not felt any effect from being re-locked down but had some concerns regarding the possible loss of staff through track and trace as they live in the 'hotspot' areas. Other providers expressed concerns that this may be the start of a spate of similar events.

In conclusion, we are keeping calm and carrying on.

Covid 12

Covid -19 and the residential childcare sector. Week ending 28th June 2020

Since the last report, lockdown easing measures have continued. Many more shops are now accepting customers and of course, our staff and children love to shop as much as anyone else! As the potential for new infections increases across the board, we are closely monitoring the situation in the sector. Again, over 400 homes are represented by respondents from across the country.

Staff

No new infections have been reported amongst staff.

Some respondents talked about working with their staff who have been shielded to help them prepare for return possibly in August. Contact has been maintained with them throughout the lockdown and some are more confident about returning than others. One commented that those staff who have been off looking after partners or relatives who are shielded are perhaps more eager to return than others.

Discussions were held regarding the potential effects on companies from those staff who have pre-booked foreign holidays and who are hoping to still take them. At the current time, they would have to self-isolate for 2 weeks and this could cause some issues, especially in smaller homes. Responses varied from hoping the issue will resolve itself through the further easing of restrictions, to staff having to take leave either paid or unpaid to cover the self-isolation. Many respondents felt that this was unlikely to be a big issue as many staff had cancelled holidays, but some were unaware of the number of staff that this may apply to within their own organisations.

Overall, fears that leave may have accumulated have largely been allayed due to people taking advantage of the nice weather since March.

Many respondents have recruited new staff during the lockdown. The general impression was that their backgrounds were more diverse than previously, with many coming from retail and the hospitality industry. One had received applications from cabin crew. Some concerns were expressed that some of these new recruits may return to their old careers once restrictions are lifted.

One member spoke about issues opening new services due to the state of the property market. Premises have been identified but deals have not been concluded as the old owners have not been able to view any potential properties. Others have been delayed due to issues obtaining building materials such as plaster to bring their properties up to standard.

One provider had raised concerns that an inspector was unwilling to accept an agency's recruitment checks and as a result, they were now asking for copies of DBS's and references. When raised, some respondents were already doing this whilst others were clear that they checked out the agencies prior to accepting their staff and believed that this should be

sufficient. Many commented that they only ever use one agency and that this increases their confidence in their staff.

Children and Young People

No infections have been reported.

Homes have reported that whilst young people are going out more with staff and some are attending school, overall, they are preferring to stay close to staff within their 'home bubble'.

Some are reporting a minor rise in children going missing but overall, levels remain very low.

A number of respondents felt that their young people were displaying signs of raised anxiety levels around the prospect of re-establishing face to face family time. One commented that they wished local authorities would stop pushing for their children to re-establish this contact asap. However, an equal number of respondents felt that their young people were eager for more face to face contact and in many cases, this had taken place already.

Children are returning to school. One provider who runs their own school-and has kept open throughout lockdown-are now operating at around 60% of capacity. Another provider whose children have just returned to school was frustrated that it subsequently closed following a report of positive tests for 2 teachers. They had been under the impression that classes were operating in 'bubbles' to minimise any risk of spreading infection and 'bubbles' would close, not schools. A number of respondents felt that a number of their children continued to do better studying at home as they struggled with the school environment.

One provider reported that they were now returning their children to face to face therapy for the first time this week.

General

One provider had not received CAMHs services throughout lockdown but all other respondents who accessed this service said that it had continued throughout. One commented that phone contact had been better and more regular than a face to face service.

A number of respondents have had police involvement. All bar one respondent reported this as being positive and supportive.

Two providers spoke about how quickly their managers were being registered by Ofsted, from 2 days to two weeks.

Overall, the sector continues to do well. Despite an ease in restrictions, no infections have been reported and life is slowly returning to some semblance of normality.

Covid 11

Covid-19 and the Residential Childcare Sector week ending 21st June 2020

Lockdown measures have been eased yet again and images of large queues at Primark and Ikea seem to be the norm. Nonetheless, as the following report shows, little has changed in the daily operations of homes.

Staff

Instances of reported Covid infection remain low. The one home that had been particularly affected in the last few weeks now has all staff back at work and fully recovered. They have been liaising with Public Health England and are now introducing a temperature monitoring system (GDPR dependant) for all staff and children.

The increased susceptibility of BAME groups to Covid infection was discussed with respondents. Many homes have staff and children from these backgrounds but only one reported a staff member expressing any anxiety. However, that staff member also had other conditions that made them more high risk. The home reported that they had not expressed any specific concerns in relation to the job making them any more at risk.

Track and Trace. Homes have not been experiencing any illness so have had no track and trace alerts from internal infection. Furthermore, there has been no suggestion of external infection impacting on them either.

Respondents yet again asked for a more cohesive and sector specific policy around Track and Trace.

Respondents talked about changing staff shifts to enable them to travel at less busy periods when dependent upon public transport. They are also supplying masks and gloves as needed.

Staff holidays are potentially an issue. Providers have reported that staff haven't taken their leave in the early part of the year due to covering shifts, early self-isolation or reluctance due to not knowing what the situation will be in the near future. Some respondents are looking at carrying a limited amount of leave forward, others potentially offering payment. Further to this, caution regarding a second wave and staffing implications are resulting in less leave being taken.

Children and Young People

No new infections were reported by any respondent.

As with staff, respondents were not identifying any undue concerns or anxiety from children from a BAME background.

No homes reported an increase in missing from home behaviour. A number felt (although didn't have actual figures to substantiate it) that incidents may have reduced. Equally, no concerns regarding an increase in trafficking behaviour were reported.

Further to this, recent local media concerns regarding the increase of drug gangs online, recruiting young people were not being realised by our homes. However, one provider

stated that she has seen an increase in referrals from that area identifying children involved in this behaviour.

Young people are largely continuing to stay in with staff, with a number of providers stating that this was through choice, with some showing no inclination to reconnect with contacts from before the lockdown. However, this is not the whole picture, and some are beginning to enjoy their new freedoms and are linking up with family and friends.

