

---

**Bath & North East  
Somerset Council**

---

**Improving People's Lives**

**Independent Reviewing Officer (IRO)**  
**ANNUAL REPORT**  
**2022-23**

**Author: Michelle McKay Interim Safeguarding and Quality Assurance, Children and Young People Directorate.**

**Date: 3<sup>rd</sup> of November 2023**

## Contents

	<b>Page</b>
1. Introduction and purpose of the annual report	3
2. Reporting period	3
3. Legal, statutory and national context of the IRO role	3-4
4. Bath and Northeast Somerset as Corporate Parent	4-5
5. Bath and Northeast Somerset Council IRO Service	5-7
6. IRO Service Provision Performance	7-12
7. Profile of children and young people in care	13-16
8. Children placed at distance from Bath and Northeast Somerset	16-17
9. Unaccompanied, Asylum Seeking and Trafficked Children	17-19
10. Child focused reviews, participation, and feedback	20
11. Children and Young Peoples Feedback	20
12. Dispute resolution and escalation	21-22
13. Quality Assurance by IRO	22
14. Areas for development within IRO service	23
15. Areas of focus for 2023-24	23-24

## **1. Introduction and Purpose of the Annual Report**

- 1.1 This report provides the Director of Children's Services, the Lead Member for Children's Services and the Corporate Parenting Board with information about the children and young people currently placed in the care of the Local Authority.
- 1.2 The Independent Reviewing Officers (IRO) Handbook (2010) provides statutory guidance to all local authorities regarding children placed in the care of a local authority. The guidance seeks to ensure improved outcomes for children in care so that they can reach their full potential. Section 7, paragraph 11 states that the IRO Service manager must provide an annual report on the delivery of the IRO Service, which members of the Corporate Parenting Board can then scrutinise.
- 1.3 This annual report provides information on the profile of the children for whom the Local Authority is the corporate parent and how the IRO service maintains oversight of the plans for these children. The report is compiled in line with GDPR, so when a small number of children are described under a certain characteristic that could cause identification, the number will be converted to a percentage.
- 1.4 Following presentation to Board, this report will be placed on the Council website as a publicly accessible document and disseminated across children's social care for further consideration.

## **2. Reporting Period**

- 2.1 This report covers the period from 1 April 2022 to 31 March 2023. Some of the data sets may vary slightly from those published by Council Children's Services due to minor variations in the timeframe for data capture and the uploading of data onto various systems. The author of this report came into the post as an interim arrangement from April 2023; the information in this report has been gleaned from data records and management files.

## **3. The Legal, Statutory and National Context of the IRO Role**

- 3.1 The appointment of an Independent Reviewing Officer (IRO) for a child or young person in the care of the Local Authority is a legal requirement under section 118 of the Adoption and Children Act 2002. Since 2004, all local authorities have been required to appoint an IRO to protect children's interests throughout the care planning process.
- 3.2 The IRO Handbook was introduced in 2010, providing statutory guidance for IRO's and setting out the local authority's functions in terms of case management and review for children in care. IRO practice handbook:

[https://assets.publishing.service.gov.uk/media/5a7e2b2740f0b623026899c6/iro\\_statutory\\_guidance\\_iros\\_and\\_las\\_march\\_2010\\_tagged.pdf](https://assets.publishing.service.gov.uk/media/5a7e2b2740f0b623026899c6/iro_statutory_guidance_iros_and_las_march_2010_tagged.pdf)

3.3 The Care Planning, Placement and Care Review (England) Regulation 2010 applies specifically to children in the care of a local authority. These Regulations aim to improve outcomes for children in care by improving the quality of the care planning processes.

3.4 IROs are required to oversee and scrutinise the Care Plan devised for every child or young person placed in the care of the Local Authority. The IRO will ensure that everyone who is involved in the child or young person's life fulfils the responsibilities placed upon them to achieve good outcomes for the child, along with permanency.

3.5 IRO's statutory responsibilities and functions are to ensure:

- Review meetings are held for all children and young people to consider their care plan, which is a key component for those in the care of the Local Authority, within a set time frame.
- The views and wishes of children and young people in care are listened to and central when decisions are being made about them,
- The Local Authority is a 'good corporate parent' to all children and young people in care by ensuring they get the same opportunities, support, love, and care that other children living within their families receive.
- Raising disputes is a key aspect of IROs role if they disagree with care planning aspects.
- Quality Assurance is a core function of the IRO.

#### **4. Bath and Northeast Somerset Council as Corporate Parent**

4.1 IROs are required to oversee and scrutinise the Care Plan devised for every child or young person placed in the care of the Local Authority. The IRO will ensure that everyone involved in the child or young person's life fulfils the responsibilities placed upon them to achieve good outcomes for the child, along with permanency.

4.2 Children who are deemed looked after by a local authority are known or referenced by differing words or titles. It is worth respectfully advising that the children of Bath and Northeast Somerset to whom Council members are accountable would like to be known as Children in Care, CiC for short.

4.3 All Officers and Councillors of Bath and Northeast Somerset have a duty to ensure that the needs of children in care are being met and that children grow up feeling loved, cared for, safe, and have the same opportunities as their peers. All council members should be committed to advocating for the needs of children in care and promote and provide opportunities that allow children to develop and grow, overcoming the adverse experiences they may have experienced before entering local authority care.

