

**Manchester City Council  
Report for Information**

**Report to:** Children and Young People Scrutiny Committee – 26 May 2021

**Subject:** Impact of COVID-19 on children's services in Manchester, including schools, settings and the Child and Adolescent Mental Health Service

**Report of:** Deputy Director of Children's Services

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### **Summary**

This report, one of a series of scrutiny reports, reports on the impact and consequence management of COVID 19 across the Children's and Education Directorate. This report has a particular focus on the delivery arrangements and performance of children's services. Acknowledging the requirement to view the support to children as a partnership endeavour, the report also provides an update on schools and the Child and Adult Mental Health services ongoing response to the pandemic.

### **Recommendations**

Committee is asked to discuss the report, provide comment on the analysis provided within the report, which is summarised at section 10 and offer views on priorities for the Directorate in the ongoing management of resources.

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**Wards Affected:** All

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| <b>Environmental Impact Assessment</b> - the impact of the issues addressed in this report on achieving the zero-carbon target for the city |
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| <b>Our Manchester Strategy outcomes</b>  | <b>Summary of how this report aligns to the OMS</b>   |
|--|---|
| A thriving and sustainable city: supporting a diverse and distinctive economy that creates jobs and opportunities. | Effective Children and Education Services are critical to ensuring our children are afforded opportunities and supported to connect and contribute to the city's sustainability and growth. |

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|---|---|
| A highly skilled city: world class and home-grown talent sustaining the city's economic success.                | Ensuring children and young people are supported and afforded the opportunity to access and achieve in the City; empowered and supported by the delivery of a strong and cohesive system that works for all children. |
| A progressive and equitable city: making a positive contribution by unlocking the potential of our communities. | Improving education and social care services that are connected to the wider partnership build the resilience of children and families needed to achieve their potential and be integrated into their communities.    |
| A liveable and low carbon city: a destination of choice to live, visit, work.                                   | Improving outcomes for the children and families across the City, helps build and develop whole communities and increases the liability of the City   |
| A connected city: world class infrastructure and connectivity to drive growth.                                  | Successful services support successful families who are able to deliver continuing growth in the City   |

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#### **Background documents (available for public inspection):**

The following documents disclose important facts on which the report is based and have been relied upon in preparing the report. Copies of the background documents are available up to 4 years after the date of the meeting. If you would like a copy please contact one of the contact officers above.

Since March 2020 each Children and Families Scrutiny Committee has received a report in respect of Covid19, its impact and the Directorate response.

## **1.0 Introduction**

- 1.1 Throughout the COVID 19 pandemic, Manchester's children services and their partners have sought to continue to ensure the delivery of the services that underpin our children's strategy; our strategic objectives are children live safe, happy, health and successful lives. Overall the partnership has demonstrated flexibility in responding to the challenges of lockdowns and associated restrictions utilised to contain the virus. Within the safeguarding partnership the system has drawn from the pre- COVID shared vision for Manchester's children, supported by a range of strategies and approaches to minimise the impact of the pandemic on all children.
- 1.2 The full extent and impact of Covid19 on the development, life chances and opportunities for the city's children and young people is not yet fully understood and may not be for some time. There are themes/issues emerging/ known:
- The education gap between those children considered to be disadvantaged and their counterparts will have widened.
  - There are indications of increased rates of anxiety and mental health issues,
  - The pandemic has increased inequality in the city; there has been 6% increase in the overall number children being eligible for Free School Meals; In addition, at times, we have seen on average an 150% increase in families accessing foodbanks over the past 12 months and financial hardship becoming a feature of everyday life for many children.
  - There is a potential for increased levels of school exclusions as some young people struggle to return to routine and boundaries.
  - Lack of opportunities for young people post school and college are likely to lead to increased levels of Not in Employment Education and Training (NEET) Several children have reported feeling anxious about transition between school/college phases, their future opportunities and feeling isolated/lonely. This appears to have the potential to compromise the aspirations/hopes of young people across the city

## **2.0 Schools Update**

- 2.1 Schools were open to all their pupils from 8th March 2021 when school attendance become mandatory again for children who receive their education at school. Primary schools welcomed back all their pupils from this date and secondary schools were allowed a staggered return to enable pupils to complete a lateral flow test on site. Secondary aged pupils were encouraged to complete 2 lateral flow tests on site before continuing to test themselves each week at home using testing kits provided by the school. Pupils need to consent to testing and before the Easter break, consent for testing across all secondary schools in the City averaged 56.08%.
- 2.2 Staff across all phases of education including early years are now able to access home testing lateral flow tests and families with school age children also able to access home testing kits from testing centres across the City.

