
**Bath & North East
Somerset Council**

Improving People's Lives

**Independent Reviewing Officer (IRO) –
Annual Report**

1st April 2024 – 31st March 2025

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1. Introduction and purpose of annual report

- 1.1 This report is produced to provide the Director for Children's Services, the Lead Member for Children and the Corporate Parenting Board with information pertaining to the children that are 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 that are placed in the care of a local authority. The guidance seeks to ensure improved outcomes for children in care in order that they can reach their full potential. Section 7, paragraph 11 sets out that the manager of the IRO Service must provide an annual report on the delivery of the IRO Service which can then be scrutinised by members of the Corporate Parenting Board.
- 1.3 This annual report provides information on the profile of the children for whom the Local Authority is corporate parent and how the IRO service maintains oversight of the plans for these children, with IRO's monitoring how children's needs are being met and prioritised. The report will highlight where IRO's have offered challenge to the local authority in terms of its duties to children in care and the aspiration and objectives of the IRO service for the year ahead.
- 1.4 Following presentation to the Health and Wellbeing 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 1st April 2024 to 31st March 2025. It has been agreed that future reports will be completed and presented at the start of quarter two, July 2026. This will allow for areas highlighted in the report to shape the plans for the IRO service and ensure any areas for development are taken forward in a timely way.

3. The legal, statutory and national context of the IRO role

- 3.1 The appointment of an Independent Reviewing Officer (IRO) for a child in 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 functions of the local authority in terms of case management and review for children in care.
- 3.3 The Care Planning, Placement and Care Review (England) Regulation 2010 apply specifically to children who are in the care of a local authority. The objective of these Regulations is 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.

IRO core responsibilities:

- **Chairing statutory reviews:** lead a review meeting for all children in care at required intervals, ensure care plans are up to date, specific and address the child's needs
- **Promoting the child's voice:** Ensure the child's wishes and feelings are heard and reflected in planning and build positive, trusting relationships with children and young people
- **Quality Assurance and Oversight:** Monitor progress against care plans and statutory timescales, identify drift or delay and challenge poor practice using the dispute resolution protocol.
- **Safeguarding and escalation:** Act promptly if concerns arise about a child's safety or welfare, escalate unresolved issues to senior managers or, if necessary, to CAFCASS.

4. Bath and North East Somerset Council as 'Corporate Parent'

4.1 All Officers and Councillors of Bath and North East Somerset have a duty to ensure that the needs of children in care are being met, and children grow up feeling loved, cared for, safe and have the same opportunities as their peers. There should be a commitment from all members of the council to advocate for the needs of children in care, promote and provide opportunities that allow children to develop and grow and to overcome the adverse experiences they may have experienced in their life before coming into care. *Local Authorities that have a strong corporate parenting ethos recognise the care system is not just about keeping children safe, but also to promote their recovery, resilience, and wellbeing* (Applying corporate parenting principles to looked-after children and care leavers, Feb 2018).

4.2 In March 2025, amendments were made to the Children's Wellbeing and Schools Bill. The corporate parenting duty being expanded to encompass government departments and public organisations, including Ofsted, NHS services, educational institutions (schools and colleges), the Youth Justice Board, and the Care Quality Commission.

4.3 Under these amendments, relevant bodies must:

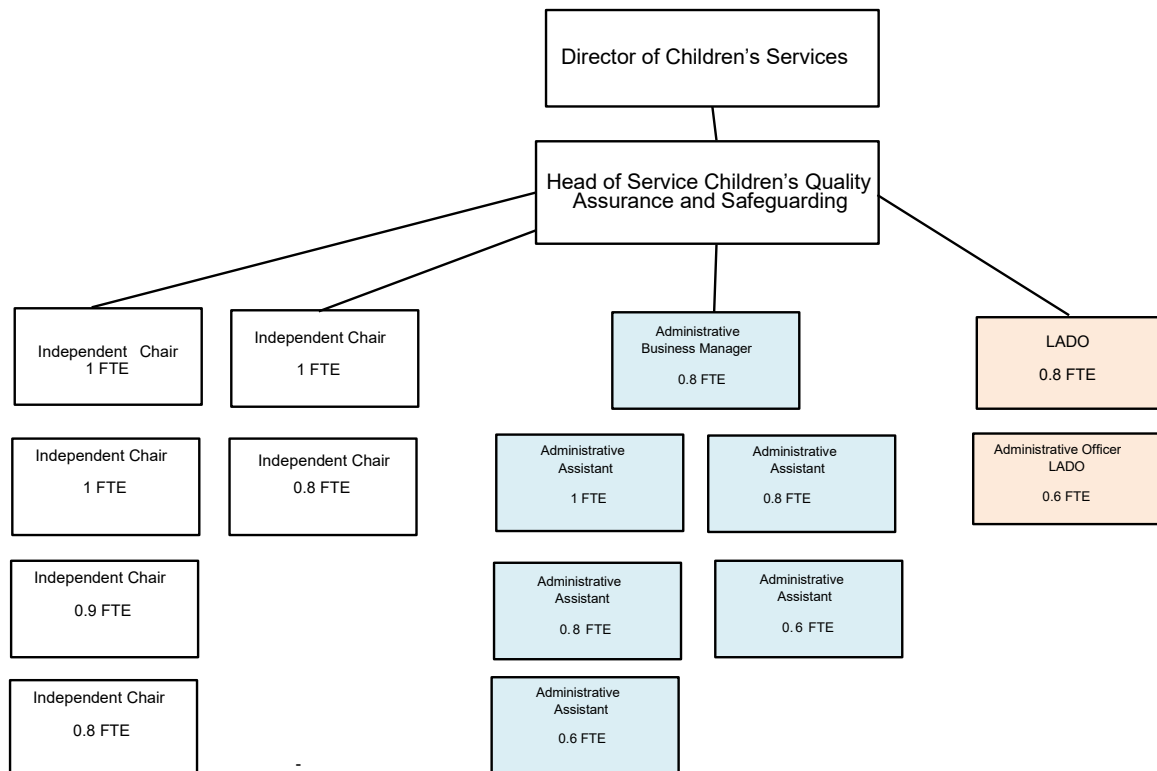
- Maintain awareness of factors affecting the wellbeing of looked-after children and care leavers up to the age of 25.
- Assess and deliver services and support aimed at promoting wellbeing and enhancing employment opportunities.
- Facilitate participation in activities that can positively impact life chances.
- Work in partnership with local authorities and comply with Department for Education guidance.

