

# Coronavirus – guidance to social care and schools on vulnerable children and young people

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Engagement with statutory services and schools is a key part of the support and safeguarding structure which protects vulnerable children and young people. With Covid-19 expected to place a substantial burden on statutory services and school closures being put into effect, the Government has now issued [guidance](#) on continued protection of this group.

The guidance comes as the Coronavirus Bill is working its way through Parliament. The Bill will amend the Care Act 2014 to allow local authorities' duties in relation to adults to be reduced for the duration of the emergency, permitting prioritisation of services. The guidance advises on care provision now, and will also be relevant to such prioritisation decisions.

More information on the Bill as it applies to social care is available [here](#).

## To whom does the guidance apply?

The guidance applies to local authorities, childcare and education providers.

## Which group does the guidance relate to?

The guidance relates to services for vulnerable children. This includes children with a social worker (including those in need or in care, for example) and those with education, health and care (EHC) plans.

The definition is not exhaustive. The guidance indicates that schools may support other children who are vulnerable and that Government will work with schools, colleges and local authorities to identify children most in need of support.

## Children supported by social care services

The guidance requires local authorities to prioritise support to the most vulnerable children. This includes children who have to self-isolate for 14 days, for whom necessary visits should continue with appropriate infection control measures. Parents and foster carers should be advised of support for which they are eligible.

This group are expected to continue to attend school, where it is safe to do so. Where parents or children are reluctant, social workers should engage with them to explore reasons, including using advice issued by Public Health England. School attendance of vulnerable children should be monitored, though this need not be via usual processes to follow up on non-attendance. It is open to schools to put in place alternative systems to check on the welfare of a child in need who does not attend.

Children's homes are to remain open. Fostering placements should continue, and foster carers over 70 or with underlying health conditions are encouraged to discuss this with social workers to consider what is in the best interests of the child.

The guidance recognises that children's homes and broader services could be impacted by staff shortages, and refers to powers in the Coronavirus Bill to allow emergency registration of social workers who have recently left the profession.

# Children with education, health and care plans

Education providers are required to risk assess children with EHC plans, with local authorities, parents, and health professionals where relevant. The assessment is to consider whether the child should continue to attend school or college, in order to meet their needs, or whether needs can be met at home.

The emphasis on social isolation remains, and the purpose of the risk assessment to consider whether these children can remain at home despite being in the vulnerable category. The category is wide, so whilst there will be children who are best placed to be at school because they will be at significant risk if the school provision does not continue, there will be children who either should not be at school due to increased risk due to underlying health conditions or because they do not receive personal care and can be looked after at home. The decisions will be made on a case-by-case basis on the criteria of the child's best interest.

The guidance envisages the possibility of carers, therapists and clinicians providing essential services at home, as an alternative to attendance.

Local authorities are expected to use reasonable endeavours to put provision for stated needs in place. This may include working with education providers to manage the supply of provision in their area, and redeployment of staff between establishments. For children with EHC plans who attend mainstream schools or colleges, whose needs cannot be met at home, it may be necessary to arrange a placement at a different institution for a time.

Where parents' consent to changes or reductions in provision during the outbreak, this will not be treated as agreement to a permanent change.

The Coronavirus Bill does have provisions within it to enable the Government to amend the legal requirements on local authorities around EHC plans in the Children and Families Act 2014. We do expect the timescales for EHC plan processes to be amended. The government has stated that these new powers will only be used for the shortest possible period.

## Children in alternative provision

The definition of vulnerable children does not extend to those in alternative provision (AP), though many in alternative provision may also meet the definition. Therefore, Government intends to keep AP settings open where feasible, though local authorities are to take the lead on determining the most appropriate local arrangements.

## Guidance for special schools and colleges

The guidance recommends that all residential special schools and colleges risk assess their establishment and their individual pupils in order to assess what, if any, self-isolation measures should be put in place.

Funding for all schools will be maintained, including grant funding for further education establishments. The Government intends to put in place a process to reimburse schools in relation to exceptional costs due to the outbreak.

## Mental health and well-being

No amendments have been made to Mental Capacity legislation in England and Wales at the current time.

Health and social care workers and those working closely with vulnerable children and young people should however, be aware that as part of the new Coronavirus Bill existing mental health legislation will be amended to enable the detention and treatment of patients who need urgent treatment for a mental health disorder. Under the new legislation detention and treatment can be implemented using just one doctor's opinion (rather than two as previously required). However, there is a requirement that "the professional considers that compliance with the requirement under that section for the recommendations of two practitioners is impractical or would involve undesirable delay" and must be supported by a statement to that effect (s3(3)).

The Bill also seeks to allow temporarily extension or removal of time limits in mental health legislation to allow for greater flexibility. Further details of the full changes can be viewed [here](#).

There of course remains the challenge of making arrangements for the care and support of people who lack capacity who display symptoms and so should self-isolate or in dealing with a shortage of carers who have fallen ill and themselves are having to self-isolate.

For further information and guidance on supporting young and vulnerable people in these uncertain times please refer to:

- [FAQ's for schools and academies](#)
- [Safeguarding in uncertain times](#)
- [Health legislation overview](#)

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