

Guidance on Social Workers attending Child Protection Medicals during the period of COVID-19

1. Purpose of the Guidance

COVID-19 has resulted in changes to the way professionals engage with and visit children and families. Therefore, in order to ensure that children and young people's needs continue to be met during this period a variation of the approach used to engage in terms of contact and visit is required.

Child Protection Medicals will continue to need to take place during this period with the medical being physically undertaken by the Consultant Paediatrician.

2. Guidance

It is important that we all follow social distancing measures and reduce the need to visit health settings where possible. However, the attendance of the social worker at a Child Protection medical can be crucial in managing complex situations, care planning and seeing children and families face to face.

It is therefore anticipated that social workers will continue to attend Child Protection medicals in most cases. There may be some exceptions, for example where the child/YP has already been seen by the social worker and the parents/carer are fully engaged in the medical process.

Any exceptions would need to be agreed and recorded at the Strategy discussion that agrees the medical and it is therefore important that the Consultant Paediatrician or member of the hospital safeguarding team attend the Strategy discussion. As in practice now, as much notice of the Strategy discussion will be needed as is possible.

If it is agreed (in exceptional circumstances) that the social worker will not attend the Child Protection medical, all relevant direct contact numbers must be shared between professionals and the social worker must remain available during the medical and immediately afterwards.

If during a medical where the social worker is absent, a situation arises where it is imperative the social worker speaks with the child and family face to face, the Consultant Paediatrician or supporting health colleague will contact the social worker immediately. If there is going to be any delay in the social worker attending the medical, i.e. an issue arises late in the medical process, the child will be sent home and the social worker will then follow up. The exception being that the child is at immediate risk of significant harm, in which case police would need to be contacted.

It is imperative that arrangements are made for any child in the family who does not require a medical (e.g. siblings) where at all possible and not brought to the clinical setting due to the associated increased risks. One parent only will be allowed to attend and children will need to bring their own toys/activities.

If it will not be possible for the required 2 meter social distancing to be implemented between the social worker, medical staff, child and family during the Child protection medical, or if there are any indications that the child or parent are symptomatic, PPE will be provided for the social worker by the Child protection medical unit

It is acknowledged that maintaining the required 2 meters social, distancing will be very challenging in child protection medical settings. PPE requirement should always be assessed and discussed at Strategy meetings. The medical and nursing staff in the CP Units are happy to answer any questions around risk and transmission of Covid-19.

The following PPE will be available in all sites;

- Masks will be provided for all attending Social Workers.
- The use of gloves and plastic aprons will be discussed and provided where necessary.
- Asymptomatic children and adults will be provided with a mask where this is requested.
- Symptomatic Children or attending adults will be managed in line with Public Health England Guidance and professionals given recommended PPE.

Please note: PPE guidance changes regularly and therefore there may be changes in line with Public Health recommendations'

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