Oranga Tamariki Proactively supporting children and families through the evolving pandemic

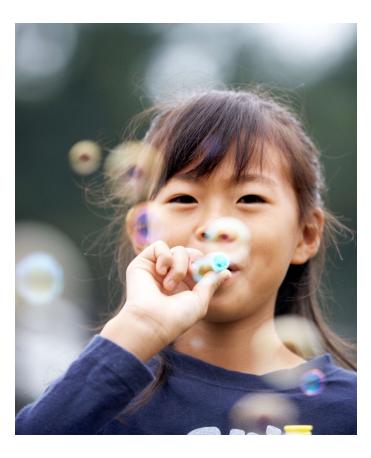
Jurisdictional Insights Report



New Zealand Government

Contents

Item	Page
Introduction	3
Summary of insights	4
Key research theme 1: Trajectory of COVID-19 in the Community	5
Key research theme 2: Responses and Recovery to Maintain Care and Protection	20
Key research theme 3: Workforce and Business Continuity	29
Key research theme 4: Collaboration Across the Sector and Services	35
Appendix	42





Introduction

Background

Oranga Tamariki – Ministry for Children is responsible for the care and protection of children and youth in New Zealand. The Ministry supports any child in New Zealand whose wellbeing is at significant risk of harm now, or in the future, as well as working with young people who may have offended, or are likely to offend.

The COVID-19 pandemic has placed significant pressure on children and their whānau, often placing young people and children at heightened risk. The compounding effects of the disrupted services during lockdowns, limited access to schools and other economic challenges require a holistic approach to supporting vulnerable children, young people and whānau.

This has required Oranga Tamariki to consider crisis and recovery responses, while ensuring continuity in service delivery. The Ministry is keen to draw on global approaches to support current responses and recovery and has engaged EY to better understand:

- 1) The trajectory of COVID-19 in the community and community recovery
- 2) Children, young people and caregivers and services that support them.

Purpose and scope of this report

The purpose of this report is to provide insights in to the trajectory of COVID-19 in community and community recovery, including how other jurisdictions are continuing to respond to impacts of the pandemic. Oranga Tamariki seeks to leverage these insights and learnings to reflect on how they can continue to shape the COVID-19 response. This is focused on proactively identifying and supporting children and young people, workforce and service continuity, increasing cross-sector collaboration and anticipating care and support.

EY prepared this report based on a jurisdictional scan, which included research and interviews (N=19) with a mix of agency and government representatives and stakeholders working closely with care and protection and youth justice systems. Interviews were conducted with three Australian states and territories (New South Wales, Victoria and Queensland), as well as the United Kingdom, United States of America, France, Israel, and Singapore.

This research was underpinned by four key research themes:



These key themes illustrate the strategies that jurisdictions are implementing to continue to respond to the challenges facing the care, protection and youth justice sectors.

Please note, this report is intended to provide snapshot of the current situation and available information on responses to COVID-19 as at June 2022. The are some limitations as a result of availability of data and stakeholders during this challenging time.



Summary of insights

Impacts of COVID-19 on children and young people, and the services that support them

The evolving COVID-19 pandemic, impact of Omicron and other evolving variants has placed significant impact on communities globally. The impact on vulnerable children, whānau and services is not yet fully understood. However, significant disruption and uncertainty has required services to learn to adapt and respond proactively.

In New Zealand, there is a rapidly evolving focus on recovery and approaches towards an endemic, including child and youth-centric social policy and community service responses.

Globally, child protection services and partner agencies are continuing to develop and refine their response and reflect on lessons learned. A more sophisticated digital approach to social work is emerging. Recovery is challenged with additional economic pressures, supply challenges and an increase in complex social and wellbeing needs.

The continued response to COVID-19 has highlighted the need for organisations to be resilient and adaptable to maintain statutory practice in child protection and youth justice.



How can Oranga Tamariki proactively support children and families through COVID-19 and community recovery?

By examining global experiences, we can reflect on important learnings from other jurisdictions and identify where Oranga Tamariki can implement strategies to uplift recovery and drive proactive responses.

Our global research has identified trends, strategies and lessons learned that have enabled continuity of support, care and service for children and their whānau.



The pandemic is having far-reaching effects on different areas of life, with the long term impacts on children and young people largely unknown. System-wide and child centric initiatives will be essential to recovery. Including the views of children and young people in service design and continuous improvement is critical.



Hybrid, agile working models are essential for service continuity. The emergence of a more digitally based and agile model of social work practice has some promising benefits, although face to face still has significant merit.



Localised, community based service delivery is critical, bringing together service providers, workers and volunteers. This could include establishing a shared workforce pool through hybrid working practices, collective action and information sharing. Enhanced intelligence sharing through data analytics across the sector will also strengthen responses and help anticipate the arising challenges of COVID-19.



Education is a mainstay of stability, wellbeing and social connection, and therefore we need to consider the role of schools as central to the child and family services ecosystem, the impact on individual children and the ability of parents to support children when school attendance is disrupted.



Culturally sensitive responses are most impactful when community-led, and should continue to underpin Oranga Tamariki's approach to support and recovery.

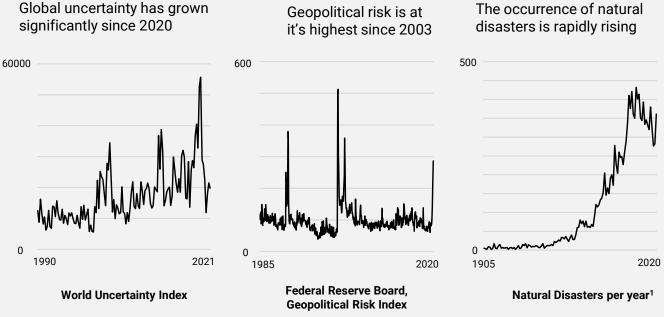
Trajectory of COVID 19 in the Community

Adopting agility and adaptability in responses can help combat ongoing challenges in the community and the unpredictable trajectory of COVID-19 and beyond

Keeping a balanced approach between agile and adaptive responses whilst managing risks effectively may improve the ability of services to transition through disruptive periods and enable care of children and young people.

An increasing trend of disruption reinforces the need for agencies and providers to remain cautious, agile and adaptive

Disruption is becoming more frequent...



¹Natural disasters include drought, floods, extreme weather, extreme temperature, landslides, dry mass movements, wildfires, volcanic activity and earthquakes.

Social workers were forced to be 'risk-smart' through the pandemic. Conditions to support adaptive and agile response include:

Leadership through practitioner-led local autonomy for decisionmaking Empowering the workforce to be flexible in their response Sharing human resources and developing structures to tap into specific skillsets



Sharing space more efficiently

Communicating through collaborative management structures

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Canada identified that a cautious yet agile approach can help combat disruption.

Research from Canada's public service found that **19% of the workforce felt the government was not responsive enough** to COVID-19, with the top barrier being **unnecessary bureaucracy**, **limits to information sharing and an inflexible organisational strategy**.

Large, complex public organisations could benefit from developing conditions for agility, including a risk smart culture.

The new conditions imposed by the pandemic resulted in the social services workforce showing incredible adaptability and agility. Key lessons learned in adapting governance and practice should be further enhanced and incorporated into the "new normal".