- 2.3 The Government recently announced that positive results from asymptomatic testing via lateral flow tests, completed at home and on site require confirmation from a PCR test. Schools were provided with guidance and advice before the wider opening to ensure they understood the isolation requirements and actions to be taken whilst a person is awaiting a confirmatory PCR test result, this included at what stage to report the positive case to the Manchester Test and Trace team (MTAT). The online reporting form used by schools to report positive cases, was amended to include questions on confirmatory PCR testing once schools were open to all pupils.
- 2.4 We regularly encourage schools via communications to continue to report their cases via the online MTAT reporting form to help with data analysis. The MTAT team provide clinical advice where needed and check the information received on the forms daily highlighting any issues/concerns to health colleagues and SSQAs when required, to ensure schools are supported.
- 2.5 The data below on referrals to test and trace has been provided by schools and early years settings via the online form during the period 8 March-17 April. During this six-week period a total of 329 cases were reported to the test and trace. This is a significant reduction in positive cases since the reopening of schools – the total number of positive cases reported in the half term period prior to the closure of schools to all pupils was 904.
- 71% of all reported cases in school and early years settings were children, 17% were teaching staff and 12% non-teaching staff.
  - An average of 39 children were reported as COVID-19 positive by schools each week.
  - 55% of all reported cases were experiencing the common symptoms of COVID: a persistent cough, a high temperature and/or a loss of taste or smell.
  - Most reported cases have been in primary or secondary settings. The number of cases in Primary settings has fluctuated week-on week but remains at an average of 30 cases per week.
  - Reported cases in secondary settings slightly increased over this period, with a weekly average of 14 cases.
  - A total of 6,723 children and 521 adults have been told to self-isolate as a result of COVID-19 during this six- week period.
  - Positively, cases reported demonstrate the high proportion of schools who are making their own independent decisions on identifying contacts of reported cases and instructing to self-isolate.

### **3.0 School Attendance**

- 3.1 Overall attendance in mainstream schools started well and schools have been very positive about the return of their pupils. We are aware however, that there are a significant number of pupils abroad who have not returned to school since attendance became mandatory. Many of these pupils are in countries now classified as red and will be required to pay to quarantine on their return. Where possible schools have been trying to make and maintain contact with these families and encourage them to return to school. Schools are following DFE

guidance regarding dealing with this situation and it is being monitored by the Local Authority.

| Phase                       | WC 15 <sup>th</sup> March | WC 19 <sup>th</sup> April | WC 26 <sup>th</sup> April |
|-----------------------------|---------------------------|---------------------------|---------------------------|
| <b>SECONDARY MAINSTREAM</b> | 92.48%                    | 92.17%                    | 92.80%                    |
| <b>Special School</b>       | 81.71%                    | 82.08%                    | 83.74%                    |
| <b>PRIMARY MAINSTREAM</b>   | 95.08%                    | 94.55%                    | 95.49%                    |
| <b>Overall</b>              | 93.09%                    | 93.22%                    | 94.08%                    |

- 3.2 The above table shows attendance rates at schools following the opening of schools to all pupils in March and then in the weeks after Easter break. The table shows that attendance is continuing to improve in all phases of education. The normalisation of children's experiences including that of school attendance will, for many, develop their resilience and assist their transition back to some degree of normality as restrictions ease whilst also enabling children to reach their own academic and social aspirations.
- 3.3 The Attendance & Exclusion Team continue to operate a telephone helpline and email for schools/families/agencies to use as needed. This has been promoted throughout the year in a variety of formats. Weekly data analysis indicates schools where attendance is lower than expected and support and advice is offered to these schools. The Attendance & Exclusion Team are to hold summer term Attendance Clinics in each district.
- 3.4 Special school attendance remains below the level it was during the Autumn term (84.76%) although it is improving each week. Schools are working with families to encourage them to return children to school, but some families remain concerned about potential risks to their children. A Special School-specific attendance clinic was held in the Spring Term, and following positive feedback, this will be added to our clinic timetable moving forward, with one planned for the summer term.
- 3.5 This academic year there have been 42 permanent exclusions in total with 9 since 8 March 2021 when school were open to all pupils. This is lower than at this time in previous years, however, it is difficult to draw any conclusions from that comparison due to the period of restricted opening during this academic year. Of these permanent exclusions, 12 were from schools outside of Manchester. Only 1 is from a primary school and there have been no exclusions from special schools. The most common reason for exclusion is persistent disruptive behaviour/physical assault on a pupil.

#### **4.0 OFSTED Monitoring Visits**

- 4.1 Throughout the autumn term, Ofsted carried out 'visits' to 10 Manchester schools. These visits looked at how schools were getting pupils back up to speed after so long at home. They consisted of collaborative conversations, without any judgements being made. Headteachers reported that inspectors listened to their experiences and provided constructive challenge around their

plans going forward. The visits were not graded, and no concerns were raised in any school. For each school, a short letter has been uploaded to the Ofsted website helping parents to understand what steps were being taken to help children back into full-time education.

