Vulnerable children report:

15 May 2020

Scottish Government
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Scottish Government and SOLACE

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Background

1. Over the past eight weeks, the Scottish Government has worked with partners across the children's sector to understand the impact of the COVID-19 outbreak and the lockdown on vulnerable children and families, and also to understand how services are responding. This activity is identifying critical themes and issues, and is informing strategy and service developments at a national and local level.

2. A commentary on the impact of the outbreak on vulnerable children in the initial weeks of the lockdown, was published by Government on 24 April[1].

3. An updated narrative was also circulated to local partnerships and national organisations on 24 April. Feedback from that, as well as new intelligence and the new weekly data set developed with SOLACE, have informed this further report.

4. A collective leadership group for senior leaders across the children's sector was established and met for the first time on 7 May, and it will report to the Deputy First Minister.

5. The leadership group considered this report at its meeting on 14 May.

Impact of the outbreak on children and families

6. It is widely acknowledged that many children and young people will be impacted significantly and for a considerable time by the COVID-19 outbreak and the unintended consequences of actions taken to control the pandemic.

7. The anticipated impact on children from physical distancing include on mental health, socialisation and attachment (particularly for younger children). This will affect cognitive, emotional and behavioural functioning and may require significant intervention over the medium and longer term.

8. Some children are more at risk due to individual characteristics, such as disabilities, mental health or neurodevelopmental factors. Some are more at risk due to factors in their immediate environment such as parental relationship conflict, domestic abuse, or the health needs of their parents. Some are also more at risk because of other parental factors such as age or learning disability. An additional high risk group are those due to make transitions, for example into school, between schools, or from school to college or employment.

9. There are increased risks as a result of financial circumstances. Those who experienced financial disadvantage prior to COVID-19, continue to do so. For many other families, the financial impact due to reduced income, and loss of work or reduced working hours, will present challenges that they haven't had to

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[1] https://www.gov.scot/publications/supporting-vulnerable-children-young-people-data-intelligence-report/

face before. A study of 500 households by IPPR Scotland found that around one in five families described themselves as being in "serious financial difficulty" while a further 29% said they were "struggling to make ends meet".

10. There are increased risks of abuse, and of neglect within families, with additional stresses from changes to early learning and childcare, school and business closures, family confinement and isolation, alongside physical and psychological health impacts.

11. There is also an increased risk of harm outside families. Children are spending more time online and are at greater risk of online grooming and exploitation. Children who aren't staying at home and are spending more time outside, potentially meeting in covert locations to avoid being found breaking the lockdown, are more visible to individuals who may want to sexually or criminally exploit them.

12. At the same time, given the radically changed circumstances of the lockdown, with many families having more time to together, it has also offered opportunities for family relationships to be strengthened, and it is clear that many families are valuing and benefitting from aspects of this experience.

13. Young Scot, the Scottish Youth Parliament, and YouthLink Scotland have published a survey of nearly 2,500 young people from across Scotland on their concerns about COVID-19.

14. Key findings include:
   - Around half of respondents stated they are moderately or extremely concerned about exams and coursework.
   - Two fifths of respondents stated they are moderately or extremely concerned about their mental wellbeing.
   - Two thirds of respondents stated that they are moderately or extremely concerned about the impact of COVID-19 on their future.
   - Two fifths of respondents aren't confident about accessing information on mental health, and over half don't know where to access information on financial support.
   - Respondents stated that decision-makers should improve the impact on education and make restrictions even stricter.

   Click here for the full report.

15. The Children's Parliament has published a survey of around 4,000 children aged between 8 and 14 years. This indicates that most children of this age are doing well during the lockdown, through the support of parents, carers, sisters and brothers and friends. Most say that they have an adult they can go to with worries, and that they feel safe at home.

16. There are indications that girls are doing less well than boys, including because of their general mood, feeling bored, worries, and feeling like they lack 'energy'.

17. There are also indications that older children aged 12 to 14 are doing less well than younger children, including loneliness, feeling bored, not being able to exercise, and not feeling that they are able to express their opinions.

Click here for the report.