More children are looking to return to school with children attending college evenings and a small number back in classrooms.

One respondent reported that closer, perhaps inappropriate relationships have been developing between their children when they had no interest in each other prior to the lockdown. The majority of respondents were not experiencing these issues, although others commented that this has always been a concern where young hormonal people live in close proximity.

General

There were mixed responses to Ofsted's latest updates. The suggestion that foster carers may be used in homes was reported by many to be impractical and probably unworkable, whilst others felt that the updates were generally useful and supportive.

In conclusion

Infection rates remain incredibly low.

Our findings about children going missing do not correlate with reports-and there was speculation amongst respondents as to whether the figures apply to unregulated homes and children on the edge of care-which often seem to be conflated with those from the RCC sector.

Covid 10

Covid-19 and the residential childcare sector. Week ending 14th June 2020

This week, I have been unable to speak to as many people as in other week, however, feedback has been rich and surprisingly consistent. Thankfully, no spike is currently manifesting itself and long may this situation last!

Staff

Staffing levels remains good. Large amounts of staff have been tested but infection and sickness rates remain extremely low.

One home still has two staff and two children with confirmed diagnoses of Covid-19, however none of them are ill. Staff have been working in 2 shifts of between 5 and 6 days between a small number of them to cover shortfalls. Staff have also been using PPE and employing social distancing within the home wherever practicable. These actions are based upon advice from Public Health England and the home's local Public Protection team. Track and trace has not been used. This home's provider spoke of his total admiration for staff who had volunteered for these shifts, re-organising their own lives in order to maintain a consistent service for their young people.

All respondents have stated that Track and Trace is unworkable within their establishments. Whilst bigger providers have a greater ability to cover resulting staff shortages, the potential for extensive shortfalls remain high. A small number of homes are largely ignoring Track and Trace unless it becomes an issue for them. Some providers were also unaware that it had been brought into operation. A number are seeking advice from Public Health England in order to inform their contingency plans. Most have stated that they would welcome government guidance that recognises the issues arising from their national policies and guidance that provides practical solutions that will enable them to keep operating.

As the weeks progress, many respondents are now talking about feeling like they are in limbo or are in a bubble just waiting for the next advances or announcements. One also stated that 'it feels like it's (Covid) not around anymore'.

Respondents felt that their staff's anxiety levels around working had lessened considerably and that they were now very used to working in this way. Others spoke about their staff adopting a very 'moral' attitude and were voluntarily limiting their contact outside of work to ensure they could keep providing a service.

One provider reported that their staff recognise their key worker status and have a pride in this.

Respondents continue to see an improvement in recruitment numbers which increases their ability to select the best candidates.

Providers continue to admit new children and referrals for younger are being received again.

Children and Young People

2 children from our respondent's homes are known to have tested positive in the last 2 weeks. Neither have been ill and both remain well. Staff are caring for them in teams who stay at the homes for up to 6 days at a time and have reported stronger relationships developing as a result.

A couple of respondents reported that some children's more challenging behaviours are gradually creeping back, but they were still lower than prior to the lockdown.

One provider reported a recent 'flurry' in missing episodes. However, she felt that this was due to the introduction of a new child to the home and had nothing to do with current restrictions or their easing. Generally, homes were not reporting a major concern about missing from home incidents.

Those respondents who operate schools have kept them operating throughout the pandemic. One spoke about the welfare visits and education packages that they have maintained for their day pupils who have been unable to attend. They commented that this was not reciprocated for their children who generally attended outside education, including no provision of education packages.

Most operators whose children attend mainstream provisions have a mixture of some children in school whilst others fall outside the current qualifying age range.

Children are mainly maintaining contact with relatives and friends online although a number have started meeting outside the home.

General

Respondents were asked whether their children and/or businesses have been directly affected by the introduction of statutory instrument 445. All stated that at the current time, they have seen no direct effects. However, respondents were clear that they expect the amendments to lapse in September as originally planned. Some expressed concerns that amendments should not become statute.

We asked what changes people would like to see retained once the lockdown is fully lifted. People overwhelmingly value the use of virtual means for internal and external meetings. Many have found that staff are more able and willing to attend meetings, some have found that social workers are more available online and that less reviews are being cancelled. Others commented that some children manage meetings and family time better, remotely.

A number of respondents valued the closer relationships formed with children and were looking at increasing the number of inclusive activities permanently.

One respondent was looking at introducing extended shifts (up to 7 days) every 3-4 months for those staff able to participate, as they have found that relationships between the staff and children have been strengthened by their lockdown experiences.

A couple of respondents expressed the opinion that Ofsted have set a precedent with their rapid registration process and want to see this continued following lockdown.

Some respondents wanted to retain largely online training. They have found this more efficient and it has enabled more staff to participate, in a more timely manner.

Respondents found the ICHA daily update useful and informative.

Covid 9

Children's homes and Covid-19. Week ending 7th June 2020

As the management of the pandemic rapidly changes and new initiatives are adopted to manage the effects, children's homes continue to carry on regardless! Again, respondents representing around 400 homes took part in this week's survey.

Staff

As yet, providers are not seeing a spike in cases. However, one respondent has been hit by two staff and 2 children testing positive. None are ill or adversely affected, displaying only mild symptoms. This has caused concerns with the introduction of Track and Trace, which will be looked at later in the report.

Staff morale remains good. One home whose children have been struggling with the realities of being in lockdown has had staff hurt, through biting and assaulting resulting in hospital attendance. Regardless, staff choose not to use PPE due to the need to retain proximity, although it was available for all. Others have reported a very small minority of children spitting at staff. Work with staff, the young person and police has stopped the behaviours without having to close placements or use PPE.

One RI talked about going back into the homes from a long period of working remotely. However, head offices remain largely unused.

Reg 44 visitors are slowly coming back into homes. One talked about beginning going back in towards the end of this month but being led by providers and home managers. From the visitor's point of view, she has been very impressed with how sensible and practical homes have been. Those who use electronic recording systems have been easier to monitor throughout. She reported that she has been enjoying virtual tours and media and phone conversations with the young people.

