COVID-19 Vulnerable Children and Young Peoples Plan: Consultation Analysis Report

June 2021
The consultation asked if, in the event of a further surge, there are specific actions which consultees would recommend to safeguard vulnerable children and young people and promote their welfare. [Q17]........................................................................................................................... 28

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Executive Summary

Background
The COVID-19 Vulnerable Children and Young People’s Plan was produced on a cross-departmental basis with the Departments of Communities, Education, Justice and the Economy.

The plan was developed in response to the challenges and risks facing children, young people and their families due to the COVID-19 pandemic. It is intended to reflect a series of activities that will be, or have been, undertaken across the Executive to meet the needs of vulnerable children, young people and their families during this time and in the recovery period after and to support the next steps in rebuilding services to meet the needs of vulnerable children and young people.

The Consultation ran from 18th September to 13th November 2020. The Department of Health led on facilitating the consultation, with other Departments notifying relevant organisations of the consultation. Consultees were invited to provide views on the draft Plan by way of questionnaire via Citizen Space [see Appendix]. Thirty four responses were received on Citizen Space. In addition a further 16 responses were received by email.

Consultation responses:
Key themes identified from analysis of responses to the consultation on the Plan were organised into 4 categories. In summary they are:

Planning – the Plan should be evidence based, accountable and flexible.

Partnerships – with children and young people, and their parents/carers, across statutory organisations, with voluntary and community organisations and with local government.

Impact– the responses to the consultation highlighted the impact of the pandemic, particularly on children with a disability and their families, and concerns about other impacts, including educational disadvantage, financial hardship and emotional well-being.

Support and Service provision – respondents referred to services under pressure, due to the impact of the pandemic on workforce capacity as well as increased demand and pre-COVID-19 pressures.

Next Steps
The Plan was developed as an emergency response to a public health emergency. The Plan was an opportunity to identify what was being done across government to safeguard vulnerable children and promote their wellbeing, to identify any gaps and to maintain a focus on vulnerable children and young people. Consulting with organisations across the statutory, voluntary, community and faith sectors as well as those who advocate for vulnerable children and young people was part of this process.
The purpose of this report is to summarise the main findings from the responses to the questions to enable the Northern Ireland Executive to respond to the main issues arising from the consultation.

The Executive will be seeking to maintain a flexible cross-departmental response that can react quickly and effectively in response to emerging COVID-19 related challenges and associated need within the wider strategic framework for children, young people and families, including the Children and Young People’s Strategy and associated strategies, including the Anti-Poverty Strategy.

The findings from the consultation have been shared across government and Departments have been drawing on feedback from the consultation and applying lessons learned to the ongoing response to the pandemic.
Introduction
The COVID-19 Vulnerable Children and Young People’s Plan was produced on a cross-departmental basis with the Departments of Communities, Education, Justice and the Economy.

The plan was developed in response to the challenges and risks facing children, young people and their families due to the COVID-19 pandemic. It is intended to reflect a series of activities that will be, or have been, undertaken across the Executive to meet the needs of vulnerable children, young people and their families during this time and in the recovery period after, and to support the next steps in rebuilding services to meet the needs of vulnerable children and young people.

The Executive agreed to a targeted consultation to ensure that the Plan:

- reflects the activities that are being undertaken to support children and vulnerable families during COVID-19;
- reflects how services have adapted and enhanced provision to continue to support children and families during COVID-19; and
- includes new actions, which have been undertaken specifically to address some of lockdown's risks and challenges.

The consultation ran from 18th September to 13th November 2020. The Department of Health led on facilitating the consultation, with other Departments notifying relevant organisations of the consultation. Consultees were invited to provide views on the draft Plan by way of a questionnaire on Citizen Space [see Appendix]. Thirty four responses were received on Citizen Space. In addition a further 16 responses were received by email.

Approach to analysis
The qualitative data from the responses received by Citizen Space and by email was indexed by: definition of children and vulnerable young people; plan objectives; promoting safety and well-being in the home environment; promoting safety and well-being in the wider community; strengthen system capacity to respond to current risks; rebuild services; further surge and other comments.

The key points and issues raised in each consultation response were drawn out and summarised into a narrative for each section of the plan. This was then analysed for patterns and connections, which enabled key themes to be identified and organised into 4 categories: planning; partnerships; pandemic impact and provision of support and services.

Main Findings
Planning – Respondents called for the Plan to be evidence based and for the evidence, including data, to be reflected in the Plan.

Respondents called for the voices of children, young people, parents and carers as well as organisations who work with them to be heard in planning. It was suggested
that children and young people are asked to identify the challenges and actions that would keep them safe and promote their welfare.

The need for a flexible Plan that responds to emerging issues and learning on what has or has not worked during the pandemic was a main theme running through the responses.

Respondents called for more detail on the actions in the Plan, including clarity on whether actions are being delivered or planned and information on who will implement the actions, timescales for implementation, and how outcomes will be measured. There were also calls for clarity on where the Plan sits strategically including with the Children and Young People’s Strategy.

**Partnerships** – Calls for collaborative working with children and young people, and their parents/carers, across statutory organisations, with voluntary and community organisations and with local government was a recurrent theme. There were calls for greater recognition of the work that non-public sector organisations do with vulnerable children, young people and their families on the ground, including being able to engage with ‘hard to reach’ families. Respondents highlighted the work of youth workers, including with vulnerable young people who will not engage in organised activities. Recognition of the pressures that voluntary organisations may be under in terms of a loss of financial support was called for; greater flexibility in the utilisation of funds during COVID-19 was suggested as well as support in other areas, including training, knowledge and skills building and guidance. Improved information sharing was advocated as key to safeguarding children, including to mitigate against office closures and remote working. One umbrella faith organisation called for cross-departmental meetings and briefings with statutory services, NGOs and faith-based communities.

**Pandemic Impact** – The responses to the consultation highlighted the impact of the pandemic on vulnerable children and young people, particularly on children with a disability, including an intellectual disability or autism. A number of respondents referenced an increase in challenging behaviour and subsequent harm being experienced in families.

The consultation responses reflected concerns that some children would be disadvantaged educationally where parents do not or cannot support home learning – including those with lower literacy or numeracy levels, parents with English as a second language or because of access to a digital device or internet provision.

Financial hardship and concerns around the number of families in poverty was also highlighted by a number of respondents. There are concerns that a significant number of families are being pushed into the category of ‘vulnerable’ due to COVID-19 pressures.

Respondents also referenced the isolation being experienced by vulnerable children and young people and their families, particularly for those in residential care, when not able to see their family. There were comments in relation to harm as a result of increased time online – concerns about gaming addictions, the impact of time spent
online on children and young people’s mental health as well as the risks of sexual exploitation. NSPCC highlighted an 11% increase in Childline counselling sessions about online abuse.

It was highlighted that groups who were disadvantaged prior to the pandemic are experiencing an accentuation of that disadvantage and that assessing the equality impact was important to ensure that those who are the most marginalised are supported.

**Service Provision** – Respondents referred to services under pressure, in some instances exacerbating pre-pandemic pressures, particularly services for children with a disability, autism, SEN, CAMHS and children’s social care.

There was criticism of the provision of services for children with disabilities and SEN during the pandemic, including on educational support and the provision of respite. One respondent said that ‘primary protective factors’ such as special education and respite provision that families had been assessed as needing should be considered as ‘essential’ or ‘priority’ services. Respondents felt that staff should not have been redeployed from these services at a time when children, young people and their families needed them the most. There were calls for special schools to remain open during future periods of lockdown. The modification of regulations for children’s social care as well as for SEN provision came under criticism. Respondents called for the regulations to be regularly reviewed, reinstated as soon as possible and for services to aspire to meet existing standards which should only be relaxed when absolutely necessary.

There were also a number of comments in relation to the support provided by schools for remote learning, including a call for a standardised minimum level of support from schools.

Caution was urged against focusing only on essential services at the risk of missing opportunities to prevent children and young becoming vulnerable. One respondent provided an analogy with the consequences of the reluctance to seek medical attention during the earlier stages of the pandemic; another provided an example of a family’s reluctance to seek help from CAMHS because they thought the service was closed.