18. Albeit contacts are anonymous, Childline is intending to produce Scottish data. Across the UK, the use of Childline by children and young people has altered significantly since the start of the outbreak. At the end of April, Childline telephone chat was at around 75% of levels seen in February and early March. However, the number of personal emails sent to Childline started to increase from 21 March, and this has continued at around 42% above pre-lockdown levels.

19. In the week 20 – 26 April, COVID-19 was raised by young people in around 20% of counselling sessions held by Childline. When talking about coronavirus, the main concerns were:
    - Mental/emotional health
    - Family Relationships
    - Suicidal thoughts and feelings
    - Self-harm

20. The numbers of children and young people talking to the service overall about mental and emotional health issues[2], including suicidal feelings, and family relationship problems has increased during the lockdown period.

21. Childline state that:
    "Based on the stories children have been sharing in recent weeks, family conflict seems to be particularly rife where the child is living in overcrowded households, often with multiple siblings and elderly relatives. Children in these environments tell us they feel 'bored', 'exhausted', 'trapped' with 'barely space to breath".

22. In relation to children and young people contacting Childline about abuse, the numbers talking to the service about physical abuse and emotional abuse have increased in the lockdown period. The number of counselling sessions about domestic abuse also appears to be proportionally higher since lockdown. Calls to the NSPCC helpline about domestic abuse and about emotional abuse have risen in the lockdown period, as well as calls about parental alcohol and/or substance misuse.

23. The Children 1st Parentline service continues to see a growing number of calls, web chats, and hits on the website for information. In particular, this is indicating:
    - Increased anxiety and distress in already vulnerable families due to the impact of coronavirus worries on health, and the impact of lockdown on finances, relationships and lack of usual supports.

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[2] In all counselling sessions delivered to children and young people, and not just those where coronavirus was mentioned.

- An increase in the level of complexity of calls; parents who are expressing suicidal thoughts, parents where recovery from addiction is breaking down, in one case a parent calling after taking an overdose.
- Increased conflict in family relationships particularly around contact and separated parents.
- Parents struggling to manage children's emotional wellbeing and anxiety.
- Many families do not have any personal devices and can't access online learning and other support – (we have now received devices and are getting them to families this week).
- Children and young people are describing feeling worried about going back to school, and returning to some of the previous stressors that they had in their lives. Parents are worried about physical safety of children but also about how they will cope with work demands if children don't go back.
- Many kinship care families are struggling to cope with worries about their health and finances, and about what might happen to their children. Expressing a lack of local supports. Poor access to school hubs in many circumstances.
- Some parents working in 'keyworker' or 'essential worker' roles are concerned about the impact of this on their own emotional wellbeing and that of their children.

24. The One Parent Families Scotland helpline has had a 300% increase in calls and online support. They suggest there is a lack of recognition of the needs of diverse families and single parents' circumstances, referencing the process for key workers to access childcare and the definition of vulnerable families. They are finalising a briefing on the support that one parent families currently need, as well as the likely issues in the recovery phase.

25. The Ethnic Minority Resilience Network hosted by BEMIS, is indicating that the COVID-19 outbreak is particularly impacting on BME communities, including because of:
- Prejudice directed towards Far East Asian communities.
- Poverty and overcrowding.
- High employment of family members in health and care services.
- No recourse to public funds for some individuals and families
- Digital connectivity inequality.

26. It is also clear that the pandemic is having a significant impact on families affected by disability. The Family Fund conducted a survey in early April with 232 Scottish families, finding that:
- More than two in five families had lost income.
- Many were struggling to access or afford food, and had gone without hygiene products, toiletries and medicine.
- The mental health of the majority of disabled or seriously ill children is being negatively impacted.

27. The Scottish Commission for Learning Disability has expressed concerns regarding the accessibility of additional support for learning, especially for low income families who may not have access to online learning.

28. Aberlour have shared two briefing papers which include information on issues facing disabled children and their families, confirming that "the impact on routines and accessibility of support has caused significant disruption, anxiety and stress."

29. It is important to recognise however, that as well as reporting on the challenges for families during the lockdown, 3rd sector organisations and others report that they have seen many families thrive over the past eight weeks. The Chief Executive of Children in Scotland says: "we have seen families finding their way through this crisis, often without having to ask for help from services, and through being resilient."