- 4.2 During the spring term, Ofsted conducted additional section 8 monitoring inspections in 9 Manchester schools that had previously been judged 'inadequate' or 'requires improvement'. Most of these inspections were conducted remotely. Inspectors explored how leaders were ensuring all pupils had access to a full education offer during the national lockdown, both those at home as well as those at school. They also looked at how the school's curriculum was being developed. The outcome of all the inspections was overwhelmingly positive and most reports have been published on the Ofsted website. In all schools, leaders and governors were judged to be taking effective action to provide education in the current circumstance.
- 4.3 From the 4th of May, some inspections under the Education Inspection Framework (EIF) will restart and will take place on site. These include section 8 monitoring inspections of schools graded 'inadequate', and those graded 'requires improvement' at their last 2 consecutive full inspections. Ofsted will also inspect 'good' schools that, due to the pandemic, have not had an inspection within the statutory 5-year window. These will be section 8 inspections and follow their usual approach to inspecting good schools.
- 4.4 In line with their usual policy, where inspectors find evidence that an inadequate school has improved and is no longer inadequate, they will be able to convert this to a section 5 ('full') inspection, which will be graded. Where inspectors find evidence that a 'requires improvement' school has improved, they will recommend that a full inspection is carried out before the end of the summer term. Unless significant concerns are raised, Ofsted will not inspect secondary schools in the first half of the summer term. They will be included in inspection schedules from 21 June. This will allow leaders and staff to focus on assigning and submitting teacher-assessed grades.

## **5.0 Early Years Update**

- 5.1 Currently there are 127 out of 133 Early years settings open with an average of 5120 children attending each day. Of these settings 41 are in the north, 47 central and 39 in the south of the city. Out of 397 childminders we currently have 315 childminders open. These closures are not due to Covid-19.
- 5.2 The number of children attending settings is increasing but north and central have fewer children than last year overall. In south we are seeing similar numbers and some settings are busier. Settings are providing home learning activities and weekly welfare calls for children not attending due to Covid-19 concerns or isolating due to Covid-19 restrictions but are on roll.
- 5.3 Lateral flow tests have now been sent to settings for use by staff twice a week at home. Settings have been reporting increased in costs for PPE, to implement

control measures but this has been mitigated against with the recent covid-19 restrictions grant linked to business rates, that settings have received.

- 5.4 Difficulties with staff accessing mandatory training during lockdown such as paediatric first aid and safeguarding have now been removed. The Council's Designated Safeguarding lead training is being offered online for childminders and settings this term and delivery of two train the trainer sessions for Designated safeguarding leads is planned for settings in May 2021.
- 5.5 Termly virtual support visits have continued to take place. The Early Years Development forums and six Quality forums for childminders also were delivered in the first two weeks in February 2021 with input from Early Help, safeguarding and support for providers on operating during this lockdown.
- 5.6 All providers are having virtual meetings with the Quality Assurance team to provide support and challenge on practice. Most support currently is being given on managing positive Covid-19 cases and ensuring effective control measures are in place. Providers are starting to prepare for the implementation of the revised Early Years Foundation Stage (EYFS) framework. Dates are in place for three Early Years Development Forums for settings and three childminding quality forums to cover the revised EYFS in May 2021 and six mixed follow up face to face sessions in June 2021 if Covid-19 restrictions allow.
- 5.7 The Quality Assurance team are planning to attend children centre advisory boards and support the organisation and delivery of school/Early years settings transition events for the summer term, if this is possible and safe to do so.
- 5.8 Currently 95% of Early Years settings are good or outstanding as are 88% of child minders. No graded inspections took place during the spring term. However, Ofsted carried out interim visits to settings and childminders who were due inspection if they were inadequate or requires improvement. They specifically looked at the actions taken to meet 'welfare requirements notices' linked to the safeguarding and welfare section of the EYFS. Ofsted carried out face to face interim monitoring visits to our four early years settings graded as requiring improvement. It was judged in each case that all actions were met, letters published to the Ofsted website and the inspectors reported that they were pleased with the implementation Covid-19 control measures. Settings also reported that they felt more confident about their practice and confident about their readiness for full inspections when they take place.
- 5.9 On-site full inspections of registered early years providers will begin from 4 May. Ofsted will prioritise providers, judged less than good at their last inspection (including those who received an interim visit in the autumn term), that registered recently but have not been inspected, whose first inspection is overdue, that were not inspected in the last inspection cycle due to the pause in routine inspection. They will continue to carry out urgent inspections if we have significant concerns about a provider.