Source: (33) Government of Canada (2011), (34) Shared Services Canada, (2021) (35) Caldara, D & lacoviello, M (2018), (37) Data (2019), (38) EMDAT (2019)



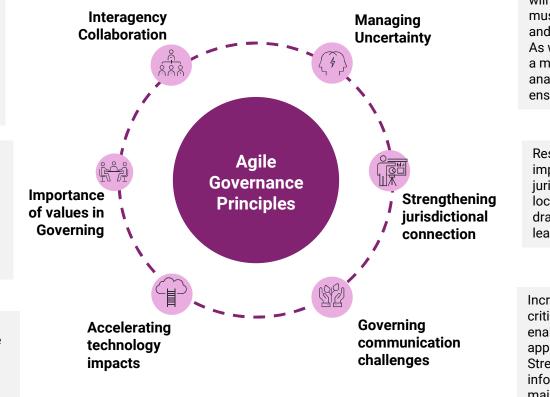
Agile governance is a potential asset to effectively manage the continued challenges associated with the pandemic

The World Economic Forum has highlighted that agile governance is key to governments' responses to recovery from COVID-19 and integral to future strategic directions for pandemic preparedness and broader reform.

Collaboration, co-creation, and coproduction will all become more common features of government operations and the delivery of public services. The Open Government Partnership, launched in 2011, has brought together public sector reformers and civil society leaders to increase inclusivity and accountability.

When human-centred values are applied to policies, they can more effectively safeguard against the unravelling of social cohesion. This can be applied in many areas, from fair treatment for people of every age group, to broader social and economic plans, and efforts to better protect the environment.

COVID-19 is accelerating technology uptake as workplaces look for innovative ways to get more done and provide improved accessibility of services. Technology disruptions have potential positive social impacts, yet must be supported by approaches to build digital literacy across the community.



The exact nature of any new outbreak will always be uncertain, but countries must be able to respond more quickly and comprehensively than previously. As we face continued challenges, only a multi-faceted, inclusive, and analytical governance approach can ensure that people will be protected.

Responses and recovery can be improved through better crossjurisdictional collaboration, as well as local systemic improvements that draw on policy and service delivery learnings from other countries.

Increased public awareness has been critical throughout the pandemic, enabled by ethical, timely and culturally appropriate communications. Strengthened practices for data and information sharing are critical to maintain accuracy of information and minimise any threats to agencies and the community.

Source: (51) World Economic Forum



Best Practice: the Singapore Government has developed an Innovation Framework and agile approach to solve complex public issues and support evolving community needs



Singapore: Public Service Innovation Framework

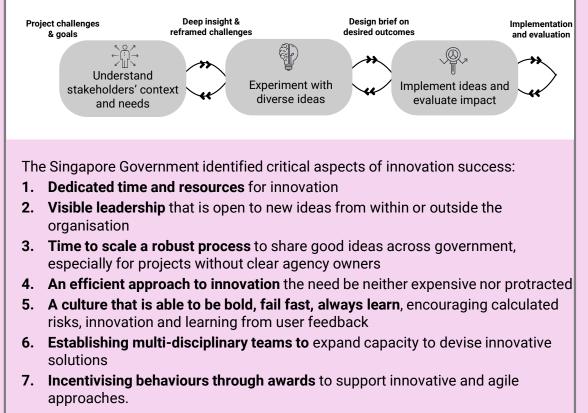
During the pandemic, governments were pushed to adapt policies, redeploy the workforce and adjust service delivery faster than ever. For Singapore, agility in operations became a priority when they realised that consumers were expecting better responses and technology enhancements from public services.

Singapore developed a Public Service Innovation Framework providing strategies including behavioural insights, business process re-engineering, data analytics, design thinking, organisational development, scenario planning, and systems thinking to design and implement innovative outcomes for citizens.

This enabled an innovative and agile culture which became a major asset when facing the challenges of the pandemic.

Make-a-thons

Part of the innovative and the agile response were makea-thons. Similar to Hackathons, these events bring together public officers and citizens to define problem statements, interview consumers and stakeholders and 'make' or 'hack' prototype solutions to problems.

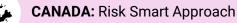


The Singapore Government Innovation Process & Critical Aspects of Success





Lessons learned: Canada's shared services 'risk smart' approach has provided a means for agile responses to COVID-19 challenges whilst effectively managing risk



Canada's shared services provide a critical 'backbone' to service delivery for children, families and communities. The Government of Canada and each provincial government has had to respond to the pandemic at pace and with significant agility to maintain public services, provide public health responses and continue to support vulnerable children and young people. A key learning from the pandemic has been that government services need to be "risk smart" throughout the delivery of rapid and innovative responses.

"Responsiveness is not about speed..... if we try and make every decision fast, that creates, I think, a little bit of recklessness. The real issue is what is the risk? What is the rate at which decisions need to be made? If we try and keep this pace up, we will burn ourselves and our people out." (Paul Glover, president of Shared Services Canada)

A review of the public sector's response to COVID-19 found that:

- 54% of the workforce believed their organisation was quite responsive
- 18% believed it was very responsive
- 19% believed it was not very responsive

The top barrier to government responsiveness was perceived as unnecessary bureaucracy, as well as limits to information sharing and an inflexible organisational strategy. Some of the lessons learned from Shared Services Canada during the pandemic include:



By focusing on execution risks for projects, rather than schedule and cost-related risks, projects can better adapt to emerging needs and successfully deliver outcomes.



Whilst approaches to solving pressing needs can result in intermediate benefits, they are rarely sustainable and scalable in the long run.



An enterprise approach is necessary for the federal government to operate at the scale and speed required to deliver modern and responsive services.



Individuals need to be supported when they take risks, as well as trained and empowered to adopt a risk smart culture.

Moving forward: The Government of Canada now has an opportunity to critically assess its digital response to COVID-19, the lasting implications of this digital acceleration, and digital opportunities and risks in the "new normal."



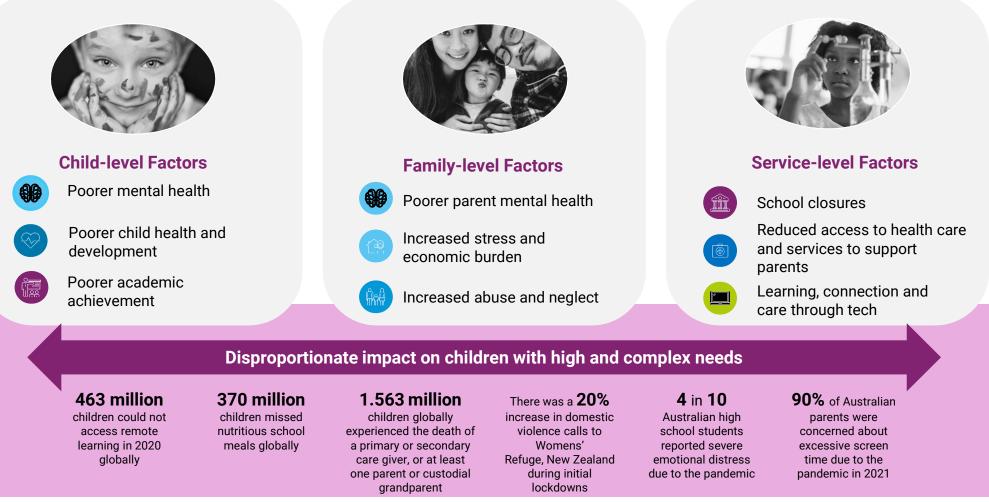
Source: (24) Kong ST, Noone C, et al., (2021), (33) Government of Canada (2011), (34) Shared Services Canada, (2021)

Trajectory of COVID 19 in the Community

Addressing the impacts of COVID-19 on children through childcentred continuous improvement

The indirect impacts of COVID-19 on children not yet fully known, however are already shaping service delivery. To continue to manage and recover from the evolving pandemic, jurisdictions are shifting to continuous improvement initiatives to support the 'return to the new normal' while bridging gaps in child development exacerbated by COVID-19.