30. The Chief Executive of Children 1st says: "there are some incredible stories of strength coming from the children and families that we get alongside" and also that "there are really interesting insights about the relief families feel as they have fewer professional systems and 'helpers' to deal with. We should have conversations about reaching deep into communities, to help find the solutions."

31. The Convenor of Social Work Scotland has responded: "our social workers are hearing the same message….this is a time to reflect."

The transformation in service delivery

32. Albeit there was an increase in public health measures up until 23 March, when the lockdown happened it had a massive and sudden impact, and agencies had to review how they could provide services to vulnerable children. New models and new approaches developed very quickly, with many examples of good and innovative practice across the country, and a sample of these is included at Annexe A.

33. While the establishment of education hubs for vulnerable children was an early priority (alongside provision for children of keyworkers), many parents and professionals took the view that children should 'stay at home'. Hence, school staff and other professionals, often working from home, had to find innovative ways to maintain contact with children and support their learning. There was also a need to ensure the continued provision of free school meals, for those who are entitled to that provision.

34. Local partnerships swiftly adapted existing relationships and systems to continue GIRFEC approaches including maintaining contacts, assessing and planning for individual children. School and education staff continued to be available for contact with children and parents; and, schools and local authorities rapidly risk assessed and prioritised those most at risk, and identified others that would need continuing support.

35. Children on the child protection register, looked after children, and other children deemed to be at risk, continue to be seen face to face by professionals.   The data set confirms that 94% of all children with a child protection plan were
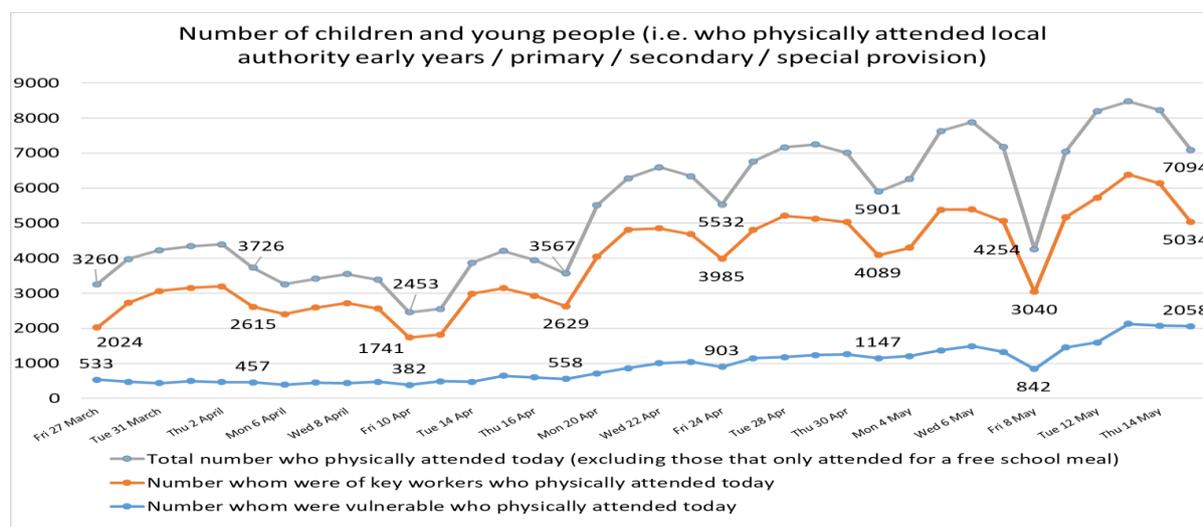
physically seen in the last two weeks, and many will be in contact with services far more often than that.

36. Other children who were already being supported by different services, continue to have their learning sustained by schools, and engagement with other services at home as appropriate, largely through online and telephone contact, including:
   - A regular pattern of calls with pupils.
   - Additional support from educational psychology services, and the use of apps to invite contact and help.
   - Tracking and monitoring engagement of pupils through on-line activity, and following up children who haven't been on-line, including with calls and supplies of phones and lap tops.
   - Social workers linked to schools.