There were concerns in relation to children, young people and their families having adequate digital provision in order to access education, services and advice online. Some respondents also highlighted issues around the capacity of vulnerable families to access guidance with one respondent from the voluntary and community sector pointing out that relationship-based provision can support families to access support.

There were some positive points on service provision during the pandemic, for example, the benefit of early years’ provision. Respondents were supportive of payments to families in lieu of free school meals and some respondents referred to the provision of digital devices which they felt should be promoted.

Those who work with children and young people were urged to maintain contact with them during lockdown.
Building children’s resilience and motivation was referenced - one respondent called for a strengths based approach so that young people are viewed ‘as having futures and opportunities as opposed to someone needing rescued.’ There were also calls for targeted mental health support for vulnerable groups, including care leavers and children with disabilities.

Respondents called for greater investment in services with one respondent saying that the Executive must review and allocate realistic resources to overcome pre-existing and expected demand for children’s social care services to ensure that the needs of vulnerable children are met.

**Definition of Vulnerable Children and Young People**

Do you agree with how the Plan has defined vulnerable children and young people? [Q5]

79.4% (27) of the 34 respondents who answered this question via the questionnaire on Citizen Space agreed with the definition.

**Summary of Comments**

A significant number of respondents felt that the definition should also include children experiencing poverty.

There were also calls for the definition to include:

- Children in the criminal justice system / in custody / secure accommodation / involved in ASB, at risk of offending or at risk of paramilitary activity;
- Children experiencing housing insecurity / homelessness;
- Children at risk of exploitation;
- Children excluded or disengaged from school, educated by alternative means or not in education, employment or training;
- Children affected by parental imprisonment;
- Kinship care and adoption;
- Families where there are language barriers;
- Traveller and Roma children; and
- Young witnesses in the justice system.

There was support for the inclusion of children who are in need but whose need is not known, what a Council described as ‘invisible children’.

Some respondents sought clarification on the age of young people that the plan extends to. The Children’s Law Centre and Sinn Féin said that the definition of Children in Need in the Plan is narrower than the statutory definition in the Children (Northern Ireland) Order 1995.
Plan Objectives
Do you agree with the objectives of the Plan? [Q6]

82.4% (28) of the 34 respondents who answered the question on the Citizen Space survey agreed with the objectives of the plan.

Section 1 – Promoting Safety and Well-being in the Home Environment
Do you agree that the right actions have been included here? [Q7]

76.4% (26) of the 34 respondents who answered the question on Citizen Space agreed that the right actions have been included here.

Are there any needs that are not being addressed through the actions in this section? [Q8]

50% (17) of the 34 responses received through Citizen Space said that there are needs that are not being addressed through the actions in this section.

Summary of comments

Increased Risk of Harm in the home
A common theme from the consultation responses was that the understanding of harm within the home should be expanded to take cognisance of harm related to increased pressures on families caring for children with a disability. Respondents pointed to an increased risk of physical harm to the child or the parent due to increased challenging behaviour, as well as harm to the mental health of a parent or child, and a negative impact on a child’s development, including their learning. A parent who responded to the consultation identified, ‘adults who are being harmed by vulnerable children who have autism, learning difficulties etc.’ as a need that is not being addressed by this section of the Plan. The Family Fund referenced research that they had undertaken: ‘89% of families in Northern Ireland reported that the coronavirus outbreak had negatively affected their disabled or seriously ill children’s health and wellbeing, particularly in relation to their behaviour and emotions [83%] and their mental health [80%].’ The Family Fund also said that they found an, ‘increasing negative effect on the health and wellbeing of parent carers’ and that 2 in 5 families reported that siblings’ general wellbeing had also been negatively impacted. A response from a HSCT also referenced distress among young people with an intellectual disability and autism. The Children’s Law Centre said that, ‘serious avoidable harm was caused to children, their siblings, parents and carers, including physical harm, damage done to property, harm to mental health.’

CiNI said that the mental health of parents has come under increasing strain, that action to support parents’ mental health was needed to promote safety and well-being in the home environment and referenced the Think Family Model.
There were calls for ‘home’ to be considered in a broader sense – to include a foster home, an adoptive home, kinship care, residential care, an ‘unregulated’ home, children in custody or in a regional residential unit and those in supporting living accommodation. Some respondents felt that the Plan does not address the needs of living in some of these different ‘home’ environments.’

RCPCH expressed support for maximising time in school, stating that the, ‘harm caused by absence from school far outweighs the risk of keeping schools open and is the only way to give children who are vulnerable to abuse and/or neglect but have not yet been recognised a chance of being identified and supported.’ Some respondents alluded to challenges in maximising opportunities for vulnerable children to spend time safely out of the home environment, one respondent from a HSCT said that, ‘some schools were exceptional in the support they provided to vulnerable children whilst others decided to be completely closed to all pupils… schools were able to make their own decisions as to whether to provide a service to their pupils or remain completely closed, refusing to provide a service for vulnerable children.’ BASW NI said that, ‘some excellent schools remained in contact with pupils throughout the pandemic but the majority did not’ and pointed to the disconnect this created for children and families. Another respondent said, ‘many primary schools defied the guidance of the Education Minister during the first lockdown and closed to all vulnerable children’.

NICCY said that there is an absence of actions in the Plan to address poor attendance in school and pre-school by vulnerable children during a lockdown. They highlighted that the most deprived areas were more likely to have lower attendance levels and that Northern Ireland experienced the lowest attendance of vulnerable children in school. NSPCC said that the Departments of Health and Education should work to find out why vulnerable children did not attend school to put in place a plan to ensure that it is not repeated. The Equality Commission said there should be actions to address the low rate of return to school of children from Traveller and Roma families. The Children’s Law Centre highlighted that there were 84.7% of children in school during the week commencing 12th October and asked if an analysis had been undertaken of the 15% not at school to assess the equality impact.

Pressures on families due to lockdown and social distancing restrictions.

RCPCH was supportive of actions in this section of the plan around signposting to available support. BASW NI described the advice support and guidance for families as ‘excellent’, calling for the SHSCT’s ‘Emotional Support and Signposting Service’ to be extended to all HSCTs, pointing out that signposting families to the right service at the right time will reduce the need for statutory intervention. BASW NI thought that more publicity is needed around Family Support Hubs, Sure Start and other community-based organisations; that families only hear at the point when they are ‘desperately seeking help.’

Home-Start felt that signposting to services only works for families who are ready to engage and a response from a HSCT also said that in their experience from the first
lockdown vulnerable children were not likely to access many of the supports outlined in the plan, including virtual or technology enabled support.

The value of Early Years provision, including childcare and Sure Start, was acknowledged by some respondents. RCPCH called it a ‘pivotal protective and supportive framework for most vulnerable young children.’ A response from SEHSCT described how the ‘lockdown’ child care placements that the SEHSCT put in place for around 50 children promoted their well-being, including their safety, and supported parents and carers. Belfast City Council highlighted early years services such as parent and toddler groups and play groups as well as activity based children’s groups and after schools groups as having been ‘invaluable in promoting the health and well-being of children and young people,’ acknowledging that while some were supported to reopen, the Council felt that this could have been better supported. The respondent from SEHSCT felt that having a proactive system to put in place new early years placements would be helpful, in the context of the learning from the first lockdown that vulnerable families will not access many of the supports put in place, and such a system would also support the Early Years sector. Belfast City Council also considered that childcare places should continue to be provided to vulnerable children. There were also calls for Sure Start to be made more widely available. Employers for Childcare said that from a survey they carried out in September 2020, parents were, ‘clear in advocating that the Government does not limit access to childcare during any future potential lockdown, and for the role of childcare to be recognised as supporting them to work, assisting in the educational and social-well-being of children, and facilitating mental health and well-being – both of parents and children.’

The Family Fund said that the Family Fund’s grant support for families raising disabled children, which is funded by the Department of Health, should be included in this section as well as the Department for Communities ‘Make the Call’ services as an important point of information and support.

