

The PCFSW & Social Work England COVID-19 Ethical Response and Best Practice Guide for Children and Families Services

27 March 2020

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Context and Introduction

This guidance has been developed by the Principal Children and Families Social Worker (PCFSW) Network and Social Work England. It has been developed as part of the PSW's practice leadership role and draws on the work of the PCFSW research and practice development project. It aims to stimulate thinking and reflection about the ethical response to the Covid-19 pandemic and to support practitioners in applying social work values and principles and Social Work England's professional standards in their everyday practice, decisions, and actions.

We anticipate further guidance from the Department for Education (DfE) and therefore this guidance is neither prescriptive nor meant to present a single way of working. Instead, it is meant to complement and inform practice and to support ethical thinking and the implementation and application of relevant legislation, national guidance provided by the DfE and Social Work England's professional standards.

This guidance has been developed in response to the current crisis and will be updated as necessary and in response to the changing circumstances. Please use the online document to ensure you have the most recent and up-to-date version.

For ease of use, below is a list of content with links to the different questions in this guide. Press CTRL and click to follow each link.

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Understanding my regulator: Social Work England

Social Work England is the specialist regulator for social workers in England. Our role is to set professional standards and assure the public's confidence in social work. We are collaborating on this guide to support social workers in understanding the link between our professional standards and practice.

In response to Covid-19, you may need to adapt your practice and ways of working. In doing so, think carefully about the professional standards and how to maintain them against a rapidly changing context. This guide offers up practical advice from sector leaders to support you as you adapt.

It is important to reflect on changes to practice and to explore professional and ethical dilemmas with peers or managers. Social workers are doing this as they explore new and different ways of working and this can be an important source of learning to record as part of your continuing professional development, which is central to your registration as a social worker.

Some social workers have returned to the profession during the pandemic through temporary registration. There can be a lot to consider when returning to practice. We hope this guide will support you as you support local teams and services at a time of considerable pressure.

We thank the Principal Social Workers networks for their commitment to embedding our professional standards and we continue to work collaboratively to make the link between standards and practice.

If you'd like to know more about Social Work England, you can find more on our website, or get in touch with us, at www.socialworkengland.org.uk.

What to do if you have symptoms of Covid-19

If you think you have Covid-19, you should follow the appropriate Public Health England (PHE) advice. If you are self-isolating, you should inform your employer and follow government advice as well as any specific advice and procedures from your employer. As a rule, in such cases you should not go into your office or workplace or make any in-person visits or contacts with service users, your colleagues or other people or professionals.

Prioritising needs, risks, interventions and support: some points to consider

Social work and social care practitioners are skilled in assessing risk and prioritising children and families interventions based on need and safeguarding risk. Until there is further national guidance and where the existing workforce and/or resources do not allow full scale service delivery, organisations and practitioners can draw on their risk assessment and crisis intervention skills to prioritise the needs of, and safeguard those, who are at greatest risk and are most vulnerable. However, it is important that such actions and decisions have a clear and explicit rationale and are:

- Ethical: in-line with professional values and the professional standards;
- Reasonable: based on sound judgement, principles and considerations;

- Evidence-based: based on the best available evidence and professional experience;
- Proportionate: based on a balance of risks, resilience and alternative courses of action and outcomes;
- Coproduced: as far as possible, agreed and consistent between different professionals and reflects the voices of those who are affected by such actions or action, while recognising that they may need to change rapidly;
- Transparent: communicated with clarity and transparency and open to scrutiny and, as far as possible, reflects the voices and concerns of those who are most affected by them;
- Contextual: focused on the best interests of the person(s) within the current context, keeping the individual and wider context in mind and balancing risks and safeguarding duties in order to prioritise the needs, safety and well-being of those who are most vulnerable while maximising impact and effectiveness;
- Documented and flexible: document activity and decisions but subject them to modification and review as the situation develops.