37. Many services and most support is now being delivered to children and families through telephone and online approaches. This includes learning, advice and information, practical assistance, emotional support, access to social workers and support staff, and involvement in planning meetings and children's hearings. Even in many households with broadband and personal devices, some family members find it difficult to access these. Thousands of households are dependent on 'pay as you go' internet, and thousands more have no internet access.

38. As a number of children's sector leaders stated in a joint letter of 16 April to the Deputy First Minister, "the current situation is leading to increased stress and anxiety for parents and carers and their families, which is being compounded by limited social connections…. For these families, technology is often a lifeline. It would allow them to access the support of family support workers, social work and other services - and in turn allow those services to connect alongside families to see how they are doing and to flag any concerns around child protection."

39. Authorities report significant ongoing pressure on some services due to the impact of the lockdown, including on staffing, and the necessary new ways of working with children and young people. Residential care (including secure care), kinship care and fostering services have faced particular challenges, and there continue to be issues managing new placements into residential and foster care, due to worries around increased risk of transmission of the virus to the existing household group when it changes to accommodate a child. While these services have risen to the occasion, they are often described as fragile, and there are concerns about capacity as the pandemic continues.

40. There are also concerns about how some families will cope as the pandemic continues. Children 1st indicate that their staff perceive a shift in mood amongst the families they are working with, with many parents saying they are finding it difficult to continue to keep children stimulated at home. Accordingly, the organisation is increasing the number of home visits by staff.

41. The Third Sector Interfaces in local partnerships continue to highlight effective work by local organisations, including in partnership with other agencies, and a number of examples are included in Annexe A.

42. There has also been an enormous and rapid growth in community-based activity across the country, with new groups emerging around tenement close, street and housing schemes, as well as enhanced activity by many existing organisations. In Edinburgh for example, it is estimated that the number of active community groups has more than doubled.

What the data tells us

43. Local authorities are having to develop new methods to quantify how regularly children are being contacted, and many don't yet have systems in place, but the data set indicates that three quarters of all children with a support plan are in contact with services and professionals every week.

44. Further, around half of all young people eligible for aftercare were contacted by a professional in the last two weeks (which does not account for the fact that a high percentage within this group choose not to have contact with services).

45. The number of vulnerable children attending education hubs has increased after the Easter break, at more than four times the previous level, albeit these are still relatively low numbers and subject to considerable variation between authorities.

Number of children and young people (i.e. who physically attended local authority early years / primary / secondary / special provision)

- Total number who physically attended today (excluding those that only attended for a free school meal)
- Number whom were of key workers who physically attended today
- Number whom were vulnerable who physically attended today

46. It is envisaged that attendance at hubs might increase further, as hub activity is developed, and this is more widely recognised as a positive option for some children and young people.

47. A number of authorities have maintained some dedicated education support for children with disabilities. Some granted aided Residential Schools and Independent Schools are still providing residential provision for children and young people with additional support needs. They have developed adaptable individualised plans to ensure appropriate support is provided whether or not the child or young person is accessing the school through its residential provision.

48. Over 168,000 meals are being provided on a daily basis (with 122,000 children entitled to free school meals) largely through vouchers and direct payments.

49. The high number of children accessing free school meals, indicates a reassuring response to those families who have experienced loss of income during the pandemic. However, there are as yet, few other 'hard' numbers evidencing how agencies have addressed the needs of families that are newly vulnerable due to the financial impacts of social restrictions.

50. It is a major concern, that the evident increased stress and risk factors for children and families, has not been leading to increased number of requests for help from services. There has been a reduction in referrals to social work services during the lockdown period, likely linked to reductions in contact with education and other services. Albeit many families are using websites and helplines to ask for assistance, relatively few of these calls appear to be transitioning into requests for social work support. These trends are evidenced by the graphs in the front data section of this report.