Providers have experienced mixed support from their local authorities with some not being contacted throughout the pandemic. Others have felt supported, but the picture is variable across the country.

One provider spoke about the power of saying 'well done' and 'thank you' to his team. Without the financial ability to reward staff for their commitment, thank you cards and publicly recognising their commitment and contribution throughout the pandemic has helped bolster morale. Other providers talked about initiative such as adding a pound an hour to wages as recognition and appreciation of their input.

Children

Respondents continue to sing the praises of their children.

There has been very little increase in behavioural issues across the respondent's homes. Those who are having issues reported that younger children, especially those with learning difficulties, have struggled to understand the reasons for the changes in their routines and

their restricted access to friends and family. One spoke about a newly admitted child who had not been able to have access to all the planned support due to lockdown, resulting in high anxiety and trauma-informed behaviours.

Homes are taking referrals with one accepting 3 across their company in the last week. They expressed the opinion that referrals have slowed down over the past week. Other providers spoke about the type of referrals being dominated by young people leaving secure and highly complex children.

One new respondent talked about their children making 'Covid Time Capsules' reflecting what they have been doing during this period and how they have felt. These have been buried ready for future archaeologists to discover!

One provider spoke about children remaining in their homes beyond their original discharge dates due to a lack of any appropriate step-down placements currently being available. Whilst this was not a concern for the provider, it suggests that once measures are eased, there will potentially be a high amount of movement in the sector.

Access to education is mixed across the sector. Most children are not back in school and continue with home education.

Track and Trace

The Track and Trace initiative has been introduced since the last ring around. This has caused some concerns, especially for very small providers.

The majority of respondents do not believe that it is workable within our small home environments. Many felt that the potential was there for whole staff teams to be off work if a staff member or child tests positive for Covid-19.

Bigger organisations reported that they were more confident of their ability to cover staff shortages that may come about as a result of adhering to this guidance but nonetheless, felt that this could potentially impact them.

Respondents felt that the information available was unclear. One of the concerns expressed was that this is not compulsory, yet not using it may have potential safeguarding concerns.

One provider who has 2 children and 2 staff with positive tests was told by Public Health England and his region's Health Protection Team that they felt there was a problem applying current guidance to our settings. They were advised to carry on as currently, use their common sense, isolate those who have symptoms only, and maintain good hygiene.

Other providers were using guidance that they felt they could work with and are hoping for more appropriate industry specific guidance.

Respondents largely stated that they would not use the Track and Trace app in their homes unless required due to concerns regarding privacy. They were clear that if staff wanted to use it, they would not be able to say 'no'.

One provider reported that their child's placing authority had already requested an updated contingency plan for their child reflecting the use of Track and Trace.

The issue of insurance was raised in relation to Covid measures adopted by homes. Many raised that whilst they were previously covered under 'notifiable diseases', their insurance providers have informed them that this will no longer be available to them on renewal of their policies, or when opening new homes. Some stated that they were tied into these policies and had no option but to stay with them.

Some expressed concern that Covid guidance and Track and Trace, in particular, may leave them especially vulnerable with regards to their insurance.

General

A number of providers expressed disappointment regarding Ofsted's perceived lack of involvement during this pandemic. Concerns that they will be severely judged on their actions or inactions once they resume inspection were expressed by a small number. One larger provider had been contacted by their inspector who asked them many questions regarding their response to Covid, indicating that imminent inspections are going to focus on this.

Overall, providers are yet again requesting industry specific, consistent guidance, with particular regard to Track and Trace. Nonetheless, they continue to provide care for this vulnerable group regardless, in some instances, of potential implications on their own safety.

Covid 8

Children's Homes Response to Covid-19. Week ending 31st May 2020

As the weeks of the nation's response to the pandemic go on, it appears that children's homes continue to operate normally, adapting to changes and encompassing them in their day to day routines.

Responses were less this week, perhaps reflecting that people may be on leave or catching up following a return to work after an extended weekend. Nonetheless, respondents represent around 250 homes, again covering single home providers to national ones.

Staff

Despite the beginnings of the ease to lockdown and greater freedoms enjoyed by staff and young people, no spike in infections has reportedly hit our homes, although this of course is early days. One commented that they are still waiting for the first spike!

One respondent reported that 2 staff from the same home are off because of Covid. 1 has a symptomatic relative and another has some symptoms. However, they have both been self-isolating for over a week and there is no indication of infection in other staff or children.

Sickness in general remains low across the sector.

Homes report that they continue to maintain high hygiene standards and any newcomers to the homes are immediately greeted with requests to sanitise their hands and maintain suitable distancing throughout their visits. Some suggested that the sanitising may well be adopted as good practice once we are fully out of lockdown.

A small number of respondents reported that staff anxiety about the consequences of lifting the lockdown are growing. There is a fear that there will be a second wave of infection and how this may affect them. However, more reported that fears appear to be lessening with a general growing feeling of 'wanting all this to be over'.

The changes in regulations have largely, although not universally, been accepted as probably necessary to enable remote working, but respondents want to know that they are lifted in September. If this doesn't happen, respondents spoken to stated that they would like the ICHA to challenge the decision at that time.

Two providers stated that their schools have been open throughout the pandemic and that their teachers have coped well with the classrooms. Other providers have expressed the hope that schools will reopen soon and accept their children back. One provider was frustrated by local school's attitudes to his children and their reluctance to accept them back into the classrooms.

Providers continue to accept admissions with little anxiety about the potential issues these may bring. Respondents talked about getting good referral information and continuing to meet the children either face to face (whilst using social distancing), or virtually to inform their decision making.

One respondent expressed the opinion that there will be an increase in referrals once the restrictions are eased as social workers will be able to visit at risk children in their homes and courts will be operational again.

Regulation 44 visitors are beginning to go back into the homes although the vast majority of respondents were happy for these to continue virtually for the foreseeable future.

Children and Young People

Again, there has been no report of any new infection amongst our children.