4.4 Within Bath and North East Somerset, the Corporate Parenting Group (CPG) is open to all Councillors, and all members of the CPG must ensure they have a

comprehensive overview as to the progress of children in 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 have opportunity to attend. The manager of the IRO service attends CPG to support its members, to ensure any areas raised by CPG are considered by the IRO service and influence practice and planning for children in care.

5. Bath and North East Somerset Council IRO Service

5.1 Structure of Children’s Quality Assurance and Safeguarding Service



5.2 The IRO service remains within the Children’s Quality Assurance and Safeguarding Service. During this reporting period, the Head of Service was reporting to the Director of Children Services although retained links with the Education and Safeguarding Directorate. Although outside of this reporting period, a decision was made in September 2025 that the Head of Service would permanently report to the newly appointed Director of Children’s Services.

5.3 The service continues to have three core areas of business.

Independent Reviewing Service: Appointment of an Independent Reviewing Officer (IRO) for children and young people in the care of the local authority is a statutory requirement under Section 118 of the Adoption and Children Act 2002. All local authorities are mandated to designate an IRO to safeguard the interests of children throughout the care planning process.

Child Protection Conferences: Leading Child Protection (CP) Conferences within statutory timescales. The service is responsible for reviewing and monitoring the progress of all children subject to a child protection plan. Timeliness of conferences and the duration of child protection plans are critical performance indicators that contribute to statutory reporting and regional benchmarking.

Allegations Management: A Local Authority Designated Officer (LADO) is assigned to manage allegations of abuse against individuals in positions of trust working with children (aged 0-18). The LADO ensures timely responses to such allegations and oversees employer-led investigations where threshold is met, always prioritising the child's welfare. The role of the LADO is defined in 'Working Together to Safeguard Children' (2018, Chapter 2, paragraph 4) and remains subject to local authority duties under Section 11 of the Children Act 2004.

- 5.4 In Bath and North East Somerset, we continue to have Independent Chairs whose role combines the function of the IRO and the delivery of child protection conferences. Following the introduction of a designated Local Authority Designated Officer in October 2022, Independent Chairs no longer routinely fulfil the requirements of this role, although provide duty cover when necessary.
- 5.5 Towards the end of Q3 (December 2024), the service experienced some disruption following the departure of two Independent Chairs. Their reasons for leaving the service were related to personal reasons and professional opportunity. In Q4 (January 2025) a full-time Independent Chair on a fixed term contract also resigned having sourced a permanent post in another Local Authority. After successfully recruiting to one post, the service had to fill the remaining vacancy by use of an agency worker. Any disruption to the staffing structure can have a significant impact due to the size of the service, children cannot be easily reallocated an IRO due to the volume of children already allocated and for some children this means short periods of time without an IRO and the Head of Service having oversight of these children.

6. South West Regional IRO group

- 6.1 The South West Regional group continues to meet virtually and in person and includes those with management responsibility for the IRO service in their area. Unfortunately, it has not been possible for Bath and North East Somerset to have regular representation at these due to conflicting demands, however information from the meetings is disseminated and assists with understanding regional themes and practices related to children in care.

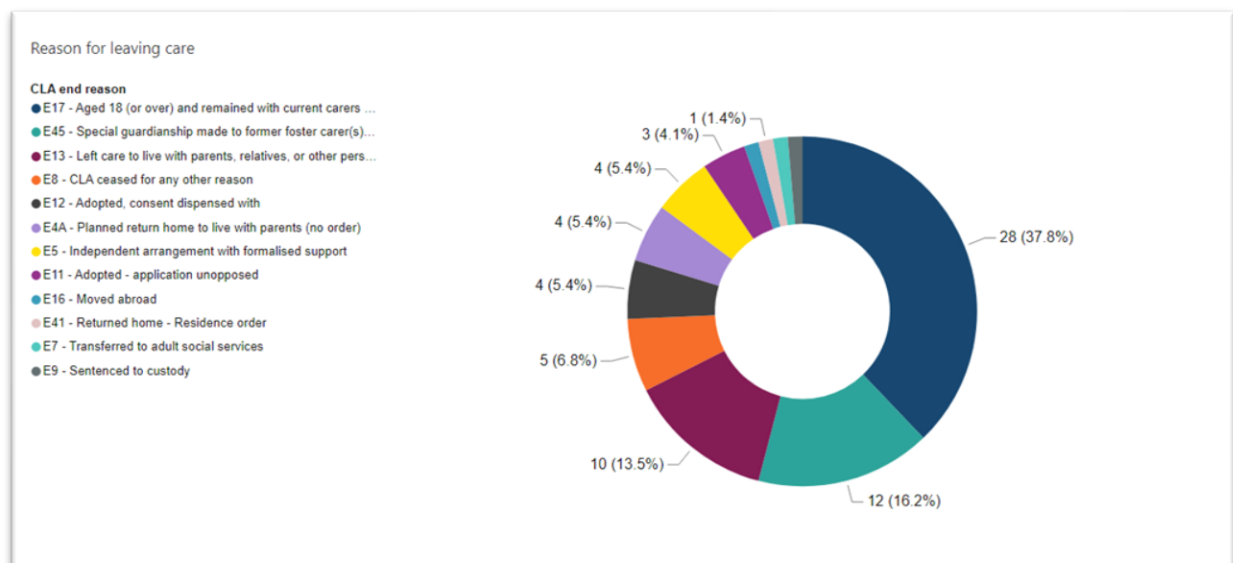
7. IRO caseload and service performance

Table 1: Number of children in care over five year period

	March 2025	March 2024	March 2023	March 2022	March 2021
No. Children in Care	220	217	228	197	181
CLA start	76	77	95	77	52
CLA end	73	91	65	61	54
% Increase of children in care from previous year	1.4	-4.8	16.3	+9	0