51. Over the last three weeks, it is clear there has been significantly reduced activity, compared with the same period last year:
    - 12% reduction in child wellbeing concerns being generated by Police Scotland
    - 17% reduction in child protection concerns being generated by Police Scotland
    - 20% reduction in cases where Health, Police and Social Work have identified sufficient evidence to consider planning a child protection investigation
    - 26% reduction in the number of children identified as needing child protection plans
    - 47% reduction in the number of children becoming 'looked after', with a 77% reduction in the number becoming looked after at home.

52. Referrals to the Children's Hearing system have also reduced, and in the period from 23 March – 5 May, again compared to the same period last year:
    - Total Referrals reduced from 3043 (2019) to 2296 (2020) – a decrease of 23%
    - Non Offence Referrals reduced from 2044 (2019) to 1485 (2020) – a decrease of 27%
    - Offence referrals reduced from 661 (2019) 548 (2020) –a decrease of 17%
    - Joint Referrals to COPFS/SCRA decreased by 22%

53. Conversely, the number of Child Protection Orders in the last week of April showed a 38% increase of 20 from the 2019 level of 52.

54. The most recent weekly data set suggests that the situation may be changing, and that concerns are returning to the level they were at the same time last year, as shown below. Further weekly reports will confirm if this is being sustained.

	Child Wellbeing Concerns from Police Scotland	Child Protection Concerns from Police Scotland
Tuesday 07 May to Monday 13 May 2019	2954	234
Thursday 07 May to Wednesday 13 May 2020	2906	226

55. It is also important to note that while these figures show a reduction in new demand, it does not take account of the significant increased activity being undertaken with many families already known to social work services.

56. Domestic abuse services continue to indicate an increase in abusive behaviour, and this was a factor in around half of new child protection registrations in the last two weeks – a 14% increase on the proportion at the same time last year. However, agencies report that women and children are struggling to access services, particularly those that usually offer face-to-face provision.

57. The volume and frequency of referrals to most services has reduced dramatically compared to the same reporting period last year, and organisations are concerned that 'new' clients (those who are not already engaged) may not have the opportunity, ability or knowledge about how to access support.

58. There has been engagement regarding this across statutory and Violence against Women & Girls services, and new supplementary guidance for local authorities will be published by COSLA and the Scottish Government, with support of Public Health Scotland, on 15 May.

Health Services and the preventative role of health

59. New information is available about the health of children and young people, and about how health services are responding to the pandemic.

60. We have a strong, high quality universal health service for all children under 5, starting from pregnancy. This enables us to continue to reach out to all those families across Scotland, including continuing to provide more intensive support for families who need it. It also allows us to proactively explore what additional supports families might need who have been adversely affected by COVID-19, and who may not have previously required support beyond universal provision.

61. By using the strength of universal services such as maternity, health visiting and family nurse partnership, we have established routes and relationships with all children, families and pregnant women across Scotland, who continue to offer support and advice at this challenging time in multiple ways.

62. Scottish Government published guidance for Community Clinical Nursing services, which included minimum requirements for delivery of the health visiting and Family Nurse Partnership services on 7 April. A workforce monitoring tool has been developed to assess adherence to this guidance, and early signs are that the majority of this workforce has been retained in their existing role, and that the services continue to be delivered. During early mobilisation planning in Health Boards some redeployment took place, but we have sought assurances that the capacity of these services remain to meet the needs of the children and families they serve.

63. There is some evidence that families, particularly from younger mothers, are seeking additional reassurance from services to support them in their daily lives. These are not child protection concerns, but as a result of the increased anxiety that is felt across the population. So, although alternative contact methods are being used with the majority of families through video and telephone, which means reduced travel for these services due to reduced home visiting, their time is being used in other ways to be available for families to contact them more frequently than they may have done previously. Routine contacts are also taking longer, again as part of the 'containment' activity to reassure families at this time.

64. Data from Public Health Scotland indicate that for children up to the age of 14 years, calls to NHS 24, attendances at A&E and hospital admissions have dropped by about 50%, 70% and 50% respectively during the pandemic compared to average activity over this period during the last two years. Figures for each local partnership are available at https://scotland.shinyapps.io/phs-covid-wider-impact/

65. Constraints on societal activity in relation outside space may be one factor for reduced attendance at A&E and associated hospital admissions, so less road traffic accidents for example. This will continue to be monitored closely.