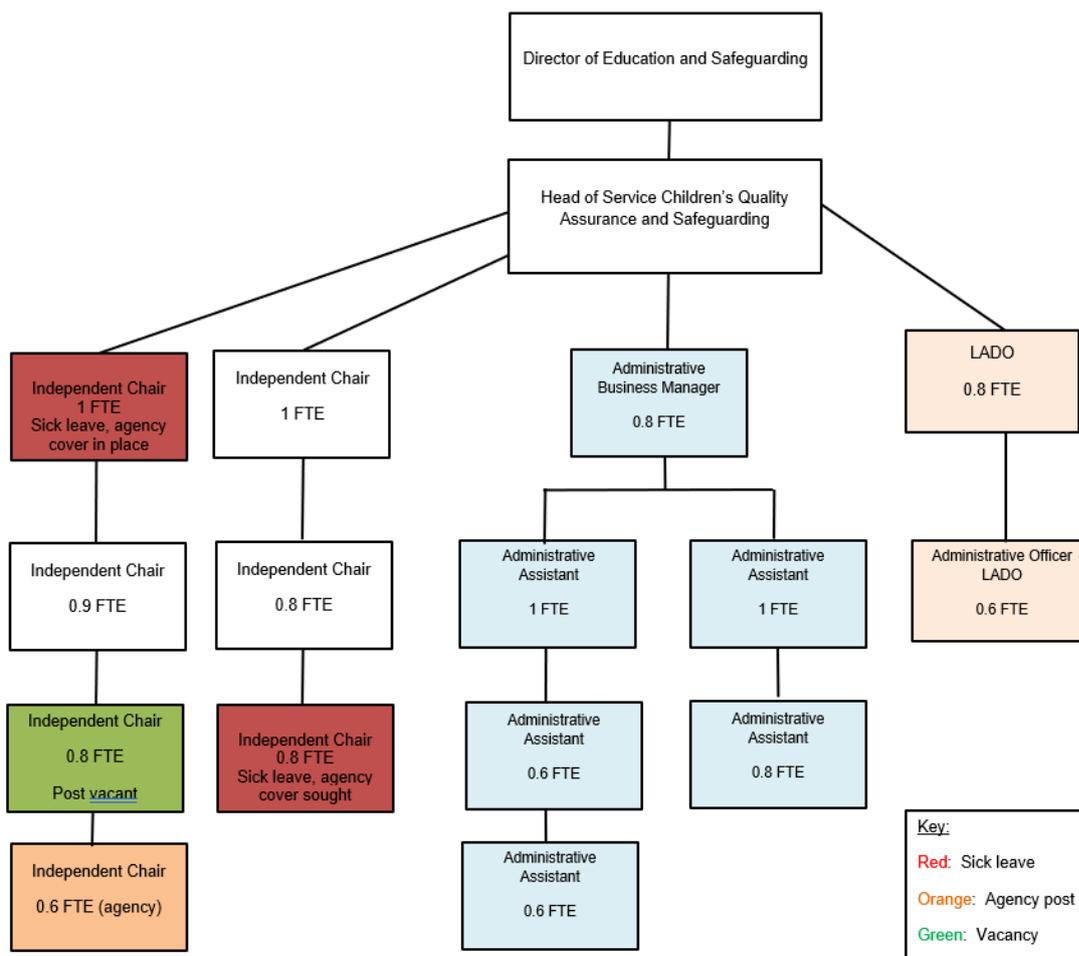
4.4 Upon election, all Councillors take on the role of 'Corporate Parent' to children in the care of Bath and Northeast Somerset Council and those young people with care experience. Corporate parents have a duty to take an interest in the well-

being and development of these children as if they were their own. Whilst the lead member for children's services has responsibilities, the role of corporate parent is carried by all councillors, regardless of their role in the Council (Corporate Parenting: Terms of Reference, Sept 2022).

4.5 Within Bath and Northeast Somerset, the Corporate Parenting Group (CPG) is open to all Councillors and all members of the CPG must ensure they have a comprehensive overview of the progress of the children in the care of the local authority, scrutinising the quality, effectiveness and performance of the services provided. CPG meetings are held four times a year and the arrangements are intended to ensure all Councillors can attend. As a result of changes in working practices, two meetings a year are held virtually again to support the attendance of members. A representative from Education and Safeguarding attends the CPG to support its members and to bring to life the issues faced and the progress made by children in care.

## 5. The Bath and Northeast Somerset Council IRO Service

### 5.1 Establishment of Safeguarding and Quality Assurance Service



5.2 The IRO service continues to sit within the Safeguarding and Quality Assurance (SQA) Service for Children and Young People, which is part of the Education and Safeguarding directorate.

5.3 The SQA service has three core business areas, these are highlighted below: delivered by the role of Independent Chairs.

- i. The appointment of an Independent Reviewing Officer (IRO) for a child or young person in the local authority's care. This is a legal requirement under Section 118 of the Adoption and Children Act 2002. All local authorities must appoint an IRO to protect children's interests throughout the care planning process.
- ii. The delivery of Child Protection (CP) Conferences within statutory timescales. The Service must review and monitor the progress of all children subject to a child protection plan. The timeliness of conferences and the duration of child protection plans are key areas of performance that form part of statutory returns and regional benchmarking. This area has significantly improved in the first two quarters of this year.
- iii. A Local Authority Designated Officer (LADO) to address allegations of abuse against a person in a position of trust working with children (0-18 years old). The LADO is responsible for ensuring allegations are responded to in a timely fashion, that where the threshold is met, an investigation by the employer is carried out and that the child's welfare is foremost. Working Together to Safeguard Children (2018) (Chapter 2, paragraph 4) set out the role of LADO and remains governed by the Local Authorities duties under Section 11 of the Children Act 2004.

5.4 As stated in previous reports, B&NES delivers the IRO and the CP function through the role of an Independent Chair. This role is unique to this local authority and was created in 2017 to provide greater flexibility and capacity within the Service. It is worth noting that both roles are significantly different and work under the guise of different legislation and differing escalation processes. The Service had responsibility and oversight of approximately 370 children at the end of the reporting year, whose plans were either CP or CiC.

5.5 In March 2022, an agreement was given for a market supplement to be attached to the role of Independent Chair, aligning the functions with that of team manager across children's social care and the pay awarded similar to roles within other local authorities. This has assisted with better recruitment when to advertised vacancies.

5.6 The Head of Service for SQA had taken early maternity leave in February 2023, earlier than expected, leaving the post vacant for two months. I came into the post in April 2023 to oversee the Service in their absence and have focused on service delivery, including CiC and CP. It is worth noting that there may be slight discrepancies in data, given the number of data and trackers used in previous years.

5.7 Sickness and vacancies have had and continue to impact service delivery significantly. There were two independent chairs with long-term sickness absences for the given reporting period; this has carried through to the 2023-24

period. There is currently a permanent vacancy being advertised for the second time. Two experienced agency workers continue to support the Service.

5.8 The SQA has a dedicated LADO role. The LADO officer now has dedicated business support and has increased their workdays from 3 to 4. Two identified IROs provide additional LADO support during annual leave and/or sickness.

## 6. IRO Service Provision Performance

6.1 The manager of the IRO service is responsible for appointing an IRO within good practice guidelines of five days of a child coming into care, this continued through the reporting period. Whilst the average caseload of an IRO has increased consistently, there has been an increase of more children coming into care than leaving and for a small IRO service which is working multiple roles, this creates additional pressure on IROs and, in turn, impacts on IRO's being able to review care plans within 20 working days of the child coming into care. Caseloads of IROs are mixed between CP and CiC, which can impact planning timescales. As set out in the IRO handbook, the average caseload is between 50-70 children per IRO; case allocations rarely exceed this number. There are no intentional changes to a child's IRO unless the IRO were to leave their role or the child requested a new IRO. This allows positive relationships to be developed between the IRO, the children, their carers, and family. During periods of long-term sickness, which has impacted and continues to impact the IRO service, children are reallocated temporarily to another IRO. This does cause the workload to increase to the IROs, as a result, the quality assurance element is not fully met and has been unable to develop.