7.1 The number of children in care in this reporting period has remained relatively stable with only a 1.4% increase on last year. The numbers of children entering care and leaving in this reporting period have been aligned

Graph 1: Reason for a child leaving care



Taken from Power BI
CSC. IRO reportV4

Leaving care reason

7.2 As the above shows, the cohort of children leaving care when turning 18 equated for 37.8% (28 children) of the entire cohort. IRO's ensure that plans post 18 are being considered from a child's 17th birthday and earlier if it is likely that as an adult there will be a need for care and support. The IRO service strives to hold a final child in care review four weeks prior to the child's 18th birthday so that IRO's, those caring for the child and most importantly the child themselves has clarity as to what post 18 plans will entail.

7.3 Of the 14 children (E13 and E4A above) that left care to live with a parent;

- Two returned home following a positive reunification assessment and transition plan,
- Five ceased to be children in care at the conclusion of care proceedings, these children having been in their parents care throughout proceedings.
- Two children came into care following difficulties arising with family dynamics and both children returned home of their own accord.
- Three children came into care under Police Powers of Protection and left care within seven days to return to parents care or a family member.
- One child turned 18 but reason for leaving has been inaccurately recorded
- One child returned home for a short period whilst a new care arrangement was found.

Reunification

7.4 Reunification has become an area of focus across Children's Services in this reporting period, two children have returned home following a positive reunification assessment, but the Care Order has remained in place, these children remain children in care until the Order is discharged. IRO's monitor through the review process the necessity of a Care Order and make recommendations about its discharge.

7.5 Reunification is an area IRO's continue to give more consideration to, recommendations from reviews will include consideration of a reunification assessment should this be in line with a child wishes and there is sufficient evidence to suggest parental factors have been addressed or are being addressed.

7.6 No changes in care should take place without the IRO having the opportunity to scrutinise the assessments and give endorsement of the plan. If an IRO did not support the proposed care plan for the child, they would seek to address this directly with the social worker and their manager, if they remained concerned, they would utilise the dispute resolutions protocol (DRP) and inform their manager. There was no use of the DRP in this reporting period due to change in care plan.

Special Guardianship Order

7.7 There were 12 children who were made subject to a Special Guardianship Order to a former foster carer who was a relative or friend. These children were all in care but placed within a kinship care arrangement which is where they remained at the conclusion of care proceedings.

Adoption

7.8 Seven children in this reporting period left care having been adopted, all these children however were in care for over two years prior to being adopted, with one child having been in care for four years. When children move to live with their adopted families everyone expects there to be a period of transition and a period where children become familiar with the adults who it is hoped will be their forever family. IRO's are sensitive to the needs of all involved in adoption and whilst not wanting to rush adopters to make their application for the Adoption Order, would

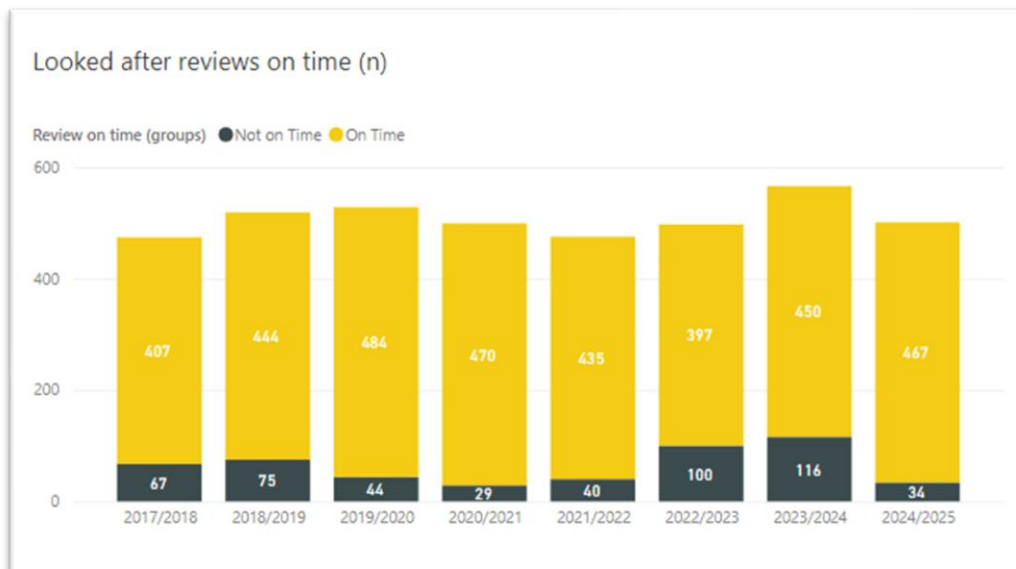
begin to question and reflect with adopters and social workers any delay in the Order being sought. Delays in seeking adoption orders have been a result of a child's complexity of need, adopters wanting assurances as to support plans before a child ceases to be a child in care and at times social work capacity to support the filing of Annexe A (A report prepared for Court that sets out the child's welfare and suitability of adoption).

Custodial Sentence

7.9 One young person (Child Y) in care under Section 20, voluntary agreement, left care as they received a custodial sentence. A child will only remain a child in care when receiving a custodial sentence if there is a legal order in place underpinning this. Statutory guidance sets out the responsibilities of local authorities towards former looked after children in custody¹.