Children less visible.

One respondent said that front line staff should be reminded of their responsibilities in identifying and reporting safeguarding issues. RCPCH also said that those who do see children should be upskilled to recognise child protection concerns and that children and young people should be empowered to reach out through helplines, social media and known trusted adults, highlighting that hidden harm to vulnerable children is the most commonly report concern from paediatricians, as highlighted in the RCPCH report, *The Impact of COVID-19 on Child Health Services*.

**Families Facing Financial Hardship.**

Responses were supportive of payments to families in lieu of Free School Meals (FSM) during lockdown and called for this to be continued to cover future school holidays with the Children’s Law Centre suggesting payments also be made when a child is required to self-isolate or is out of school. Some respondents called for
eligibility for FSM provision to be extended - one respondent highlighted that there are families in food poverty where one or both parents are in employment - and support for families to use the FSM payments and other resources effectively. There was support for the action in the Plan on immediate child/family needs being met through the children in need budget and support for the £100 additional payments to foster carers.

Respondents provided information on the increased financial pressures that families are experiencing. The Family Fund said that they have found through their research that 48% of local families had seen their income fall as a result of the pandemic and that as well as falling incomes, families also reported rising household costs with lockdown. Home-Start referenced their ‘Babies in Lockdown’ report which included responses from 177 expectant and new parents, including an 18 year old father of an unborn child from Northern Ireland who said, ‘I’m scared for my child. I’m scared for my partner. I’m scared that my furlough leave is not guaranteed after 30 June. I’m scared that if I lose my job I’ll not be able to pay rent. I’m scared of going homeless and having nowhere to go as the housing organisation is closed. I am terrified.’ Home-Start said that the report demonstrates the enormous impact of the pandemic on the lives of parents already experiencing hardship. RNIB said that access to food and financial challenges have been a major source of concern for people with sight loss and that they are aware of children and young people in need who are not able to access supports, for example, because rising demand means grant making organisations have been forced to tighten criteria.

There were references to poverty from a number of respondents – the impact on poverty for children, including on their access to education, health and recreation, the link with child abuse and neglect and an anticipation that poverty is increasing, that there is a cohort of families who have become vulnerable or are on the precipice of becoming vulnerable because of the COVID-19 pandemic. The Children’s Law Centre quoted a statistic from Action for Children that, ‘71% of families accessing the Action for Children appeal did not have financial problems before the pandemic, which has been causing distress in all kinds of places and all kinds of ways.’ NSPCC said, ‘we are in contact with families who are at the point of destitution, with food poverty particularly evident.’ The RCPCH said that its members, ‘see the effects of poverty manifest in the poor physical and mental health of children daily.’

The Children’s Law Centre called for the Anti-Poverty Strategy to be published urgently. There were calls for specific interventions to mitigate against child poverty. BASW NI said that the ‘Anti-poverty Strategy ‘must address the root causes not ameliorate the symptoms;’ one respondent suggested that the Plan should connect with the Anti-Poverty Strategy.

Children facing educational disadvantage due to school closures.

The Alliance Party response acknowledged that educational disadvantage amongst vulnerable children is of concern, particularly regarding access to post-primary admissions and transfer tests. Respondents reported inconsistencies in the provision of support provided by schools during lockdown. CiNI said that evidence suggests
there were wide ‘disparities in the provision of homework and contact from schools during lockdown.’

A response from one HSCT, in highlighting the autonomy of schools to make their own decision to close during lockdown, described how in that HSCT area a ‘pop-up’ school was created that provided one to one support for vulnerable children. The HSCT suggested that specific schools should be set up in each HSCT to provide a bespoke service for children who are not able to access school or where provision is limited.

The Children’s Law Centre said that the actions in the plan did not take account of the current situation in relation to educational disadvantage and needed to include actions for disruptions to attendance, for example disruption being experienced by children with clinically vulnerable parents, children with profound needs who are clinically vulnerable, children isolating, children whose parents are afraid to send them to school. Other respondents pointed out that children who are required to self-isolate are missing 2 weeks of school. The Children’s Law Centre highlighted the challenges for children who are at home, while peers are in school, to learn online with no support other than that of parents – some who may have themselves had reduced educational opportunity, may not be economically well off and or could be very ill. Parenting NI felt that there is a need for support specifically aimed at children or parents who are unable to assist with educational activities, including families who are particularly vulnerable – refugees and asylum seekers, parents with English as a second language and those with poor literacy / numeracy skills. NIACRO, in response to a question in respect of support in event of a further surge also said that parental ability to meet educational needs should be addressed, highlighting that literacy levels among lower-income families tend to be poorer. This was echoed by a faith organisation who felt that young people who are not being supported at home and who are not being given the additional support that they receive in school at home, are being missed.

The Children’s Law Centre felt that sending children work home was not adequate, that children require home teaching and direct support as well as peer interaction and that direction, guidance and resources is needed from DE. While welcoming DE Circular 2020/05 on Supporting Remote Learning they pointed out that this was left to the discretion of schools.

Parenting NI called for all schools to provide a minimum and standardised level of support when closed which should include some ‘distance real time’ engagement. In their joint response Professor Berni Kelly, Dr Bronagh Byrne and Professor John Pinkerton called for ‘clear guidance on minimum expectations in relation to online contact with school teaching staff to reduce and overreliance on parents / carers and to ensure consistency in opportunity for education across Northern Ireland.’

A response from one HSCT highlighted learning from first lockdown – that vulnerable children were not likely to access many of the supports outlined in the plan, including remote learning.
There were a number of comments on education provision for children with special educational needs and disability in particular. Parentline NI reported, ‘an overwhelming amount of calls from parents who said little had been done to provide them with the help they need to continue their child’s education at home since the closure of special schools.’

Barnardo’s commented that ‘…the closure of special schools and withdrawal of support, leaving families feeling alone and struggling, cannot happen again.’ Mid Ulster District Council reported considerable feedback from local residents and communities that children with special needs or complex special needs were ‘abandoned’ during lockdown. The Council called for more ‘specific’ actions to be ‘included or developed’ in the plan. RNIB referenced a survey where most families said they had not had contact with their child’s school or their Qualified Teacher of the Visually Impaired.

CCMS reported feedback from Principals that SEN services must remain open. The Children’s Law Centre felt that additional literacy and numeracy support in a small group or one-to-one could have continued online during lockdown and the circuit breaker. RNIB called on DE to make clear to the Education Authority that they need to ensure that children with SEND are getting the support they need and that schools should ensure that SENCOs are in regular contact with all children with SEND who are not attending school, working with other professionals, to make sure that support is being provided at home. CiNI said that it was their view, ‘that children with a disability or children with special educational needs were failed by some schools during lockdown’ and called for the Executive to establish, ‘clear protocols for special schools to ensure resources are in place for children with disabilities to continue with their education and any action taken by schools does not discriminate against children with disabilities…ensuring their right to education is upheld.’ NIACRO cited feedback they had received from parents with children with SEN saying that they needed extra support in the home if the children were engaging in distanced learning. The Irish Council of Churches / Irish Inter-Church meeting called for greater emphasis on children with SEN who were, ‘the first to be impacted by school closures and are among those most likely to be negatively impacted by disruption to their routine and loss of in-person supports.’ The Equality Commission called for actions on maintaining SEN provision in the event of further COVID-19 related limits to services. NSPCC said there had been a failure to adequately support SEND.

CCMS feedback from principals commented that phone call support is insufficient and that parents need special schools to remain open to meet need. RNIB also pointed out that most of the support needed by young people with visual impairment also requires direct teaching and cannot be delivered at home.

Children / families unable to access services due to reduced service provision and / or social distancing requirements.

A number of respondents referenced the impact of reduced service provision on families with children with a disability, in particular with calls for more support for
children with a disability and their carers. CiNI, who said that children stopped receiving help and support overnight, said that 77% of parents in a survey they conducted with parents were stressed about the loss of support systems.