Impact of COVID-19 on Children: although health impacts on children have been more limited, 11 potential indirect pandemic impacts have been identified that could jeopardise child development ⁽¹⁰⁾



Source: (10) Goldfeld S, O'Connor E, Sung V, Roberts G, Wake M, West S, Hiscock H (2022), (39) Oostrom TG, Cullen P, Peters SA (2022), (40) Howard-Jones AR, Bowen AC, Danchin M, et al (2022)



Mental health and economic impacts have significantly affected children and families



Child-level Factors

Poorer Mental Health

Studies have shown that mental health impacts on children have been significant as a result of the pandemic due to lockdowns, changes in routine and lack of access to education, friendships, wider family relationships and other protective factors.

- Mental health difficulties significantly increased for children who experienced a second lockdown
- Kids Helpline, the Australian national youth helpline, saw a 4.6% monthly increase for mental health support and 5.7% monthly increase for suicidal ideation or self-harm.

Poorer child health and development

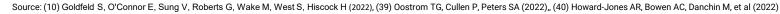
In addition to public health impacts of COVID-19, children have experienced a range of impacts on their health and development:

- Pandemics have contributed to increased rates of improper nutrition and dramatic changes in children's play, resulting in negative impacts on growth and development
- In a longitudinal study of 14 countries during COVID-19 restrictions, children were found to have significantly less active time during the pandemic, spending 55 minutes more per day in sedentary screen time, and 81 minutes less per weekday outdoors
- Throughout lockdowns, children missed routine health checks resulting in reduced or delayed diagnosis of developmental delays
- Maternal stress throughout the pandemic has been shown to have contributed to poorer newborn health, in turn resulting in long term negative effects on educational attainment and health outcomes.

Poorer Academic Achievement

Throughout the pandemic, children experienced significant impacts on their education and academic achievement due to home learning, limited access to teachers and limited capacity of parents and caregivers to provide educational support:

- · Access to technology to support home learning was poor in many countries and low socio-economic areas
- · Families were seen to lack the resources and time needed to support their child's learning
- Student engagement was more compromised among children experiencing adversity
- The achievement gap between disadvantaged and advantaged students was found to grow at 3x the rate during remote learning compared with on-site learning.





Mental health and economic impacts have significantly affected children and families



Family-level Factors

Poorer parent mental health

Parents and caregivers also experienced significant impacts on their mental health, experiencing much higher rates of anxiety, depression and other mental health disorders during the pandemic, impacting on the family environment and their children:

- In Australia, 46% of parents reported a negative impact on their mental health
- Parent mental distress tripled from 8% before COVID-19 to 24% during the pandemic

Reduced family income and job loss

Globally, the overall well-being and stability of the family unit has been impacted by loss of family income, financial stress and economic hardship. Deteriorating economic circumstances due to job losses or reduced household income have resulted in higher rates of newly disadvantaged families, increased levels of persistent disadvantage and significant growth in families seeking support from social services for the first time.

Increased household stress

Household stress due to lockdowns, financial strain and job losses has also contributed to increased overall family stress, including:

- · Increased family conflict and negative impacts on parent-child relationships
- · Increased family violence impacting on child safety, well-being and mental health
- Marital dissatisfaction and increases in divorces and separations
- Increases in caregiver stress leading to decline in caregiving capacity.

Increased abuse and neglect (and decreased reporting)

Throughout the pandemic, many jurisdictions identified increased risks of abuse and neglect of children, however also had significant reductions in reports of abuse and neglect due to lack of contact between mandatory reporters (in particular teachers) and children.

- · Reports to child maltreatment hotlines decreased substantially due to reduced visibility of children
- In the US, criminal charges pertaining to child abuse or neglect were lower than forecasted in the first months of the pandemic
- Australian data indicated that notifications made to child protection services increased once restrictions were removed.



Service continuity, essential health and technology were identified as critical service factors affecting children's health and development



Service-level Factors

School closures

School closures removed a key universal service for children and young people, contributing to health, well-being, educational and family impacts:

- By April 2020, remote learning had been implemented around the world and 86% of the global student population experienced school closures
- School closures have been associated with a loss of access to school-facilitated health care, including free lunches and mental health care
- Children experiencing adversity were more susceptible to the impacts of school closures and loss of school-based health care, mental health
 support and nutritional lunches
- US estimates have suggested public primary school closures may be associated with an estimated 13.8 million years of life lost due to decreased long term educational attainment.

Reduced access to health care and services to support parents

Access to health care throughout the pandemic was significantly reduced or delayed for many children, impacting on diagnosis of health needs and timely provision of health services.

- Service delivery primarily shifted to telehealth which brought additional challenges, especially for kids with high and complex needs; only 30% of parents of children with neurodevelopmental disabilities reported that telehealth worked well for their child
- 31% of unwell or injured Australian children delayed or avoided accessing health care, primarily because of the fear of exposure to COVID-19
- There has been a substantial increase in paediatric mental health admissions to emergency departments

Increased use of technology for learning, connection and health care

Shifts to telehealth and use of technology for remote learning drove significant innovation in accessibility to services however this also resulted in inequality of access:

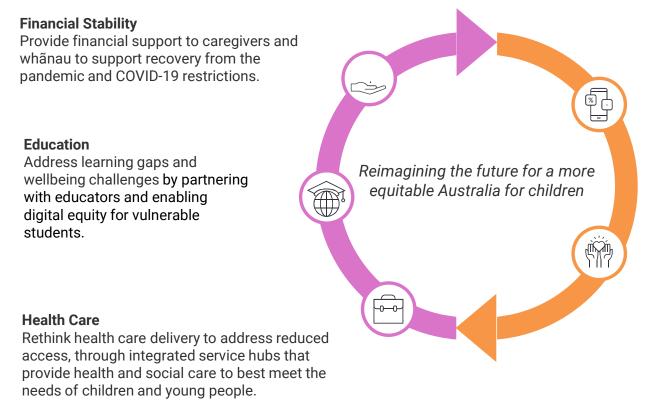
- Evidence on the efficacy of telehealth and the impacts of remote learning remains unclear
- Schools used technology to move the education curriculum to a remote learning environment, however many children lacked the necessary skills or self-confidence to use technology for learning
- In 2013, it was estimated that only 68% of children living in Australia's most disadvantaged communities had access to the internet at home
- Technology has also been positively used to facilitate social interactions between children in an attempt to alleviate loneliness and maintain a sense of community.



Source: (10) Goldfeld S, O'Connor E, Sung V, Roberts G, Wake M, West S, Hiscock H (2022), (39) Oostrom TG, Cullen P, Peters SA (2022), (40) Howard-Jones AR, Bowen AC, Danchin M, et al (2022)

Five key focus areas have been identified to ensure continued care and support for children

The Medical Journal of Australia identified five potential areas for recovery and continuous improvement, to improve equitable service provision for children following the pandemic:



Care Delivery

Leverage digital solutions to create more accessible and efficient approaches to care for children and young people, in particular for those with multiple and complex needs.

Mental Health

Focus on prevention and early intervention of mental health in care and protection practices. This can be achieved through community-based approaches to help families prevent, identify and support children and young people; working with educators to support prevention and early intervention; and embedding a culture of evaluation into mental health services, with a focus on reducing inequities in access to care and support.