## **6.0 Children's Services**

- 6.1 Children's services in Manchester have continued to provide services to vulnerable children and their families throughout the current COVID pandemic. Since March 2020, the service has operated under the working premise of "business as usual but doing things differently". This mission statement reflected the services commitment to ensure children were safeguarded and their needs were effectively met. As such the service has, throughout the pandemic, mindful of relevant health and safety advice, continued to work directly with children and their families. The service has shown significant creativity and flexibility in our approach to service provision, whilst at the same time supporting the partnerships capacity to continue to develop collaboration in the knowledge that some families require a co-ordinated multi agency level of support to safeguard children.
- 6.2 Since the start of the pandemic staff were rota'd on a two-weekly cycle to either be working from the office, working from home and visiting children in their communities and working from home carrying out back-office tasks and responding to issues when required. This approach has resulted in ensuring the ongoing safety of Manchester's children and service delivery as assessed through both our quantitative and qualitative analysis.
- 6.3 Throughout the pandemic the Directorate has worked effectively to ensure the identification of vulnerable children and have since the early phases of the pandemic jointly risk assessed children with schools to target support for children. The service supported the expert advice on COVID that children, on balance, were better off at school than not and as such supported many children and families to return vulnerable children to attend school during periods of lockdown ; for some children schools have indicated when there were fewer children on site this enabled and supported children to develop stronger relationships with teaching staff, with examples of children reluctant to talk previously who are now more confident 'talkers and learners'.

## **7.0 Early Help**

- 7.1 Throughout the pandemic there have been increased requests for support with parenting, emotional and mental health support and well – being alongside continued demand in relation to domestic violence and abuse incidents.
- 7.2 Adaptation of delivery meant revised guidance for all staff in the service in relation to face to face contact with families and included, doorstep visits, outside contact – walking in parks and meeting at other venues i.e., Sure Start Centres and undertaking home visits where required. Staff liaised with partners to ensure families were supported and seen and early help practitioners found creative and innovative ways of engaging, communicating and supporting their families.
- 7.3 For many families, poverty and hardship has been exacerbated. As part of the Councils' response to COVID food and fuel poverty this was alleviated for some through the Covid Winter Relief Scheme which was administered through the

Early Help Service. 2,872 children have benefited from payments to relieve hardship identified by schools; this equates to £186,640 being distributed to alleviate hardship. Schools have reported satisfaction with the scheme and there is ongoing work to look at support over the summer period. In addition, supermarket vouchers have been provided for children entitled to benefit related free schools' meals and other vulnerable children during every school holiday since September 2020.

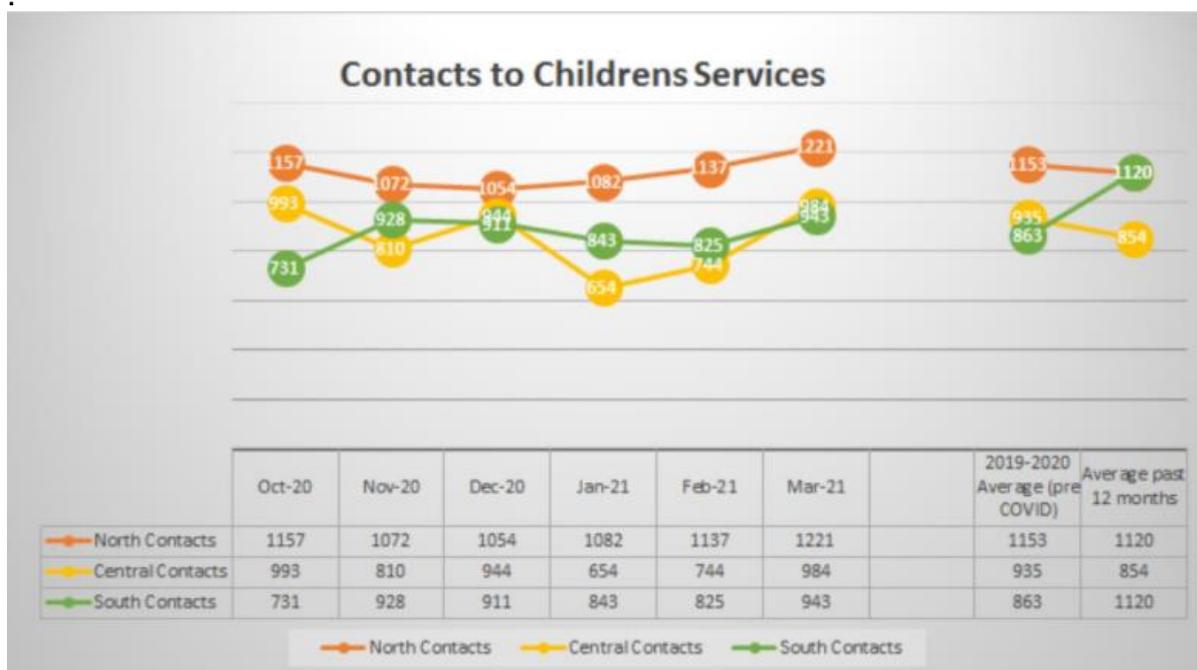
- 7.4 In relation to partnership working, multi- agency allocations meetings and Team Around the Family meetings have continued with good virtual support from partners. However, the number of Early Help Assessments fell dramatically at the start of the pandemic but are now beginning to increase again (49 families/89 children in April 2020 rising to 187 families/378 children in February 2021).
- 7.5 As indicated support to ensure children attended school has been a high priority for the hubs and early help practitioners have monitored school attendance and worked with families to understand barriers and liaised with pastoral lead to resolve issues. Early Help are key partners supporting the school clusters arrangements and this is ensuring the wider needs of families in the localities are focused on. Following the resumption of a return of all children to school in March requests for early help support have been consistently high averaging 800+per month, with a significant increase in March 21 to 1,079 new requests for Early Help.
- 7.6 Domestic abuse notifications remain high and Early Help contribute to the daily multi agency Domestic Abuse and Child Concern (DACC) meetings with police and social workers. In March 21 there were 1,785 children discussed at the daily DACCS and 291 went onto to receive an offer of Early Help with most of the new notifications referred into the social work service due to risk and complexity.
- 7.7 Whilst there have been some variations in the volume of requests for support notably central and north localities experiencing higher requests for support, the presenting needs across all three localities are broadly similar. We are seeing pressures related to families experience of lockdown, being isolated, increased money worries, substance misuse and a corresponding impact on mental health and family relationships. Analysis of the requests for support highlighted that mental health/emotional support, domestic violence and abuse and drug and alcohol abuse are the key presenting needs. In South locality requests for support have identified an increase in the number of children and young people self-harming, having suicidal thoughts, and making attempts to take their lives. Early Help Practitioners have completed online ZSA Suicide Awareness Training, and some have benefitted from the suicide training. All 3 hubs have an early prevention integrated community responder (part of the thrive offer) who is available for consultation with staff, undertakes direct work with young people who present with mental health risk and or psychosocial distress.
- 7.8 Demand for parenting support has been high, lockdowns have disrupted the delivery of face to face and group work evidence-based programmes. In