Respondents said many of their young people had been out alone or with staff since restrictions were eased. A few said that their young people had interpreted the easing as an excuse to go out a lot. However, this was the minority and children continue to do well.

Respondents talked about the measures they use with young people to reinforce the need to maintain social distancing when out, and the inability to enforce this all of the time.

One new respondent commented that relationships between children as well as with staff have strengthened during this period with them sharing activities such as yoga, work outs, trampolining and dog walking. She commented that they were enjoying playing and 'being children again'. She said that one teenager had hardly used his phone since going into lockdown.

Children are still mainly having family time using remote means although a number of respondents said that face to face meetings are beginning to be used. One commented that one of their children had independently chosen to not resume contact once restrictions began to allow for this.

Some children are asking to return to school whilst one provider expressed concerns that others may refuse once the opportunity arises again. There is a view that children have become comfortable learning online and many prefer this to having to reenter the school environment.

Overall, children continue to cope with restrictions and the changes it has brought to their lives.

General

Respondents are happy with the updated PPE guidance although almost all have stated that they have rarely used it.

Many respondents have stated that they want to begin to return to normal now and would like to see an end to the restrictions.

Overall, infection rates are minimal, sickness is low and as usual, the sector continues to provide children with the care they need.

Covid 7

Week 7

DCEO Children's Homes update. Week ending 24th May 2020

Week 7 of the ring around and the sector continues to be buoyant. Morale remains good and people are cautiously optimistic about the future.

Staff

Out of 300+ homes, there has been 1 reported case of a new confirmed infection. The staff member is an occasional worker and the provider felt that the illness was unlikely to have been picked up at work. Due to carrying out few shifts, the owner feels that the chances of them infecting others in the company are very low.

As people are not showing symptoms, little testing is currently happening in the homes. Those who have been tested appear to have mainly returned negative results.

Sickness in general remains low across the board. Whilst homes have staff off who are shielded, staffing levels remain good.

One provider spoke about their recruitment and how they have had an increase in candidates and have felt that the calibre of the candidates is also somewhat higher. They also felt that this was attracting new people to the sector.

The view on referrals are varied. A national provider had figures that demonstrated that numbers of referrals had increased throughout the pandemic. They stated that the number of repeat referrals seems high and this tends to involve older children with more complex needs. They also commented that referrals for younger children are very few. This was confirmed by other providers. Based on this, some speculated whether children are not being reached/identified as being in need during this crisis and whether numbers of the younger age group will increase significantly when services return to normal.

Conversely, a smaller provider had seen referrals drop by approximately 10% in the same time period.

Regardless, respondents continue to accept admissions and placement turnover remains low.

One provider had opened in a new home this week and was optimistic about taking in new children.

Providers reported that although the cost of PPE has been high and the struggle to procure it difficult, the use has been minimal. It has been used when children displayed symptoms earlier in the pandemic, but staff have largely been pragmatic, recognising that providing childcare means that unrestricted physical contact will happen and indeed needs to happen. Those with older children reported that social distancing has been easier to maintain in their homes-but that these children still need a hug!

Providers reflected that staff do not appear to have increased anxiety regarding the ease of lockdown restrictions and the potential increase in infection that this may bring. It was recognised that not only are the children likely to be going out more-but so are staff.

Providers are finding that planning for the 'second wave' is not much different from their original plans when the pandemic first hit. Variables were unknown then, and possibly remain so now. In this respect, homes remain cautiously optimistic with little change to practice envisaged following the recent ease in restrictions.

With this being Mental Health Week, one provider talked about developing mental health guidance for her staff team and carrying out welfare supervisions for all their staff.

Children

A number of providers reported that their children were fearful when out and about following the introduction of the easing measures. It would appear that the messages have been so strong about the threats posed by Covid, that some now have an unreasonable fear of contagion from everyone outside of their homes.

Family time has increased over the last week with some children having their first face to face contact in weeks. One provider has concerns that this may increase anxieties in some children and make them more restless-this is an area that we will continue to revisit in the weeks to come.

Further to this, it was reported that some children are reluctant to go out now they can-now preferring to play indoor games.

Regardless of easing, many children continue to maintain family contact via social media and providers have reported that seems to be more manageable for a lot of our young people.

Providers are not seeing a marked increase in challenging behaviour. Some children continue to go out and are taking advantage of the relaxation in rules. Nonetheless, this does not appear to be causing any undue concerns.

Education is a hot topic. Schools have been reluctant to accept some of our young people and providers wondered whether this will continue once children start returning in June. Many continue to do well with online learning, and where possible, it is hoped by some that this will continue. Some providers reiterated that their children appear to have been doing better away from established educational settings.

General

Providers have had minimal contact from Ofsted. However, Ofsted representatives have recently attended ICHA's online regional meetings and one provider commented that this had been valuable.

Regulation 44 visits remain largely remote. However, some providers are looking at bringing them back into the homes. One provider that takes young children explained that they

enjoy taking the visitor on a tour of the premises on their iPad, feeling more involved in the inspection process.

Covid 6

Children's Home Update week ending 17th May 2020

The resilience of the children's residential sector continues. Many respondents talked about their admiration for their children and staff throughout this time and wanted it reflecting in this feedback. This feedback is based upon responses from providers representing over 400 independent children's homes.

Staff

Staff sickness levels remain very low. There have been isolated cases of confirmed infection but no new ones since the last update. The vast majority of staff are back in work and most sickness is non-Covid related.

One provider raised concerns regarding the welfare of some staff who have difficult circumstances at home. Some are now the sole breadwinner and are having to cope with the emotional and financial fallout that this brings both for them and for members of their families. Many respondents felt that this was not something that had been shared by staff but were concerned that the longer restrictions are in place, the greater prevalence this may take.

Responses from providers demonstrated that a lot more flexibility has been adopted across the sector. Shift patterns have been altered or amended in some settings, one home picks up staff who fear having to travel on public transport and more internal meetings are now being done via social media.