7.10 Child Y was known to the Youth Justice Service and was discussed at the Custody Review Panel, which the author of this report sits on. Based on His Majesty's Inspectorate of Probation (HMIP) Thematic Inspection Recommendations, it is advised that multi agency partnerships undertake learning reviews for any children sentenced to or remanded to youth detention accommodation. As a result of Y's custodial sentence, the Bath Community Safety and Safeguarding Partnership (BCSSP) undertook a review into Child Y's journey. The review highlighted areas of practice that could be strengthened including the use of professional's meetings with IRO input.

Graph 2: Timeliness of child in care reviews



Taken from Children's Social Care Performance - PowerBI

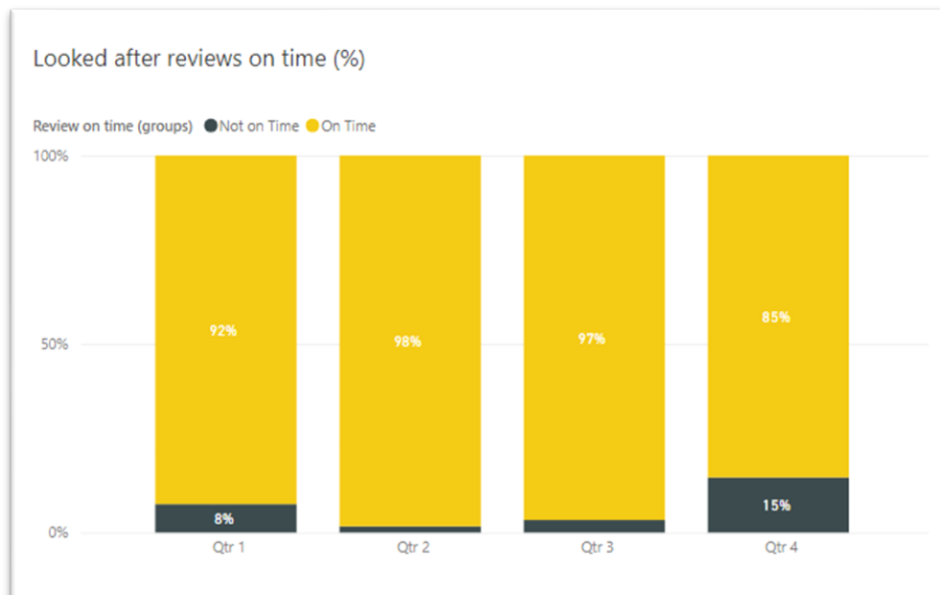
7.11 In this reporting period, IRO's led 501 child in care reviews, 87% (467) of which were within statutory timescale. A child coming into care, will have their first review within 20 working days, their second review within three months of

¹https://assets.publishing.service.gov.uk/media/5a7cb1c8ed915d6822361f73/Former_looked_after_children_in_custody.pdf

their first and subsequent reviews at six months intervals. Unplanned changes in care would also lead to the IRO triggering a new review within 20 working days.

7.12 The quarterly performance for review timeliness highlights that Q1 and Q4 saw the most reviews out of timescale, those reviews that didn't proceed as planned in Q1 were related to staff sickness, with an IRO being off work for all of Q4 (2023-2024) which resulted in some children experiencing a significant delay in their review being held. The dip in timeliness in Q4 correlates with several IRO's leaving the service at the end of Q3, start of Q4, which led to 74 children requiring reallocation within the service. As a small service, this number of children is difficult to absorb and where children were reallocated promptly, conflicts in diaries meant that not all reviews could proceed as planned. The challenges as to the allocation of an IRO for children in care during this time was highlighted to the Director of Children's Services.

Graph 3: Child in care reviews on time per quarter



Taken from Children's Social Care Performance – PowerBI

Midway reviews

7.13 Alongside statutory child in care reviews, the IRO service introduced Midway Reviews (MWR) for all children in care as of January 2024. These were introduced to provide a formal mechanism in which IRO's review the progress of a child's care plan in between statutory reviews. Whilst IRO's within Bath and North East Somerset maintain strong oversight of the care planning for those children which they are allocated, undertaking a MWR ensures minimum levels of scrutiny and strengthens the IRO footprint within a child's record. The implementation of MWR's allows for prompt identification of any drift or delay in care planning which is a fundamental aspect of the IRO role. IRO's are required to monitor the progress of the child's care plan throughout the child's journey through care and not just at statutory reviews.

7.14 MWR's are completed three months following the second child in care review and subsequent reviews. The IRO will undertake the review as a paper based exercise, however, should the IRO identify the need for clarification they will have a discussion with the child's social worker. In some instances, the IRO may wish to speak with the child, their carer or a specific family member. The IRO will capture these discussions within the MWR record. Once completed, the MWR will be shared with the social worker and their manager for their consideration and comment, with a copy of the review placed on the child's file.

7.15 When introduced, it was not envisaged that a MWR would be an onerous task however IRO's reported challenges in completing these due to information not always being readily available and therefore IRO's having to meet with social workers routinely to complete these. In Q4, it was agreed with the Director of Children's Services that MWR's would be paused due to level of activity required to complete them and the need to prioritise the statutory element of the IRO role. At the time of writing, MWR's have not been reinstated, however the service have been considering how MWR's could be used in a more targeted way as opposed to them being undertaken for all children in care i.e. completed where placement stability is an area of concern, where reviews identify lack of progress or care plans not being progressed, where there are identified concerns about a child's needs and levels of support required. At the time of writing, it is envisaged MWR's will be reinstated at the start of Q4 (25/26).

Social Work reports

7.16 The completion of social work reports has been an area for improvement throughout this reporting period, with IRO's raising these are not done within three working days before a review and there are instances where reviews are being held without a social work report. This is in breach of statutory expectations and has been an area of social work practice the IRO service has highlighted to senior managers within children's social care. In June 2024 an audit undertaken by the Head of Service looked at all child in care reviews held over a two week period to capture timeliness of social work reports and to see how many were completed three days ahead of the review as set out within statutory guidance. Of the 26 reviews, 77% had a report for the review, only 38% of these were completed three days prior to the review taking place. This has been a reoccurring area discussed at Service Improvement Board, Head of Service liaison meetings and with the Director of Children's Services. Currently there is no data report for this area of practice, IRO's therefore continue to address on an individual basis with social workers and their managers. Internal audit highlighted this area of practice when an audit of the IRO service was undertaken in Q4 (see section 14).