One response said that, ‘young people with an intellectual disability and autism have suffered most during this pandemic due to the loss of supports from both education and health and social care and their difficulty in tolerating changes in routine,’ adding that ‘there is nowhere near the level of support needed for these young people in the community. Support from Special Schools and signposting alone will not be sufficient. The level of risk to young people and their parents and the number of placements on the verge of breakdown is huge. Direct practical supports in the form of short breaks, respite care and support for families in managing challenging behaviour is urgently needed. It is hard to imagine the level of distress and mismatch in support for this group being countenanced in any other group of young people’. CCMS felt that children with special educational needs were most affected during lockdown.

The Family Fund reported that their research found that almost 7 in 10 families said that formal support for their disabled or seriously ill children had declined since the outbreak and that many families remain unable to access the formal support they had in place prior to COVID-19. Responses referenced the impact of the loss of respite (including respite through attendance at school) for families with children with a disability. Sinn Féin said that the lack of support, including respite, for households with children with additional needs had led to increasing use of medication. The Children’s Law Centre also referenced ‘chemical restraint’. Respondents said that respite is now more essential to families who are dealing with hardship and isolation. The Children’s Law Centre pointed out that respite, which should be recognised as a ‘primary protective factor,’ is not referenced in the plan. RNIB highlighted that children with disabilities are at increased risk of abuse than those without disabilities, increasing the need for families of children with disabilities to receive support during lockdowns to prevent moving from children ‘in need’ to children ‘at risk.’ RNIB said that Family Support Hubs need good communication with specialist organisations for children with disabilities, especially for low incidence disabilities such as visual impairment where ‘the risk of isolation for their families is exacerbated when lack of tailored information and support for their specific needs.’

The Children’s Law Centre said that a, ‘coherent, transparent, accessible, visible, properly and jointly resourced multi-disciplinary vulnerable children process directed and guided by DE and DOH and operationalised by the EA and HSCTs is the most important action Departments can take for these children.’ The Children’s Law Centre cited reasons why the process that was put in place had not, as they considered, worked: certain schools refused to open, schools refused requests from social workers for help, in some cases social workers did not put forward relevant children; parents had no direct input which resulted in the offer of unworkable ‘solutions;’ some children were not identified. The Children’s Law Centre claimed that some special schools, ‘simply risk assessed out the most challenging children without a multi-disciplinary input and left those children at home when it was against their best interests.’ The Children’s Law Centre also said that some schools who did
open and provide for some children cited lack of available health staff as a reason for being unable to manage certain children safely. They felt that DE should have used powers of direction to ensure that schools opened.

In relation to health services, the Children’s Law Centre referenced ‘extensive delays’ in health assessments for children with special educational needs and disabilities. The CCMS response, based on conversations with principals, said that schools reported a need for social services to work with schools to share information, that transition for a number of looked after or adopted children to different schools has been challenging due to a lack of support, that CCMS officers have been to a number of MAST meetings requesting further support for the school to meet these children’s needs. RBNi said that specialist teams in HSCTs such as Sensory Support Teams and Children’s Disability Teams should keep regular contact with families. NIACRO referenced frustrations from families who are not able to access supports in their local region that are offered in other areas and called for a consistent approach between the health trusts.

Some respondents felt that services via telephone or online are not the same as seeing a family face to face. RCPCH said that the use of technology must complement ‘in-person service’ provision and called for Sure Start and Early Years provision to be ‘in-person’ as soon as practicable. NIGALA, aware from young people the challenge of not being able to see family living in a different house during lockdown, said that ‘video calling siblings was not the same as spending time together.’ A voluntary organisation pointed out that much of the action relies on families and children and young people having access to technology, with those who do not have such access being, ‘denied important support perhaps when it is most needed and when face to face contact is not possible.’ An umbrella faith organisation suggested that essential face-to-face services should remain open for the most vulnerable young people.

Some respondents expressed concern about the impact of the pandemic on new parents and babies. Home-Start thought that the needs of new parents should have higher prominence in the Plan, pointing out that COVID-19, ‘is having a clear impact on …early development by restricting parents’ access to informal support, family and friends, increasing stressors and reducing opportunities for the parent/child interaction to be supported.’ NSPCC referenced an Ofsted report about an alarming rise in intentional harm to babies, highlighting the critical role of health visitors. NSPCC were concerned about health visitors being diverted to acute care. RCPCH also expressed concerns on health visitor redeployment, saying that the recovery of ‘Healthy Child Healthy Future’ should be prioritised.

A number of respondents highlighted challenges for children and young people relating to transitions, including transitions to adult services (for example, disability, mental health); for young people leaving care and moving to independent living; to new school and to adulthood for children with disability.

Some respondents felt that the plan should include actions targeting at addressing language barriers for newcomer, refugee or asylum seeking families or unaccompanied children. The CCMS response highlighted good practice in this area.
by FSN who, ‘reinvented new ways to support the asylum seeking and newcomer children – often reaching out to voluntary organisations such as Save the Children projects to support these families.’

There were references to a lack of ‘suitable accommodation’ for looked after children, particularly the use of B&B / hostel accommodation for 16 and 17 year olds. The Children’s Law Centre and Sinn Féin highlighted a particular issue for young people in perfecting bail that has been exacerbated by the pandemic. Sinn Féin said that some young people have plead guilty because the sentence faced was less than anticipated jail time while awaiting trial on remand. The Criminal Justice Inspectorate called for no child to be released from custody to a hotel or bed and breakfast accommodation.

NSPCC asked what specialist support services have been put in place to help children recover from domestic abuse trauma and suggested that support is mapped by HSCT to identify the gaps. RCPCH highlighted an Ofsted report that has highlighted reduced behaviour, concentration and / or mental and physical stamina in some cases attributed to domestic abuse as well as trauma and mental health issues at home.

Some respondents also felt that digital poverty is not being adequately addressed, that children have not had access to the equipment they need for online learning and to access advice and support and for families to access online resources and services. NSPCC said that the government had been slow to provide digital services to children from poorer backgrounds. Evangelical Alliance NI also said that there needs to be better provision of digital support or clearer information on the provision that is available. RNIB said that technology and online resources need to be accessible for visually impaired children or parents, pointing out that accessibility of school online platforms for children who are visually impaired is limited and highlighting that schools should ensure learning platforms are accessible to comply with duties under the Disability Discrimination Act. The Children’s Law Centre believe that with the internet now being essential to many aspects of life, the failure to ensure equality of access to the internet and digital technology is a breach of children’s rights. The CCMS response welcomed support from Executive in meeting challenges for families with internet / digital devices and NIACRO suggested that the Education Authority should promote the provision that is in place to supply devices to students in need. A response from a HSCT indicated that access to technology was only part of the reason why, in that HSCT’s experience from the first lockdown, vulnerable children were unlikely to access virtual or technology enabled support. Evangelical Alliance NI pointed out that some vulnerable young people and their families lacked capacity to access apps and online resources.

The Irish Council of Churches / Irish Inter-Church Meeting highlighted that the inability to access devices and online supports exacerbates the impact of isolation during the pandemic. NIACRO referenced the isolation for children living with one parent during lockdown. Barnardo’s also referenced social isolation and called for loneliness as a cross-cutting theme to be integrated within the plan, saying that, ‘vulnerable children, young people and families – including young people leaving
care, young carers, families experiencing poverty or who are affected by disability – may be particularly at risk of loneliness and social isolation, which the pandemic is exacerbating.’ NIGALA referenced the isolation of young people in residential care when the unit is in lockdown, the isolation from family and from friends. NSPCC also referenced the challenge to children of dealing with isolation and a lack of access to family and friends, reporting, ‘often overwhelming’ feelings of isolation and loneliness of children contacting Childline. RNIB highlighted the impact of isolation on the social skills and development of independent skills for children with a visual impairment. CCMS referenced the isolation for some families when schools are closed and suggested additional funding for a liaison team to communicate with children when schools are closed.

Some respondents said that there is a range of available supports that are not referenced in the Plan, including those delivered by local government and the voluntary and community sector. Respondents highlighted that voluntary and community sector organisations had been providing services to children outside their homes and that there should be increased funding, citing increased demand on their services.