Many respondents are finding benefits to remote meetings as it enables staff to attend for staff meetings without having to sacrifice the best part of a day. The increase in this type of contact has also enabled more regular but shorter meetings and sharing of information and support.

Respondents talked about the current ways of operating rapidly becoming their 'new normal'. For example, hand hygiene and contamination awareness has heightened but to a level where better practices have now been adopted and are rapidly becoming embedded into practice.

Providers are still calling for sector specific guidance about maintaining current practice but more around lifting restrictions.

Some fears about Ofsted were expressed with respondents expressing a hope that they will be reasonable and proportionate once they return to the homes. As stated, in the absence of industry specific guidance, providers have had to often interpret guidance from other care settings and try to make a 'best fit'.

Whilst homes are accepting admissions, others are struggling to match with the referrals coming out. One provider had seen a rise in fostering referrals whilst others felt that the levels of risk in the children's home referrals was very high and would be difficult to place with their children.

Regulation 44 monitoring visits are taking place in all settings. Some are remote, others are face to face whilst following social distancing and hygiene rules. Those companies using recording systems such as 'Clearcare' or 'Radar' have found that Reg 44 visitors are easily able to access all the records remotely. This, coupled with virtual tours and remote conversations with professionals and young people, ensure detailed reports are being produced. Some providers expressed concerns about these visitors coming back into the homes and introducing a new source of infection.

A couple of providers are considering opening new facilities using the new Ofsted guidance aimed at enabling faster registration in some instances.

Providers are beginning to incorporate the easing measures into their policies, procedures and planning. However, an equal number felt that the new guidance is not specific enough.

One provider talked about behaviour management training and using online videos by the training company coupled with demonstrations of holds using members of their own family. Other providers are still struggling with this issue, in particular.

Young People

There are no confirmed cases of Covid amongst the children. No children are reported to be showing any symptoms.

Respondents regularly praised the children in their care for their resilience and compliance with one looking for a form of national recognition from the government.

Pockets of non-compliance remain. However, these children displayed similar behaviours prior to lockdown too. However, overall, young people appear to be coping very well with the situation.

Contact with social workers has remained largely at the same levels although a good number of respondents felt that this had increased. One stated that her young person seemed to enjoy meeting their social worker virtually as they understood this medium and it seemed to reduce the pressure of face to face meetings.

Children who are home schooling continue overall, to do well. Another provider who also runs a school talked about remaining open and recently increasing their intake of day pupils. Any child not being sent to school are receiving welfare checks from the school staff.

Some young people have been expressing the view that from the 15th, they will be able to go out as much as they want. Some providers are still considering how best to convey the messages about the easing of the lockdown as there is fear that children may 'vote with their feet'.

One provider reported that their children who have supervised contact and would like this reinstating through the new guidance of meeting with one other person whilst out and about. There are concerns that the presence of a carer may be seen to contravene the current guidance. Further clarity is sought on this matter.

Providers are not reporting any increase in challenging behaviours.

General

One provider still has difficulties accessing PPE in certain local authorities, describing their lack of response to requests as 'shocking'.

One larger provider is still being inundated with information requests from local authorities. Most providers no longer cite this as an issue, but it is likely that this is a matter of scale.

Overall

Children remain well and well protected by staff.

The sector is largely sanguine and resigned to the current measures, nonetheless, there are concerns about the easing and we would welcome more sector specific clarity.

Covid 5

Week 6 of lockdown

Yet again, homes report that very little has changed. Thankfully, last week's fears about an increase in challenging behaviour being brought about by a downturn in the weather, appear to have been unfounded. Providers repeated said how proud they were of their children and some have called for recognition to be given for their resilience during this time.

Staff

Staff sickness continues to fall. Only one home spoke about staff going off more than once with Covid related symptoms. A couple of providers felt that sickness levels were possibly than pre-Covid.

The vast majority have consistent and committed workforces.

Whilst some staff have been tested, overall, the figures remain low and no children are reported to have been referred for a test. A very small number of providers are reporting confirmed diagnoses, and these are restricted to isolated cases. There has been no report of mass infection.

One provider expressed pleasure at the availability of testing as it allowed at least one member of staff to return earlier. Instead of isolating for 14 days, they were able to return after 7, due to a negative result.

Across the sector, agency usage is generally minimal and staff teams are pulling together to ensure their service remains consistent for the young people. Most providers reported that staffing levels were very good and staff continue to pull extra shifts if needed. For example, one Deputy Manager who had recovered from a positive case of Covid has stayed in a home for 5 days to ensure continuity and boost morale as staff can see that a full recovery is possible.

Providers were asked whether they would be interested in accessing new volunteer schemes to boost staffing. Most felt that this was not needed and would prove disruptive. Many also stated that they would need to conduct their own checks and training which would make the lead in process too long to be of benefit during this crisis.

Some staff and providers are beginning to raise concerns about what might happen when the lockdown lifts. There are worries about an influx of young people needing placement and a potential increase in illness either through Covid or other opportunistic bugs. A couple of providers talked about developing or already having plans in place for this time.

Access to PPE remains an issue for some. Whilst most homes limit their use to children who have symptoms, one provider caring for children with physical difficulties commented that they are experiencing more problems as their need for PPE on a regular basis is generally higher and stocks are low.

Many continue to report varied levels of support from local authorities, from 'dreadful' to 'excellent' (whereas most fall in between).

Homes continue to accept new children, reporting that part of their admission screening process now includes many 'Covid related' questions.

Referrals are beginning to include short term placements for children for whom the Authority can't find a foster placement. Some providers have expressed their reluctance to accept these referrals as the disruption in moving again in a few weeks would be likely to be negative. Overall, the majority of referrals continue to be for older teenagers whose placements have broken down, and not Covid related.

Providers spoke about their pride in their staff teams and their commitment to the children during the crisis.

Children and Young People

Overall, young people appear to be doing very well in lockdown. Staff are playing more games with them, a number are doing extra shifts so consistency is higher and many don't have schools to attend although many are completing education in the homes and of these, many are reported to be concentrating better.