response the Early Help Parenting Team developed a telephone appointment service during the summer to signpost and help parents. The helpline offered advice, guidance and strategies to parents and was popular and successful but not be resourced once the term-time delivery of parenting programmes resumed. There remains a huge demand for parenting programmes across all 3 hubs and similar high demand is reflected in the early years. There is ongoing work with a range of partners including Manchester Adult Education service, Early Years, Health providers and voluntary and community groups to develop the range of parenting provision; current provision has adapted well to virtual, face to face and one to one support.

- 7.9 There is a strong focus on ensuring effective identification and support for babies particularly babies born during Covid, who may have missed out on developmental opportunities around social and early years contact. This includes where developmental issues are not identified early enough and families where safeguarding and significant harm issues are being identified. During the pandemic we undertook a consultation and engagement as part of our Start Well Strategy and 201 conversations were held with residents and 97 conversations with staff and volunteers. From these conversations 91% of families reported that the pandemic had affected their experience of raising a baby. Families highlighted the lack of socialisation for babies and parents/carers, isolation from friends, and wider family members and fewer activities and groups available.
- 7.10 We are addressing this through the Start Well partnerships and via targeted projects such as our Thriving Babies and Confident Parents Project. This project will provide enhanced early pre- and post- natal support for families with complex vulnerabilities to prevent escalation into pre proceedings and achieve early permanency for families. A thriving baby's team has been established and will work with voluntary, community and adult services to improve the coordination and offer.
- 7.11 Pressures related to housing issues are also high and we are anticipating an increase in the number of referrals to Early Help where families are being evicted or are in situations where they have debts that bailiffs will be responding to. Prevention of homelessness is a key priority in the Supporting Families Programme, (replaced term for Troubled Families) and the Strategic Lead for Early Help is involved in work in Greater Manchester to look at prevention and the role of early help.