A range of resources developed by organisations during COVID-19 was highlighted.

Some respondents also highlighted the role of youth workers in engaging vulnerable young people and called for youth workers to be considered as essential, included in Family Support Hubs and given permission to go ‘where the young people are’, in recognition that many young people who will not engage with online services or comply with restrictions in order to access indoor provision.

Respondents identified a need for a joined up approach with stakeholders to be involved in implementing the actions, including voluntary and community sector.

Are you aware of any examples of best practice that are addressing need in this area? [Q9]
50% (17) respondents who answered this question said that they were aware of examples of best practice addressing need in this area. Respondents also highlighted work of ‘unseen agencies and organisations that are quietly supporting children and young people without government support.’

Section 2 Promoting Safety and Well-being in the Wider Community

Do you agree that the right actions have been included here? If no, please explain why. [Q10]
79.4 % (27) of the 34 respondents who answered this question via Citizen Space agreed that the right actions had been included.
Are there any needs that are not being addressed through the actions in this section? [Q11]
41.2% (14) of the 34 respondents who answered this question via Citizen Space suggested that there are needs not being addressed through the actions in this section.

Are you aware of any examples of best practice that are addressing need in this area? [Q12]
35.2% (12) of the 34 respondents said they were aware of other examples of best practice, which were addressing need in this area.

Summary of comments
Some respondents highlighted the impact to children and young people’s well-being of being cut off from the wider community and not able to socialise with friends, including due to the closure of spaces for young people and a reduction of services. One respondent commented that, ‘our young people will be more mentally healthy when they can safely be out and about within the community.’

On online harm, Barnardo’s highlighted that risks include the risk of grooming / sexual exploitation, gambling and negative impacts on mental health. NIACRO said that awareness about gaming addictions in children should be included, pointing out that as well as being harmful in itself it makes children even more vulnerable to sexual abuse, exploitation, and financial loss. Some respondents said that parents and carers need to be supported to help their children to stay safe online, while one respondent highlighted that some vulnerable children do not have supportive relationships with parents that are key to supporting safe online interaction. Family Fund highlighted their digital skills training to parent-carers, a key part of which is ensuring parent-carers are able to place safety controls on their children’s devices. NSPCC pointed out that there are no actions for victims of online abuse in the Plan and highlighted the 11% increase in Childline counselling sessions about online abuse. NSPCC called on the NI Executive to, ‘immediately publish and progress its Online Safety Strategy without delay, take proactive and timely measures to respond to the increased risks children face online and protect children in Northern Ireland from online abuse and exploitation.’ NSPCC also called for close work with the UK government to ensure the Online Harms Bill guarantees all children across the UK robust and comprehensive protections from online abuse and exploitation.

Some respondents referred to a risk to children of becoming involved in criminal activity, including anti-social behaviour. Barnardo’s referenced young people who may struggle to comply with the restrictions – due to life experiences and previous trauma – coming into conflict with the law and being criminalised, advocating that the PSNI and other responders adopt Trauma Informed Practice. Another respondent suggested that the Plan should include, as a risk, the lack of engagement with young people who do not comply with the COVID-19 restrictions. The increased risk to
young people who are spending more time outdoors when youth provision is closed or partially open and other community services are limited was also highlighted. Some respondents called for youth workers to be recognised as essential workers so that they could continue to provide face to face services especially for some young people at risk of exploitation (including through Paramilitarism) unlikely to engage in organised programmes.

An umbrella faith group said that youth workers have expressed concerns about increased exploitation of vulnerable young people including through Paramilitarism, organised crime and criminality. A response from Supporting People, NIHE highlighted that the plan does not reference drug use or increases in substance abuse and that coming out of lockdown young people have been targeted by dealers, adding that there is a ‘plethora’ of support available through a variety of agencies. 2 respondents referenced PSNI actions which they thought should be in the Plan – engagement with young people at risk of exploitation and actions to disrupt perpetrators, along with the PSNI role in public protection.

NIACRO highlighted that there is no reference in the Plan to support for young people who identify as LGBTQ+, adding that young people who identify as LGBTQ+ were four times more likely to self-harm pre COVID-19 and that this is likely to have been exacerbated by COVID-19.

Respondents called for the public sector to work collaboratively with the voluntary, community and faith sectors to keep children safe and promote their well-being in communities, highlighting the local knowledge and trusted relationships that these sectors have, particularly in hard-to-reach communities and with young people, maintaining contact with children and young people throughout COVID-19.

Examples of local collaboration were referenced in responses, including examples of local youth groups working alongside local secondary schools to support young people, including to enable them to spot potential exploitation amongst themselves and their friends, and street based youth work teams as well as a collaborative team of different organisations working with PSNI Neighbourhood Team and the Education Authority.

There were a number of comments in relation to the sharing of information. The Criminal Justice Inspectorate felt that all missing children should be considered as being at risk, not only where a ‘significant’ risk has been identified, as worded in the plan. The Criminal Justice Inspectorate said that clarity and action on information sharing was needed to safeguard children across all Departments, agencies and NDPBs.

Section 3 Strengthen System Capacity to Respond to Current Risks
Do you agree that the right actions have been included here? [Q13]

76.5% (26) of the 34 responses received through Citizen Space agreed that the right actions have been included here.
Are there any needs that are not being addressed through the actions in this section? [Q14]
55.8% (19) of the 34 responses said that there are needs that are not being addressed through the actions in this section.

Are you aware of any examples of best practice that are addressing need in this area? [Q15]
The majority of respondents – 67.6% (23) of the 34 who responded on Citizen Space – said they were unaware of any examples of best practice that are addressing need in this area.

Summary of Comments
Information to Inform Decision Making

Home for Good NI welcomed the weekly publication of social care information, commenting that the publication of this information had enabled them to ‘share real-time needs in the system which has inspired people to respond.’ Home for Good NI suggested that other information is made available including the number of foster carers within the system and delays in adoption proceedings. RCPCH also welcome the specific actions on the collection of data and evidence to inform decision making adding that the RCPCH has, ‘long called for enhanced collection and utilisation of relevant data from appropriate intelligence sources, particularly from service users in Northern Ireland.’ QUB Disability Research Network & School of Social Sciences Education and Social Work (SSESW) said that 3.1, ‘Availability of adequate information in a timely manner to inform decision-making in response to COVID-19’ should include an action to consult with children and young people, directly and through advocacy organisations. The Children’s Law Centre stated that it is, ‘imperative’ that children and young people and their families who have been impacted by changes to service delivery are directly asked their views. The Children’s Law Centre also called for information to be disaggregated across ‘Section 75’ categories to identify differential impact, including across socio-economically disadvantaged families given the, ‘obvious disproportionate impact of COVID-19 on this group.’ RNIB said that disability organisations should be contacted for information about the experiences of families of disabled children and young people and disabled parents and specific professionals in the voluntary and statutory sectors.

QUB Disability Research Network & SSESW suggested that focused research to enhance existing and emerging UK and international evidence base should be commissioned and used.

Barnardo’s said that there is an opportunity to improve cross-sectoral communication. They felt that office closures and remote working has made it harder for social workers across different organisations to speak directly.
Provision of Guidance

RNIB recommended specific guidance for parents of children with disabilities and for parents with disabilities and guidance specifically for blind and partially sighted children and adults on social distancing on how to get out and about safely. Some respondents felt that some families need support to access guidance. Evangelical Alliance NI highlighted that often families with vulnerable children and young people do not have the, ‘physical, mental or emotional capacity’ to ask for guidance which can fall to service providers who are already ‘overstretched in workforce and workload.’ Home-Start UK suggested actions around increasing levels of support, pointing out that relationship based support for children and families helps ensure guidance, ‘reaches families and achieves impact.’ The Children’s Law Centre called for an action on guidance in a child friendly format. RCPCH highlighted ongoing publishing and updating of guidance for professionals, children and young people and parents.