This week, there has been no reports of illness in children.

Levels of disruptive or challenging behaviour remain low across the sector. Whilst some children may still be leaving the homes, one provider commented that it seems to be to get some fresh air or relieve boredom as opposed to CSE or CCE pressures. They commented that they almost have permission not to go out and meet the perpetrators-the lockdown provides their excuse.

Whilst some -mainly older teenagers-continue to flout the rules, most are enjoying staying in with staff. Providers reported that relationships are strengthening and one reported that their children are now happy to go on group walks and share experiences that prior to lockdown, would have been unthinkable.

One provider echoed others', reporting that their children seem to be benefitting from being allowed to remain 'in their safe place', away from the pressures of the world.

General

Some expressed disappointment at the continued absence of sector specific guidance and fear that there will be a similar lack of guidance when lifting restrictions.

Overall, the sector continues to do well. Infection rates are low and our children are largely benefitting from the alleviation of outside stressors.

Covid 4

Week 5 of the lockdown.

This week's ring around again represents 400+ homes. Most participants report that things remain relatively unchanged-although there are some concerns about what the downturn in the weather might bring!

Staff

Staffing levels remain high. Providers report that staff are largely back on duty and homes are well staffed.

A few staff have been referred for testing although the majority are eligible due to family members having symptoms, not the staff member. Confirmed cases remain low. Around 6 staff were reported to have tested positive for Covid-19. One provider has reported a spread amongst his staff. They have traced the infection back to the 4 young people being ill in later January, early February. One member of staff has reported a week of illness and a persistent cough for around 4 weeks and has now tested positive. However, in the absence of testing, she did not know that

Some providers reported issues with accessing testing but the majority are managing to refer staff who show symptoms.

PPE is now getting through in patches, but many providers have bought their own at quite considerable cost. Homes are reporting that it is not being used unless absolutely necessary.

A number of providers reported levels of anxiety amongst their staff. Some of this appears to be linked to children ignoring the lock down and some in relation to what may happen when the restrictions lift. One provider related how staff became anxious and one, 'terrified' about one of their children who self-harmed and had to be taken to hospital. Not only did staff find it anxiety provoking to go to the hospital, but also feared the threat of any future episodes. Work with the home's psychologist is reported to have helped the child and staff team.

One provider expressed fears of a second wave of staff sickness as test results come through for staff's family, friends and associates.

However, overall morale remains good. One provider commented that 'its becoming the new normal'.

Of those spoken to, at least half continue to accept referrals. Those that didn't were full, felt that bringing a child in may destabilise those already in placement or felt the referrals were unsuitable for their homes. Two providers were waiting until some of the restrictions have started to lift before considering whether to accept children.

Some providers commented that the rate of referrals has slowed whilst others felt it remains the same as pre-lockdown. However, overwhelmingly, providers reported that referrals were mainly for 15-18 year olds who's placement had broken down. No providers

had received referrals for children who had been accepted into care through Covid-19 related issues-for example, parents being in hospital and domestic violence exacerbated by lockdown. (However, one provider with a background in safeguarding stated that she is aware of children affected in this way through working with and supporting her local authority with this cohort of children.)

Many providers speculated as to whether there would be an 'explosion' in referrals and felt that the current situation is akin to limbo-waiting to see what happens next.

The majority of participants did not report large amounts of extra expenditure due to the lockdown and many commented that any expenditure was mainly balanced due to savings in things like petrol. A small minority intended to claim back some relevant costs.

A small number of participants stated that they had started the process of applying for fee uplifts in January. One stated that uplifts are built into their major placing authority's framework. Others stated that they were considering the process in light of NMW increases and general cost of living rises. Around a third did not intend to apply for a fee uplift. A couple apply uplifts to new referrals whilst retaining existing fees for those already accommodated.

Children and Young People

There remains a cohort of young people who do not comply with the lockdown-but as one commented to me last week, 'everyone else is out there!' Whilst this may not be strictly true, her viewpoint is understandable. However, providers seem to be getting the required messages across and the vast majority of children are complying with guidance.

There has not been any significant increase in challenging behaviour-but a number felt that there may be some change if the weather continues to deteriorate. One provider who ran a welfare secure unit had seen an increase in challenging behaviour which seemed to correlate with an increase in non-Covid related staff sickness, necessitating a new influx of staff.

Some providers reported that a good proportion of their children are enjoying the lockdown. They believe that this is due to a lifting of stressors such as school, socialisation and family time-all of which can be triggers for a large number of our children.

Access to off-site education is varied but most children are receiving home schooling, either through tutors or staff. Some providers continue to maintain their own schools.

Other

Only 1 provider was still receiving a lot of requests for information from local authorities. This appears to be more manageable now for the majority of respondents.

Local authority assistance and involvement was varied. Some reported no contact from their placing authorities whilst others felt well supported

A couple of providers expressed concerns regarding the relaxation of Regulations but most reported 'business as usual'

Covid 3

We're still standing! Week 4 of the lockdown.

The number of homes represented in our weekly feedback has now risen to over 400 providing a broad picture that is truly representative of the sector. Again, solo through to national providers are represented.

Staff

Morale is generally felt to be 'not so bad' to very good. One provider spoke about staff having a 'Home Team' feel as though they were happy to look after their own. Another spoke about staff refusing agency, again wanting to care for their own children.

Overall, staff anxieties have lessened as the weeks have progressed and infection rates remain low.

Two homes have each had 2 staff testing positive for Covid with 3 requiring hospital admission. Thankfully, all have recovered and are looking at how they can safely be returned to work. Two self-isolated at the beginning of lockdown and no staff or children from their homes subsequently presented with any symptoms. Other providers have isolated cases of staff presenting with quite severe symptoms but managing at home.

There has been some confusion amongst some staff regarding PPE and social distancing within work and as such, calls remain for industry specific guidance to reassure and appropriately guide staff.

The majority of providers reported a return to work of all staff who weren't shielded or sick from illnesses other than Covid. Many reported full staff teams across their company.