6.2 Table 1: Total Number of CiC over five-year period

	March 2023	March 2022	March 2021	March 2020	March 2019
No. Children in Care	<b>231</b>	197	181	181	192
CLA start	<b>95</b>	77	52	75	96
CLA end	<b>63</b>	61	53	86	81
% Increase of children in care from previous year	<b>+17%</b>	+9%	0%	-6%	+14%

Source: Children's Social Care Powerbi

6.3 As the above data shows, the number of children and young people in care in this reporting period has increased by 17%, with 231 children in care at the year-end of March 2023. Once again, the number of children entering care was higher than that of children leaving care. It is worth considering the figure of 231 children in reporting quarters for the year to give further insight. Q1-203, Q2-215, Q3-227 & Q4-231. There was a considerable increase in the second half of

the reporting quarter, this figure increased again in the following reporting period. Given this trajectory, an additional post of IRO has been requested, this will ensure the children coming into care will be allocated an IRO immediately to oversee the care planning function and to notably support and develop the quality assurance element of the Service.

#### 6.4 Table 2: Reason for leaving care

Reason for leaving care	2022-23	2021-22	2020-21	2019-20
Turned 18	29%	35%	34%	31%
Returned to family	27%	23%	17%	33%
Placed under SGO	18%	23%	19%	17%
Adoption	9%	7%	30%	15%
Other	18%	8%	0%	4%

Source: Childrens Services Data, Previous years parameters unclear. Parameters for 22-23 defined by Powerbi as E- codes leaving care. Rounded up to nearest %.

6.5 The number of children leaving care to return to living with their family has increased by 4% in the last reporting year and this figure accounts for children who returned in a planned way (16 children) and those who returned home unplanned (21). The increase in adoption has slightly improved; however, it is nowhere near as high as in previous years and it is believed that this will level off at about 12% within the next three years based on intelligence available with forecasting. Children are returning to birth families with additional support and under the guise of orders, assisted by the reunification framework, explained in further detail below. 'Other' includes a number of factors such as - ceased for any other reason, transferred to adults' Service, etc.

6.6 In November 2021, the local authority approved and implemented the NSPCC reunification framework. This framework can be used for all children in care up to 18, where a return home is an option. Permanency for children is the focus of all IROs and central to the care planning process. Any practitioners involved with children and young people can identify them to be considered for reunification, e.g., social worker, social work manager, the IRO. This would be part of the IRO reviews where the care planning is considered. The child's IRO will be informed when a decision is made to explore reunification and progress a return home assessment. The IRO if not in support of this decision, will discuss it directly with the child's social worker and social work manager. At the assessment's mid-point stage (approximately six weeks from the start), a networking meeting will include the child, family, foster carer, supervising social worker, family therapist, connecting family's practitioner and the IRO.

6.7 Once the assessment has been completed, should reunification be proposed, the IRO will hold a child-in-care review to consider reunification plans and the support available to the child and their family. The IRO will need to be in support of the plan for reunification before this can proceed. Should the IRO's views not be aligned with the assessment outcome, the IRO would be expected to discuss

this with the social work team responsible for the child's care plan. The dispute resolution protocol would be utilised in instances where an IRO and social work team continue to have opposing views.

6.8 Children within the local authority have returned home for several reasons, some in a planned way via the reunification process, others not. The reunification process has then supported the children who have returned home in an unplanned way to ensure the carer can parent safely, with positive outcomes for the child. This then prevents a breakdown later, requiring them to re-enter the care system again. Repeat accommodations have been a concern over previous years and this is now observed more closely.

6.9 Children are being considered for reunification and are at varying stages of the reunification process; the IRO for these children will continue to review and ensure the reunification framework is being followed. Data is not fully available for 2022-2023, given the beginning of the process, however, it is moving in a positive direction given the data available for Q1 & Q2 of 2023-24, this will be provided in next year's report. A comparison of reunification, children re-entering care and child-in-care figures will need a deeper analysis.

6.10 Table 3: Children entering and leaving care by quarter

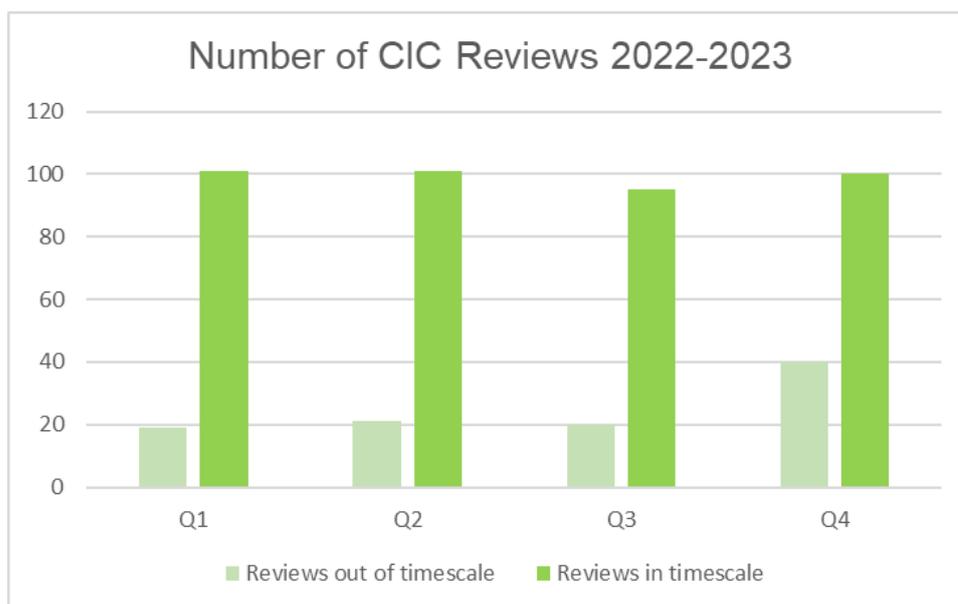
	Q1 22-23	Q2 22-23	Q3 22-23	Q4 22-23
Children coming into care	24	24	27	22
Children leaving care	18	11	15	19

Source: Children's Social Care Powerbi actual number

6.11 As the above shows, this reporting year showed a higher number of children coming into care than leaving and this pattern has continued into the next reporting period. This evidences the need to request an additional IRO for the Service.