Ethical considerations in making a child-centred or person-centred decision in current context

The professional standards, as well as national guidance and legislation provide a flexible ethical framework for practitioners' actions and decisions. However, when in doubt, seek guidance from your manager and employer.

Supporting children and families and accessing resources

Where limitations on workforce and resources arise and it is not possible to ensure service delivery for all children and families, it is important to prioritise decisions, actions and interventions based on risk and needs to ensure protection for those who are most vulnerable or at risk of harm.

Until further national guidance is published or specifies otherwise, practitioners should consult their managers and follow their organisation's guidance and protocols, including procedures for making complex ethical decisions. This will require careful consideration and prioritisation of decisions, actions and interventions by finding an appropriate balance between risk and benefit as well as the impact of non-intervention and lack of service and its possible outcomes. This could include the risk or benefit of carrying out, cancelling, or postponing a home visit, or holding this virtually if possible?

Ethical dilemmas in prioritising interventions, care and support based on risk and need

Social workers may be concerned about prioritising interventions and support based on the balance of risks and how this interacts with non-discriminatory practice. Under Chapter 2 of the Equality Act (2010), such actions and decisions can be described as 'a proportionate means of achieving a legitimate aim' under equality law. However categorical policies, such as not supporting young people over a given age or not supporting older adults below a given age, may not be lawful. In particular, and as suggested by the Equality Commission, the following are additional points to consider in relation to the justification for 'proportionate means of achieving a legitimate aim'. The aim should:

- be an objective consideration and not discriminatory in itself (for example, ensuring the safety and wellbeing of others would be a legitimate aim);
- not simply be a cost or budget reduction;
- proportional, balancing the aim and its benefits against any discriminatory effects;
- only be pursued if proportionate and appropriate alternatives are unavailable.

Personal protective equipment (PPE)

The use of PPE such as masks, gloves, gowns, disinfectant gels and sanitisers is for the protection of practitioners and the people they support. Social workers should make use of appropriate PPE where it is available and use it safely and in accordance with relevant guidance. In the absence of such equipment, practitioners and their managers should discuss and evaluate alternative ways of working, prioritising the safety of the social worker and the person or people they are supporting.

Working outside of normal work areas

During the Covid-19 response, practitioners may be asked to carry out tasks outside their area of specialism or usual remit. Regardless of the area of practice, social workers should exercise respect and transparency with people they work with. This means being clear about their remit and what they are trying to achieve.

Flexibility is a welcome and necessary part of service delivery, particularly under present circumstances, but practitioners should always operate within their competence and should raise any concerns about their ability to practice safely and competently with their manager. Where there are concerns, alternative arrangements should be put in place either for someone else to carry out the given duty/task or to ensure there are appropriate safeguards to support the practitioner to meet their organisational and professional standards.

Where no alternatives are available, practitioners should exercise their best effort to provide the safest care and support that they can provide under the circumstances with the goal of achieving the best interest of service users.

Undertaking home visits in person

Different organisations have adopted different approaches to home visits and contact based on local context and available workforce and resources. In light of the Government's guidance in relation to [staying at home and away from others \(social distancing\)](#), before a home visit, practitioners should call or otherwise contact the parents, foster carers or service users to verify if there are any persons within the household who are showing symptoms of Covid-19 or are self-isolating. It is advisable to record this information with date and time or other communication. In such situations, wherever possible, in-person visits should be postponed.

If one or more members of the household are experiencing symptoms of Covid-19, then all of the members of the household should self-isolate for 14 days. In such circumstances, as much as possible practitioners should avoid in-person visits. Home visits may be carried out virtually and using digital

technology. However, when safeguarding risks are such that in-person intervention or visit is necessary and cannot be deferred, practitioners should discuss the situation with their managers who should put appropriate safeguards in place to ensure practitioners' and others' safety and well-being. Such discussion should include consideration of the risk to the practitioner, the child and their family or carer and any decisions should be in line with existing government guidance.

