

By email: contact@covid19.public-inquiry.uk

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ADCS response to the UK Covid-19 Inquiry's draft terms of reference (ToR)

The Association of Directors of Children's Services Ltd. (ADCS) is the national leadership organisation in England for directors of children's services (DCSs) under the provisions of the *Children Act (2004)*. The DCS acts as a single point of leadership and accountability for services for children and young people in a local area, including children's social care and education. ADCS welcomes the opportunity to make a submission to this important consultation and contribute to national learning about the pandemic experience to date.

ADCS additions to existing ToR (*italics*):

Inquiry aim (1): In relation to central, devolved and local public health decision making and its consequences:

- Preparedness and resilience of: *government departments and agencies, local government and other public services, including health, the police etc.*
- How decisions were made, communicated and implemented, *including guidance*
- *The establishment and use of learning and feedback loops to inform ongoing response to the pandemic and/or planning for future waves of infection or pandemic events*
- *Prioritisation of specific groups with vulnerabilities beyond clinical or age-related considerations, such as ethnic minority communities, children in need of help and protection, children with learning difficulties and/or disabilities and children eligible for free school meals*
- *Initial and ongoing restrictions on attendance at, and the operation of, places of education, from the early years through school phases to further and higher education and the effectiveness of alternative arrangements (online education)*
- *The decision to reform the national public health agency in the midst of a global public health crisis (the dissolution of Public Health England (PHE) and the formation of the UK Health Security Agency and the Office of Health Improvement and Disparities in 2021).*

Throughout the pandemic decision making has been highly centralised. More recently, some discretion has been devolved to local public health professionals to respond to spikes in infection in education settings with use of local mask mandates, however, approval for this course of action is still required from the Department for Education. In the early stages of the pandemic, this was an understandable response, when so little was known about the virus, but a more nuanced, localised response feels more proportionate, and effective, given the highly differential experiences and impact of the pandemic on different geographical areas and different communities.

ADCS believes there is insufficient attention in the ToR to the equity and proportionality of decision making and how differential rights and vulnerabilities, whether racial, generational

or geographical, were factored into decision making. Real world outcomes of decision making should also be considered here.

Other key public services listed at (1) may implicitly include children and young people and services for children, but it is not explicitly stated this is the case e.g. consideration of the experience of children in custodial settings, particularly during the first lockdown. Similarly, children's rights and experiences must not be forgotten despite the scale of challenges experienced by the wider population. Too often over the last two years children have been either overlooked in national responses or subsumed in wider responses without consideration being given to their specific needs or inherent vulnerabilities.

To illustrate this, it is the case that the Ministry of Justice did not differentiate between children and adults in its initial response to the pandemic in prisons, meaning children in custody were locked up in their rooms for up to 23.5 hours per day. Access to education in some custodial settings was not protected in the same way that it was for peer groups in the community; children with social workers were given priority access to education and schools during lockdown(s).

Similarly, under blanket Department Health and Social Care guidance, solo under 18s returning from abroad in spring and summer 2021 were required to quarantine alone in hotels rather than at home with their family despite the risk this may present to children's health, safety and welfare. This resulted in these hotels becoming de facto unregistered children's homes. It is worth noting lone children arriving in the country to attend boarding school were permitted to undertake a period of quarantine at school, rather than in a hotel, under guidance issued by the Department for Education.

The response of the health and care sector across the UK, including:

- *Understanding the immediate, and longer term, impact of decisions to redeploy NHS staff, for example, on the health, safety and welfare on specific, and vulnerable, groups e.g. health visitors, school nurses, children's mental health workers etc.*
- *Procurement and distribution of key equipment and supplies, including PPE, to all frontline and key workers supporting communities through the pandemic*

The wording in this section is largely tailored towards health services and adult social care, specifically older care home residents, rather than children's social care e.g. social work, children in care, children's homes, residential special schools and foster carers.