6.12 The IRO Service chaired a total of 497 child-in-care review meetings in the reporting year of 2022-23; this is an increase of reviews from the previous year.

### 6.13 Graph 1: Timeliness of CiC reviews



Source: figures taken from Children's Social Care data powerbi

6.14 Between the reporting period of 2022-23 of the 497 reviews held, 397 (69%) were held in timescale and 100 (31%) were out of statutory timescale. This is a significant number of overdue reviews and a decline from the previous year's figures of 92% in timescale. To analyse further, a breakdown into quarters has been produced below.

### 6.15 Table 4: Quarterly timeliness of CiC reviews

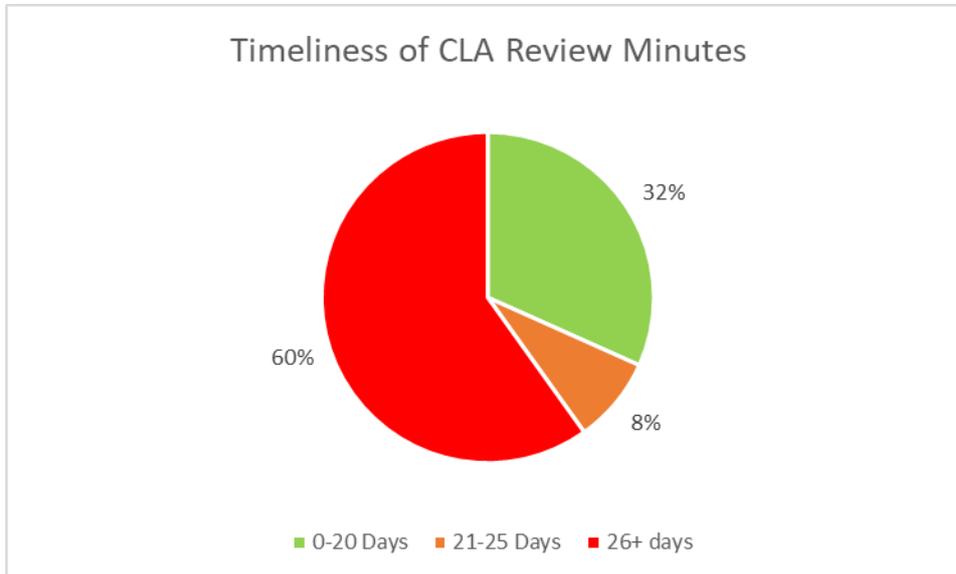
	Reviews out timescale	Reviews in timescale	% out of time	% on time	Total reviews held
Q1	19	101	16%	84%	120
Q2	21	101	17%	83%	122
Q3	20	95	17%	83%	115
Q4	40	100	29%	71%	140

Figures taken from Children's Social Care data powerbi

6.16 There are several reasons why a review would not proceed within the timescale or on the date initially scheduled. Of the reviews not in timescale, Q4 saw a significant number of overdue reviews, 40 in total (29% of total reviews), this was possibly due to the manager going on immediate unplanned leave, therefore no clear oversight of allocations and compounded by staffing gaps caused by ill health. There have been some reporting data issues with systems used; for example, when a pre-meeting review report is not completed by the social worker for CiC review, then this causes a problem for the IRO Service to keep a review in timescale. Should a review be held out of time scales, this then has an automatic detrimental effect on the timely distribution of the review minutes. It is worth highlighting that as interim service manager, I have sought to prioritise this area of poor performance. I am pleased to report that this figure

has improved considerably over the past two reporting quarters of 2023, with Q2 now being 86% on time.

#### 6.17 Graph 2: Timeliness of distribution of CiC Review minutes



6.18 Following a child's review, the IRO must provide a written record of the decisions or recommendations within five working days of the completion of the review. A full record of the review is expected to be distributed within 20 working days.

6.19 During this reporting period, 32% of review records were completed and circulated within 20 working days, 8% were sent between 21-25 days, 60% were sent 26+ days after the review. The Service has not met its target of ensuring 85% of review records are sent within the statutory timescale.

6.20 This performance area has been impacted by IRO sickness, an increase in reviews and late social work reports. Whilst some of the reasons are understandable, we keenly know that this performance area needs to be addressed. As mentioned previously, this is an area that will improve as more reviews are held within statutory timescales.

## **7. Profile of children in care in Bath and Northeast Somerset on 31 March 2023**

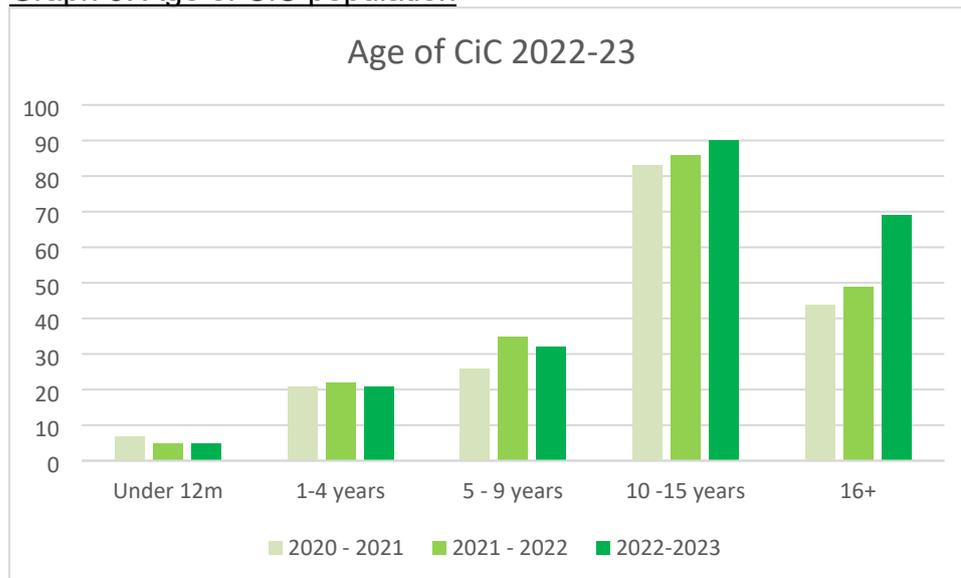
### Gender:

7.1 The Government's most recent publication of statistics of looked after children nationally in England evidence that males continued to account for 56% of children in care and females 44%; this has been the trend from 2018 to 2022 with no deviation. The gender breakdown in Bath and Northeast Somerset has

continued to be in line with previous years, if somewhat below the national average for males, with 50.5% of children in care being male and 48% female. A small discrepancy in figures exists due to identification as nonbinary, which is accepted as a gender norm.