Table 2: Distribution of child in care review records

Quarter	% on time
Q2 (July-Sept)	42
Q3 (Oct – Dec)	35
Q4 (Jan – March)	44

7.17 The statutory guidance sets out that following a child's review, the IRO should provide a written record of the recommendations within five working days, with a full record of the review being distributed within 20 days. The monitoring of review record timeliness has been in place since 2021-2022 and a target of 85% of review records being sent in time was set for the service at the start of 2023. The tracking of review records is through the CLA tracker which is overseen by the IRO administrator and Admin Business Manager, revisions were made to the tracker at the start of this reporting period.

7.18 IRO's have monthly supervision and the performance data around review timeliness and completion of records is discussed. IRO's are transparent about the challenges they face in completing their written work in a timely way, this is also not unique to Bath and North East Somerset as other IRO managers across the south west have shared this is an area of performance requiring improvement within their service also. IRO's are very alert to the requirements placed upon them and want to complete records in a timely way, but the complexity of their role and competing demands are a barrier. The service has been given the opportunity to use magic notes as of Q3 of this current year (2025-2026), whilst early into its use it is believed these technologies will improve timeliness in this area.

7.19 Weekly completion sheets had been introduced in 2023-2024 as a way of gaining an understanding as to when reviews are being held and future dates, with this approach being felt to assist in capturing data more accurately. However, when this process was reviewed at the start of this reporting period, it was felt this process created additional work for IRO's and the data could be obtained through other systems and processes, the decisions was therefore taken to stop this practice.

8. Profile of children in care in Bath and Northeast Somerset on 31 March 2025

8.1 Nationally: To assist with the perspective of Bath and North East Somerset's profile of children, a summary of national trends needs to be understood. In 2025, there were 81,770 children in the care of local authorities in England, a 2% decrease on last year (1,760 children). This is a rate of 67 children in care per 10,000 children.

8.2 Of the children in care across England, males are slightly over represented at 56% with females at 44%. Children in care, across England are primarily from an older demographic. Over the last five years, whilst the overall numbers of children in care have increased (by 1%) the numbers of children aged under five have decreased – under 1s decreased by 8% and those aged one to four years decreasing by 14%, the numbers of children aged 16 years or over have decreased by 17%².

8.3 Children from mixed ethnic groups were over represented and children from Asian ethnic groups were under represented in the child in care population compared to

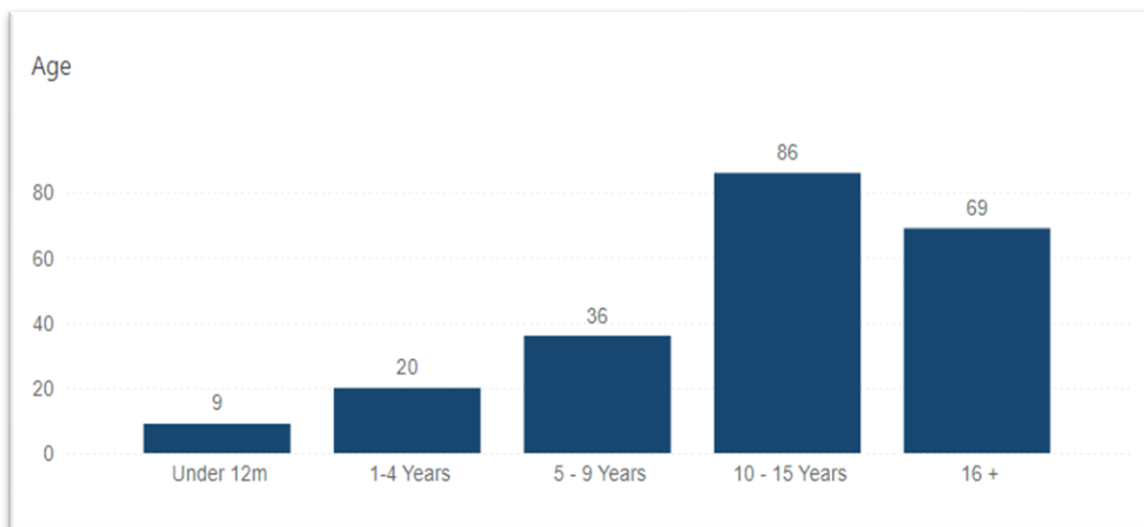
² <https://explore-education-statistics.service.gov.uk/find-statistics/children-looked-after-in-england-including-adoptions/2025>

the overall child population. Children of White ethnicity accounted for 71% of children in care, 11% were Mixed or Multiple ethnic groups, 8% Black, African, Caribbean or Black British, 5% were Asian or Asian British, 4% other ethnicities, 1% had no recorded ethnicity.

8.4 Children in care were primarily in care because of abuse or neglect (67%), with a child's disability accounting for 2%, parental illness or disability 2%, Family dysfunction 12% and 9% absent parenting. In 2025, most children in care were looked after under a Care Order (75%), 19% of children were voluntarily accommodated under S20 and 6% under a Placement Order.

8.5 Locally: In Bath and North East Somerset as of 31st March 2025, there were 60 children in care per 10,000. This year, in Bath and North East Somerset, 54% of children in care were male (down from 62% last year) and 46% female (increase of 9%).

