

Vulnerable Children and Young People Survey

Summary of returns Waves 1 to 21

March 2021

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Headline facts and figures

Headline figures for Wave 21 of the survey:

Number of children	The total number of children looked after (CLA) was 1% higher than the same time in 2019-20 and the total number of children
(08 – 10 March)	on a child protection plan (CPP) was 1% lower than 2019-20.
Contact in the last	A large proportion of CLA, children on a CPP and other children
four weeks	in need (CIN) have been in contact with a social worker in the last
	four weeks (70%, 95% and 66% respectively).
(08 February – 07	
March)	
Social worker and	The proportion of social workers not working due to coronavirus
residential care	(COVID-19) has stabilised, with 3% of local authorities reporting
worker availability	over 10% of social workers unavailable due to coronavirus
worker availability	
(08 – 10 March)	(COVID-19) in Wave 21. This is compared to a low of 1% in Wave
	16 (14 – 16 December 2020) and a peak of 13% in May 2020.
	The proportion of local authorities reporting over 10% of their residential care staff unable to work due to coronavirus (COVID-19) has decreased to 9% in Wave 21, compared to 14% in Wave 20 ($22 - 24$ February). Note that some local authorities have small residential care workforces and therefore a small change in the number of staff available may result in a large change in the proportion unavailable.
Referrals	The total number of referrals during Wave 21 was 15% lower than
(22 – 28 February)	the usual number at that time of year.
Looked after children	The total number of children who started to be looked after
	reported in Waves 1 to 21 of the survey was 8,560. This is around
	29% lower than the same period in 2017-20.

Background

Survey

The Department for Education (DfE) established a survey of local authorities in England to help understand the impact of the coronavirus (COVID-19) outbreak on Children's Social Care. Local authorities are asked to report to DfE every two weeks with the exception of four weeks between Waves 7 and 8 (over the summer holidays) and Waves 16 and 17 (over the Christmas holidays). Each fortnightly survey return is referred to as a 'wave' in this publication, the dates that each wave refer to and the questions asked can be found in Annex A. Details on the number of local authorities that responded can be found in Annex B. Local authorities were asked to report on the following areas:

- Contact with children supported by the local authority Children's Social Care
- Children's Social Care workforce
- System pressures

Previous publications from the survey¹ contain analysis of questions that have been removed from the survey and open text questions that are not repeated here.

¹ <u>Vulnerable children and young people survey</u>

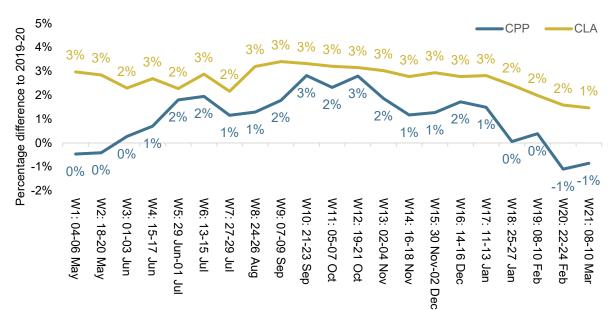
Summary of data

Total number of children supported by local authority Children's Social Care

Local authorities were asked to report the total number of Children Looked After (CLA), children on a Child Protection Plan (CPP) and other Children in Need (CIN). The number of other CIN has not been included in this report due to data quality issues.

In Wave 21 the total number of CLA was 1% higher than the same time in 2019-20 and has been gradually decreasing over the past few waves. In Wave 21, the total number of children on a CPP was 1% lower than the same time in 2019-20, and this has decreased since Waves 10 and 12 when it was 3% higher than usual levels.

Figure 1: Difference in the total number of CLA and children on a CPP compared to the same time in 2019-20



Notes:

'W1' refers to Wave 1 and so on.

Percentages rounded to the nearest whole number.

See Annex B for the number of local authorities that responded to the question per wave.

Contact with children supported by local authority Children's Social Care

From Wave 3 of the survey, a new question was added which asks how many of CLA, children on a CPP and other CIN have been seen or contacted by their social worker in the last four weeks.

Contact is defined as communication that has taken place with the child/young person, including both face to face visits and remote communication, such as telephone calls or other types of messaging.

Local authorities were previously asked how many cases had been reviewed and how many children had been contacted by their social worker in the last two weeks. These questions were removed from the survey from Wave 10 because findings remained stable, face to face visits were resuming and carried out within statutory timescales, and to reduce the burden on local authorities. A summary of responses from these questions can be found in previous publications¹.