7.2 Note: DfE plans to change the collection of data to 'sex' from the 2024 to 2025 onwards. Until this point, all are advised they may continue reporting sex or gender as done in previous collections.

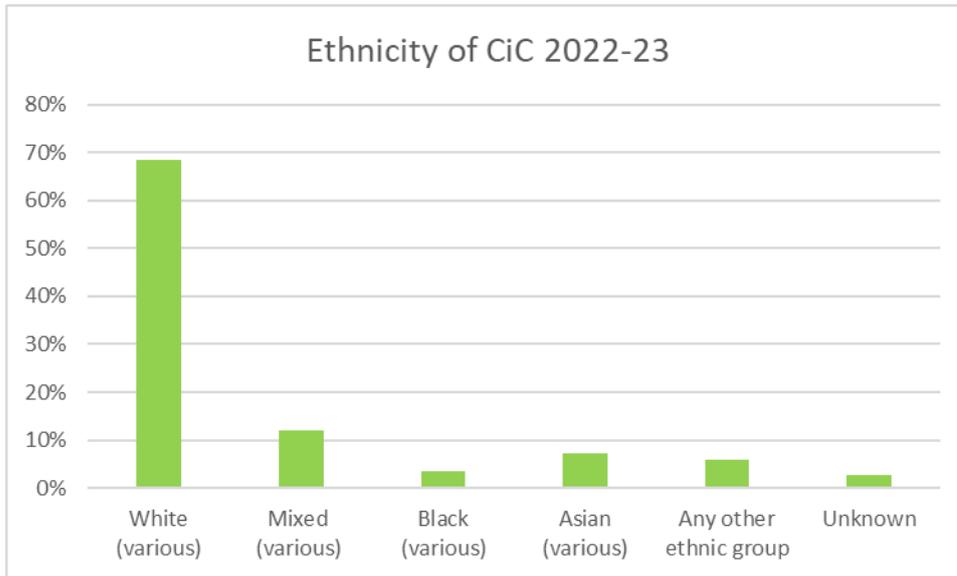
### 7.3 Graph 3: Age of CiC population



Source: Children's Social Care data powerbi

7.4 The above shows the age ranges of children in care within Bath and Northeast Somerset over a three-year period. This highlights the consistency over the years that most of the children in care are aged 10+ years. There has been an increase of 20 young people in the 16+ age range, this is due to the increase in unaccompanied asylum-seeking children as part of the national transfer scheme.

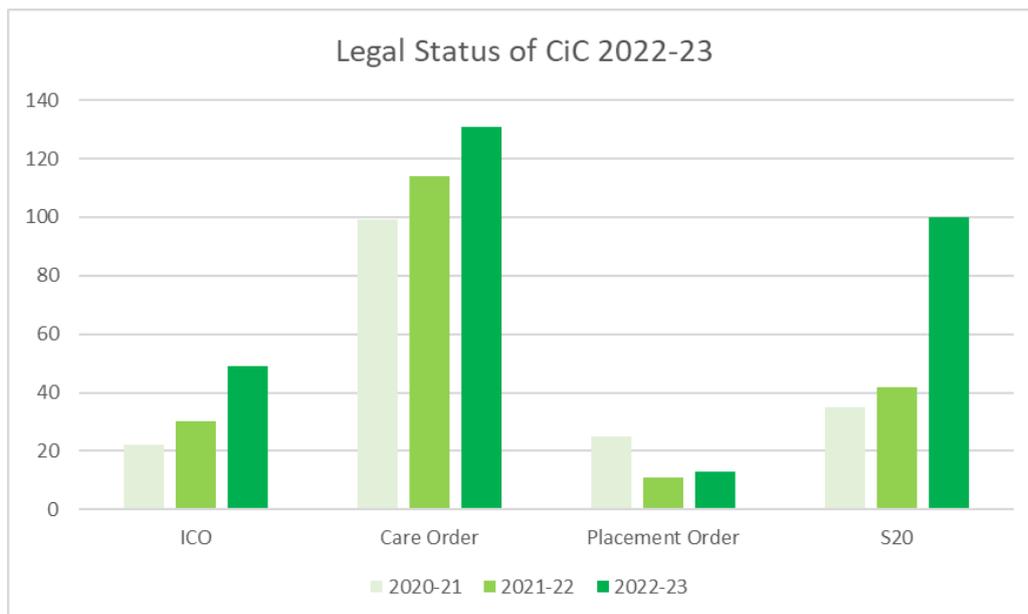
7.5 Graph 4: Ethnicity of CiC:



Source: Children's Social Care Powerbi

7.6 Most children in the care of the authority are of White ethnicity, almost 70%. The cultural and identity needs of CiC is an area that IROs consider and promote in their decisions or recommendations from a child's review. The ethnicity of the CiC cohort is mixed, as stated and includes a variety of ethnicities. The groupings have been compiled into six groups to prevent identification under GDPR and presented in percentages.

7.7 Graph 5: Legal status of CiC



Source: Children's Social Care Powerbi actual figures

7.8 The above shows that there has been an increase in CiC who have a permanence plan for the child to remain as a CiC. Plans for these children will be closely reviewed by their IRO, with reviews held at least once every six months. Children in long-term care benefit from the longevity of the IRO role's relationship, with IROs being able to bring to life a child's journey and ensuring their voice is heard, especially when changes in care arrangements are necessary.

7.9 The above shows that there has been an increase in CiC who have a permanence plan for the child to remain as a CiC. Plans for these children will be closely reviewed by their IRO, with reviews held at least once every six months. Children in long-term care benefit from the longevity of the IRO role's relationship, with IROs being able to bring to life a child's journey and ensuring their voice is heard, especially when changes in care arrangements are necessary.

7.10 There has been a slight increase in the number of CiC whose care plan is adoption, from the previous reporting period last year. This is to be considered along with CiC, who are being placed with a relative or connected person under an SGO, which can be seen in the reasons for children leaving care in Table 2. Age is a significant area that IROs will consider; if they identify a child has been left at risk of harm in the CP arena for too long, this will be raised directly with the social work team and the manager of the IRO service, any themes identified will be reported back to senior managers in children's social care.