Source: (10) Goldfield S, O'Connor E, Sung V, Roberts G, Wake M, West S, Hiscock H (2022), (39) Oostrom TG, Cullen P, Peters SA (2022), (40) Howard-Jones AR, Bowen AC, Danchin M, et al (2022)



A range of practices have been found to support well-being and recovery of children as communities adapt to the new normal

Practising Empathy Children's responses to stressful events are unique and varied. New and challenging behaviours are natural responses and adults can help by showing empathy and patience.	Sensitive Caregiving The primary factor in recovery from a traumatic event is the presence of a supportive and caring adult in a child's life. By offering consistent and sensitive care, children can be protected from the pandemic's harmful effects.	Connection, not isolation Social connectedness improves children's ability to be develop resilience through adversity. Creative approaches to staying connected are important (e.g., writing letters, online video chats).	Appropriate Information Adults should be available for children to ask questions and talk about their concerns and experience of the pandemic as well as managing and mediating children's exposure to media coverage, social media and adult conversations supporting their access to age- appropriate information channels designed specially for them.	Reassurance, Routine and Regulation Establishing reassurance and routine can help provide children with a sense of safety and predictability.
Keep them busy A child's likelihood to worry and partake in disruptive behaviour will increase when they are bored. Adults can provide options for safe activities and involve children in brainstorming other creative ideas to minimise their focus on the impacts of the pandemic.	Increase Self-efficacy Self-efficacy is the sense of having agency or control—an especially important trait during times of fear and uncertainty. Children often feel more in control when they can play an active role in helping themselves, their families, and their communities.	Care of the caregiver Children's well-being depends on the well-being of their parents and other caregivers. Caregivers must take care of themselves so they have the ability to care for others.	Seek professional help Emotional and behavioural changes in children are to be expected during a pandemic. If children show an ongoing pattern of emotion or behaviour that is not resolved with support, professional help may be needed.	Emphasise strengths, hope and positivity Children need to feel safe, secure, and positive about their present and future. Adults can help by focusing children's attention on stories focusing on connection, finding creative solutions to difficult problems and overcoming adversity during the epidemic.

Source: (15) Bartlett JD, Griffin J & Thomson D (2020)



Best practice: Australian public health agency puts the rights of children at the centre of policy development and system design through a child-centred continuous improvement initiative



Australian Public Health Systems Theory Approach



The child protection system relies on a collection of Federal and State Government administered services to ensure children and young people thrive and are protected from harm.



Child well-being is seen as a collective responsibility across all agencies that come into contact with children. There is a need for broader coordination and transparency between agencies in order to build an effective and responsive system for a child's wellbeing, safety and protection.



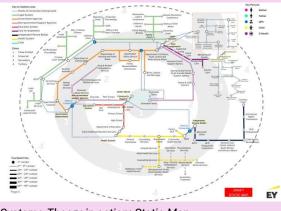
A 'systems theory' approach has been introduced to bring insight into the complex ecosystem of support networks. 'Systems theory' promotes a holistic approach to the child's well-being, safety and protection system, which includes the contributions of health, education, review bodies, police, legal and other services. A 'whole system' perspective is adopted, instead of considering actual or perceived issues as isolated to certain parts of the system.



By examining the interaction of the child's well-being, safety and protection system holistically, the system can better identify risks or vulnerabilities in the quality, accessibility, responsiveness and cultural competence of the system and break down communication barriers and siloed practice.

A systems theory approach to the child wellbeing, safety and protection system will create:

- A system that can effectively respond to the needs of all children.
- Community trust in an increasingly responsive, accountable and consistent system.
- The synchronisation and collaboration of multiple agencies to share learnings, policies and experiences.
- A more efficient and effective way of responding to issues and triggering change through a collaborative process of reflection.



Systems Theory in action: Static Map



Best practice: Wales collaboratively established a holistic Recovery Framework for Social Care, supporting an endemic approach to the ongoing care of vulnerable children and families

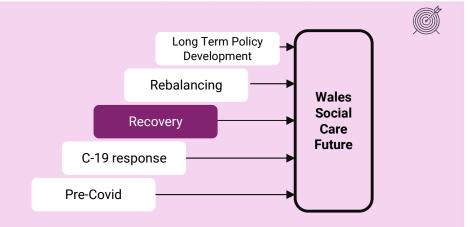
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WALES

Social Care Recovery Framework

The Social Care Recovery Framework provides a defined purpose and direction for Wales' social recovery from COVID-19 through:

- Overarching principles for recovery
- Graded priorities (immediate, short-term to medium-term)
- Responsibilities and roles in delivering the identified priorities
- Recovery roles for partners of the social care sector
- Linkages to broader recovery initiatives led by the Welsh government



Overarching Principles

An agreed set of overarching principles enabled all social care sector stakeholders to be aligned behind a common vision for social recovery to:

- **Ensure rights- and strengths-based** approaches where solutions are holistic and require a cross-sectoral, integrated systems approach focused on the needs of citizens and carers.
- Work with partners to share ideas, to avoid duplication and enhance efficiency.
- **Support system leadership** and encourage action to build mature partnerships with mutual benefits for all.
- Drive towards a people-centric strategy by proactively reaching into marginalised groups and underpinning all approaches, systems and processes with anti-discriminatory practices to build equality.

Recovery Priorities

A detailed set of immediate and short term priorities were defined and allocated to key stakeholder groups, including:

- People who need care and support
- Service providers
- The social care workforce

By working in partnership and collaborating on person-, family- and child-centred social care, the Recovery Framework is enabling a coordinated and impactful approach to social recovery, focused on transitioning to future rebalancing and long term policy development for a new, modern and agile social care sector. All key stakeholder groups are included in recovery planning across the Welsh Government to ensure accountability for outcomes.



Source: (12) Alberta Department of Health (2022)

Best practice: A child-centric approach to optimising funding allocation while enhancing prevention, access and delivery of care services



UNITED STATES

Child Centric Approach: Optimising service access and delivery

Through a child-centric view of funding allocation and service design, agencies in the United States are implementing new models of funding allocation and service access so that children can obtain coordinated assistance based on needs. The overall objective is to create a pathway where the child may be supported by diverse programs towards a better outcome for their own health and wellbeing, by more flexibly utilising funding streams. Through analysis of funding sources, eligibility criteria and access pathways for existing services, opportunities for a more flexible and integrated approach are identified and recommendations are made for more flexible combinations of funding sources can be realised to suit individual child needs.

Key aspects of funding reallocation include:



Centralising Prevention

The initiative has established a centralised approach to prevention by:

- Assessing existing programs that provide prevention services for individual children and/or families
- Evaluating effectiveness of prevention programs
- Establishing a Task Force to guide strategy and action plans to improve effectiveness
- Developing recommendations for new structures to centralise prevention, including improved governance models, redesign of access/eligibility processes and improved use of data





The initiative is enabling improved flexibility and tailoring of funding to client needs through forensic assessment of funding sources.

The financial team will trace back available funding sources and document a range of factors to understand usage, crossover in service areas and reporting requirements that inform flexibility in funding access and appropriate use to meet client needs.

They will then make recommendations on how funding from multiple sources might best be "braided" to provide a more streamlined and effective prevention strategy



New Zealand Government



Responses and recovery to maintain Care & Protection

Community-led and school-based responses for children and families are critical to reduce inequality and enable transition to the new normal

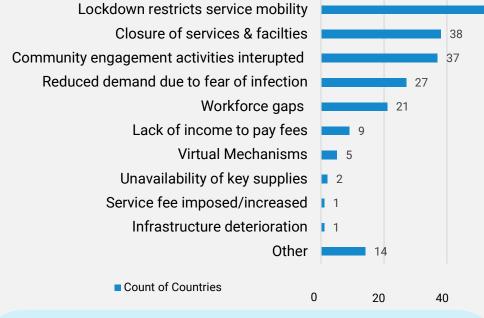
Care and protection responses that are community-led and focused on equality of access and care are vital to support children and families in the transition to the new normal. Community-led responses to COVID-19 have enabled culturallysensitive care and protection approaches for First Nations and culturally diverse communities. Education has provided a universal platform to support equitable access to care and wellbeing supports, and a supported return to school is critical.