Graph 4: Ages of children in care

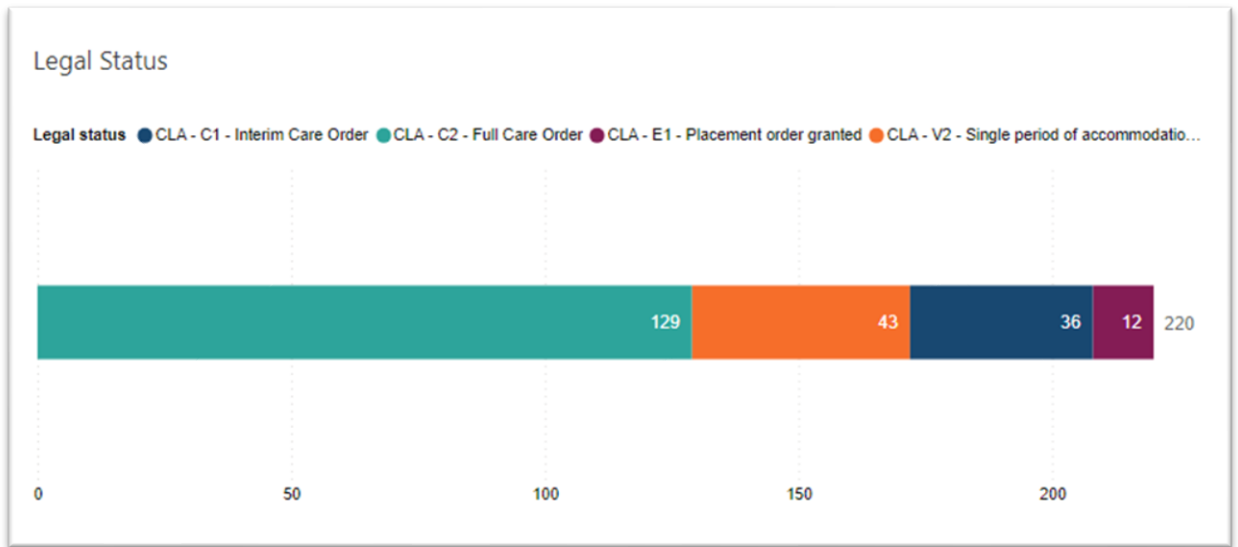


Taken from Power BI
CSC. IRO reportV4

8.6 70% (155) of the child in care population in Bath and North East Somerset are over 10 years old, with 39% (86) aged between 10-15 years old and 31% (69) of children 16 - 17 years old. Children under 12m are the smallest cohort, accounting for 4%. The age of children in care has remained relatively stable for the last five years and is aligned with national data for England.

8.7 As seen in England's end of year statistics, 74% of children in the care of the local authority identified as White, 13% were Mixed or Multiple ethnic groups, 4% Black, African, Caribbean or Black British, 5% Asian, 1% other and 1% not known/not recorded. 8% (18) of children in care at year end were Unaccompanied Young People of which 94% (17) were 16+.

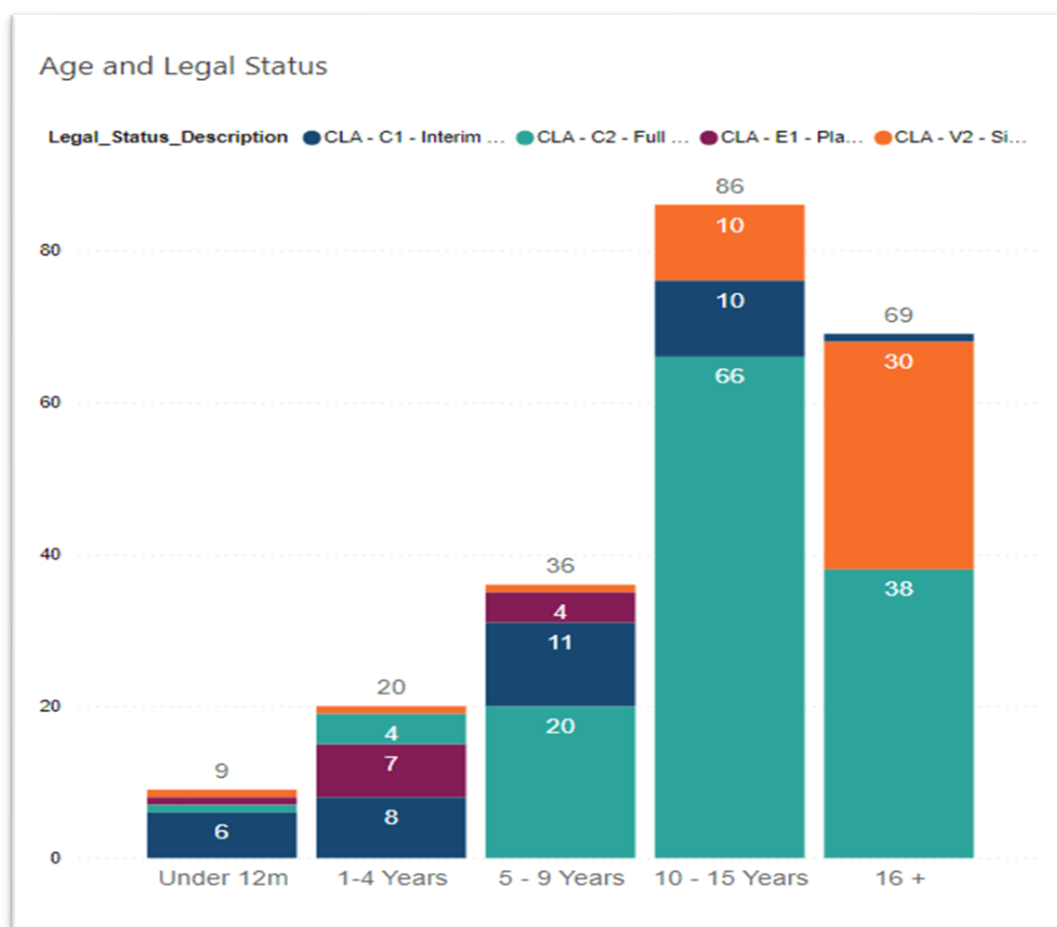
Graph 5: Legal status of children in care