Legislative Changes

There were a number of comments in relation to the temporary modification of statutory duties. The Children’s Law Centre response was critical of temporary modification notices which they described as, ‘diluting the entire substance of the SEN legal framework to a ‘best endeavours’ standard,’ and called for the Department of Health to repeal the Children’s Social Care (Coronavirus) (Temporary Modification of Children’s Social Care) Regulations (Northern Ireland) 2020 (the ‘Children’s Social Care Modification Regulations’) as a matter of urgency. Barnardo’s called for there to be, ‘an aspiration to meet existing standards… with changes allowing for flexibility when absolutely required rather than a general acceptance of a relaxation.’ They also called for the social care modifications to be continuously reviewed. NICCY reiterated concerns about the use of emergency measures, including the Children’s Social Care Modification Regulations to contend with, ‘pressures in the system.’ Sinn Féin said that statutory duties to children and young people, particularly vulnerable children and young people have been, ‘hard won and should not be weakened because the department struggles to meet them…a focus needs to be put in how statutory obligations can be met in ways that are conducive the additional safety measures, rather than removing the obligation to deliver.’

The QUB Disability Research Network & SSESW, said that the Children’s Social Care Modification Regulations may need amended following consultation. RNIB called for the impact of the temporary modifications to be regularly reviewed and for the provisions in the social care legislation as well as education legislation to be reinstated as soon as possible adding that, ‘the relaxation of social care legislation has left some families of children with complex needs at breaking point due to lack of access to carers.’ RCPCH commented that the most recent monitoring report, ‘illustrates a reasonable percentage of LAC visits, LAC reviews and limits on secure care but paints a more bleak picture for Care leaver pathways.’ RCPCH called for
the reinstatement of the, ‘pre-modified protective provisions around statutory timescales and in-person visits’ to be ‘afforded the highest level resolve.’

NIACRO asked for consistency between HSCTs and schools so that plans are reviewed every 4 weeks to ensure that actions are meeting needs. Barnardo’s advocated caution in relaxing pre-employment vetting, particularly given quick AccessNI turnaround times.

**Workforce Capacity**

The Children’s Law Centre said that staff shortages and services under pressure reflected their clients experience prior to COVID-19 which has now been exacerbated.

NICCY pointed out that this section needs to address the additional pressure on services from increased referrals as well as reduced workforce capacity due to illness / self-isolating. This was echoed by other respondents, including RCN which said that, ‘the DOH must remain aware of the impact of the pandemic and the ever-increasing workload upon health and social care.’

The Children’s Law Centre said that not maintaining, ‘primary protective factors’ of specialist education attendance, daytime respite and short breaks indicates that these services have not been considered as ‘essential’ or ‘priority’ services even though families have been assessed as needing them prior to the pandemic, ‘to prevent harm and hold the family together.’ The Children’s Law Centre called for the definition of ‘essential’ services to be made public, along with criteria used to prioritise families for services, such as respite.

NICCY expressed concerns about a focus on what NICCY called, ‘emergency and urgent services.’ Home-Start UK advocated that services be delivered as normally as possible so that children who are vulnerable are not prioritised at the expense of children who may become vulnerable. Parenting NI said that while understanding that the Plan focuses on the most vulnerable, the pandemic has pushed a larger range of families into a ‘vulnerable’ category than normal times.

NICCY expressed concerns about a reliance on agency staff or those temporarily employed. Another respondent said the Plan does not address needs of staff in terms or training and encouragement of coping mechanisms and self-care.

Some respondents felt that staff working with vulnerable children should not have been redeployed. RNIB said specialist staff in health and education who support children with vision impairments should not have been redeployed when needed most. The Children’s Law Centre also referenced the impact of service reprioritisation on vulnerable children and their families, with the redeployment of staff and repurposing of respite facilities. They felt that the Department of Health should have directed that relevant HSC staff, including nurses and AHP specialised to work with children, remained available in specialist school and respite settings. RCPCH referenced their report on the impact on children’s services which found that up to 9% of paediatric staff were unable to work between April and July 2020 (eg due
to redeployment, illness, shielding or self-isolating), calling for policies to protect the children’s services workforce, saying a high backlog of cases as well as delays in presentations of child protection cases were consequences of phase 1 of the pandemic.

Home for Good NI also highlighted that in addition to challenges on the children’s workforce capacity, they were aware from their network that many foster carers stepped back from foster caring during lockdown because of health concerns. Home for Good NI called for the Department of Health to develop an emergency recruitment strategy to ensure children are not, ‘left waiting for a home to meet their needs or placed in inappropriate accommodation.’

**Protection measures for staff delivering face-to-face services**

RCPCH said that the use of alternative methods of service delivery needs to be evaluated to assess the impact of using these for delivery of care and patient outcomes, they need to be accessible and safe.

Respondents called for the provision of PPE and testing to be a priority for children’s social care and health workers as well as those in education. Some respondents also called for vaccinations to be a priority for these groups.

**Role of organisations outside the public sector**

There were comments in relation to the role played by organisations outside of the public sector. Home-Start UK urged Departments to give, ‘greater prominence to the role of the voluntary and community sector especially when more formal facilities are closed or otherwise restricted,’ with another respondent saying, ‘get out there and work with youth workers and churches outside of the Education Authority bracket who are actually working with the most at-risk and vulnerable.’ One umbrella faith organisation said that churches and faith-based organisations are willing and ready to help to share resources that they have including facilities, property and people. The Irish Council of Churches / Irish Inter-Church Meeting highlighted a challenge for volunteer led faith-based groups in keeping abreast of changing guidance which is not tailored for volunteer youth and children’s services. The Big House Ireland called for a fund for small organisations who are providing solutions to the situation. Barnardo’s requested an explicit commitment to maintaining and building on cross-sectoral work with the voluntary and community sector. NICCY said that the voluntary and community sector plays a critical role in the delivery of this Plan, calling for the impact of the pandemic on the capacity of the voluntary and community sector to be monitored.

**Other Comments**

The Supporting People NIHE response detailed a number of actions that have been undertaken in this area that have not been listed in the Plan. These include the
close contact that Supporting People has maintained with providers to share information and spot emerging trends within, and understand the changes to, the sector in terms of need.

**Section 4 Rebuild Services**

Are there additional actions required in connection with rebuilding/resetting/restarting services for vulnerable children and families? [Q16]

55.8% (19) of the 34 who responded on Citizen Space suggested there were additional actions required under this section.

**Summary of Comments**

A number of respondents felt that there was insufficient detail in this section of the Plan, with RCN saying that more detail is required in relation to the priorities and how to balance rebuild and addressing the second wave and how services are prioritised within a depleted and pressurised workforce.

There were comments on the need to restore services and ‘recover’ the workforce.

Many respondents said that a pre-pandemic situation of services under pressure has been exacerbated by COVID-19. The Children’s Law Centre said that prior to COVID-19 many services, ‘were not fit for purpose, were chronically underfunded and understaffed, with huge waiting lists for young people to access services.’ NIACRO referenced 3 year waiting lists for ASD and ADHD assessments. NSPCC referenced ‘extreme pressures’ faced by children’s social care: ‘workforce challenges and inadequate resourcing has been driving decision-making and there have been increasing numbers of unallocated cases…this crisis has further exposed the fragility of a strained system.’ The Alliance Party said that waiting lists for children accessing CAMHS support before the pandemic was extensive and that a plan is needed to reduce the wait for counselling in the context of increasing mental health issues. The CCMS response said that schools have been highlighting a lack of CAMHS provision for a number of years and also referenced special educational needs services as being, ‘inadequate to meet demand.’ CCMS also said that schools report concerns around referral times to Family Support Hubs. NSPCC pointed to delays in the criminal justice system, referring to the Gillen Review which highlighted that the system in Northern Ireland takes twice as long as the system in England and Wales with serious sexual offences involving children seeing cases take an average of 986 days to complete: ‘in these instances, our Young Witness Service see first-hand the negative impact and strain of this delay on children and families first-hand.’ NSPCC called for court cases involving young witness to be prioritised.