In Wave 21, 70% of CLA, 95% of children on a CPP and 66% of other CIN had been in contact with a social worker in the last four weeks (08 February– 07 March). This has stabilised since a slight decrease in waves 17 and 18 which covered the Christmas period. At the start of the pandemic, many local authorities reported in the open text question that they were contacting children more frequently than their plan. Over time, as restrictions were lifted, many local authorities reported they were returning to business as usual and contacting children within statutory timescales. During the latest period of restrictions local authorities are reporting a similar situation as previous waves in their open text question (as discussed on page 7). The frequency of visits should be determined on a case by case basis; therefore it is not expected that all children should be contacted every four weeks.

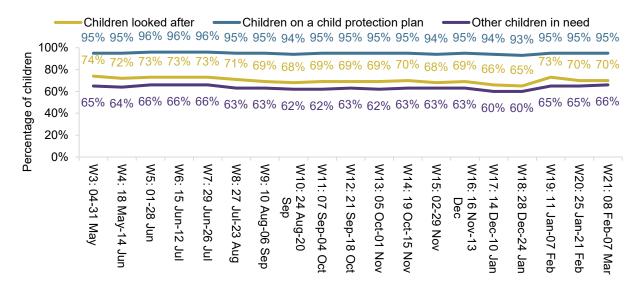


Figure 2: Contact with social workers in the last four weeks

Notes:

'W3' refers to Wave 3 and so on.

Guidance to local authorities on the correct methodology to calculate other CIN was improved at Wave 3. Local authorities were prompted again at Wave 6. This may explain decreases in percentages for this group over time.

See Annex B for the number of local authorities that responded to the question per wave.

Analysis of the open text questions in the earlier survey waves (1-4; May - June) described the local authority activities to safeguard children that they were not in contact with. These comprised of: risk assessing and RAG rating cases, working with other agencies to manage risk and working with schools to ensure that welfare checks and contact were taking place with vulnerable children not attending school.

Across subsequent survey waves (5-12; July - October) many local authorities reported having further adapted their approach with more face to face contact resuming. From Wave 5, some local authorities reported activities that were focusing on hidden harms and early help to identify children who may be at risk. Some local authorities were developing new ways to manage risk and monitor contact, for example through new reporting tools, to safeguard the children that they were not in contact with.

In survey waves 13-17 (November - January) local authorities reported reviewing their contact arrangements in light of the local and national restrictions introduced in November, December and January. Despite these restrictions, the majority of local authorities that responded to the open text question indicated that they were trying to continue with face to face visits as much as possible, "there is an expectation that visits will now be face to face in person unless Covid restrictions prevent this (eg. Positive Covid test in the household, self-isolating)." Some local authorities told us that they were also considering factors such as assessed risk, case type and the local incidence of transmission of the coronavirus (COVID-19) virus when deciding on frequency and mode of visits.

In waves 18-19 of the survey (late January – February) some local authorities indicated that they are making a return to using virtual visits for some children. One local authority commented, "the past week has seen 50% of latest contacts made virtually compared to 33% a week ago". Another local authority told us, "the majority of children on child protection and child in need plans are currently being seen remotely, following risk assessments. Children under the age of 5 subject to child protection plans are being prioritised for face to face visits. Children who are looked after are being seen remotely in the majority of cases based on an updated risk assessment." Many local authorities went on to add that face to face visits will take place if an "assessment shows an escalation of risk" or if children have "significant and complex needs", and that these arrangements are reviewed by managers. Some local authorities also commented on the frequency of visits. Consistent with previous waves, local authorities told us that they are risk assessing cases to determine how often visits are made.

In the latest survey waves (20 and 21; February – March) responses regarding the mode of visits were mixed. Some local authorities continue to tell us that they are using virtual visits for cases which are not high risk. However, other local authorities told us they are maintaining face to face contact with all cases unless there is a specific reason why they cannot e.g. if the child/family are isolating. Similar to previous waves, local authorities also told us that they are monitoring visiting arrangements. For example, *"visit frequency is monitored on a weekly basis via a series of live reports and any gaps are addressed*

promptly with the allocated social workers" and "we now have a dedicated officer ensuring cases of concern are reviewed and that social workers are sighted on children who are not attending school and the school's level of concern."

Children's Social Care Workforce

Local authorities were asked about the availability of their staff during coronavirus (COVID-19); both the social worker workforce and residential care staff. A new question was added to Wave 3 of the survey which asks whether the local authority directly employs residential care staff. Note that local authorities were previously reporting 0% if they do not directly employ residential care staff. As such the sample consisted of fewer local authorities from Wave 3, and the figures from Wave 3 onwards are not directly comparable to Waves 1 and 2.

