

COVID 19: Guidance for providers of Adoption Services

Version Control

Version	Date	Summary of changes
3.01	May 2021	<p>Para 3 – Deleted – As far as possible</p> <p>Paras 7 to 9 - Deleted Changes to Legislation – impacting on Adoption.</p> <p>Previous Para 12 – revised wording on face to face introductory meetings</p>

COVID-19: Key messages for providers of adoption services in Northern

Ireland:

- **Protecting and maintaining current placements and adoptive families** must be a priority for Health and Social Care [HSC] Trusts.
- **Regular communication** with dually approved and concurrent carers¹ and prospective adoptive parents is critical to ensuring that these families and their children feel supported throughout the period of the COVID-19 pandemic and, if support and advice is required, it should be provided.
- **The PHA has provided** a dedicated point of contact for children's services to provide detailed advice on health issues and infection prevention and control; this may be accessed through the relevant Trust Assistant Director.
- Check the PHA and DOH websites regularly for new and/or updated guidance on COVID-19. These websites are the main source of public health advice.

¹ Concurrent carers are those who have been approved as adopters and foster carers and who are prepared to provide a placement for a child while their future is being decided. The child will initially be placed on a fostering basis. Concurrent arrangements means two possible outcomes for the child running alongside each other, that is (i) a return to the birth family; and (ii) adoption by the concurrent carers. Dual approved carers are also approved as adopters and to foster but the child will generally only be placed with them after the best interests for adoption decision has been made.

INTRODUCTION

1. This guidance relates to adoption and is aimed at HSC Trusts and Voluntary Adoption Agencies who provide services to adoptive parents, dually approved and concurrent carers and prospective adoptive parents. The [Covid-19 Guidance for Foster Care and Supported Lodgings settings](#) may also be of interest to Dually approved and concurrent carers
2. The guidance aims to support adoption services during the ongoing COVID-19 pandemic and it will be regularly reviewed and updated as necessary.
3. Every effort should be made to ensure that services continue to be provided during the COVID-19 pandemic. It is essential that a collective leadership approach is adopted with effective multi-agency collaborative working, where necessary.
4. This guidance should be read in conjunction with, **advice from the Public Health Agency** <https://www.publichealth.hscni.net/news/covid-19-coronavirus> and [Covid-19](#). For general advice on COVID-19 call 111. It is important to check the PHA and DoH websites regularly to ensure the correct advice is being adhered to. When normal services resume in full, this guidance will fall away.
5. For detailed advice on health issues and infection control, the PHA's dedicated point of contact for children and young people's services is Deirdre Webb, Assistant Director of Public Health Nursing (deirdre.webb@hscni.net, tel: 07920 186497) and she may be contacted by the relevant Trust Assistant Director or nominated lead within the voluntary adoption agency. Each HSC Trust Family Placement Services will establish a link with their health/nursing colleagues to enable prompt access to advice and guidance where concerns/queries arise regarding COVID-19. In addition, the PHA duty [room contact number is 0300 555 0119](#).

6. The Northern Ireland Social Care Council (NISCC) has published a [free online resource on infection control](#). Although developed to support social care workers, families and young people may also find it helpful.

ADVICE SPECIFIC TO ADOPTION

7. Every child should continue to be offered the best opportunity to flourish in a safe family environment where their fundamental needs are met and where they can enjoy the same opportunities as any other child. For some vulnerable children adoption is a positive and effective intervention for meeting their care needs and improving their overall outcomes.
8. In these adverse times, it is important that we do not lose sight of the importance of progressing adoption placements. It is important that HSC Trusts and the Voluntary Adoption Agencies continue to progress as much of the process as they possibly can for these children, working innovatively and flexibly where possible and providing some level of flexibility during the pandemic will allow this to happen. The more that can be progressed now, will enable HSC Trusts and the Voluntary Adoption Agencies to advance cases more quickly once the Covid-19 crisis has reduced, thus providing permanency for these children and freeing up foster placements that will be required to meet the needs of other vulnerable children.
9. Introductory face-to-face meetings may be challenging in current circumstances, however there needs to be a case by case, risk-based decision about what is right in the circumstances.
10. If deemed appropriate HSC Trusts and the Voluntary Adoption Agencies should consider utilising audio/visual communication technology to continue with the adoption process and other ways may need to be found to prioritise permanent placements for children in line with their best interests.
11. We expect HSC Trusts and Voluntary Adoption Agencies to take a common sense, risk-based approach during this time . If prospective adopters would like

to progress their adoption applications and HSC Trusts and Voluntary Adoption Agencies are content to proceed without the health assessment and/or Access NI Check, they should do so as long as these checks are completed before the joint visit with senior social worker/manager, towards the end of the assessment process.