Homes continue to accept admissions. Providers risk-assess any potential admission for exposure to the virus but the majority would not look to take a child with a confirmed diagnosis. A few providers talked about isolating new admissions for 7-14 days after admission. This has been as the result of instructions from the placing authority or company policy. Not all providers are following this course of action.

Admissions are being managed imaginatively. Providers spoke about providing virtual tours of their homes and bedrooms for potential admissions, about interviewing a child through an open window, using questionnaires and allowing potential new children to speak to current residents and staff via media. No new placements have broken down as yet.

One provider spoke about effectively working with the police to reduce challenging and missing episodes, so much so that they intended to commend the officers to their superiors.

Homes have been informed by Ofsted that they are now eligible for testing if they meet specific criteria. Some local authorities are also offering this facility. The vast majority of homes have reported no staff or children falling into this category. Those staff exposed to ill family members have been referred in.

PPE is now largely available. In the homes although is rarely being used. Supplies are coming from various sources, private purchases, local authorities and Public Health England to name a few. One enterprising provider is making her own masks for staff to use whilst out shopping!

Children

From those providers who engaged with the information collection, there have still been no diagnosed cases of Covid amongst the young people. In a regional meeting, one company spoke about 12 young people becoming ill for some time and being cared for by the same staff team until they reached full health but at that time, they had not been offered any testing. Homes report isolated children with mild symptoms and one reporting symptoms until she realised, she would have to be isolated, suddenly making an amazing recovery.

A higher number of staff have reported the young people beginning to suffer from 'Lock-down Fever'. As a result, some have been more challenging, a number have refused to stay in and some are arguing more with their peers within the home. However, the vast majority of providers stated that the behaviour wasn't that different to before the lock down.

The weather was cited as helping to keep young people happy enabling outdoor activities in the grounds and gardens. One reported having chickens and other animals which meant that children had to maintain their routines of caring for them throughout the lockdown.

A number reported that schools have re-opened or stayed open, giving the young people some routine and outlet. One spoke about their school running a holiday club over Easter for their children and day pupils of key workers. One provider commented about the difficulties in keeping young people engaged with on-line learning whilst others felt that their young people were doing better than in their usual classroom settings.

Discussions were held regarding the use of restraint and physical contact with the young people. Providers felt that staff were being sensible and limiting but not withholding contact. Children were still receiving hugs and being tucked into bed as before. There were a few reports of restraint being needed to keep a child safe, but this is the exception, not the normal picture.

A number reported on the strengthening of relationships between the staff and young people and how removing the pressures of school and family have enabled some of them to become calmer and happier.

General

Contact with regulators has generally been minimal and confined to business. Only one provider spoke about her inspector who called to check out how everyone was and to offer her services if needed.

Ofsted continue to provide virtual inspections and interviews in most cases. A couple of providers expressed concerns that they have not been inspected for over 2 years and 20 months respectively and that this is unlikely to happen soon due to the continuing lockdown.

Local authority information requests now seem to be manageable. Support from authorities varies across the country from some providing regular welfare checks and assistance with PPE to others having very little input.

Overall, the sector is managing well. Most report 'business as usual', a buoyant workforce and a healthy client population.

Covid 2

Company experiences and management issues

Its week 3 of the nationwide lockdown and we have again spoken to a number of our members to assess how the residential childcare sector is coping. This sample was larger than last week with 311 homes represented, from all parts of the country. Provider sizes again varied from solo to national.

Overall, morale remains high and optimism is at a surprisingly high level amongst most.

Staff

After the initial 'flurry' of staff sickness and self-isolation, many staff have now returned to work. A good number of providers reported that they had no staff sickness at this moment in time. Others reported that sickness was largely due to non-covid related illnesses. Those who remain off due to Covid 19 are generally in the shielded group or have caring responsibilities. This represents a small proportion of the workforce overall.

Only 1 staff member has been reported to have full Covid symptoms although no testing was done, and they did not require hospitalisation. No other staff or children developed symptoms after being in contact with them.

As stated, morale remains good with a few providers reporting that staff were relieved to be at work instead of stuck at home! Many continue to do extended shifts although many seem to be returning to normal shift patterns.

A small proportion of providers reported using agency staff over the last 2 weeks but that this number was dwindling. One spoke about limiting their use to specific agency personnel to ensure continuity and minimise infection risks. One enterprising provider has set up her own agency which she is now also offering to neighbouring providers.

A few mainly larger providers spoke about holding successful recruitment drives and staffing levels being very buoyant. There were however one or two smaller providers who were struggling to staff sufficiently as the impact of losing one or two staff was more impactful. A number reported being unsure about future sickness levels due to the unknown nature of the illness.

A great number of providers talked about further restricting footfall in the homes through centralising shopping, restricting buying to 1 staff member or using outside caterer suppliers.

Most providers reported that they were struggling to access PPE, although some had stocks prior to the lockdown. The overall feeling was that PPE would only be used if a child was self-isolating, but that it needs to be available in case this happens. One provider called for

testing-in particular to identify those who had previously been infected and may now have a level of immunity. One other provider records staff temperature's daily as a precaution.

There were two reports of staff contacting unions over PPE. Providers are managing this well but one stated that they would welcome industry specific guidance on this matter from the DfE/DOH. Other providers reported some continuing anxiety amongst staff but felt that for most it was business as usual.

Most providers are still looking to accept admissions although they remain very careful about cross matching. The overwhelming majority felt unable to accept a child with a diagnosis of Covid 19 due to the risks posed to staff and other young people and insurance coverage. Three providers spoke about closing placements in a positive manner. One reported that they have extended the closure date to accommodate current difficulties in transitioning.

Children and Young People

Most young people continue to cope well with the lockdown. A minority of older teenagers are reported to be the most challenging about restrictions, continuing to visit partners or ignore the house rules. Whilst staff are managing it well, it has been causing some anxiety regarding the potential to bring infection into the homes.

Only one company reported a couple of children self-isolating although they were generally well. All other children are reported to be symptom free.