The proportion of social workers unavailable to work due to coronavirus (COVID-19) has stabilised; 3% of local authorities reported more than 10% of their workforce unavailable in Wave 21. This is compared to a low of 1% in Wave 16 and a peak of 13% in May 2020.

The proportion of residential care staff unavailable to work due to coronavirus (COVID-19) has decreased in the latest wave, with 9% of local authorities reporting over 10% of staff unavailable in Wave 21, compared to 14% in Wave 20 and a peak of 27% in June 2020. It should be noted that some local authorities have small residential care workforces and therefore a small change in staff availability may result in large changes in the proportion of staff unavailable to work due to coronavirus (COVID-19).

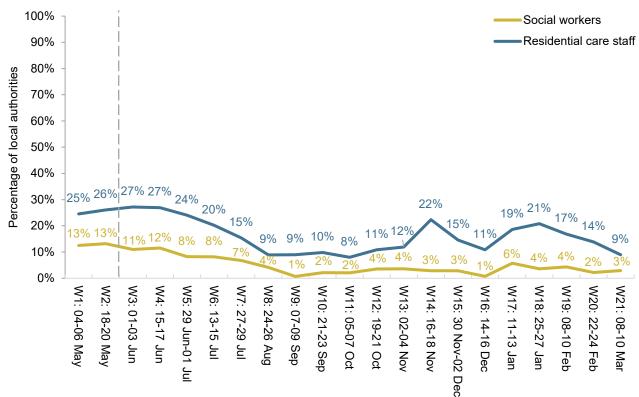


Figure 3. Proportion of local authorities that reported over 10% of staff not working due to coronavirus (COVID-19)

Notes:

'W1' refers to Wave 1 and so on. The figures from Wave 3 onwards are not directly comparable to Waves 1 and 2. See Annex B for the number of local authorities that responded to the question per wave.

In the open text responses, local authorities told us in early waves of the survey (1-4; May – June) that workforce availability linked to the coronavirus (COVID-19) outbreak was not as problematic as they originally expected at the outset. Some local authorities voiced concerns about the demands on frontline staff and staff isolation with the advent of staff working from home. Some local authorities provided examples where staff had been re-deployed, and training was provided on the impact of coronavirus (COVID-19) on practice. In survey waves (5-11; July - October), no common themes about the workforce were reported in the open text response. In later survey waves (12-19; October -February) some local authorities told us that they had some of their workforce that were either off sick, self-isolating or shielding. However, in the open text responses when referring to the workforce, local authorities were more likely to describe the general tiredness and stress amongst their frontline staff. In the last two waves of the survey (20-21; February-March) workforce availability did not feature in the open text responses but some local authorities again describe fatigue amongst staff. One local authority told us "...our staff are finding this lockdown more difficult and different compared to the previous two lockdowns... our staff are experiencing fatigue..." and another local authority told us "...social workers are feeling fatigued though it is hoped that the recent news around the ease of lockdown restrictions will have a positive impact on social work morale".

Referrals to Children's Social Care services

In Waves 1 and 2, local authorities were asked to report the number of referrals to children's social care services they received in the last week. From Wave 3, local authorities were asked for the number of referrals to children's social care services the week before last to account for the lag in reporting that affected Waves 1 and 2. As such, the figures from Wave 3 onwards are not directly comparable to Waves 1 and 2.

From Wave 3 onwards local authorities were also asked to report the sources of their referrals.

In Wave 21 (22 - 28 February), the total number of referrals was 15% lower than a threeyear average of the same week across 2017 to 2020. Since the survey began, the only time referrals were higher than usual levels was during school holidays; these comparisons should be treated with caution due to the timing of the holidays from year to year.

The total number of referrals to children's social care services reported in Waves 1 to 21 of the survey was 214,080, this is around 10% lower than an average of the same weeks during 2017-20.

Wave	Total number of referrals	Average referrals 2017-20
W1: 27 Apr-03 May	9,340	11,190
W2: 11-17 May	8,960	12,750
W3: 18-24 May	9,870	11,780
W4: 01-07 Jun	10,670	12,470
W5: 15-21 Jun	11,090	13,330
W6: 29 Jun–05 Jul	11,510	13,000
W7: 13-19 Jul	10,910	12,070
W8: 10-16 Aug*	10,540	9,430
W9: 24-30 Aug*	9,080	8,940
W10: 07-13 Sep	11,040	11,770
W11: 21-27 Sep	12,070	12,370
W12: 05-11 Oct	11,710	12,330
W13: 19-25 Oct*	11,180	10,260
W14: 02-08 Nov	10,500	12,110
W15: 16-22 Nov	11,700	12,290
W16: 30 Nov-06 Dec	11,110	11,610
W17: 28 Dec-03 Jan*	5,130	4,170
W18: 11–17 Jan	9,110	11,610

Table 1: Number of referrals received in the survey compared to the same weeks in 2017-20

W19: 25–31 Jan	9,510	12,300
W20: 08-14 Feb	9,350	12,160
W21: 22-28 Feb	9,690	11,420

Notes:

'W1' refers to Wave 1 and so on.