7.11 Table 5: Ages and legal status CiC 2022-23

Age category	Interim Care Order	Full Care Order	Placement order granted	Accommodated under Section 20	Total
Under 12m	19	0	6	2	27
1-4 years	13	4	4	3	24
5-9 years	12	28	3	3	46
10-15 years	5	75	0	34	114
16+ years	0	22	0	56	78
<b>Total</b>	<b>49</b>	<b>129</b>	<b>13</b>	<b>98</b>	<b>289</b>

Source: Children's Social Care PowerBi Int Report

7.12 The above table shows the legal status and ages of children in care at the end of this reporting period on 31.03.2023. What is noticeable is a significant increase in children under 12 months made subject to interim care orders compared to the previous year. There were four in the previous reporting year for children under 12 months compared to the 19 reported in the table above. In addition to this, the number of 16+ children accommodated under section 20

rose considerably from 27 to 56. This is due to several factors, including the increase in UASCs allocated to the council, discussed later in this report.

7.13 There has been a slight increase in placement orders being granted for children, which is positive, given that they will now be placed for permanency with a new adoptive family. The IRO is involved intrinsically in this process, ensuring that any new placement is their forever home. Should an adoption placement not be located, alternative plans are considered via the reviewing process.

7.14 The figures in Table 5, include children with a disability and are likely to require an assessment by adult social care to consider what support they may need as they become adults. For these children aged 16+, IROs will continue to make referrals to the Adult Social Care transition panel. The panel must consider whether a young person is entitled to a transition assessment under the Care Act 2014. The assessment will consider the young person's needs regarding care and support post-18, including accommodation for all over 18. In this reporting period, IROs have identified delays in completing transition assessments, which has left, for some children, plans post-18 uncertain.

## 8. Children placed at distance from Bath and Northeast Somerset

### 8.1 Table 6: CiC placed Out of Area

<i>Type of placement</i>	<i>2022-23</i>
<i>Family</i>	3
<i>Foster Care</i>	134
<i>Residential / Children's home</i>	24
<i>Residential School</i>	1
<i>Mother and Baby</i>	3
<i>16+</i>	33
<i>Other</i>	16
<i>Adoption</i>	8

*Source: current year Children's Social Care collective data from back end of powerbi*

8.2 Local authorities are expected to place children in accommodation that meets the CiC needs and allows them to live near their family home. It is acknowledged that there is a national shortage of suitable placements for children; therefore, securing a placement within the local authority cannot always be achieved. In Bath and Northeast Somerset, there was an increase in the reporting period of CiC being placed in a provision which was out of the local authority and a considerable distance from their birth parents or corporate parent.

8.3 It is known from research that children's needs are better met within a family-type household unit, especially for younger children. However, some children need a residential placement or a residential school to meet their needs and

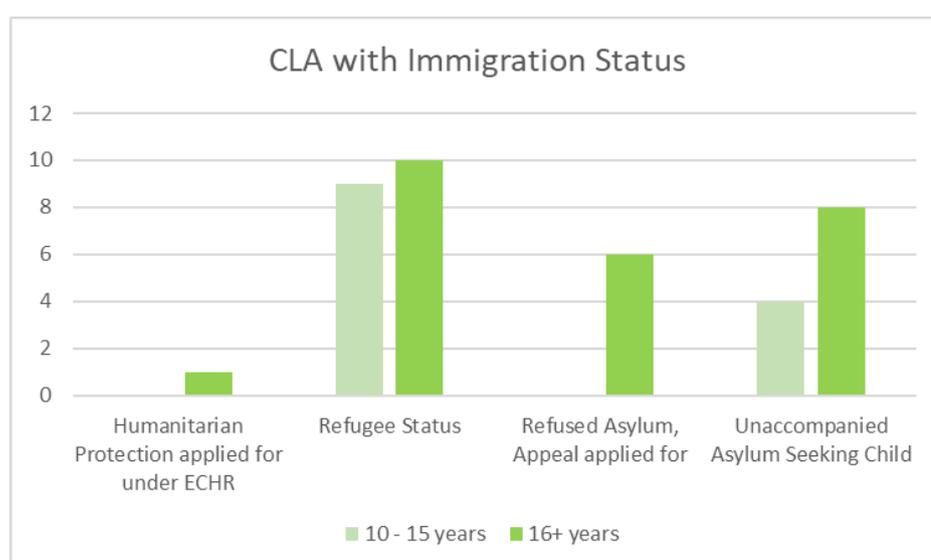
keep them safe. These types of placements will often be out of county and not in-house.

## 9 Unaccompanied, Asylum Seeking and Trafficked Children:

9.1 In the UK, a person becomes a refugee when the government agrees that an individual who has applied for asylum meets the definition in the Refugee Convention. In turn, they will 'recognise' that person as a refugee and issue them with refugee status documentation. Usually, refugees in the UK are given five years' leave to remain as a refugee. They must then apply for further leave, although their status as a refugee is not always limited to five years. Children become unaccompanied asylum-seeking children (UASC) if they do not have a parent or caregiver with them. Often a child can be brought into the country to secure asylum from an unrelated adult who will then abandon them.

9.2 In this reporting period, Bath and Northeast Somerset Council have seen an increase in the number of CiC seeking asylum or refuge. The placement of these children across the country is overseen by the National Transfer Scheme (NTS) protocol, which has been established to ensure the safe placement of unaccompanied children in the UK. In November 2021, all local authorities were given legal notice to accept transfer of children into their care, providing crucial placements and services for these children. The allocation numbers of children to local authorities across the country have increased, and within Bath and Northeast Somerset, the number has doubled. This figure will increase with conflicts predicted to escalate within the Middle East.