Taken from Power BI CSC. IRO reportV4

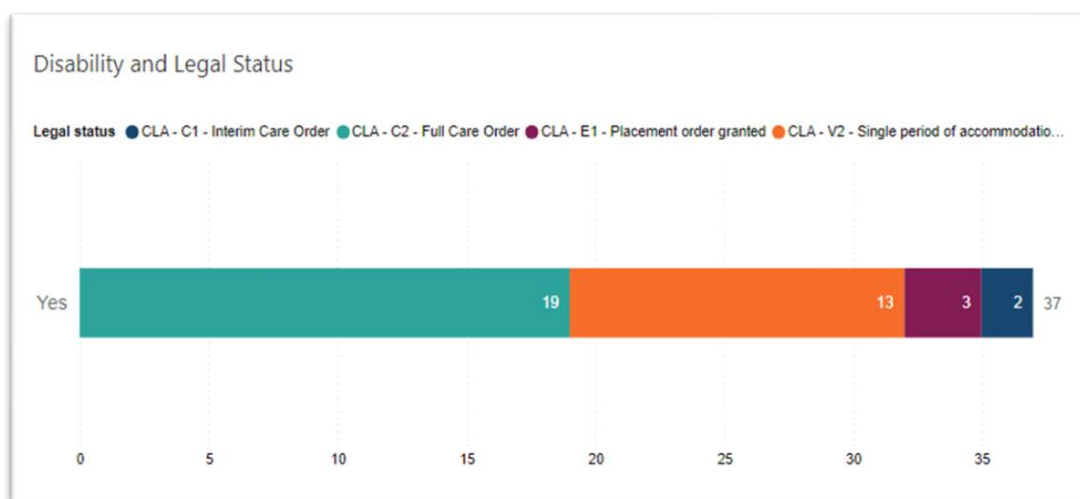
8.8 The legal status of children in care within Bath and North East Somerset continues to follow the trajectory seen over the last four years, with 59% of children in care subject to a Care Order and 20% in care under S20 (voluntary agreement). 16% of children are in care subject to an Interim Care Order, for these children permanency has not yet been achieved, and the Court will retain oversight until final decisions within the care proceedings are reached. Children subject to a Placement Order are low in numbers, accounting for 5%.

Graph 6: Age and legal status of children in care



8.9 The above graph shows the ages of children in care and their legal status, this shows that 56% (123) of children between the ages of 5 – 17 years old have a care plan that currently recommends they remain in care, and a Care Order is in place. There are 20 children who are aged between 5-9 years old subject to a Care Order of which 7 (35%) are placed with a connected person, which for the majority are blood relatives. The four children aged 1-4 subject to a Care Order are all placed with a connected person. A Care Order allows a Local Authority to share parental responsibility and is usually granted to protect a child from risk or abuse, it would appear this legal framework is being made to secure a child’s care arrangement with a connected person by ensuring support continues to be provided by the Local Authority. IRO’s should be robustly reviewing the plans for these children and any proposed legal order. It is positive that children are remaining with those familiar to them, however state intervention is very intrusive for a child (and their carers) and should therefore only be in place where entirely necessary. This is an area that requires further exploration, looking at all children in care under a Care Order placed with a connected person (family or friend) to understand the rationale for the legal order and the trajectory of this legal framework.

Graph 7: Disability and Legal status



8.10 17% (37) of children in care were deemed to have a disability. Of these children, 35% (13) were in care due to their disability and under a voluntary agreement. Three children were subject to a Placement Order, meaning adoption was the care plan at the conclusion of care proceedings. 54% of children with a disability were subject to a Care Order, these children will likely remain in the care of the local authority until adulthood.

8.11 Where children are deemed likely to have care and support needs as adults, the IRO will make clear recommendations at the child's review about the need to refer the child to the transition's panel and provide a clear direction as to the timescale for this. Whilst IRO's see most children discussed at panel in a timely way, IRO's continue to have concerns about the plans for these children post 18, often IRO's not having assurances as to plans at the child's final review. Where this arises, IRO's will raise their concerns with both children and adult social care. For children whose needs post 18 require assessment by adult social care, the IRO will invite the adult social worker to attend the final child in care review.

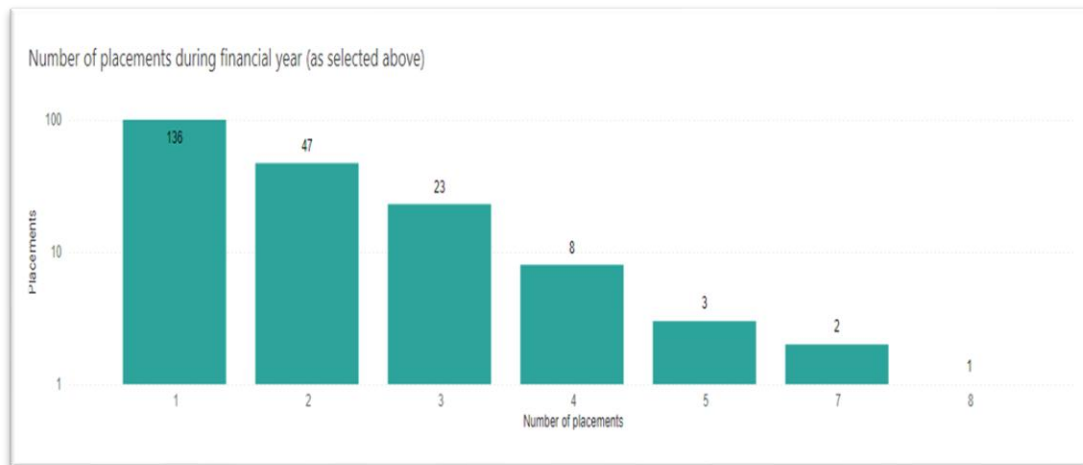
9. Placement of children in care

9.1 Local authorities have a statutory duty to place children in care as close to their home communities as possible, unless this were not deemed to be in the child's best interest. The principle when placing children is to place them within 20 miles of their family and support networks. When placed at a distance from family and their local community, children can feel cut off, estranged, experience disruption within their education and lose their confidence and social networks, impacting on their overall wellbeing. Nationally there are challenges in local authorities having sufficient placements locally, as such placement searches are extended and children are too often placed beyond 20 miles from what is familiar to them. In Bath and North East Somerset, of the 220 children in care at year end, 137 were placed beyond 20 miles from home.