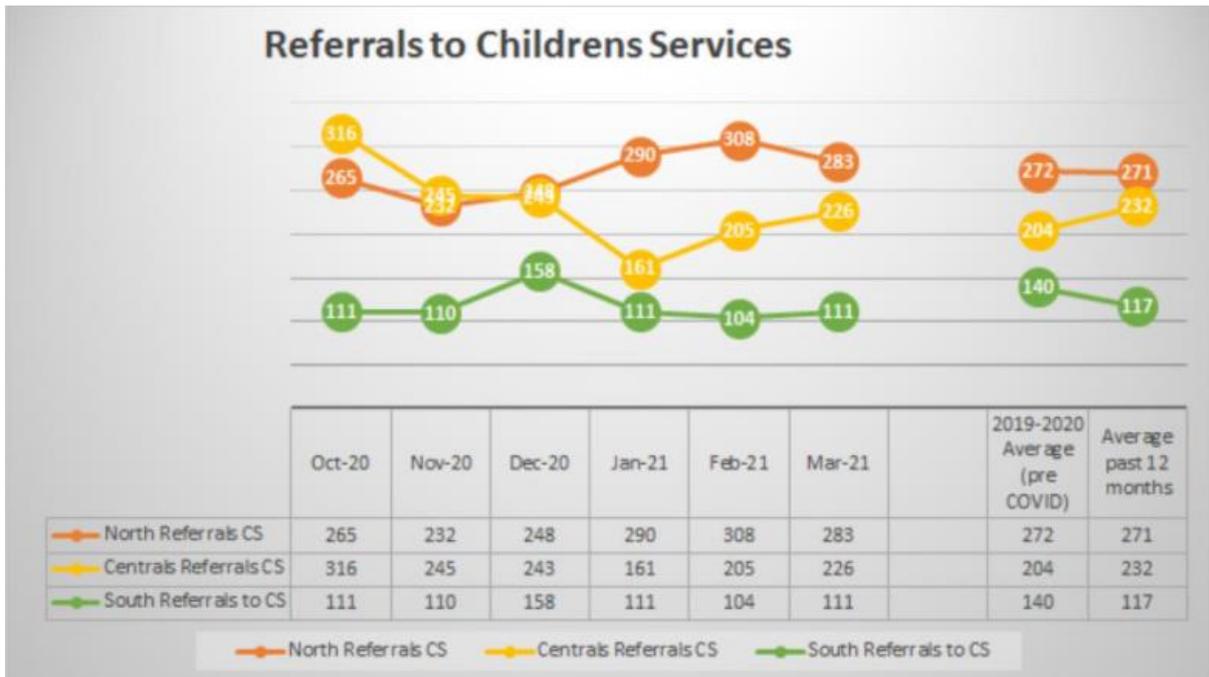
## **8.0 Children's Services**

- 8.1 The graph below demonstrates the number of contacts with children's advice guidance and support hubs (AGS), the service welcomes a high number of discussions between professionals regarding concerns they may have for the safety and wellbeing of children. This data is a good proxy indicator for a high level of awareness, within the professional community, of the need to ensure children are protected from harm. All three areas have experienced an increase in contacts since the turn of the year which mirrors the trend for support via our early help service.

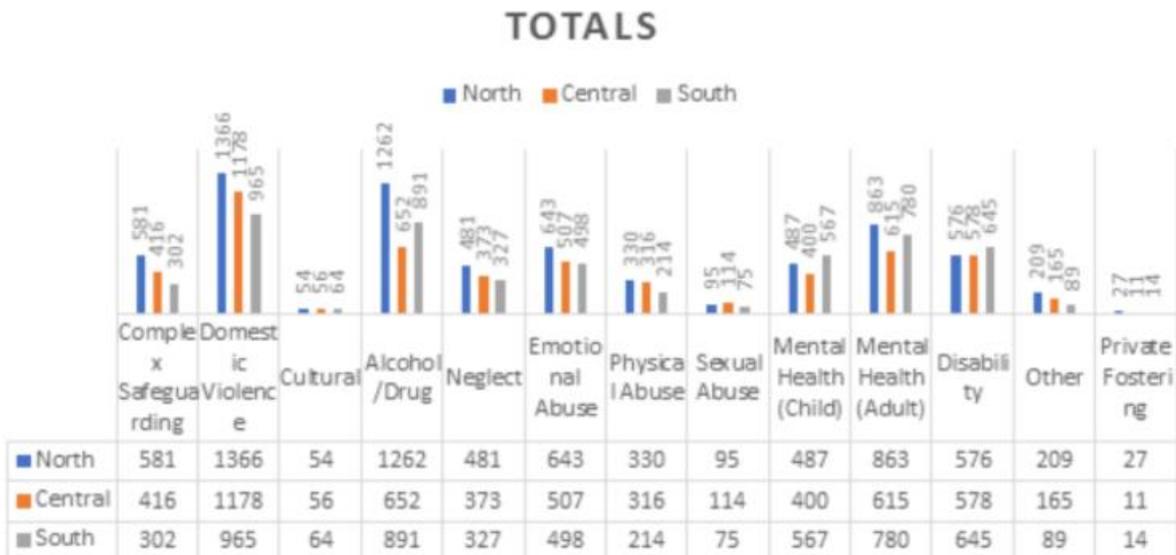


8.2 North has maintained contacts in line with data pre-COVID (2019-20- 1153; 2020-21- 1120). There has been a noted increase in contacts from January 2021 and in March 2021. Central has seen a decrease in contacts (but as highlighted below an increase in referrals). The average contacts pre COVID 2019-20 were 953 compared to a 2020-21 average of 854. South has seen a significant increase in contacts with 12-month average increased from 863 in March 2019/2020 to 1120 March 2020/2021. All three areas have seen a rise in contacts since January of this year.