It should be noted that people can be asymptomatic and carry the virus without knowing or showing any symptoms. Therefore, appropriate precautions and safeguards are necessary in all in-person visits or interventions.

For specific guidance about carrying out home visits see the "Best Practice Guide for Home Visits" and the attached "Brief Guide for Home Visits".

Time pressures and case recording

The Covid-19 response can be a very difficult and stressful time and many practitioners are facing increased workload. Many may be considering how to balance support and interventions with case recording. Case recording provides an accountable record for children of what was happening for them at this time and what others did to support them and safeguard their positive development and well-being. Over and above this, case recording can support social workers to:

- Document the current context;
- Evidence the reasoning and motivation for decisions and plans;
- Inform future decisions and actions;
- Articulate concerns and evidence progress, or lack of progress;
- Support information sharing;
- Develop practitioners' thinking, hypothesising and analysis;
- Provide an accountable record of the child's journey across services;
- Provide an audit trail and oversight;
- Support reflection, learning and accountability.

In these stressful times, it can be difficult to take time to reflect. Practitioners can use case recording as an opportunity to slow their thoughts and reflect on their practice. Furthermore, it is important to remember that case recording does not need to be extensive, instead what is important is that records capture the salient points about the case and offer reflection, analysis and foresight.

Practically, recording can be undertaken in bullet point form. What is important is that the bullet points are meaningful, meet the above criteria and answer the what, why, who, how and when.

Different local authorities have adopted different approaches to case recordings and therefore, it is important to discuss and agree with your manager.

Parental contact during the pandemic

Parental contacts are important for children and their parents and lack of contact can affect

children's emotions, mental health and well-being as well as their behaviour. However, practitioners may work with parents to think creatively about contact while minimising the risk of infection; for example, by facilitating virtual contact using social media and digital technologies.

Lord Justice Andrew McFarlane has indicated that contacts should continue however, different local authorities have adopted different approaches to contact and the anticipated DfE guidance will clarify this issue. In all circumstances, it is important to manage the situation with sensitivity and shared understanding and ensure that children and young people are supported so they understand the reason why there are changes, if any.

Suspension of respite care

In view of government guidance about social distancing, respite care has been halted. Exceptions exist for situations where the lack of respite care poses serious risk to the stability and continuity of the placement. It is important to ensure that parents, foster carers and the young person understand and appreciate the reason for the lack of respite care. In the meantime, foster carers offering respite care may be able to provide emergency care when need be.

Given the possibility of an increase in demand and pressures on capacity, fostering practitioners and teams may consider contacting foster carers who had previously stopped fostering, as they may be willing to provide support during this time. In such instances, they can be redeployed under the DfE guidance for temporary approval for such carers.

Peer support and keeping informed and abreast of latest regulation and guidance.

The current situation is fast evolving. As we anticipate further DfE guidance, social workers should maintain their professional standards and continue to apply professional and organisational values and ethics and adhere to principles of empowerment and anti-oppressive and anti-discriminatory practice.

Tension and anxiety can run high under current circumstances. It is important for practitioners to be mindful of their own emotional well-being, to avoid sources of misinformation and disinformation and to work constructively and collaboratively in partnership with other professionals and people who access services. It is also important to keep in touch with peers and professional networks to remain well-informed and supported to provide support to people who access services and those who are at greatest risk.

From the Principal Children and Families Social Worker (PCFSW) Network and Social Work England, thank you for all that you do.

Your comments and feedback are valued and welcomed. Please send all feedback, comments or suggestions to Dr. Peter Buzzi at: PSWresearch@esafeguarding.org

For: The PCFSW Research and Practice Development Project; and
The PCFSW Network; and
Social Work England

Author: Dr. Peter Buzzi (National Research Lead, PCFSW Project); and
Claudia Megele (National Chair PCFSW Network)
Sarah Blackmore (Executive Director Social Work England)

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