66. There are no reported excess deaths[3] of children in Scotland to date, nor any child deaths directly related to COVID-19 infection.

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[3] A measure of deaths which occurred over and above the predicted regular rate.

67. Parent Club have included children and the concerns of parents in their most recent media campaign '*The NHS is Open'*, and RCPCH (Royal College of Paediatrics and Child Health) have produced some material for parents to encourage them to seek medical help and attention based on the symptoms presented. A national campaign to further promote the need to continue to immunise young children and pregnant women also launched through Parent Club and Public Health Scotland two weeks ago. Immunisation uptake will be monitored through national data by Public Health Scotland. (https://www.parentclub.scot/articles/immunisations-and-non-coronavirus-illnesses)

68. There has been a greater amount of calls to the NHS 24 helpline for Covid-19 related symptoms for younger children (0-4) than older age groups, and this is likely because the symptoms associated with COVID-19 are very similar to symptoms of other infections and diseases common on this age group.

69. The secondary health impacts for children and young people of not seeking help early are usually less immediate than for adults, but are more likely to be longer lasting for both physical and mental health and wellbeing. Action taken to date includes pausing of some routine health screening and surveillance activity, parents delaying attendance for medical concerns, limiting outdoor activity and discerning the as yet unquantifiable impact on mental health across the population.

70. The evidence strongly suggests that the impact of the pandemic will be felt unequally, and those already disadvantaged are likely to be affected more. Many factors associated with chronic ill health, frailty and premature death in older adults have their origins in the earliest years of life, and developing a strategy to maintain and enhance developmentally age and stage appropriate interventions to counter these effects will be crucial. . Scottish Government is working alongside Public Health Scotland and Child Health Commissioners to drive this forward.

Critical themes and issues

71. Many families have been resilient in their response to COVID-19 and the lockdown. They have pulled together, supported each other, and at times appear to have benefitted from having fewer services and professionals to engage with.

72. For some families, or for some members of families, it is likely to have been a period of distress and trauma.

73. It is evident that services for children across Scotland have responded well to the challenges presented by COVID-19 and the necessary measures to manage the impact of the pandemic.

74. It is evident that the impact of the pandemic will continue to be felt for months to come. Accordingly, it will be necessary to reset, realign and reform services to meet the new challenges, learning from our recent experience, and continuing to develop best practice.

75. In particular, there will need to be a co-ordinated approach across local services, as they begin to respond to the anticipated increase in the need for support following the reduction in social restrictions. Just as has happened over the past eight weeks, agencies will require to work collaboratively as part of an integrated GIRFEC approach, to ensure that children, young people and their parents and carers get prompt and appropriate responses, and especially in the following areas.

76. **Listening to children's voices and experiences** – There is increasing awareness that some children and young people may be less likely to or able to speak up about what is happening within their families while living in isolation, and that it important to maintain attention on how they are supported to connect to sources of help. Drawing on what we know can be the case, this may include children living in households where parents issues may be hidden or actively involve constraining children's expression of what is happening, such as is often the case related to domestic abuse and parental alcohol and drug problems. It may also be the case for children who have fewer opportunities or experience specific barriers to speaking out, such as children with disabilities and children from black and minority ethnic groups.

77. **Child protection** - All of the evidence indicates that services should be receiving increased child protection referrals at this time, and be involved in heightened child protection activity - but there is less. The UK Government has launched a child protection media campaign in partnership with the NSPCC which is running across the UK. The campaign has been developed by Department for Education for an English context. We are currently exploring options for further awareness raising to complement national messaging from Parent Club Scotland, Child Protection Committees Scotland, Police Scotland and local communications activity. We should also consider why calls to helplines and websites are not resulting in more requests for social work support.

78. **Digital exclusion** – The needs of vulnerable children and young people must be at the forefront of our efforts to increase digital access, by addressing access to equipment (smart phones, tablets, laptops), low cost and more sustainable provision of access to bandwidth and data, and through support to use online safety measures. This requires a determined, joined up, combined local and national approach.