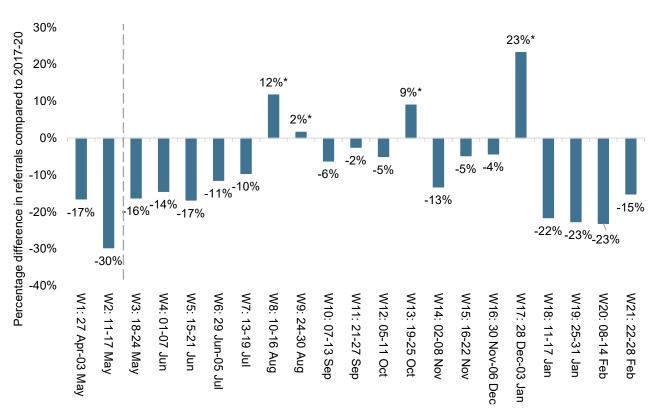
The figures from Wave 3 onwards are not directly comparable to Waves 1 and 2.

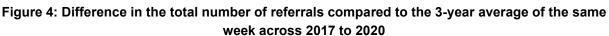
*Waves should be treated with caution due to the timing of school holidays from year to year.

Survey data for some local authorities was removed due to known data quality issues. Comparator data for these LAs was also removed.

See Annex B for the number of local authorities that responded to the question per wave.

Comparator data was only included for LAs that responded to each wave.





Notes:

'W1' refers to Wave 1 and so on.

The figures from Wave 3 onwards are not directly comparable to Waves 1 and 2.

*These comparisons should be treated with caution due to the timing of school holidays from year to year. Survey data for some local authorities was removed due to known data quality issues. Comparator data for these LAs was also removed.

See Annex B for the number of local authorities that responded to the question per wave.

Referrals from all sources were lower than the three-year average in Wave 21 (22 - 28 February) except for police referrals which were around the same as usual. Due to attendance at schools being restricted to fewer pupils, referrals from schools were 41% lower than usual, similar to but higher than the first wave of national restrictions in 2020.

Table 2: Number of referrals received from each source over Waves 3-21 compared to the sameweeks in 2017 to 2020

Wave	Referral source: Individuals	Referral source: Schools	Referral source: Health services	Referral source: Police	Referral source: Other sources
W3: 18-24 May	-10%	-76%	-18%	16%	-5%
W4: 01-07 Jun	-2%	-74%	-5%	16%	-7%
W5: 15-21 Jun	-2%	-65%	-8%	13%	-11%
W6: 29 Jun–05 Jul	2%	-58%	2%	19%	-10%
W7: 13-19 Jul	11%	-52%	-3%	12%	-13%
W8: 10-16 Aug*	26%	-29%	4%	29%	-3%
W9: 24-30 Aug*	8%	-71%	2%	12%	-4%
W10: 07-13 Sep	3%	-21%	4%	4%	-13%
W11: 21-27 Sep	1%	-15%	7%	6%	-4%
W12: 05-11 Oct	-9%	-3%	-10%	1%	-11%
W13: 19-25 Oct*	0%	100%	-7%	-2%	-3%
W14: 02-08 Nov	-10%	-23%	-9%	-8%	-13%
W15: 16-22 Nov	-11%	-5%	-6%	2%	-6%
W16: 30 Nov-06 Dec	-16%	-9%	7%	4%	-10%
W17: 28 Dec-03 Jan*	26%	-30%	19%	29%	22%
W18: 11–17 Jan	-9%	-60%	-6%	-13%	-10%
W19: 25–31 Jan	-21%	-57%	-8%	-10%	-9%
W20: 08-14 Feb	-5%	-56%	-7%	-11%	-15%
W21: 22-28 Feb	-5%	-41%	-7%	0%	-18%

Notes:

'W3' refers to Wave 3 and so on.

*Waves should be treated with caution due to the timing of school holidays from year to year.

Other sources include local authority services, legal agencies and children's centres.

See Annex B for the number of local authorities that responded to the question per wave.