Respondents called for greater investment in service rebuild, informed by lessons learned since the beginning of the pandemic, including new and innovative models of care, and informed by the views of children and young people as well as organisations who work with vulnerable families. The Children’s Law Centre said, ‘it
is imperative that the opportunity is taken now to learn from past experiences, to take stock of where the gaps are and to build back better.’ Barnardo’s also called for ‘build back better.’ RCPCH called for planning on children’s health services to be ‘reset and underpinned by data and evidence,’ they called for the commencement of the paediatric workstream to be re-prioritised to minimise silos, ensure holistic, wrap around service and support for vulnerable children. One respondent called for additional training places for Social Work students, additional investment in children with disability services and additional investment in children’s residential services as well as recurrent funding – stating that non-recurrent funding is not sufficient to meet medium term needs of vulnerable children affected by the pandemic and the subsequent increased demand for services.

One respondent said that the Northern Ireland Executive, ‘must review and allocate realistic resources to overcome pre-existing and expected demand for children’s social care services to ensure that the needs of vulnerable children are met.’ There was also a call for flexibility for the voluntary and community sector – to be able to re-direct funds to areas of priority need without overbearing additional documentation - and that unclaimed ring-fenced funds should be investigated, redirected and any barriers to accessing the funds addressed. A need to assess the impact of loss of services from voluntary organisations who have closed and options to mitigate against these losses was also highlighted.

The Criminal Justice Inspectorate repeated their earlier call for clarity and action on information sharing and strengthening partnerships to safeguard and protect children, including a clear message from the Executive as recommended in the Criminal Justice Inspectorate NI’s Child Sexual Exploitation report. Partnership working was also a feature of Home-Start UK’s suggestion that action should be taken to, ‘grow relationships between statutory supports and third sector voluntary organisations to facilitate training, communication and building knowledge and skills across the sector.’

The responses in this section again called for special schools to remain open: ‘my son is 9 year old with non-verbal autism and OCD tendencies that have gotten so much worse with the closing of schools…special needs schools must remain open or these vulnerable children will deteriorate in the worse way like my son has;’ There were calls for urgent action on gaps in short breaks provision for young people with an intellectual disability; for services for children with additional or special needs to remain open in particular for children with autism and services for the hearing impaired as well as speech and language services.

Parenting NI echoed an earlier theme that the pandemic has pushed a larger range of families into a vulnerable category.
Further Surge

The consultation asked if, in the event of a further surge, there are specific actions which consultees would recommend to safeguard vulnerable children and young people and promote their welfare. [Q17]

70.6% (24) of the 34 responses on Citizen Space suggested additional actions, which they would recommend to safeguard vulnerable children and young people and promote their welfare in the event of a further surge.

Summary of comments

Earlier comments in relation to the continuation and increased capacity of respite services were repeated in the responses to this section. One HSCT said that respite cannot fill the gap of special schools, ‘who must continue to support vulnerable young people.’ The continuation of services for children with special needs was referenced. NIACRO said that children who normally receive support in school should receive some particular support during lockdown, for example small group learning opportunities, and that children who have sensory toys / equipment in school should have access to it. A parent said, ‘school and more home support.’

An earlier theme - that the range of parental ability to meet educational needs should be addressed - was echoed by one respondent. NIGALA asked what provision / resources can be put in place for children in residential care and where money is an issue to catch up educationally, to motivate and ‘help them to experience their education as valuable and to have hope in their future.’

A number of respondents suggested that children and young people identify the challenges and actions that would keep them safe and promote their welfare, with two suggesting that staff could be trained to facilitate this. Barnardo’s said it is important that children and young people’s voices are heard in planning a response to a further surge.

Families accessing advice, including advice filtering down from government, came up again as a theme in this section. Comments included in relation to advice being accessible, one respondent from the voluntary sector advocated, ‘ongoing, simply accessed communication for those who are perceived as vulnerable – so that families and young people themselves can confidently say what support they need’. Two respondents referenced support from GPs in this context. Some respondents said that the advice should be readily available and ‘beyond an online presence,’ particularly in the event of further school closures or lockdown. The QUB Disability Research Network & SSESW said that parents / carers of children with disabilities need targeted support and different forms of support as usual services may be temporarily closed. A grandparent called for, ‘face to face help for family plus social services quick response to calls.’ Evangelical Alliance NI also called for more capacity for face-to-face community services. The response from Disability Research Network & SSESW, QUB said that children, young people and parents / carers need, ‘clear, accessible information regarding the type, level and mode of support available.’ Home-Start UK called for support for services which exist in the
community which are ‘bridges to information, guidance and are based in providing relational support to help support, and rebuild parental capacities, and support parent / child relationships.’

Some respondents called for those working with children and young people to stay connected to them. Volunteer Now said that, ‘promotion of this concept is vital.’ QUB Disability Research Network & SSESWSW also advocated ‘clear and consistent efforts to maintain contact with vulnerable children and young people and their parents / carers.’ CCMS said a number of families did not receive any calls from schools during the summer and felt very isolated and would welcome support for schools to fund a family liaison team to communicate with every child in the school at least once or twice whilst schools were closed. BASW NI said to aspire for teachers to check in with families via a weekly call.

Earlier comments about designating youth workers as key workers were repeated in responses to this section: ‘make us key workers to help young people.’

There was a common thread in responses to this section around the emotional resilience and mental health of children. One voluntary organisation suggested that educational bodies and others working with young people be, ‘unusually holistic.’ BASW NI called for schools to be a, ‘safe and caring environment for those children who are struggling’ and called for ‘positive behavioural management strategies’ to be ‘less important than the emotional and mental health of school pupils.’ One respondent suggested more funding streams to support needs of young people, with promoting education and well-being at the centre of proposals.

One respondent said that it was important for children to, ‘build resilience to cope with the situation’ and for, ‘opportunities for children to socialise / interact with peers and be children.’ Another respondent called for a strengths based approach, that young people should be viewed has having futures and opportunities as opposed to someone needing rescued which would enable more resilient and motivated young people. The Big house Ireland also referred to the need to offer, ‘concrete hope, encouragement.’

NIACRO referenced a specific need for children in residential settings to look after their mental health in terms of being able to see relatives and friends and also suggested that ways in which children can visit family members in prison are considered. The response from QUB also said targeted mental health services are needed for vulnerable groups including care leavers and children with disabilities.

NIACRO called for specialised individual support for looked after children highlighting that as a consequence of many residential homes experiencing extremely short staff due to COVID-19, usual services such as ‘one to ones’ and ‘trust’ visits aren’t taking place. NIACRO also referred to practical helps including more iPads and flexibility on rules on when phone calls are allowed in residential homes.

The QUB response said that, ‘care leavers need opportunities to remain in foster care and residential care or to move to more appropriate accommodation’ and Home for Good NI reiterated its call for an emergency recruitment strategy for future crises.
Some respondents called for practical support for families. QUB said that additional practical support for vulnerable children and their parents/carers is vital (including food parcels, financial assistance and provision of technology). NIACRO said that there should be cold-weather payments for families who are using more heating, electricity etc. due to being at home.

Respondents advocated continued awareness raising about reporting safeguarding concerns and to promote via media the helpline/online chat facilities available for children and young people experiencing abuse.

The RCN said that it is important also to focus on maintaining normal service delivery, not just focussing on specific pressures and losing sight of mainstream services: ‘ensure that the needs of the children and young people of NI, and their families and carers, are addressed appropriately and fully, regardless of the trajectory of COVID-19.’

The response from Supporting People, NIHE echoed earlier themes of promoting partnership working and information sharing which they described as, ‘crucial to a preventative approach to the protection of vulnerable children and young people.’ Evangelical Alliance NI suggested regular cross-departmental meetings with, and briefings to, other statutory services, NGOs and faith-based communities who work on the ground with vulnerable children and young people and their families across the sectors. They also suggested a single point of contact for concerns to be raised which have a cross-departmental remit. Home for Good NI advocated the involvement of all stakeholders to develop best practice.