### 9.3 Graph 6: Immigration status



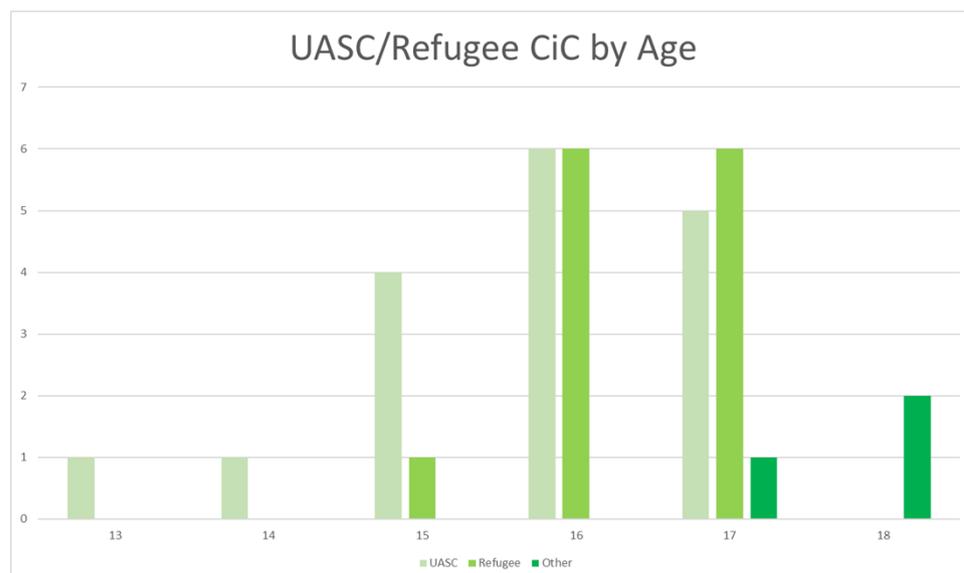
Source: Children's Social Care data powerbi annual IRO report

9.4 The graph above shows the significant increase in the number of CiC seeking asylum within Bath and Northeast Somerset. Thirty-two UASCs have been accommodated, an increase from last year's reporting period of eleven UASCs. The majority of UASCs are not placed locally or are already residing

in larger cities across the country, often a placement they have been in before Bath and Northeast Somerset became the corporate parent. A number of children who have a placement within the local area say they would like to move to larger cities where they can maintain contact with friends they already know or be part of the community they feel they can fit within. Many UASCs speak little or no English, which makes integrating into a predominantly white English-speaking area difficult. When UASCs are placed out of county in large cities, the vulnerability to them increases, especially around modern slavery and further trafficking. The increase in UASC has also increased travel burdens on the IRO service, affecting the service capacity. A UASC working group has been established to address the abovementioned issues. For B&NES, this is an issue that we will need to work creatively to ensure we can be as efficient as possible with our resources.

9.5 The IRO service has recognised the importance of continuing to develop the skills, knowledge, and expertise in working with the cohort of UASCs. IROs introduce themselves to the children and young people, providing translated documents that explain their role, how they can be contacted and the purpose of a child-in-care review. Minutes of the reviews are also translated into the first language. It can often be daunting for UASCs as they feel that the IRO is part of the system and feel threatened or at risk of deportation, so additional time is required to develop meaningful relationships. IROs will meet all children in person ahead of their reviews in order to reassure them and ensure the use of interpreters to enable the CiC to participate fully.

9.6 Graph 7: Ages of unaccompanied asylum-seeking



Source: Children's Social Care UASC tracker

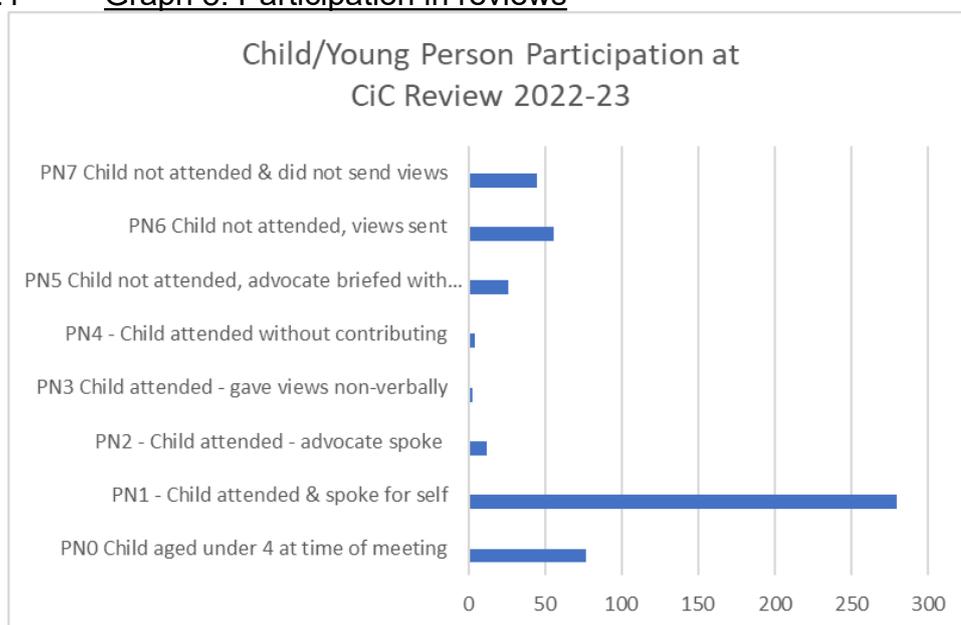
9.7 As advised in the reporting period of 2022-23, 32 unaccompanied children or children with refugee status were placed in the care of Bath and Northeast

Somerset. The majority of these children are older, between the ages of 15 & 18.

9.8 The number of UASC continues to grow and is anticipated to continue to do so. This has a significant impact on the IRO service and the IRO's ability to fulfil their statutory responsibilities. As a result and as already advised in this report, the SQA service requires additional capacity to support its work. The Service will also continue to work alongside other LA social care teams to consider the complexities of this cohort and how we best meet their needs.

## 10 Child-focused reviews, participation, and feedback

### 10.1 Graph 8: Participation in reviews



Source: Children's Services Data ICS system numbers of CiC

10.2 IROs oversaw 497 reviews in this reporting period, with 56% of reviews seeing a child attend and speak for themselves, have their advocate speak for them, or attend but choose not to contribute. Children aged four and under will continue to be seen by their IRO in their placement with their carers. IROs will observe the relationship between the child and carer, how at ease the child is in their environment and how the child interacts with other members of the family/household, recording this as the child's voice. Some children choose not to attend their reviews; whilst they are encouraged to attend, it is acknowledged that some children do not wish to attend, and the IRO service respects this. All CiC are sent a consultation document before their review and are offered independent advocacy by the IRO service as a matter of process.

## 11 CiC Voice and feedback:

**11.1** This area has not progressed as well as we hoped during the reporting period despite being recognised as a service priority. The Service can see that the child's voice is more evident in documents provided to the IRO and the IRO service is making a conscious effort to ensure that the child's voice is included in all review minutes. However, there is much more work to do in this area for the Service.

## **12 Dispute resolution and escalation:**

12.1 IROs continue to work together with social work teams and other professionals. Inevitably, issues do arise where IROs disagree with plans being proposed for children; they will always seek to resolve this at the lowest level, often discussing matters with the child's social worker in the first instance and the social work manager. IROs, as part of their day-to-day practice, will offer views, question plans and decisions being made for children. IROs encourage open dialogue with social work teams and promote the importance of regular contact with a child's social worker in between child-in-care reviews.