The open text responses across all of the survey waves show very mixed experiences in the numbers of referrals received across local authorities. Some local authorities reported that the number of referrals had increased and were at levels higher than average, whilst others report that referrals remained lower than average or as expected at this time of year. In survey waves 18-21 (January -March) the mixed experiences in the number of referrals received continued but slightly more local authorities told us that their referral numbers have fallen like they did back in March during the early stages of the (COVID-19) pandemic.

In Waves 20 and 21 we specifically asked local authorities to tell us about the type and volume of referrals anticipated when schools returned to full opening in March. Of those that responded, information varied. Some local authorities said that they were expecting a rapid increase in referrals. Whist others told us that they were not anticipating a surge

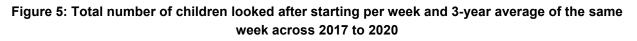
in referrals as schools reopen fully in March (see the 'key themes' section below for a fuller description of this).

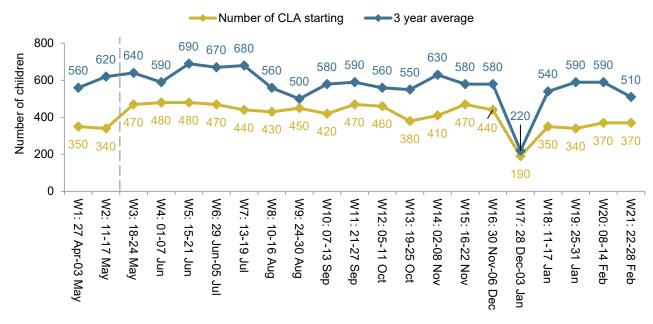
Children who have started to be looked after

In Waves 1 and 2, local authorities were asked to report the number of children that started to be looked after in the last week. From Wave 3 local authorities were asked for the number of looked after children starting the week before last to account for the lag in reporting that affected Waves 1 and 2. As such, the figures from Wave 3 onwards are not directly comparable to Waves 1 and 2.

The total number of CLA starting in 142 local authorities during Wave 21 (22 - 28 February) was 370 compared to an average of 510 during the same weeks in 2017-20 (- 28%). The total number of children who have started to be looked after reported in Waves 1 to 21 of the survey was 8,560, this is around 29% lower than an average of the same weeks during 2017-20. There has been a downward trend in the number of children starting to be looked after in recent years², therefore we may expect the numbers returned in this survey to be lower than the same period in 2017-20.

For the majority of local authorities there has been a difference of up to 5 children compared to the 3 year average of the same week across 2017 to 2020.





Notes:

² Children looked after in England including adoption: 2019 to 2020

'W1' refers to Wave 1 and so on.

The figures from Wave 3 onwards are not directly comparable to Waves 1 and 2. See Annex B for the number of local authorities that responded to the question per wave.

In the open text questions from July onwards a small but growing number of local authorities report that they continue to have higher numbers of open cases and that care proceedings are taking longer to complete. The reasons cited include the lack of direct work with families and services in support of reunifications and delays in court hearings. This means that planned permanency moves are not happening. One local authority explained "...whilst the volume of contacts and referrals has returned to expected levels there continues to be considerable pressure in the system. This is caused by the backlog of cases in court proceedings which are either progressing very slowly or are paused. This is causing additional work in those cases, but more importantly this is also showing an adverse impact on children's wellbeing. A further effect of this is the pressure on placements, which are being lengthened to match the duration of proceedings. This is reducing the availability of suitable placements for children newly coming into care, or for children who have experienced an unexpected change in their placement".

Key themes from open question responses

These findings are derived from the open text questions in the survey. One of the questions asks about the 'steps local authorities have been taking to safeguard children that they are not in contact with' and the other asked about any 'trends, challenges and good practice'. The phrasing of this latter question was changed from wave 9 (September) when we asked local authorities to tell us about any changes in the demand for children's social care services that they are seeing. In later survey waves (17, January) in our covering email about the survey, we asked local authorities to tell us about referrals), these are reported below.

Not all local authorities respond to the open text questions, and those that do so provide views reflecting the unique circumstances and challenges in their area. These may not be comprehensive of all issues, nor reflective of views and practices of all local authorities. A note of caution should therefore be exercised when reading these findings.

Previous publications from the survey¹ contain some analysis of the open text questions that is not repeated here.

Working with coronavirus (COVID-19) and the future

In the early waves of the survey (1-4; May - June), local authorities told us how they were adapting their working arrangements in response to the coronavirus (COVID-19) pandemic and about their recovery plans. Local authorities risk assessed and RAG rated their cases and at that time these informed the scheduling and mode of social work visits (carried out virtually and face to face where possible). To stay in touch, alternative forms

of communication, for example telephone calls and WhatsApp were used and some local authorities provided children and families with new technology to enable this. Early recovery plans focused on incremental approaches to direct work, gradual reopening of offices and requests for government guidance to assist them with these.