8.3 1 in 5 contacts to children's services relate to domestic violence and abuse. The AGS has a well-established triage system to identify families where further assessment and support from children's services is required. This is informed through a shared risk assessment informed by information from Police, Health, Early Help and Social care records. Our approach to protecting children experiencing domestic abuse is informed by Safe and Together; an internationally recognised suite of tools and interventions designed to help professionals become domestic violence informed. The service is engaged in an academic review of the implementation of the model with the findings of this review will be available later this year. Throughout the pandemic we have continued to work effectively with partners to support the non-abusing parent and assess the impact domestic abuse has upon children's health welfare and development.



8.4 Although contacts to the service increased in first quarter of the calendar year this did not correspond with a marked increase in referrals to the service. We believe (through our quality assurance processes) that our threshold for assessment from children's services is proportionate and as such the data presented demonstrates that children are not drawn into the statutory service inappropriately. Reasons for referral and subsequent assessments are variable and are reflected in the graph below, the data presented below informs the services planning, resourcing commissioning and improvement activity to support children in Manchester.



8.5 The service continues to analyse its effectiveness through a mixed approach of quantitative and qualitative measures. Compliance with a variety of indicators, as demonstrated from a selection of our compliance data below indicates that the system is responsive to the timeliness of meetings to plan for children.

|  | Jan. 21 | Feb. 21 | March 21 |
|--|---------|---------|----------|
| %LAC reviews in timescale  | 96.9%   | 98.4%   | 98.7%    |
| %LAC reviews where SW attended                                   | 99.0%   | 97.9%   | 98.9%    |
| %LAC reviews up to date careplan monthly                         | 85.6%   | 81.7%   | 87.6%    |
| % CPC where the allocated social worker or team manager attended | 87.9%   | 87.6%   | 87.7%    |
| % CP reviews in timescale  | 93.9%   | 94.3%   | 94.5%    |

- 8.6 The culture of performance management within the service is well established and is supported by a robust suite of performance reports. Our proxy indicator scorecard below has been the subject of discussions at previous scrutiny meetings shows mixed performance against demanding targets. The increase in referral rates have impacted on the average caseloads of social workers, which is slightly above target. We have reinvigorated our recruitment campaign in response to this and aim to recruit significant numbers of staff over the coming months. Visits to children subject to child protection planning in timescale is strong; we have a robust process to analyse the reason for lateness which ensures oversight of every child subject to this form of planning. We have made progress on children who have a permanence plan at the second review and have plans to further improve our performance. Our edge of care offer has ensured the number of children looked after by the local authority is lower than our target. SEE APPENDIX 1
- 8.7 The principal means by which we managed the qualitative aspects of the service is through our Quality Assurance Framework (QAF) and in our auditing of the quality of social work case management activity. Scrutiny committee will be aware we have refocussed the QAF to focus less on compliance against tasks and more on the quality of work we do with children and families. We have utilised the skills of an independent consultant to assist Service Managers focus on the outcomes for children in the children's circumstances that are audited; this has supported a more systemic look at the support children and families receive and the outcomes generated by intervention. Auditing, moderation and the learning generated by this is part of a range of activities that contribute to a monthly report by the Head of Service which has an overarching examination of the quality of practice in given areas of our operations. This activity has continued throughout the Pandemic with monthly audits set against a framework which is informed by our six golden threads of practice which are; Listening to the voice of the child, management oversight, quality of assessments and plans, genograms and chronologies, working with and not doing to and engaging children, parents and carers. In the last quarter we have audited over 250 children's files; this confirms a gradual increase in the numbers of audits judged as outstanding and an overall decrease in audits judged as inadequate. In the first quarter of the year 90% of children whose circumstances were audited were judged to be good or requires some degree of

improvement to be good. 7% were judged to be outstanding and 3% inadequate. Of those judged to be inadequate a learning circle occurs where professionals involved in the child's life engage in a facilitated discussion that identifies learning. As such whilst there is some organisational learning through the experience of COVID we believe that we have been successful in delivering our mission statement throughout the pandemic.

- 8.8 As a service we intend to preserve many of the features of technology that have enabled meaningful engagement between children services and those children and families we serve. We have learned that as service our staff can work more agile and efficiently; influenced by engagement with our staff, we are developing plans to increase agile working post COVID 19.