Impact of Omicron on Service Delivery: UNICEF highlights mobility restrictions and closure of facilities as the main reasons for disruption to care and protection services



UNICEF research highlights that lockdowns restricting the mobility and transportation of service providers is the MOST common reason for disruption in child and family services.

Top reasons for child protection service/use disruptions in Quarter 3, 2021



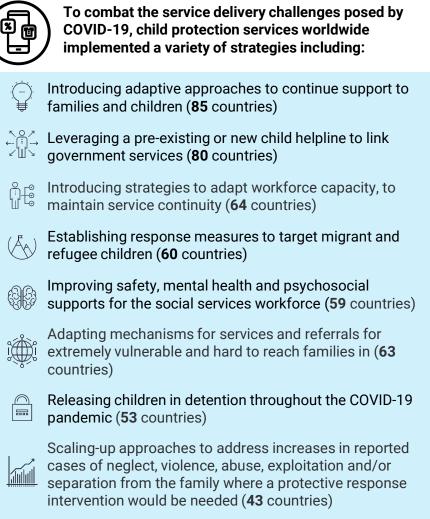
Other major disruptors:

- Closure of services/facilities and postponement of services •
- Interruption of community engagement activities •
- Reduction in demand due to fear of infection



52

60





Source: (11) UNICEF (2021)

Best Practice: Community-led initiatives have been successful in supporting culturally appropriate responses. In New Zealand, a whānau-centred pandemic response leverages expertise to ensure service continuity



Ministry of Health led research in New Zealand revealed Māori and Kiwi organisations have proven to mobilise quickly and effectively to support their communities, both during the pandemic and earlier public health emergencies such as the Canterbury earthquakes.

The depth of experience and expertise available in communities can deliver a response that will identify available resources (and gaps) and connect children and their families to this protection.

Research reveals actions at a national and community level for a whānau-centred response include:



Providing equal access to protection from infection, including:

- Vaccines
- High-grade masks
- Ventilation and filtration in school buildings
- Paid sick leave for caregivers



Resourcing community organisations to build social and practical support networks to enable children to stay home safely including:

- Ensuring food security
- Support for mental distress
- Access to routine vaccinations
- Providing neighbourhood outdoor activities to maintain children's social contacts



Prioritising equipment and support for schools in areas with high proportions of low-income families and essential workers where children may need to remain at school through the outbreak



Recognising that children are not an isolated population and need to be protected through a national COVID-19 mitigation strategy that aims to reduce inequalities of infection in all age groups



Developing and implementing an integrated infectious diseases strategy for Winter 2022 to control COVID-19 and other infections.



New Zealand Government

Best Practice: Community-led and specially resourced initiatives have also proven successful in other First Nations communities to enable ongoing access to care

AUSTRALIA



The essential role of community action for First Nations people with disabilities during the pandemic

- Australia used proactive leadership and direction to quickly close First Nations communities at the outbreak of COVID-19.
- Given the increased vulnerability to health concerns for the First Nations community and external health access difficulties, rural and remote regions were restricted prior to government mandate, which was driven by Indigenous medical advice
- Communities relied on trusted volunteers and family members for personalised support roles in the absence of specialist paid support workers including access to Personal Protective Equipment (PPE) and other supplies
- Aboriginal organisations such as First Peoples Disability Network mobilised their local workers to support communities where critical disability support needed to be maintained.





- Influenced by Indigenous leaders, the Canadian government declared Indigenous adults, including First Nations, Métis and Inuit, as a high-priority group to receive COVID-19 vaccines
- Vaccine uptake was supported by the response and campaigns mounted by Indigenous leaders and community networks
- Indigenous community actions and Indigenous health leadership created an atmosphere of trust that led to increased vaccination uptake among Indigenous People, contributing to the decline in community active cases and increasing protection against future outbreaks

Indigenous assertion of selfgovernance led to increased vaccine uptake. **COVID-19 cases in Indigenous communities dropped by more than 85%** between January and April 2021.



CANADA

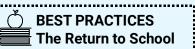
Chartered flights to provide health professionals for remote First Nations communities during COVID-19

- Indigenous Service Canada used special charter flights to deliver essential services personnel and supplies to remote First Nations communities, to reduce the risk of exposure to COVID-19
- Nurses have been flown into remote First Nations communities after boarding at dedicated terminals where strict health and safety procedures are being enforced
- Communities have access to health care professionals, medical supplies and equipment as well as professionals to maintain critical infrastructure such as water treatment plants
- Chartered flights also provide flexibility to support other needs such as emergency management responses, food security or medivac services as required



Source: (13) Minority Rights Group International (2021)

Best Practices: Jurisdictions are focusing on the return to schools as a key factor in the care and development of vulnerable children and young people



BEST PRACTICES The Return to School

Vulnerable children or children from low socioeconomic families are considered less likely to return to school as schools re-open, resulting in a growing gap with students from advantaged socioeconomic backgrounds.

The absenteeism of vulnerable students could be linked to disengagement in education and the disproportionate effect of COVID-19 on vulnerable families.

To combat the impact on vulnerable children and families, an incentives system to promote attendance is advised. This may include:

Free or subsidised meals for low-income families

Public, free and safe transportation to schools



CANADA Safe Return to Class Fund

In Canada, up to CAD 2 billion is being unlocked in support for provinces and territories through the Safe Return to Class Fund. This will provide the complementary funding they need, as they work alongside local school boards to ensure the safety of students and staff members throughout the school year. For example, the Fund will help by supporting adapted learning spaces, improved air ventilation, increased hand sanitation and hygiene, and purchases of PPE and cleaning supplies.



AUSTRALIA ABSTUDY – Australian Government

The Government of Australia has used an existing support mechanism dedicated to Indigenous students called ABSTUDY, which provides support for travel, accommodation and tuition. During the crisis, many students from remote areas returned home and were eligible for extra support and help to safely return to their families.



PORTUGAL Multidisciplinary Support Team for Inclusive Education

Portuguese schools, with the National Commission for the Promotion of the Rights and Protection of Children and Young People, organised student welcoming and supported ways of working through the Multidisciplinary Support Team for Inclusive Education. This provided students at risk with the tools to promote their safety, training, education, well-being and development.



CANADA

Funding for First Nations Students

Canada will provide an additional CAD \$75.2 million to support First Nations, Inuit and Métis Nation post-secondary students impacted by COVID-19. The Prime Minister also announced an additional CAD \$112 million in funding for First Nations to support community measures to ensure a safe return to school on reserves. The government will continue to work with First Nation partners to help protect the health and safety of students and staff this school year.



FRANCE

National Emergency Aid Fund

The existence of a National Emergency Aid Fund allowed the French government to support thousands of students. Many received financial support, free food and plane tickets to return home when studying abroad.



Source: (14) OECD (2020)

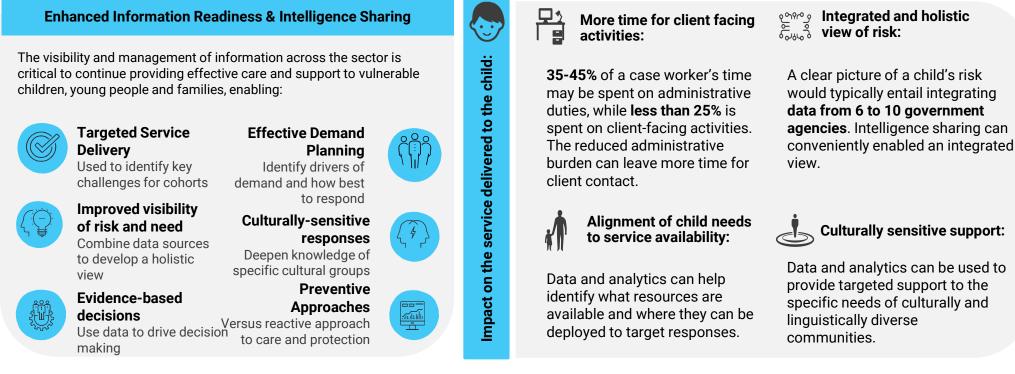
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Responses and recovery to maintain Care & Protection

Leveraging information sharing and data analytics for enhanced responses to care and protection

Jurisdictions highlighted the importance of intelligence sharing as a key driver for targeted and efficient responses during peaks of the pandemic. Advanced data analytics across the sector can enable responses to become even more targeted, effective and culturally appropriate.