79. **Supporting children back to early learning child care and school** – It is recognised that the attainment gap will widen further, the longer that children are away from ELC and school. However, many children state they are anxious about returning, and need to return safely, and vulnerable children will require specific measures and co-ordinated support to take that step. This work is being led by the C-19 Education Recovery Group. It is also important to consider services operating in many communities around about the school day, including breakfast and after school and youth programmes, which may provide crucial care and support for children in normal circumstances.

80. **Support for Families** – Our key response to the experience of the lockdown, should be to build on the inherent strengths of families, to support them to be resilient to the challenges they have faced and may continue to face. We must guard against medicalising our response, and defaulting to an increase in Child and Adolescent Mental Health Services (CAMHS) referrals, and work towards the prevention of children and young people entering the care system. Rather we must ground our actions in the principles outlined in the conclusions of the Independent Care Review – especially that families must be given support to promote resilience, nurture their love and overcome the difficulties which get in the way.

81. **Sustaining care services** – Residential, fostering and kinship carers have provided good support for looked after children during the lockdown. These services will need to continue to be robust as we move forward, for those children who will continue to require them.

<u>Annexe A: Examples of practice</u>

- In Aberdeen, care-experienced young people and their families who are finding the lack of face to face contact and social isolation difficult during lockdown are being encouraged to use the Mind of My Own app to stay in touch with their social work professional.

- Multi-agency guidance has been issued in Aberdeenshire, reinforcing how the named person role and Team around the Child continues to operate during the crisis. There has been clear messaging that the GIRFEC practice model continues to be followed, but from different places and with more activity taking place virtually.

- Working alongside social work teams in other partnerships, Aberlour family support workers are assisting with joint visits to families' home where there are child protection concerns and contributing to social work assessments.

- Across Argyll & Bute, community organisations are reaching out to their communities, using virtual meetings, texting and phone calls. Where there is a concern for a child, groups are engaging with the team around the child, with communication and support often taking place online. Some organisations are offering online coffee mornings for parents; others are organising deliveries and food parcels over this large, rural area.

- Barnardo's services continue to work alongside other partners across the country. In Edinburgh, the service at Oxgangs became the first operational hub for vulnerable children (known as Hub at Home). Jointly co-ordinated by Barnardo's, and the Social Work Service, it provides recreational and emotional support to children and young people known to be at risk.

- Children 1st held an online workshop with Dr Suzanne Zeedyk to look at what the organisation has learned since the start of the pandemic. They named the session "Why Being There is Enough", to highlight that the feedback from parents, carers and children about the value of practical and emotional support in person, on the phone, online and through various other means.

- Children's Hearings Scotland and partners are now holding virtual hearings and, whilst overall numbers of weekly hearings remain lower than pre-crisis, the most urgent and time-critical proceedings have been preserved. More than 750 volunteers have been trained in how to participate and manage virtual hearings, and over 1000 hearings have been held. Operational challenges remain, as does the challenge of digital inclusion, but this has demonstrated that such processes can operate at least partially online, which may improve experiences for children and young people in the future

- All education establishments in Clackmannanshire have identified children and young people who will require additional learning support and have established systems to check in with children, young people and their families on a weekly basis. Strive+C is Clackmannanshire Council's integrated response to concerns about food, finance and housing, and education hubs have direct links to the service. An Intensive Hub Support Team is being established to provide enhanced support to some children, including therapeutic interventions, family support and one-to-one activities.

- In Dumfries & Galloway, a dedicated helpline has been established, and calls are filtered to partner agencies for follow-up support. This central co-ordination is avoiding duplicated effort.

- In East Ayrshire, the Request for Assistance process continues to be used to access support for a child, including a place at a hub. The Health and Social Care website provides the single point of contact details, and a 3rd sector directory of support is being created. Health and Social Work staff can use rooms in the hubs for meetings with families.

- In East Renfrewshire, a coordinated approach is being maintained for child planning, despite the challenges. The hubs have engaged with active schools and music teachers to broaden their activities, and used social media to promote this. A weekly Health & Wellbeing update is circulated via schools and also on social media. The youth Intensive Support Service is holding a daily video group call to young people to check in, offer support and provide opportunities for young people to network and support each other.