## **9.0 Managing the impact of Covid 19 on Well- Being and Mental Health**

- 9.1 There has been significant support delivered across the city to promote children's mental health and well-being. This multi-agency local offer has now been in place since September 2020. This provides a universal, targeted and bespoke offer for our schools and colleges. All schools have had access to a detailed directory of resources and contact services, including education psychology and voluntary, charity sector support.
- 9.2 All schools have had access to mental health training and awareness sessions for pupils, parents and staff delivered by healthy schools as part of the Department of education wellbeing for education return. Most schools have participated in this offer. We are now rolling out mental health first aid training from Manchester Mind which will continue as an offer for schools in 2021/22.
- 9.3 A third of our schools now have a mental health practitioner in school as part of the mental health in schools' green paper, this will continue to grow year on year. High Schools have been prioritised for this support. The criteria for this is that schools have developed a whole school offer for mental health, including having a mental health lead, which supports this role. Thrive hubs which provide support for children and young people and families in the community are progressing and north hub is now live. Central and south will go live later this year.
- 9.4 As part of Mental Health Awareness week (w/b 10th May) a recorded webinar overview of M Thrive in Education is available for schools, colleges and other agencies to understand the current offer for children and young people.
- 9.5 The impact on the mental health and wellbeing of young people isolated from their friends, disconnected with other social outlets, including schools and colleges has for some children been a significant issue in managing the impact of COVID. The Child and adolescent mental health service (CAMHS) redesigned their service during the lockdown moving quickly to a choice of offer of Phone and Video, alongside continuing of face-to-face activity for those families and children and young people at risk of harm to self or others. The service also focused on raising awareness of the specialist CAMHS services,

this approach complemented the pre-existing range of online self-help provision eg Kooth and MIND also aimed at promoting emotional health and well-being.

- 9.6 Following the lifting of restrictions from the 1st wave, CAMHS then targeted vulnerable populations through triage due to an increase in A&E presentations particularly for Autistic Spectrum Disorder presentations and Learning-Disabled young people in crisis. There was also an Increase in Eating Disorder (CED) referrals and in their acuity requiring high admission rates to paediatric wards for refeeding at a level of physically compromised that the team could not manage within a community refeeding offer. CED funding to meet this demand has increased in Q4 of 20/21.
- 9.7 To support the increased presentation within the acute hospital settings of young people with a behavioural and mental health aspect of their admission, CAMHS increased the offer to 7 days and provided an in-reach service to all the hospitals within Manchester.
- 9.8 A 24-hour help line was also established for all ages CAMHS colleagues report a 98% performance rate of planned activity pre covid was maintained throughout the pandemic. From the data it is evident that those with pre-existing vulnerabilities; Learning Disabled and Eating Disorders have been significantly impacted by COVID 19. The data also reports significant increased levels of distress within children and families who were already in services and known families to CAMHS who struggled and in turn used the emergency aspect of CAMHS more intensely.
- 9.9 March 2021 in particular all services experienced an increase above business as expected/planned/capacity as schools fully returned and restrictions started to be lifted and the trend is upwards. Potentially indicated that the surge in presentations and distress for Manchester is starting to emerge as schools return.

## **10.0 Summary**

- 10.1 COVID 19 has clearly had a significant impact on the lives and experiences of young people in the City. Services have had to flex to meet acute demands and develop either new services or ways of working; this is most evident in our increasing use of technology, our parenting offer and human resource deployment; the latter is an area where we are further developing arrangements for staff to work flexibly.
- 10.2 Performance against a range of indicators has generally been strong and although identified need has increased since March there is sufficient resilience in the service and partnership to continue to effectively meet this level of need. Planning with partners has continued and developments such as think family, smoke free homes and vulnerable babies are all excellent examples of our capacity to strategically plan throughout the pandemic.
- 10.3 Whilst there has been some good practice and adaptability to the restrictions, communication within the service has been different and more challenging, we

recognise that some key messages relating to longer term planning for children may have been diluted - in part this may explain the lower rates of children with a permanence plan at second review - we aim to deliver a reset of our communication and priority setting to further crystallise our expectations of the quality of practice and strategy.

10.4 To date an analysis of the data points to:

- increasing demand for services since schools have returned, increased inequality and poverty, increased numbers of parents requesting support for parenting, the vulnerability of babies born during lockdown, the intensity of the impact of COVID being worse for families with pre-existing health vulnerabilities.
- Differential need across the three social work teams and resilience to need.
- Children's attendance has increased.
- Rates of exclusion have been relatively low.
- Service performance has been strong.
- The numbers of children looked after by the authority has been generally stable during the pandemic.
- The vast majority of staff where consulted wish to continue working in an agile way.

10.5 The service will continue to monitor and respond to the issues above and any other issues identified by data and professional insight as we continue to manage the impact of COVID 19.