

PROTECTING CHILDREN AT A DISTANCE

A multi-agency investigation of child safeguarding and protection responses consequent upon COVID-19 lockdown/social distancing measures

RESEARCH BRIEFING Early Help

Key points

- Levels of Early Help (EH) were reported to be rising due to stress and economic instability.
 - **89% of survey respondents noted increased EH needs locally,** and the perception of this was similar across agencies.
- 39% reported that EH services were cut in favour of statutory services.
- **Provision and funding of EH** was mentioned repeatedly within respondent commentary as a **priority and recommendation for central government** in order to prevent escalation of cases.
- 94% of survey respondents reported that most EH provision shifted to online delivery.
 - $\circ~$ only 53% felt that online services were effective.
- 68% felt that the onus on families to contact EH services had increased.
 - Concerns were raised that this shift in responsibility and move towards online EH provision may have prevented some disadvantaged families from accessing support and exacerbated existing inequalities of access due to digital poverty.
- 95% of respondents (n=217) reported that in the first six months of the pandemic children's centres were physically closed or partially closed.
 - \circ 67% of respondents (n=191) felt that this was appropriate.
- 89% of respondents noted that children's centres were offering full or partial pre-existing services remotely.
- Interviewees noted that children's centres were repurposed in some boroughs, for example to include health visiting and midwifery services. 43% of survey respondents reported that children's centres were repurposed in some way and most felt that this was an appropriate response in the pandemic.

Study overview

This research briefing provides key findings concerning early help/early intervention from a multi-disciplinary study on the impact of the COVID-19 pandemic on safeguarding/child protection practice in England. The study was designed to engage safeguarding leaders in all professional disciplines involved in safeguarding practice. The first stage of the study took place between June and September 2020 and comprised 67 interviews with London-based safeguarding and child protection leaders within seven professional groups: Children's Social Care, Health, Mental Health, Police, Education, Law and Safeguarding Partnerships. Interviewees' priorities and responses informed the questions and response options for the second stage, a national survey distributed to similar professional groups in February–March 2021, which elicited 417 responses for analysis. Respondents represented all regions in England with London and the South East accounting for 45% of overall survey representation. We accessed a very senior and experienced group of respondents with a predominantly strategic perspective, including Directors of Children's Social Care, Safeguarding Partnership Independent Scrutineers/Business Managers, head teachers or Designated Safeguarding Leads, Named and Designated Health and Mental Health Professionals, Police safeguarding leads at area level, and local authority and children's panel lawyers. Respondents had a mode of 20 years' experience. The survey generated over 1,000 comments (some are highlighted within this briefing).

Early Help

Levels of Early Help (EH) were reported to be rising due to stress and economic instability. 89% of survey respondents (n=193) noted increased EH needs locally (Figure 1) and the perception of this was similar across agencies. A few respondents (15%, n=144) reported *lower* thresholds for EH while a similar proportion (n=133) reported *raised* thresholds. Any increased threshold would be of concern given the reported increased need for EH. **39%** (n=153) reported that EH services were cut in favour of statutory services (Figure 1). Survey respondents commented on the need to invest in EH, especially in relation to resources targeting Domestic Violence and Abuse and preventing children from becoming recipients of statutory services. Provision and funding of EH was mentioned repeatedly within respondent commentary as a considerable priority and recommendation for central government in order to prevent escalation of cases.

'There needs to be policy change to improve investment in prevention and supporting families at the very beginning of their journey into parenthood.'
Designated Nurse for LAC and Safeguarding

LAC and Safeguarding Children, North West England 'Increase funding in early intervention and statutory services to ensure that local authorities can provide services which fully respond to local need.'
- Children's Social Care, London

'Investment in early help and family support and interventions as well as mental health and education.'
- Children's Panel Solicitor, South East England

'The whole sector needs more money to employ staff so thresholds would not have to be so high and children could actually be supported to live safe successful lives. This applies across social care, early intervention, mental health services and therapeutic support.' - Business Manager, Yorkshire and the Humber Interviewees reported a shift towards online EH provision and expressed concerns that the onus was being placed on families to contact EH services and that information was not accessible and/or updated regularly. This was reflected in the survey data: 94% of respondents (n=196) reported that most provision shifted to online delivery and only 53% (n=108) felt online services were effective. 68% (n=173) felt that the onus on families to

contact services had increased (Figure 1). This shift in responsibility and the move to online EH provision presents concerns as this may have prevented some disadvantaged families from accessing support. Online EH provision may not be suitable or accessible for some families due to digital poverty/inequalities. About half of respondents reported enhancing communication of EH packages to



Figure 1: Impacts of the pandemic on Early Help

professionals, young people and families. Online offers of EH services were reported by most respondents, as well as creation of COVID safe spaces for in-person support. Interviewees also noted the establishment of such spaces (e.g. booking a play slot at school playgrounds; social workers meeting with young people in parks). Interviewees and respondents indicated that the pandemic affected the functionality and accessibility of children's centres. **95% of respondents** (n=217) reported that **in the first six months of the pandemic children's centres were physically closed or partially closed** and **67%** (n=191) **felt this was appropriate**. Most (89%) noted that **children's centres were offering full or partial pre-existing services remotely**. In some boroughs, interviewees noted that **children's centres were repurposed**, **e.g. to include health visiting and midwifery services**. **43%** of respondents (n=129) **reported children's centres being repurposed in some way**.

Recommendations

- Baseline Early Help resourcing needs to be strengthened.
- Evaluate the effectiveness of online provision of Early Help, assess which groups did not access the services during the pandemic and formulate take away lessons from this for a broader reach in the future.
- Ensure equity of access and detail how support will be offered and provided to families that do not have internet access or may have social/learning vulnerabilities.
- Enhance local information sharing strategies should further lockdown take place, such that information on health, early intervention, and protection are part of the routine local mail out in addition to local authority information.
- Plan for future lockdown such that children's centres are accessible and safe.
- Develop plans for COVID safe spaces for client meetings in the longer term.

For more information about this study and to download stage 1 and 2 summary of findings reports and the final report, please visit the study project page: https://www.kcl.ac.uk/research/protecting-children-at-a-distance

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