Jurisdictions identified enhanced data analytics, enhanced intelligence and information readiness as key factors in enabling continuity of care and protection services



Data governance to underpin intelligence sharing

UNICEF research suggests that good global data governance for children and child-centred innovation in both policy and practice are crucial to supporting future outcomes for children throughout the pandemic recovery. Good global data governance will enable:

A fair data economy through secure crossborder data flows and data storage practices

Increased rigour of data governance

Harmonisation of data protection regulations and protocols Fostering of public trust and trust by children Purpose-driven, proportional, professionally accountable, peoplecentric data collection

Source: (42) Smith, S, Jones, W, Hussey, C & Milner, J (2016), (55) Raftree, L. and Day, E (2020)



New Zealand Government

Best Practices: data analytics and integrated information systems are being used to target preventive responses to need and cultural background



Health Equity Analysis:

Using data to enable COVID-19 vaccination outreach and distribution

State Public Health Agencies in the US are using dynamic data to identify indicators of health and social welfare challenges and drive strategic decisions that inform policies, programs and interventions. A model has been built to identify and develop strategies to target vulnerable populations, including ethnic minority communities, low-income populations and medically underserved. This analytical tool helps drive resource deployment to areas of greatest need, through using:

- Spatial analysis of vulnerable populations using demographic, socioeconomic and health indicators at the Census tract level to identify concentrations of various vulnerable populations and their COVID-19 vaccination rates
- Identification of vulnerable Census tracts that are underperforming in their vaccination effort and identification of the factors that have the greatest influence on vaccination rates using an econometric model

The set of outputs provides users with the information needed to make decisions regarding COVID-19 vaccination outreach while promoting health equity. Specific health challenges and the demographics of various regions are being used to craft and deliver targeted health marketing and culturally sensitive messaging.





Victorian Government Child Link: Integrated and holistic data platforms

The Victorian Government has developed a webbased platform to integrate data on the child and their key family and day-to-day care relationships, interactions with government services and evidence of child protection orders for authorised Child Link users. This is an effective use of data and intelligence sharing as it provides integrated insights at the fingertips of various users, targeted to their specific professional needs. Data privacy is managed through strict accessibility controls, where users are professionals who have regular contact with children and families and can identify and intervene early where there is a wellbeing or safety concern. By providing information, Child Link helps authorised key professionals to:

- Collaborate with other services and professionals
 working with the child and their family
- Identify needs, issues and vulnerabilities that may be present earlier and provide the support necessary to prevent an escalation of harm
- Make more informed decisions about the wellbeing, safety and support needs of a child in their school or service.



Best Practice: Technology has enabled integration of service offerings from not-for-profits, businesses, volunteers, faith sectors and social enterprises to identify needs of vulnerable children and family needs



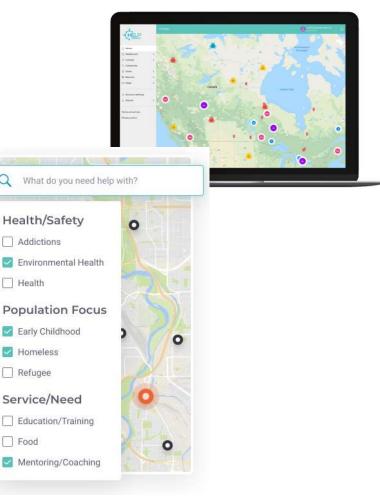
CANADA HelpSeeker



Demand for support services in Canada has been high during the COVID-19 crisis. This prompted a need for technology to support better identification of community need and targeting of services to reduce pressure on essential healthcare systems.

The Canadian HelpSeeker platform is a digital platform that uses system mapping to provide families with a tool to find services quickly and stay up to date on the availability of goods and services. This has supported policymakers to understand need and prioritise resource allocation and service delivery.

By also supporting "community wellness checks", the digital platform facilitates collaborative work between volunteer agencies and mental health services to help parents and children cope with mental health challenges arising through the pandemic.





Source: (30) OECD (2020)

Workforce and Business Continuity

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Supporting the social care workforce to navigate COVID-19 and enhance service continuity through digitalisation, while ensuring a child's wellbeing.

The pandemic posed significant challenges for the social woker's role. Embedding flexibility, adaptability and digitalisation to workforce practices can enhance workforce capabilities, partnering, trust, engagement and teamwork while maintaining engagement and support for children.

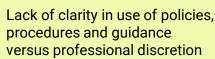
The social workforce experienced several challenges that prompted agility and adaptability to ensure care and support services throughout the pandemic

Social workers experienced a range of challenges during the pandemic including:



Volatile working environments







Conflict in prioritising service user needs and demand with limited resources



Heightened emotions, ranging from fear and anxiety, through grief and sadness, to guilt and shame



Using lessons learned from the pandemic to rethink social care

56.5%, of the social workers in the United Kingdom, felt they were well supported by managers/ supervisors during COVID-19 and by the government's responses to social care concerns.



More challenging ethical dilemmas

Reduced access to PPE

and vaccinations



Creating and maintaining trust through digital social work

Intensified risk and social



There are compounding challenges for frontline workers, migrants and ethnic minority groups. OECD reports have highlighted that COVID-19 posed disproportionate challenges.



Frontline Workers

- Decreased job security
- Decreased overall health and mental well-being
- Increased COVID-19 infection rate



inequality

Migrants

- Hit harder by the crisis and are recovering more slowly than the native-born
- Significantly lower employment rate compared to native-born



Racial/Ethnic Minorities

- Disproportionate impact on labour market in United States
- Increased unemployment in United Kingdom
- Deteriorating labour market outcomes in Canada

Source: (18) OECD (2022), (46) Kong, S-T, Noone, C, Quintana, A et al., (2021), (47) Pink S, Ferguson H, Kelly L (2022)



Reflecting on lessons learned during the pandemic through understanding challenges faced by social workers can enhance workforce experience, while improving the outcomes for children

Workers learned the importance of balancing risks. The pandemic exposed new risks to employee personal and professional lives. Team support and a caring work environment are key to ensuring workers can successfully assess, mitigate and redistribute risk. To uphold service quality during the pandemic employees learned to apply rethinking and reconfiguring service, procedures, protocols and conventional processes in order to uphold professional integrity and practice standards. The re-establishment of interagency collaboration, cooperation and service user-worker was crucial to ensure ethical practice.

The pandemic revealed a range of lessons learned related to the social care workforce of the future:



More investment in the social care sector is needed to support the response to increased material, psychological and educational needs



Community-based and voluntary support networks in neighbourhoods and communities of interest are vital to social work capacity



Coordination between services is fundamental to address service continuity and demand



Capacity to adapt to change should be embedded in the foundations of social work. A lack of clarity in procedural guidelines poses as a key hurdle



There is an opportunity to reflect on the nature and practice of social work. There is potential to reinvent the profession through digital means whilst sustaining the integrity of the work

Source: (21) University of Durham & BASW



The pandemic revealed how building a contingent workforce through digitalisation can help ensure service continuity

Digital social work cannot replace the in-person home visit but digitalisation can add a valuable dimension for better connection with clients who may be more comfortable engaging digitally than face to face. I can also enable the workforce to adapt to resourcing challenges as they continue to arise. Though in-person visits are perceived as more inclusive and a "better option", it is important to note the qualities and possibilities afforded by virtual engagement.