In the following waves of the survey (5-10; July - September), the working arrangements and recovery plans that local authorities described involved moving from a crisis response towards a 'business as usual - living with coronavirus (COVID-19)' approach. Local authorities were reverting to their usual assessment and planning processes, they continued to assess the required frequency of contact with cases and took a "blended" approach to visits which comprised of both virtual and face to face contact. In the later survey waves, many local authorities reported that visits were taking place face to face unless there were ongoing health concerns of staff or family. Local authorities updated their safety procedures and made adjustments to buildings and some told us about their contingency plans in preparing for an increase in demand.

In later survey waves (11-21; October - March) local authorities reported reviewing and readjusting their practice in light of which coronavirus (COVID-19) local and national restrictions are in place, as discussed on page 7. Local authorities reported using the same arrangements as earlier in the pandemic to manage risk and protect children, "*The infrastructure and arrangements we put into place in April and May 2020 (including pre visit risk assessments, guidance to staff, arrangements for PPE and increased management oversight) continue to serve us well with only small adjustments required when guidance changes*". Some local authorities also told us that they are making plans based on their experiences at the start of the coronavirus (COVID-19) pandemic, "*the planning is in place for the forecasted increase in demand at the end of the lockdown and when the schools are back to normal. The impact seen in the first lockdown is being used as a predicting model for the impact of the third lockdown".*

In the latest survey waves (20-21; February - March) local authorities reported themes consistent with previous waves. In response to us asking, some local authorities also told us how they are planning and preparing for a possible increase in referrals when the schools fully re-open. Please see page 17 of the report for a fuller description of this.

Working with schools and other safeguarding partners

Across all survey waves, local authorities provide examples of joint working between local authorities, schools and other safeguarding partners on issues associated with the pandemic (see earlier publication for examples).

Over the summer, local authorities carried out activities to encourage attendance in preparation for schools returning to full capacity and some told us that they provided support to vulnerable children during this time.

In later survey waves (9-16; September - December), local authorities resumed close working with schools to track the attendance of vulnerable children and children isolating due to coronavirus (COVID-19) outbreaks. Responses to the open text questions suggest that processes for sharing information with schools have become more embedded over time.

In survey waves 17 - 19 (January - February), some local authorities told us that they were tracking the school attendance of vulnerable children to monitor which children have been seen at school and to help inform decisions around social work contact and support. For example, *"we know from education partners which children have additional vulnerabilities, including whether they are engaged in education, and are taking a risk managed approach to support those families who need it"* and "we continue to work closely with schools in identifying vulnerable children who are not in school to clarify reasons and ensure any safeguarding concerns are appropriately addressed".

In the most recent wave of the survey (20; March) some local authorities told us that they will continue to work closely with schools to monitor and encourage attendance and to ensure schools receive the support they need if there is an increase in referrals. For example, *"as children return to school, we remain in close contact with schools to ensure they receive the support they may need and that emerging or more serious needs presented by individual children are addressed"* and *"we have ensured contact with all families involved with CSC and EH on the run up to school return, both encouraging attendance and offering targeted support"*.

Case Complexity

Across all the survey waves local authorities described the types of cases that they are seeing. A common and consistent theme has been an increase in cases involving suspected domestic abuse. In later survey waves (9-21; September - March) a growing number of local authorities also described an increase in the complexity of the cases that they are seeing.

The examples of increased case complexity cited in the open text responses vary but include cases involving: elevated mental health issues amongst parents and children, neglect and emotional abuse, parental issues relating to alcohol and mental health, cases involving non-accidental injury, increases in the number of new-born children that are being presented in care proceedings, increases in cases involving young people self-harming, referrals where the family are in acute crisis and escalations of risks in cases that are already open to children's social care. Some local authorities told us that case complexity is evidenced through the increase in the contact to referral and referral to assessment conversation rates that they are experiencing.

Local authorities described how the presenting issues and case complexity are related to the pressures arising from the (COVID-19) pandemic. The following example (from wave 17, January) exemplifies the challenges that local authorities continue to face: *"the*

referrals that we are receiving do appear to be a crisis point for example: Lack of face to face interventions and support from other services; An increase in demand on Substance/DV/MH services which has led to longer wait times for services; Children not being in school/having periods of self-isolation and demands on parents; Financial pressures due to parents losing their jobs or being furlough; Families general anxieties about COVID and restrictions on family support which have led to crisis. There appears to have been an increase in young people on the edge of care with parents appearing to not be able to manage and situations reaching crisis which again could be due to impact of COVID".

