

Making Arrangements for Contact for Children in Care

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At the outset of the Covid-19/coronavirus pandemic in March 2020, face-to-face contact between children in care and their parents largely stopped in order to comply with Government guidance around public health and safety. At that time, contact needed to be virtual, and local authorities adjusted their practices accordingly. Since then, restrictions relating to social contact during the pandemic have loosened, and what was previously not allowed is now permitted. On 6 May 2020, the Government in England updated their advice to children’s social care about this issue:¹

We expect that contact between children in care and their birth relatives will continue. It is essential for children and families to remain in touch at this difficult time, and for many children, the consequences of not seeing relatives would be traumatising.

Contact arrangements should therefore be assessed on a case-by-case basis, taking into account a range of factors, including the Government’s social distancing guidance and the needs of the child. Where it may not be possible, or appropriate, for the usual face-to-face contact to happen at this time, keeping in touch will, for the most part, need to take place virtually. Where face-to-face contact is not possible, we would encourage social workers and other professionals to reassure children that this position is temporary and will be reviewed as soon as it is possible to do so.

We expect the spirit of any court-ordered contact in relation to children in care to be maintained and will look to social workers to determine how best to support those valuable family interactions based on the circumstances of each case.

The [latest Government guidance for England](#) (as of 31 July 2020)² specifies that individuals should not:

- socialise indoors in groups of more than two households;
- stay overnight away from your home with members of more than one other household.

These guidelines mean that face-to-face contact (including overnight stays) with one other household is permissible and contact of this nature can take place, subject to the necessary risk assessments. This will still need to be considered on an individual basis.

In making contact plans, the safety, health and welfare of children, their carers and birth parents must always be the overriding priority, and the local authority must agree a plan in each case that is based on the outcome of a full risk assessment. Limitations on face-to-face contact arrangements are likely to be distressing for both birth parents and the child, but everyone has a primary responsibility to ensure that their child is kept safe.

¹ www.gov.uk/government/publications/coronavirus-covid-19-guidance-for-childrens-social-care-services/coronavirus-covid-19-guidance-for-local-authorities-on-childrens-social-care

² Guidance in other UK countries differs, as do requirements when areas in the UK have specific local “lockdown” requirements. In these cases, the principles set out in this document will still apply but may need to be interpreted in a way that complies with the legal requirements in that jurisdiction.

In considering the most appropriate contact plan in individual cases, the local authority will need to make a carefully balanced judgement, taking into account a range of factors:

- The legal status of the child is crucial and decisions will need to take into account whether face-to-face contact is required in order to comply with a court order. Where that is the case, it will be necessary to be clear about what is specified in the order regarding frequency and length of contact, and any other matters. If it is not possible to comply with a legal order, then it will be necessary to consult with a local authority lawyer to look at how best to take matters forward. If the child is looked after under section 20, the parent has the right to remove the child without notice. However, the risks associated with Covid-19 infection are such that the parent/s should not be permitted to act in a way that creates further risks to the health of their child, or the health of other individuals.
- The care plan for the child is also important in that, in some situations, it will be more crucial to have face-to-face contact than in others. Failure to set up face-to-face contact between parents and their babies working towards reunification will almost certainly impact adversely on attachment and bonding, and will make permanent separation more likely. This should be avoided. In other cases, such as contact between a parent and their child in long-term fostering, the immediacy of face-to-face contact may be less significant.
- Consideration will need to be given as to whether any face-to-face contact might be possible while also complying with social distancing guidelines. In practice, that will mean children and family members remaining two metres apart from each other if possible, maybe in a garden or outside space. Even where contact needs to be supervised, it is possible to do this creatively and in a way that minimises risk. This is likely to be more achievable with older children than with younger ones, but will need individual consideration rather than a blanket policy. Social distancing might also need to be considered in relation to the relevant adults when babies are having face-to-face contact with their parents. Where face-to-face contact is being considered, it will be important to involve contact centre staff to help inform decisions, including possible use of the contact centre, and what support can be offered to the child, carer and birth parent.
- In some cases, virtual methods such as “live” video may have been used during the Covid-19 pandemic or previously, and the extent to which this met the needs of all parties – especially the children – will need to be taken into account. Where virtual contact is established and working well, this might suggest that a return to face-to-face contact is less important than in cases where the quality of contact is poor or not serving its purpose. In considering virtual contact, there should always be an assessment of any risk factors, including the potential for accessing information that identifies online details of the child’s location.
- Linked to this, the views of the child, parent and carers about contact will be crucial. It may be that there is a level of agreement about what is best, but even where that is the case, the local authority must be reassured that what is proposed is safe and lawful. Every child must have an opportunity to express their thoughts and feelings about these issues in a supportive and open way. For some children, only face-to-face

contact will meet their needs; for others, such an arrangement will feel risky and destabilising.

- It is important to recognise that in some cases, the child, carer or parent, or members of their households will be particularly vulnerable in relation to Covid-19 as the result of age or existing health conditions. There is also evidence that black and minority ethnic individuals are statistically more vulnerable to the virus, although the reasons for this are not entirely clear.³
- Individual risk assessments should be conducted prior to any face-to-face contact, and if any of the parties has Covid-19 symptoms or is self-isolating, then face-to-face contact will almost certainly not be deemed safe.
- It will also be relevant to take account of whether the parties have been observing social distancing advice in their day-to-day life. This could potentially be a crucial aspect in making a judgement about the likely safety or otherwise of a face-to-face contact meeting.

In some cases, local authorities have considered whether protective clothing might be useful in the context of arranging contact. Government advice is that employers ‘should not encourage the precautionary use of extra PPE to protect against Covid-19 outside clinical settings or when responding to a suspected or confirmed case of Covid-19’.⁴

Studies undertaken by the Nuffield Family Justice Observatory about contact over the period of the pandemic⁵ and virtual contact more generally⁶ have reached a number of conclusions that are relevant to those planning virtual contact:

- Virtual contact cannot usefully be seen as either entirely positive or negative. It will depend on individual circumstances, including the quality of the relationship with the birth family member.
- For some children and young people, especially older children, it can be more immediate, less formal, safer, and leave them feeling more in control.
- Virtual contact might be less successful for some disabled children, younger children and babies, especially where physical touch is an important factor in the communication.
- Virtual contact needs to be supported and, where necessary, supervised, including support with using the technology. This is not always straightforward.

³ www.gov.uk/government/publications/covid-19-review-of-disparities-in-risks-and-outcomes

⁴ www.gov.uk/guidance/working-safely-during-coronavirus-covid-19/homes

⁵ Neil E, Copson R and Sorensen P (2020) *Contact during Lockdown: How are children and their birth families keeping in touch?*, Briefing paper, London: Nuffield Family Justice Observatory/University of East Anglia

⁶ Iyer *et al* (2020) *The Effects of Digital Contact on Children’s Wellbeing: Evidence from public and private law contexts*, Rapid evidence review, briefing paper, London: Nuffield Family Justice Observatory

- It will likely be more successful when it is carefully planned and designed to be child-friendly, to include games, songs, stories and crafts.
- The involvement of foster carers in virtual contact can be experienced as a positive element, but in some circumstances can be seen as violating the safe space of the foster home.

Local authority practice should be informed by this evidence.