Traditional

The covid-19 pandemic accelerated uses of digital media and technologies as face-to-face interactions became limited. Digital technologies offered helpful but incomplete experiences of the family environment offered by the sensory and atmospheric elements of 'home visits'.

Hybrid

Hybrid was significant in supporting social workers to manage anxieties, and risks to families and themselves. As organisations made virtual technologies available, social workers became skilled at reading the home environment through the screen.

Digital

With significant shift to technology, children sometimes reveal more about their lives and narrate their experience in a more extensive way through a screen. The modes of engagement demonstrated by social workers, children and families during the pandemic can be effectively mobilised to shape a framework for an adaptable digital social work practice

(46) Kong, S-T, Noone, C, Quintana, A et al., (2021), (47) Pink S, Ferguson H, Kelly L (2022)



Best Practices: enhanced communication channels and anticipation of challenges are important factors to ensure workforce, care and support services continuity



FRANCE Immediate Communication Channels

A significant enabler in the response to COVID-19 for France was the rapid adoption of new digital communication channels by the workforce. This had a significant impact both in continuing to provide social services and revealing progressive systemic improvements for social work practice as a whole. Social workers leaned into digital tools that provided fast, direct and precise information to families and children. This rapid change also influenced and expedited the digital maturity of the sector, improving traditional bureaucratic and hierarchical methods of decision making and response.

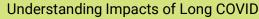


UNITED KINGDOM Continued Placement Stability

To support the increased challenges for foster carers with children experiencing school closures, local authorities in the UK repurposed holiday camps for respite care to intensively work with foster families to prevent placement breakdown. Reflective practice and supervision were used to assess and support foster carers' emotional wellbeing. Carer support groups were also easily accessible and well attended due to onsite service provision.



WALES



The Welsh Government is examining the scale and impact of Long Covid and planning for necessary resources to manage the demands it will place on health and social care. Initial evidence and data modelling indicates that Long Covid is one of a range of factors likely to increase demand for services, particularly in the areas of reablement and domiciliary care services:

Understanding these impacts will enable Wales to remain agile in how they respond to future challenges of COVID-19.

Workforce and Recruitment

Recruitment and retention is essential to increase capacity in intermediate and longer-term social care, to respond to demand arising from direct and indirect impacts of COVID.

Understanding of local data There is a need to increase the

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usable data across all types of local services and invest in data capability so that services can be targeted to greatest need and improve management of demand and capacity.



Managing sickness

COVID is impacting on 30% of the workforce at any point in time therefore contingency planning is essential. Long COVID is creating a greater strain on workforce availability. Recovery can take months and require and extended phased return to work to reach previous working levels.



Demand planning

We can expect to see a COVIDrelated increase in demand for disability support, longer-term packages of care and home care placements.

Source: (26) Ministry of Social Care – Wales, (12) Alberta Department of Health (2022), (50) Clayton, V. and Briggs, E., (2020)



Best Practice: a focus on workforce supply helped the United Kingdom with service continuity through innovation in worker supply and recovery responses



UK: Temporary Registration of Retired and Unemployed Social workers

For Social Workers in the UK to cope with the increased service demand, challenges to typical service delivery and staff resourcing, retired social workers were reregistered to practice.

Social Work England wrote to social workers who left the profession in the last two years to advise them they could practise again with a temporary registration. Temporary registration worked on an opt-out basis, whereby all social workers were deemed able to register for practise.



CANADA

Alberta Health: Workforce Planning & Supports

To support the Alberta Health Workforce through the evolving pandemic, the authorities recommended creating **an immediate strategy to address capacity challenges** in critical positions to the pandemic response to sites with urgent workforce needs including:

- Roles and skills facing critical shortages
- High-level quantification of needs over the next 12 months
- Specific activities and strategies aligned to each identified capacity challenge, with operationalised targets to track strategy implementation
- A mechanism for ongoing tracking and reporting of progress and critical staffing needs

Alberta Health is also developing **employee listening strategies** and implementing targeted interventions to increase employee wellness and wellbeing, which include:

- Continuing to expand the employee and family assistance program and on-site mental health support to priority sites, departments and units
- Formalising peer-to-peer networks and improving dedicated respite spaces for staff on-site
- Providing decentralised funding for site-based recognition and groundswell initiatives
- Review recognition programs with an emphasis on non-financial rewards



UNITED KINGDOM NHS – People Plan Guidance

The NHS was guided by the four themes of their People Plan throughout the pandemic.

- 1. Looking After Our People
- 2. Belonging in the NHS
- 3. New Ways of Working
- 4. Growing for the Future

These provided a common framework and clear direction for the workforce response. Efforts were focused on the most impactful actions for the workforce:

- Supporting people to be safe and well and ensuring voices were heard
- Delivering safe staffing of the COVID response and vaccination program
- Sustaining other services with greater use of innovation, technology and new ways of working

Source: (19) Social Work England, 20, (25) Department of Health and Social Care - UK (2022)

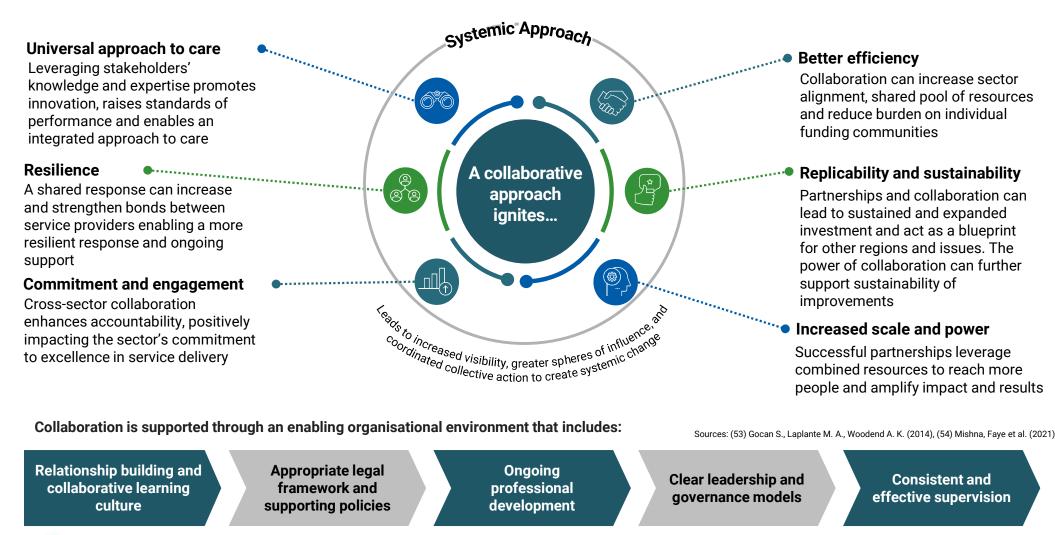


Collaboration across the sector & services

Adopting a systemic approach to collaboration to further strengthen the social services sector

Strengthening collaboration across the sector can combat current and future challenges in an integrated and supportive way. Collaboration can help to form a proactive response as opposed to a reactive response.