Placement Sufficiency

When we issued Wave 17 of the survey (early January) in our covering email about the survey we asked local authorities to tell us in their open text responses about any current pressures related to the (COVID-19) pandemic (e.g placement capacity, working with partners etc). Some local authorities told us that they are experiencing some placement sufficiency issues. For example, finding placements for children with more complex needs and behaviours. Please refer to earlier versions of this publication where the open text responses about placement sufficiency are described in more detail.

Expectations and Planning for Referrals

In Waves 20 and 21 of the survey (February – March), in our covering email about the survey we asked local authorities to tell us about their expectations and planning for referrals when schools reopen fully (in particular the types and volume of referrals anticipated and reasons for this). Responses were mixed with some local authorities expecting a surge in referrals and some expecting referrals to increase modestly or not at all.

The local authorities that <u>were not</u> anticipating an uptake in referrals when schools reopen fully were fewer in number than those who were. These local authorities said that their referral numbers had maintained at the usual levels across the coronavirus (COVID-19) pandemic and they were not expecting to see an increase. One local authority told us "... more children have been in school during this lockdown than previous ones, which may mean the expected increase in referrals is not as large as those seen previously" and another local authority told us "... this is different to the previous lockdown endings as schools have continued to be in contact with all children, at least virtually, and appear to be more aware and pro-active with regard to those pupils that are not in school particularly those where the children and/or parents do not engage with the school and in their education provision". Some local authorities said that they have been working with schools to mitigate the need for statutory referrals. One local authority told us "we do anticipate a small rise in contact and referrals once pupils are fully back in school, however, we do not anticipate this will be a significant increase; this is due to the extensive work we have been doing with schools".

The local authorities that <u>were</u> anticipating an uptake in referrals when schools reopen fully told us about their plans and mitigating activities in preparation this. For example:

- funding for additional staff and resources to meet needs at the point of referral, assessment and within wider services
- increasing staff capacity, particularly for the front line teams
- increasing the use of agency workers
- working with schools and partners agencies to provide guidance about referral processes and advice to support children and families
- working with partners and schools to ensure there are resources in the community to support families
- additional funding for rapid and targeted help to prevent escalations
- changing the structure of support provided at the front door to include early help to prevent escalations
- emphasising the work of the early help network e.g. meetings with schools and partners agencies about children and families where there are concerns
- prioritising support from early help co-ordinators to partners and schools to increase confidence and knowledge about available support resources in the community
- vulnerable children meetings with schools and partners agencies to help tackle the upturn and respond to demand at the right level.

Some local authorities told us that any anticipated uptake in referrals and demand would not happen immediately. For example one local authority said "we do not expect the 'hidden harm' to be immediately evident but for this to become more apparent as children learn to build trust again with adults within the schools". Some local authorities told us that the anticipated uptake in referrals and demand will be short lived. For example one local authority said "... we saw a short term bump in demand for services (up between 25% and 33%), but this abated after slightly less than a month. We envisage something similar will occur over the next 6 weeks".

Annex A: survey questions and time periods

The questions asked in the survey are shown below. All local authorities were asked to complete the form.

Question 1

How many children do you have in the following groups?

- a) Children looked after, children on a protection plan and other children in need
- b) Children looked after, children on a protection plan and other children in need that have been seen or contacted by their social worker in the last 4 weeks
- c) What steps are you taking to safeguard those children that you are not in contact with?

Question 2

How many of the following staff are employed by your local authority and approximately what proportion of them are not working at the moment due to coronavirus (COVID-19) (FTE)? Choose from: 0-10%, 11-20%, 21%-30%, 31-40%, 41-50%, 51-60%, 61-70%, 71-80%, 81-90%, 91-100%.

- a) Social workers permanent or agency
- b) Residential care staff

Question 3

How many referrals to children's social care services you received in the week before last?

Question 4

Please tell us about the source of referrals received in the week before last:

- a) Individual
- b) Schools
- c) Health services
- d) Police
- e) Other

Question 5

How many children started to be looked-after in the week before last?

Question 6

Can you please tell us if you are seeing any changes in the demand for children's social care services (e.g. increases in referrals, changes in case complexity or the profile of children being supported) and the impact of these changes.

Question 7

Use this space if you would like to tell us how you have calculated any of these data items and any assumptions that you have made.