The economic response to the pandemic, and its impact. Including government interventions by way of:

- *Additional funding for relevant public services in support of immediate responses to the pandemic plus ongoing recovery and restoration efforts*
- *Effectiveness and scale of investment in education recovery efforts, previously, currently and in the future, for all phases and stages of education, from the early years through school and into further and higher education*
- *Support for children, young people and families living in deprived communities and experiencing poverty during lockdown(s) and over the longer term.*

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Inquiry aim (2): identify lessons to be learned from the above, thereby to inform the UK's preparedness for future pandemics. In meeting these aims, the Inquiry will:

- Listen to the experiences of bereaved families, and others, who have suffered hardship and loss as a result of the pandemic, *with a specific focus or line of inquiry on children and young people*
- Consider the experiences of, and impact on, health and care sector workers and education staff, plus other key workers such as children and family social workers, during the pandemic
- Consider the effectiveness of support for the mental health and emotional wellbeing of: frontline and key workers; specific vulnerable groups; and, the general population
- Consider the impact of the pandemic and the response put in place on children and young people and how their needs, interests and outcomes were factored into decision making across multiple domains.

What's missing or remains unaddressed in the current ToR?

ADCS members believe children and young people should have a much greater profile in the review. It is somewhat ironic that the ToR for the review continues to reflect a major flaw in the decision making during the period that it is reviewing; specifically that the needs of and risks to children were not, in our view, sufficiently prioritised. Whilst in the midst of responding to a global health crisis, protecting the health service and preventing death were overriding concerns, children are likely to experience the longest running impacts of this collective experience.

In the early stages of the pandemic, schools and other places of education closed to the majority of learners, meaning children lost out on learning but these losses were far wider. For some school is a protective factor, offering respite from a difficult home life, for others it gives them access to resources and experiences they would not otherwise have. As well as exams being missed so too were milestone experiences - plays, trips and visits, graduations, proms, sporting tournaments plus transition visits to new schools or colleges. Disruption to more practical teaching subjects, including the arts and physical activity, continues to this day. Latest data show substantial increases in childhood obesity over the last two years.

It was surprising not to see a specific focus in the draft ToR about mental health, specifically the disastrous impact upon children's mental health, or about the racial inequalities the pandemic shone a light on. There have been numerous studies and reports underlining the need to address health inequalities, from the 2020 PHE report *The disparities in the risk and outcome of Covid-19* to Sir Michael Marmot's publications in 2020 and 2021.

It is important the Inquiry seeks to capture positive learning and gains as well as issues and challenges. Necessity sped up innovation in practices and responses, the wholesale introduction and use of flexible working and technology in many sectors and professions. ADCS understands, for example, that the family courts in England and Wales was the only jurisdiction in the country, and indeed the world, that sat throughout the entire pandemic.

There is a growing body of evidence for the Inquiry team to draw on, from academic evaluations and studies to inspection reports and select committee inquiries. Utilising existing materials will help speed up and strengthen the fact-finding phase of this exercise and may allow learning to be shared on a shorter timeframe; the pandemic is far from over.

ADCS members are clear the Inquiry should make every effort to reach out and engage with children and young people, to hear their voices and experiences. There are numerous existing channels and organisations that can be drawn in here who work with and/or for specific groups or cohorts of children, from children in care and care leavers, to young carers and children with special education needs or disabilities. We have an active and impressive youth parliament in this country and local authorities host a variety of fora, such as youth councils and children in care councils, and can relatively easily cascade information to their local family of schools to assist with this aim.

Additionally, in 2021, the Children's Commissioner for England carried out the largest ever survey of children in the world, 'The Big Ask,' which will likely offer helpful insights into children and young people's experiences and their hopes for the post-pandemic future. Engagement with parents of children with disabilities and the very youngest children will be crucial to ensure all voices are heard. Easy-read information about the Inquiry and the ability to make submissions via different mediums or routes would help with this aim e.g. video or audio files or drawings.

The ToR do not yet cover the approach the Inquiry will take to its work, whether events will be considered thematically, chronologically or another way. ADCS believes we should prioritise the review of policy and practice responses in services, and for cohorts, that continue to be significantly, and detrimentally, impacted by the pandemic. The operation of schools and other places of education continue to be extensively disrupted by Covid-19 and should be urgently prioritised, ADCS believes the Inquiry's early phases should give precedence to safeguarding matters and children's mental health too.

ADCS would welcome the opportunity to discuss these comments further with the Inquiry team and expand on any points, as required. Please contact the relevant policy officer via katy.block@adcs.org.uk in the first instance.