Research suggests that strengthening collaboration across the sector can combat current and future challenges in an integrated and supportive way resulting in positive impact to children and families





New Zealand Government

A coordinated effort of practitioners from various health and welfare sectors can drive better outcomes for the child and service delivered

Key insights on current state of collaboration



Around the globe, child and family protection services struggle with coordination between child protection and child and family welfare services



System-level barriers (e.g. inadequate resources) and practitioner-level barriers (e.g. mutual lack of understanding) impact collaboration



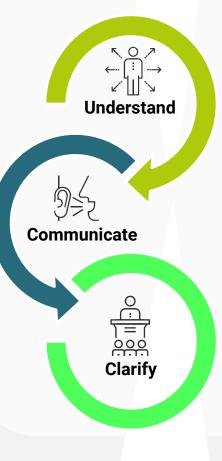
Efficacy of collaboration is dependent on the context including relational aspects between agencies, the involved sectors and strategies used by agencies



Collaboration is most impactful for children with high and complex needs



In Australia, there is evidence of interagency collaboration increasing Indigenous engagement in services **Components of collaborative competence**



Discern between the distinctive roles of child protection and child and family welfare sectors

Develop strong communication between sector partners, other practitioners and family members

Strengthen and incentivise collaboration and describe clearly how it will work best



United Kingdom Through joint referral systems, joint



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Through joint referral systems, joint triaging and universal self report helplines cutting across local authority departments.



The nature of the emergency removed longstanding barriers to data sharing for local authorities

Examples of interagency collaboration in the UK during COVID-19 include:

Children's Centres and Health Professionals

Children's centres are being repurposed as spaces for social workers and family support workers to work with particularly vulnerable families, working alongside midwives and health visitors who could not work out of hospitals or health centres.

Police Officers and Vulnerable Families

Police officers parked their cars at community locations, such as shops, which would be accessible to victims of domestic abuse to make themselves available for support and advice on safeguarding.

Sources: (48) Child Family Community Australia. (2020), (49) Child Family Community Australia. (2011).



Best Practice: Our Tampines Hub (OTH) is an innovative example of how agencies and organisations can collaborate to provide holistic services



SINGAPORE

Tampines Hub: Innovative approach to collaboration

Through Singapore's approach of public sector make a thons that stimulate innovation and people centric and inclusive community hubs, Our Tampines Hub (OTH) was developed. OTH brings together multiple agencies, services and facilities to purposefully offer a comprehensive range of services. OTH was conceived with 13 public sector stakeholders, as well as representatives of residents of all ages and interest groups.

OTH integrates multiple agencies with a common purpose to provide better services, widen community outreach and engagement and build community ownership in programming for residents and visitors.

OTH promotes a holistic approach to supporting child wellbeing and development through integrating key government agencies, community centres, health and lifestyle facilities. The hub also promotes sustainable lifestyle habits, such as working towards zero waste.

OTH provides a centralised and combined location for access to essential family supports, for example job matching, financial assistance, registration for community engagement activities.





Additional examples of collaboration have been outlined in other sections of this report, in particular examples pertaining to Victorian Government Child Link: integrated and holistic data platforms, and WALES: Social Care Recovery Framework



Source: (36) Civil Service Quarterly (2018)

New Zealand Government

Best Practice: The alignment of children and placements is improving through agency collaboration enabled with data and analytics



Better Placements Better Outcomes NSW Department of Communities and Justice (DCJ)

DCJ is rethinking the out of home care (OOHC) placement matching procedures, enablers and barriers at both the funded service provider level within NSW, as well as more broadly across other States and Territories in Australia. DCJ is piloting the use of matching algorithms to align children and carer characteristics to deliver better outcomes for children, families and carers.

In order to develop this algorithm they have:

- Undertaken a jurisdictional review of placement decision making procedures and mechanisms through reviewing available information and undertaking targeted consultations
- Administered surveys to service providers to understand current placement decision making experiences, practices and systems (e.g. technology platforms and IT support)
- Undertaken consultations with a sample of out of home care service providers and key stakeholders, including peak bodies and DCJ Districts
- Developed and assessed options based on findings using multi criteria analysis



Through data and analytics DCJ will:

- Obtain a better understanding of current placement decisionmaking experiences, practices, enablers and barriers
- Reflect on key strengths and learnings of placement mechanisms in other States and Territories
- Explore key options for improving placement decisionmaking, which will support future procurement by DCJ



Best Practice: Smart use of data and predictive analytics has helped prevent COVID-19 outbreaks and saved lives Aged Care Facilities in the US



Prevention through Prediction California Department of Health

The use of data analytics helps the California Department of Public Health (CDPH) to proactively find and intervene early at aged care facilities where an outbreak might occur. CDPH began collecting information from a daily online web based/mobile app survey and, with past infection compliance data, public health teams could generate predictive analytics to monitor and identify in real time aged care facilities at a high risk of outbreaks and increased infection. The primary list of predictive indicators fall into three main categories:

1. Pre existing Conditions: factors related to the facility's current standing

- Historical infection control deficiency for past 3 years
- Health care associated infections
 program referrals
- COVID 19 mitigation plan compliance
- Staff and resident testing compliance
- COVID 19 daily reporting compliance,
- Historical outbreaks of flu & other infection
- Norovirus
- Poverty Index of facility location

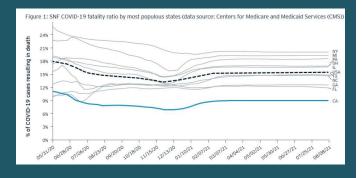
2. Changes in Conditions: uncontrollable factors that influence workforce supply

- Community Transmission
- Staffing ratios and requests for staffing assistance
- Absent staff
- Administrative change
- Shortages of personal protective equipment (PPE) and hand sanitizer
- Dedicated staff, supplies and space for groups of residents based on COVID 19 exposure and positivity
- Vaccination rates of staff, residents and location

Impact: The Californian Department of Health (blue line) had one of the **LOWEST** incident rates of COVID cases resulting in death in SNF compared to other American States.

3. Events: additional events impacting the spread of COVID 19

- Proximity to other facilities with identified outbreaks
- New incidents
- Outbreaks in nearby childcare centres, hospitals and other state licensed facilities (5 mile radius for urban areas, 10 15 miles in rural settings





Best Practices: There are a range of centrally governed practices that support community-led collaboration between organisations

NSW Integrated Health & Care System

NSW Health have published the strategic framework for their Integration of Care approach, which aims to deliver seamless care within the health system and its interface with social care.

The integrated model aligns all health services and social care services aiming to improve:





change?

USA Community-led Action Model

The ATSDR Action Model helps the diverse members of the development community find ways to build health into the renewal process. Communities can use the action model to identify common goals to incorporate these goals in strategic planning.

The Action Model consists of four steps that involve key questions to assist with planning: **Step 1:** What are the issues in the community?

Step 2: How can development address these issues?

Step 3: What are the corresponding community health benefits?Step 4: What data are needed to measure

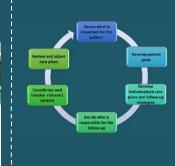




NORWAY Patient-centred Services

Local governments and hospitals in Norway are incentivised financially to co-create and deliver services in an integrated way to get money around the most vulnerable patient groups, like mentally ill patients, children in need of care, elderly people, and people with chronic diseases.

Most health spending is on these services, so a collaboration programme has been designed to provide patient-centric services. For example, one project was the creation of a "hospital at home".



This service was very useful during COVID-19 because primary care units and the hospital were able to collaborate around the infected patients and they were able to discover earlier if there was a need for hospitalisation, therefore saving lives.



Source: (26) Department of Health and Social Care (2022), (31) Agency for Toxic Substances and Disease Registry (2020), (32) NSW Health (2022)

New Zealand Government

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Appendix

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