Wave	Questions referring to collection dates	Questions referring to last 4 weeks	Questions referring to last week	Questions referring to week before last
Wave 1	04- 06 May	-	27 April <i>-</i> 03 May	-
Wave 2	18 - 20 May	-	11 - 17 May	-
Wave 3	01 - 03 June	04 - 31 May	-	18 - 24 May
Wave 4	15 - 17 June	18 May - 14 June	-	01 - 07 June
Wave 5	29 June - 01 July	01 - 28 June	-	15 - 21 June
Wave 6	13-15 July	15 June - 12 July	-	29 June - 05 July
Wave 7	27 - 29 July	29 June - 26 July	-	13 - 19 July
Wave 8	24 - 26 August	27 July - 23 August	-	10 - 16 August
Wave 9	07 – 09 September	10 August – 06 September	-	24 – 30 August
Wave 10	21 – 23 September	24 August – 20 September	-	07 – 13 September
Wave 11	05 – 07 October	07 September – 04 October	-	21 – 27 September
Wave 12	19 – 21 October	21 September – 18 October	-	05 – 11 October
Wave 13	02 – 04 November	05 October – 01 November	-	19 – 25 October
Wave 14	16 – 18 November	19 October – 15 November	-	02 – 08 November
Wave 15	30 November – 02 December	02 – 29 November	-	16 – 22 November
Wave 16	14 – 16 December	16 November – 13 December	-	30 November – 06 December
Wave 17	11 – 13 January	14 December – 10 January	-	28 December – 03 January
Wave 18	25 - 27 January	28 December - 24 January	-	11 - 17 January
Wave 19	08 - 10 February	11 January - 07 February	-	25 - 31 January
Wave 20	22 - 24 February	25 January - 21 February	-	08 - 14 February
Wave 21	08 - 10 March	08 February - 07 March	-	22 - 28 February

Table A1: Time periods referred to in questions

Annex B: response rates

Wave	Number of local authorities	Percentage of local authorities
Wave 1	145	96%
Wave 2	147	97%
Wave 3	149	99%
Wave 4	149	99%
Wave 5	149	99%
Wave 6	149	99%
Wave 7	149	99%
Wave 8	148	98%
Wave 9	146	97%
Wave 10	146	97%
Wave 11	147	97%
Wave 12	145	96%
Wave 13	145	96%
Wave 14	146	97%
Wave 15	145	96%
Wave 16	142	94%
Wave 17	142	94%
Wave 18	142	94%
Wave 19	142	94%
Wave 20	141	93%
Wave 21	142	94%

Table B1: Overall survey response rates

Table B2: Number of local authorities that responded to Question 1

Wave	Total number of Children looked after	Total number of Children on a child protection plan	Total number of Other children in need	Children looked after seen or contacted a social worker in the last four weeks	Children on a child protection plan seen or contacted a social worker in the last four weeks	Other children in need seen or contacted a social worker in the last four weeks
Wave 1	145	145	144	-	-	-
Wave 2	147	147	147	-	-	-
Wave 3	149	149	148	138	138	138
Wave 4	149	149	149	139	140	139
Wave 5	149	149	149	142	142	141
Wave 6	149	149	149	146	146	144
Wave 7	149	149	149	147	147	145
Wave 8	148	148	148	146	146	144
Wave 9	146	146	146	145	145	143
Wave 10	146	146	146	145	145	143
Wave 11	147	147	146	146	146	143
Wave 12	145	145	144	143	143	140
Wave 13	145	145	145	144	144	142
Wave 14	146	146	146	144	144	142
Wave 15	144	144	144	142	142	140
Wave 16	142	142	142	141	141	139
Wave 17	142	142	142	141	140	139
Wave 18	142	142	142	141	141	139
Wave 19	142	142	142	141	141	139
Wave 20	141	141	141	140	140	138
Wave 21	142	142	142	141	141	139

Note: The question asking how many children were seen or contacted by a social worker in the last 4 weeks was added from Wave 3.

Wave	Proportion not working due to coronavirus (COVID-19): Social workers	Proportion not working due to coronavirus (COVID- 19): Residential care workers	Number and source of referrals to children's social care	Children starting to be looked after
Wave 1	136	110	143	145
Wave 2	144	115	145	147
Wave 3	146	103	147	149
Wave 4	147	104	147	149
Wave 5	146	104	147	149
Wave 6	147	104	147	149
Wave 7	147	104	147	149
Wave 8	144	101	146	148
Wave 9	142	100	144	146
Wave 10	142	102	144	146
Wave 11	143	100	145	147
Wave 12	141	101	143	145
Wave 13	140	101	143	145
Wave 14	140	103	144	146
Wave 15	140	103	143	145
Wave 16	139	101	140	142
Wave 17	140	102	140	142
Wave 18	138	101	140	142
Wave 19	139	101	140	142
Wave 20	138	101	139	141
Wave 21	137	100	140	142

Table B3: Number of local authorities that responded to Questions 2 - 5



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