Useful Sources of Evidence
The consultation asked respondents about any sources of evidence that would be useful to the Executive in meeting needs of vulnerable children and young people during COVID-19. [Q18]

70.5% (24) of the 34 responses suggested sources of evidence that would be useful to the Executive.

Additional Comments on the Plan
The Consultation document invited consultees to provide further comments.

Summary of Additional Comments
Respondents welcomed the Plan and the multi-agency cross-departmental nature of it.

There were a number of comments in relation to equality impact screening. The Children’s Law Centre said that disadvantage for some protected categories is being exacerbated and asked for sight of the equality screening assessment for the Plan as well as for the temporary modification notices. The Equality Commission and Sinn Féin also pointed out that duties under s75 continue to apply. Barnardo’s referenced an equality impact assessment in the context of ensuring that the plan reaches those most marginalised.
Respondents sought further detail on how the implementation and effectiveness of the Plan will be monitored and evaluated. Some suggested that already agreed indicators, i.e. outcomes for children and young people should be used. There were specific comments in relation to the role of data in monitoring and implementing the plan.

NSPCC felt that there was a lack of, ‘facts, statistics and evidence’ in the Plan. The Children’s Law Centre felt that the actions within the plan are, ‘not reflective of the critical issues that vulnerable children are experiencing, that they have not been formulated on the basis of evidence of need and that the plan is not an evidence based policy.’

Respondents also sought clarity on where the Plan sits in a strategic context, including in relation to the Children and Young People’s Strategic Partnership and Areas Outcomes Groups with NICCY calling for a clear link to a, ‘broader point of reference’ such as UNCRC, Children’s Services and Cooperation Act and the Children and Young People’s Strategy. The Criminal Justice Inspectorate also said synergy and cross-referencing to the Children and Young People’s Strategy would be helpful.

There were a number of comments in relation to the effectiveness and status of the actions listed in the Plan. Respondents queried which actions are new or tailored to respond to the pandemic. Sinn Féin said it was, ‘not clear which services remained the same, changed or what actions are required to support, revise or rebuild services.’ One respondent agreed that the actions in this section were the right actions but that there was a lack of clarification on which are being delivered and which are planned. The Criminal Justice Inspectorate also said it would be helpful if the plan included information on, ‘current accessibility and availability of actions / services,’ while Barnardo’s commented that, ‘this plan appears to be a list of reactive actions already taken, rather than a strategic plan to improve and sustain support for vulnerable children, young people and families during the ongoing pandemic into its next stages.’ The Children’s Law Centre called the Plan ‘retrospective’, pointing out that the actions seem to be ones taken during the initial lockdown and that it is not clear what actions are being taken forward in any future lockdown / circuit breaker. This was echoed by comments from NICCY who also said that the plan lacks detail on how actions will be taken forward and by when. The Equality Commission also said it could not differentiate between actions and possible actions. NSPCC described the plan as ‘a list of activities’ but that it should be ‘a living document,’ along the same lines, the RCPCH said that the plan must be ‘flexible.’

A number of respondents emphasised the importance of engaging with children and young people and practitioners in the development of the Plan.

There were a number of comments about incorporating learning from what worked or did not work earlier in the pandemic, including by using feedback from services and helplines. The Children’s Law Centre felt that there is no evidence in the Plan that lessons from the previous lockdown has been learned and that this was illustrated by the fact that the multi-disciplinary vulnerable children process was not re-started during the half-term circuit breaker. Barnardo’s called for a review of effective
practice during the first surge, including a review of all available evidence on the impact of COVID-19 on vulnerable groups to identify best practice, effective interventions and what could be improved.
Appendix

Overview
The Department of Health has led on the development of a Covid-19 Vulnerable Children and Young People's Plan, which has been produced on a cross-departmental basis with DfC, DE, DOJ and DfE. Please click the link below to access the plan:


The plan has been developed in response to the challenges and risks facing children, young people and their families due to the Covid-19 pandemic. It is intended to reflect a series of activities that will be, or have been, undertaken across the Executive to meet the needs of vulnerable children, young people and their families during this time and in the recovery period after.

Freedom of Information and Data Protection
The information you provide in your response to this consultation, excluding personal information, may be published or disclosed under the Freedom of Information Act 2000 (FOIA). If you want the information that you provide to be treated as confidential, please tell us why, but be aware that, under the FOIA, we cannot guarantee confidentiality.

Anonymised comments may be published on the Department of Health website and in a resulting report on the consultation. If you are replying on behalf of an organisation, only the name of the organisation will feature in the report. If you do not want the name of your organisation to be published, please let us know.

Any personal information submitted will be handled in accordance with GDPR and the Data Protection Act 2018

For more information on how the Department handles personal information please see the Departmental Privacy Notice https://www.health-ni.gov.uk/sites/default/files/publications/health/DoH-Privacy-Notice.pdf

Why We Are Consulting
The Executive agreed to the publication of the Covid-19 Vulnerable Children and Young People's plan on 6 August 2020, subject to a targeted consultation to ensure the Plan:

- reflects the activities that are being undertaken to support children and vulnerable families during Covid-19;
- reflects how services have adapted and enhanced provision to continue to support children and families during Covid-19; and
- includes new actions, which have been undertaken specifically to address some of lockdown's risks and challenges.

The Plan will help support the next steps in rebuilding services to meet the needs of vulnerable children and young people.
INTRODUCTION

1. What is your name?

2. What is your e-mail address:

3. What is your organisation?

4. Are you content for the name of your organisation to be published?

☐ Yes ☐ No

If no, please explain why

5. Do you agree with how the Plan has defined vulnerable children and young people?
(Required) ☐ Yes ☐ No

If no, please explain why

6. Do you agree with the objectives of the Plan?

(Required) ☐ Yes ☐ No

If no, please explain why
SECTION 1: PROMOTING SAFETY AND WELLBEING IN THE HOME ENVIRONMENT

7. Do you agree that the right actions have been included here?

(Required) ☐ Yes ☐ No

If no, please explain why

8. Are there any needs that are not being addressed through the actions in this section?

(Required) ☐ Yes ☐ No

If yes, please specify

9. Are you aware of any examples of best practice that are addressing need in this area?
(Required) ☐ Yes ☐ No

If yes, please specify
SECTION 2: PROMOTING SAFETY AND WELLBEING IN THE WIDER COMMUNITY

10. Do you agree that the right actions have been included here?

☐ Yes ☐ No

If no, please explain why

11. Are there any needs that are not being addressed through the actions in this section?

(Required) ☐ Yes ☐ No

If yes, please specify
12. Are you aware of any examples of best practice that are addressing need in this area?

(Required) ☐ Yes ☐ No

If yes, please specify
SECTION 3: STRENGTHEN SYSTEM CAPACITY TO RESPOND TO CURRENT RISKS

13. Do you agree that the right actions have been included here?

(Required) ☐ Yes ☐ No

If no, please explain why

14. Are there any needs that are not being addressed through the actions in this section?

(Required) ☐ Yes ☐ No

If yes, please specify

15. Are you aware of any examples of best practice that are addressing need in this area?
(Required) ☐ Yes ☐ No

If yes, please specify
SECTION 4: REBUILD SERVICES

16. Are there additional actions required in connection with rebuilding/resetting/restarting services for vulnerable children and families?

(Required) ☐ Yes ☐ No

If yes, please specify

17. In the event of a further surge, are there specific actions which you would recommend to safeguard vulnerable children and young people and promote their welfare?

☐ Yes ☐ No

If yes, please specify
SUMMING UP

18. Are you aware of any sources of evidence that would be useful to the Executive in meeting needs of vulnerable children and young people during Covid-19?

If yes, please detail below

19. Any other comments?

If yes, please detail below
Almost Done…

The completed questionnaire should be returned to FCPDadmin@health-ni.gov.uk. By submitting your response you give us permission to analyse and include your responses in our results.

Information provided by respondents will be held and used for the purposes of the administration of this current exercise and subsequently disposed of in accordance with the provisions of the Data Protection Act 2018 and General Data Protection Regulation.