12. HSCTs and the Voluntary Adoption Agencies should consider how panels can continue to ensure the adoption system continues to place children, but we accept that some delays may occur especially for the less straightforward cases.
13. Panels should continue and if required remotely through audio/visual communication technology or conferencing calls and this should be determined on a case by case basis. Adoptive parents and prospective adopters should also be asked to join via video/telephone calls.
14. Families who require visits, particularly for adoption support, should be prioritised according to need. Where it is necessary to visit, risk assessments will need to be undertaken. Advice and support can be offered remotely if it is appropriate.
15. Although it may be necessary to defer some training sessions, the HSCTs and Voluntary Adoption Agencies should look to put plans in place to continue to facilitate as many as possible via other means such as video conferencing or other facilities.
16. Playboard NI, in cooperation with the Department of Education's Play Matters, have produced guidance ['Coronavirus – Play Matters more than it did'](#) to assist /teachers, playworkers, parents and those offering care to children in these challenging times to consider how they may provide quality play opportunities and experiences.

PHYSICAL ACTIVITY

17. Children and young people should be encouraged to maintain as much physical activity as possible, within PHA guidelines about social distancing.

COMMUNICATION

18. Good communication is very important during this crisis ensuring that those who depend on or need their support or information and advice can have it during the COVID-19 pandemic. HSC Trusts and Voluntary Adoption Agencies should continue to provide services to adoptive parents, concurrent carers, dually approved and prospective adoptive parents and ensure that they know where to get up-to-date information about issues that may affect them. The PHA website is a good source of information about the COVID-19 pandemic and steps that should be taken to prevent the spread of infection. Providers should also ensure that their own websites and social media pages are updated regularly.

CONTACT ARRANGEMENTS

19. All regular face-to-face contact between family members living in different households should be in accordance with the latest public health advice in order to prevent the spread of infection. During the period of ongoing restrictions it is important to find ways of ensuring that where contact orders are in place that contact between children/ young people and their birth families can continue, for example outdoors or by using audio/visual communication technology with the regularity agreed by way of the contact order. Visits to and by family members and others should be managed in a way that is safe, taking account of advice on social distancing and hygiene measures and children should be supported to manage this in line with their specific needs. If further advice is required around the safe facilitation of visits to and by family members and others, the Trust Designated Nurse (see Annex A), and/or other appointed individual, should be contacted in the first instance and they may in turn seek advice from the PHA's dedicated point of contact for children and young people's services. Good communication between social workers, the child or young person's family will be essential to ensure that contact is maintained as much as possible, that

alternative arrangements are agreed by all parties and that the child or young person can speak freely with their social worker, staff and family.

20. Contact arrangements should be reviewed by the responsible social worker on a weekly basis. Where there are issues with contact which cannot be mutually agreed, HSC Trusts should seek clinical and/or legal advice.

CAPACITY

21. HSC Trusts and Voluntary Adoption Agencies should ensure that details of approved adopters, dually approved and concurrent carers are up to date.
22. Where necessary, the use of assessed prospective adoptive carers, including dually approved and concurrent carers and experienced childminders will be considered to provide support in the event of a shortage of foster placements.

Annex A

Nurse contacts for COVID-19

Specialist Nurses for Children and Young People in care			
Name	Trust	Contact Details	Office Address
Catherine Gorman	BHSCT	Tel: 028 95 045042 Mob: catherine.gorman@belfasttrust.hscni.net	Whiterock Health Centre 1 st Floor 6 Whiterock Grove Belfast BT12 6RQ
Barbara Barklie	NHSCT	Tel: 028 9083 1432 Mob: 07771336448	Glengormley Community Ser Newtownabbey

Specialist Nurses for Children and Young People in care			
Name	Trust	Contact Details	Office Address
		barbara.barklie@northerntrust.hscni.net	
Sonya McDowell	SEHSCT	Mobile : 07912046338 Sonya.McDowell2@setrust.hscni.net	<u>Trust Wide</u> Ards Hospital Newry 4AS
Jacqueline Toner	SHSCT	Tel no: 028 30 832252 Mobile no: 07823 443085 Jacqueline.Toner2@southerntrust.hscni.net	Canal House St Mary Street, Newry BT34 2AA
Susan Rogers	WHSCT	Tel: 028 6632 7730 Ext: 255179 Mob: 07867 155040 Susan.Rogers@westerntrust.hscni.net	South West Acute Hospital 124 Irvinestown Road Enniskillen Co Fermanagh
Emily Roberts	PHA	Emily.roberts@hscni.net Mob: 07810527191	Towerhill Armagh

Record of Previous Versions and Amendments to Guidance

Version	Date	Summary of changes
1.0	July 2020	Final version issued
2.0	March 2021	<p>Para 4 inserted - Advice regarding checking the PHA, DoH and NI Direct websites regularly to ensure the correct advice is being adhered to.</p> <p>Para 24 Reference to Annex A-Trusts Designated Nurse</p> <p>Annex A Trusts Designated Nurses</p> <p>Appendix 1 Record of Previous Versions and Amendments to Guidance</p>