A few members related a rise in challenging behaviours due to boredom or wanting to see family and friends. Conversely, equal numbers talked about children seeming to enjoy 'getting back to being a child,' playing games and spending lots of time with staff. Providers spoke about using their grounds and gardens to great effect and were very thankful for the recent good weather, recognising that without this facility, children and young people may be more restless and challenging. Unfortunately, one member also reported that neighbours were unhappy about the increase in noise associated with the children being home all day.

Some children and young people have continued to attend education or be home schooled. Most have been compliant with this and one provider reported that they appear to be achieving more through home schooling than they ever did in general education. One company felt that their own education providers were not challenging the children sufficiently and were working with them to improve their services. Whether the children will appreciate that should become clear in the next report!

Children and young people continue to use social media and phones for contact and some providers have reported that usual anxieties around family time have reduced significantly during the lockdown.

Local Authorities

Providers reported that requests for information has generally slowed down. Many also stated that they have refused to provide information when they have felt it to be inappropriate or unnecessary.

The majority of providers have reported good relationships with individual authorities although there have been various isolated problems.

General

Providers have been generally happy with Ofsted's assistance in registering new provisions which should of course increase capacity.

In conclusion, morale remains good, infections are very low and children are generally doing well during these challenging times. Staff continue to turn up for work and although some are anxious, they continue to care for the children and young people as usual.

Covid 1

Company experiences and management of issues

We have contacted a small sample of providers from the north, south and north east of the country. These represent large, small and medium providers who in total manage over 150 homes.

Staff

All report that staff sickness in the homes is low. Most have one or two staff on the shielded list but report an average of 95% staff attendance. One company reported a spike in staff self-isolating in the first week, but this appears to have resolved itself.

Most staff are reported to be 'pulling together' and seem to recognise that if they don't care for these children, who will? Interestingly, one company that reported staff sickness said its head office personnel had a high number of staff quite seriously ill but nothing in the homes.

Homes reported that staff have generally been great-some offering (and doing) 14 days on lockdown with children! Others have echoed this but limited shifts to 72 hours maximum. A number of providers have offered hotel accommodation for staff who are happy to work extended hours but don't want to return home in between for fear of bringing or transmitting infection. All have reported that they have kept movement of staff between homes to an absolute minimum.

One company sent an email asking for 'Corona Heroes' asking what they were able or prepared to do. Many offered 72 hour/48 hour shifts to lessen footfall and this has ensured continuity and consistency for young people.

Company leaders report maintaining daily contact with homes to keep up morale and get 'corona updates.' Some companies have written to their staff thanking them for their dedication and recognising the difficult choices they are making.

Homes have issued staff with key worker letters to enable staff to maintain school placements, for required travel and to get supplies. One company spoke about keeping their schools open to accommodate day pupils of key workers as well as their own children.

Companies have looked for ways of protecting everyone as best they can. One has introduced contactless handovers-handover information is written down and left for incoming staff-outgoing pass them in the car park! Others have been providing PPE so new staff can be trained in hands on restraint training to ensure they are available for work.

For those unable to come into work, there has been lots of online training for self-isolating staff. Companies have also been able to negotiate extensions on training certificates for things such as Team Teach to ensure they remain compliant with Regulations.

Homes are requesting PPE and testing. They feel that knowing if staff have had the illness may make return to work easier and identifying illness will help with deployment and lock down decisions.

One small provider spoke about being fearful of accepting new admissions with the current children being in lockdown. They felt that it would be difficult to introduce a new child to this environment and wanted to ensure that the current children were their priority.

Children

No confirmed cases of Covid 19 have been reported amongst children in any of the provisions contacted. A few have reported children with sniffles and other symptoms and confirm that they've instigated full lockdown in these instances.

Homes have reported that on the whole, children have been coping very well with the lockdown. Staff are engaging them well and one reported extra budgets being provided for toys for the garden and in the house. Those with in-house education have been provided with lots of extra 'fun' lessons to help with home schooling.

Contact is being managed through Skype, email, Zoom-being creative. One company reported that two of their children had contact visits early on in the pandemic and requested permission to self-isolate with their families. This was agreed with the placing authorities.

Working with Local Authorities.

Homes have reported that local authorities are generally working well with them. Homes update the authorities regularly and visits are being suspended in the majority of cases to prevent footfall.

Placing authorities have also quite rightly taken responsibility for informing children about the restrictions placed on their home visits and family time ensuring that children don't blame care staff.

However, there are some issues. All companies reported being inundated with LA requests for information, down to the number of gloves in each home. Many of the registered individuals are doubling up and taking on extra roles during this crisis and this is putting unnecessary pressure on their resources. One stated that where requests are made on behalf of a number of authorities, this lessened the pressure.

One worryingly reported that one placing authority informed them that they 'are not accepting any placement closures during the pandemic.' Whilst we can all understand the reasoning behind this directive, the reality is that providers generally only close placements in absolute emergencies and when the child, staff or members of the public are in danger should the placement continue, generally through assaults or criminal behaviour. This right must remain.

Some Las have been asking theoretical questions as to whether homes will accept a Covid infected child. Those I spoke to operated multi-occupancy homes and their response was

'no'. Some companies however have empty homes that could be used for this purpose-if they are able to staff it.

Homes were also told by some placing authorities that if a child contracts Covid and the hospital won't look after them, they expect the home to take them back. Homes were unhappy to comply with this due to their multi-occupancy status, staff safety issues and the lack of appropriate PPE.

Occasional LAs appear to be unprepared and not to grasp the context of taking responsibility for their children-ie having risk plans, agreed procedures, informing about home visits, social work visits etc. However, these are the exception and not the norm

Other

Ofsted are reported to be doing 'virtual inspection visits' for new home registrations-accepting being taken on a virtual tour of a premises. Overall, they appear to be helping speed up new registrations. One company also spoke about 'fit person' interviews being carried out over the telephone.

No homes reported problems with getting appropriate general supplies although all are concerned about a lack of PPE.

Overall, morale appears to be good. However, this is a small snapshot, but the messages are consistent across the regions.