12.2 The dispute resolution protocol provides a framework for IROs to utilise when disagreements about plans for children have not been resolved between the IRO and Social Worker. The protocol has three stages: informal (IRO raises concerns directly with Team Manager responsible for child), formal (IRO has not been able to reach a resolution at the informal stage and so concerns raised with the relevant Head of Service for Children's Social Care) and Director level (in rare instances where resolution at formal stage hasn't been achieved and concerns relate to welfare and safety of the child, these will be escalated to the Director or Assistant Director of Children's Social Care). The escalation process is currently being reviewed after identifying several anomalies in practice and the policy is overdue its review date. It is important to acknowledge that the IRO role sits independently from Children Services in that they can escalate directly to CAFCASS if no resolution is reached within the process.

12.3 In the reporting period of 2022-23, there were approximately 52 informal escalations raised by a child's IRO, similar reasons as evidenced in previous reporting periods. Three noticeable themes are highlighted below-

- i.* Non-completion of Social Work pre-meeting report for a child's review. A pre-meeting report is required before the child in care review to provide evidence of how the child is doing and the progression of the care plan. This issue significantly impacted the Service provided to children in terms of care planning. Despite numerous informal escalations during the reporting period, it did little to change the practice. On several occasions, two or more child-in-care reviews had been held without the pre-meeting report being completed. Since this reporting period, the practice has improved, and this will be more evident in the next reporting period.
- ii.* Completion of needs assessment and pathway plan: IROs will make recommendations at every child in-care review about the need for relevant children to have an updated needs assessment and/or pathway plan. At

subsequent reviews, where there is no evidence the recommendations have progressed, the IRO will informally raise and seek a timescale for completion by the social worker's manager. The lack of pathway plans significantly impacts post-18 children in care. This creates uncertainty around their post-18 accommodation, etc. Children in care are to have their final child-in-care review 4-6 weeks before their 18<sup>th</sup> birthday to ensure recommendations from previous reviews have been completed.

- iii. Suitability of placement meeting the CiC needs, whether out of county or being close to education.

12.4 In the reporting period of 2022-23, there were seven formal escalations made by IROs due to unresolved informal escalations and the level of concern identified. A formal escalation can proceed without instigating the informal part, generally due to immediate concerns of safeguarding and planning. In data report systems, there is no real control over the raised/resolved dispute dates, leading to inaccuracies in reporting; what is acknowledged is that IROs have raised several escalations without resolutions reported, as evidenced on a child's electronic file. Most of the data previously presented to the scrutiny committee was collated into a manual spreadsheet tracked by the IRO Manager. This practice has ceased and movement to a child's electronic file began in the reporting period.

### **13. Quality Assurance by the IRO**

13.1 IROs must maintain close oversight of the care planning for children and young people in care; this means that they must keep oversight of the progress of children in care in between their reviews. Social Workers must inform a child's IRO of significant changes/events in the child's life. Any proposed changes in the care plan should be discussed with the IRO before implementation.

13.2 The IROs ensure the minimum quality assurance around the child's care planning by completing the quality assurance and recommendations document on a child's file following the review. No midpoint reviews are undertaken on a CiC electronic file to ascertain the progression of care planning. This leaves the potential for drift, especially around transitional stages from children to adult services, requiring a pathway plan and multi-agency cooperation.

13.3 The IRO service manager reports to the Service Improvement Board every quarter, this includes reports on CiC and the IRO role. This presents an opportunity for the Service manager to be held to account for service delivery and raise issues that impact the Service's ability to deliver as effectively as it would wish.

## 14. Areas for development within IRO service

14.1 Each year, the IRO service identifies areas of practice that require further development or improvement, updates to the progress of these are set out below.

Area for development/ improvement	Update
Feedback from children, young people, their families, and carers. (Outstanding from 2019)	The child's voice is more evident in documents provided to the IRO and the IRO, including the child's voice. The child's voice allows for a measure in terms of being listened to and identifying service areas. Feedback forms will be developed and disseminated with minutes of review to advise on the process and IRO. This will further include how to complain about the IRO service and rating their review.
Children in care will have access to life story work delivered in an age-appropriate way. (Outstanding from 2019 – 2021)	The IRO service is awaiting the completion of a life story policy by Children's social care. This work has been outstanding since 2019 and the IRO manager has raised it at the children's social care improvement board.
Improving the number of children in care review records disseminated within 20 working days of the child's review, achieving at least 85% compliance in this area.	As in previous years the target of 85% has not been met, the reporting period for 2022-23 being 46%. The current performance is still low and acknowledged, given the service deficit.
IRO's to have input and oversight of any plans for reunification.	This ongoing process appears to work well at the early reporting stages. IROs are supporting this project.
Themed audits are to be undertaken, identified by the themes emerging from the quality assurance activity within the Service and the data reports. (Area for development 2021-2022)	The thematic audit process is underway after successful recruitment to the vacant post.

## **15. Areas of focus for IRO Service**

15.1 For the reporting period 2023-24, the interim manager's focus has been to ensure every child in care has an allocated IRO when they enter the process, regardless of IRO capacity. The Service has also been focused on ensuring social work pre-meeting reports for CiC reviews and pathway plans are available. Timely provision of both documents is essential to support and map a clear path for CiC.

15.2 Improving timeliness of reviews and ensuring the child's records are updated is improved. This will assist the IRO role in meeting its statutory function more effectively. The quality assurance of midpoint reviews is an aspect of CiC, which is currently under development, this would enable the Service to tackle better drift and delay in the transition to adult services.

15.3 The escalation protocol/ policy is being reviewed to ascertain its effectiveness and how it can be improved to ensure that data is better captured and unresolved problems are addressed and recorded on the CiC files.

15.4 The CiC voice is critical to service development and improvement. The SQA Manager will continue to ensure innovative ways to capture this feedback are delivered within the service area.

15.5 This is a time of increased service demand for children's social care, coinciding with difficulties in recruiting social workers. While being mindful of this, the quality assurance development aspect and scrutiny of CiC and their plans must continue to ensure the 'corporate parent' is meeting its statutory responsibilities. The relationships between the IRO service and other areas across the council remain positive, and what is to be highlighted is the dedicated relationships between social workers and the CiC they work with, as are the relationships between CiC and their IROs.

M.Mckay  
03.11.23