- The City of Edinburgh Council and 3rd sector have established a Task Force in response to the impact of Covid-19. The purpose of the task force is coordinate shared efforts and resources to support vulnerable children and their families. Partners will share information and develop new ways of working together to help mitigate the effects of poverty and social isolation in these difficult times. The aim is to avoid duplication and to build supportive networks for children and families that are directed in the most meaningful and helpful way.

- Edinburgh has also been tracking and comparing current referral rates and child concern reports with those weeks prior to COVID-19 and the same week a year ago. This has assisted in illustrating the 'demand' changes since lockdown, and they are seeing an increase in both referrals and actions taken as a result of the rise in demand/concern. This is providing reassurance that they are getting closer to the children who may be particularly vulnerable.

- Every child on the child protection register in Fife has been offered a place in the education hubs, and community hubs (which may be virtual) are ensuring a joined-up approach in localities around wider issues, including access to food and offering a housing service.

- In Glasgow, 33,000 children and young people are receiving a free school meal provision of a supermarket voucher. The provision was established quickly in order to support vulnerable children and is in addition to the support provided through education or early years hubs.

- The majority of the 2,666 children in Highland with multi-agency plans are contacted by school staff, and in the last week more than 99% were contacted. Where it has been difficult to make contact, Head Teachers have been creative in engaging with families, and have also worked with Police, health visitors and social care staff to ensure a child is safe.

- Home-Start has also moved to support families via digital technology, and groups are keen to sustain the digital service after this crisis, as they believe this is more accessible and removes barriers around stigma. Groups have distributed activity packs, meals and food supplies, electric and gas cards, as well as money directly to families. They also expect demand to increase, and say that their capacity to respond will be dependent on the investment of good community based services that can work in partnership with statutory bodies.

- Clear protocols are supporting the identification of families in Inverclyde who would benefit from a visit from Barnardo's outreach workers or community learning staff to discuss the local hub offer. Any concerns arising from these contacts with families are being shared with education and social work for appropriate follow up.

- The Midlothian partnership has developed guidance for professionals to provide clarity and support during the pandemic. This sets out which agency is responsible for each group of children and young people and describes the expectations around making contact. It also outlines the gatekeeping process for those who are deemed vulnerable, and a weekly meeting takes place with a multiagency group of professional to identify supports, the hub being only one option within a menu of services.

- In North Ayrshire, a multi-agency forum meets weekly to allocate support to children and families at risk. The meetings consider applications, using a risk and resilience matrix and assessment process based on the GIRFEC National Practice model.

- In Perth & Kinross, schools have provided information on the support for vulnerable children through a survey which asks about collaboration with partners to review plans. The authority is confirming the number of children and young people for whom plans have to be reviewed, and asking if there is any further support that schools might require of partner agencies.

- Relationships Scotland are working to offer provision through video conferencing and by telephone, and up to a third of counselling clients are already taking up online provision. They are anticipating a surge in demand across their services.

- Scotland's anti-bullying service 'respectme' has developed on-line anti-bullying resources, recognising that young people are spending more time on line during the COVID-19 pandemic, including user-friendly resources for parents and carers to support them in preventing, identifying and managing this problem.

- The Scottish Borders Youth network has broadened the scope of its activity, to reach out to more young people. Working through social media platforms, the network engages with many young people on a daily basis, including activities and crafts, and promoting general wellbeing.

- In Shetland, all children with a child's plan are contacted twice a week. New guidance is being prepared by young people, to reassure parents and children that the named person service remains available. While managers recognise that it has become more challenging to review and maintain child's plans, they have introduced flexible approaches to child's plan meetings.

- Community groups in South Lanarkshire are combining online and telephone assistance with practical activity such as shopping and prescription collection, and the provision of hot meals. Voluntary Action South Lanarkshire is linking with the Council's Community Engagement Teams in each locality, to operate a "Wellbeing Helpline".

- Team around the Child meetings are taking place virtually in Stirling, where clear guidance was issued early to staff about supporting children during the crisis. Advice has also been provided to parents with a Freephone line, and use of the Mind of My Own app for children.