9.2 The children's transformation programme includes a sufficiency project focusing on improving the local authorities fostering sufficiency, 16+ accommodation for

care experienced young people and the potential for the local authority to have its own children's home.

Graph 8: Placement stability



9.3 Placement stability has become an area of focus in this reporting period with 37 children experiencing 3+ moves within the 12 month period. Changes in care, whether planned or unplanned are disruptive for a child and should be prevented at all costs. IRO's expect to see responsive action by children's social care where carers express worries or difficulties in caring for a child. Where there are concerns about the stability of a placement a stability meeting should be held so concerns can be addressed and support identified to prevent a care arrangement ending. IRO's should be invited to attend stability meetings, however in this reporting period IRO's have shared they do not consistently get invited/notified of these meetings, when they do, they prioritise their attendance and contribute information to support the plans developed. Often, IRO's have been the consistent person for the child since entering care, for children who have experienced multiple moves, the IRO can provide insight into the precipitating factors and the child's journey to date. The IRO attending stability meetings and providing a narrative of the child's experiences assists in develop plans that promotes the child's current needs and allows the IRO to review and monitor how plans are progressing and what difference support is making.

9.4 Given the challenges with placement stability and sufficiency, the IRO service has seen children placed in a residential setting rather than a foster placement, which has been the preferred option. This is not unique to Bath and North East Somerset as again features nationally.

Residential care arrangements

9.5 Children placed in residential placements are subject to further scrutiny through the high cost placement meeting, now known as the Placement Support and Oversight Group (PSOG). The Head of Service for Children's Quality Assurance and Safeguarding attends these meetings and ensures IRO's contribute by providing their views on:

- whether the placement is meeting the child's needs,

- any identified concerns from the IRO's visits to the child or contact with them,
- any areas that need to be considered for the child
- Any additional support identified by the IRO that would promote stability within the child's care arrangement.

10. Unaccompanied, Asylum Seeking Children

10.1 In the UK, a child is deemed an unaccompanied asylum seeking child (UASC) having arrived in the UK without a parent or legal guardian. In this reporting period 18 children in care were UASC, accounting for 9% of the child in care population, a decrease of 3% from last year. The majority (16) of UASC were male, in line with previous reporting figures, with all but one aged 16+.

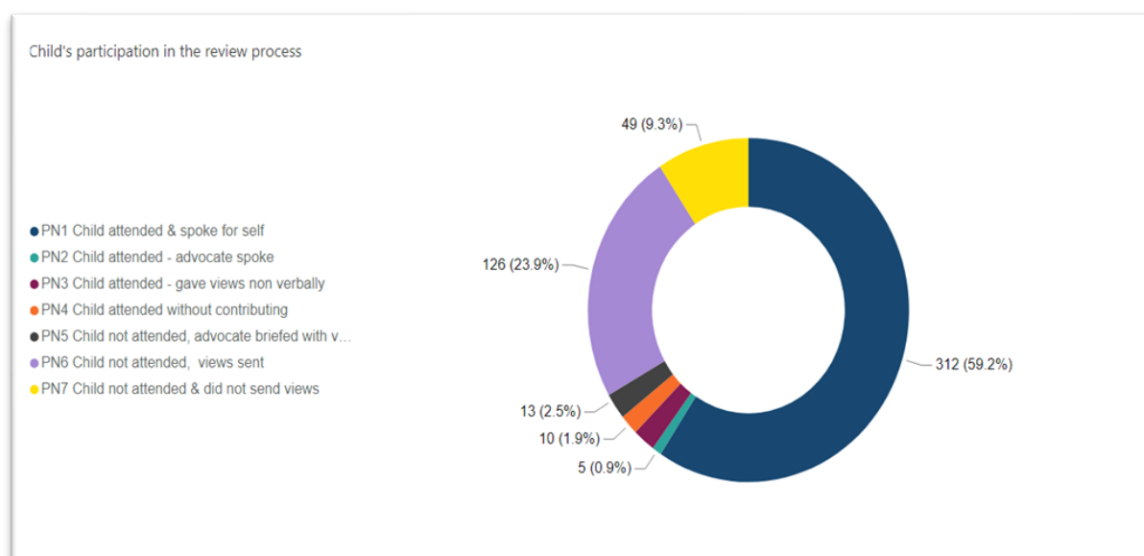
10.2 Within Bath and North East Somerset, UASC are allocated a social worker who is a specialist in working with this cohort of young people. There is no dedicated IRO for this cohort of children however the IRO service is well versed in reviewing the care planning for these children. IRO's are alert to the complexity of needs UASC have, being in a country unfamiliar to them, with communication barriers, a lack of understanding as to western culture and state intervention. IRO's seek to ensure all children in care understand their rights and entitlements and where a child cannot advocate for themselves or an IRO has concerns that the child is not expressing their wishes and feelings, the IRO will liaise closely with the social worker and carer for the child to see how their views can be gained.

10.3 There has been a drive to place UASC within local placements, in previous years this cohort of children had often not set foot in the local area and although this didn't impact necessarily on how they were supported it did present challenges when they turned 18 in terms of housing duties. This reporting period saw 55% of UASC children placed within Keynsham or Bristol, this is an improvement on previous years and means our UASC are more visible and can be linked in with local services and build links with one another.

11. Voice of the child, participation and feedback

11.1 The IRO service actively seeks to engage children in the review process, IRO's take a child centred approach to a child's review, recognising it is their meeting and as such every child should be supported to be present and actively participate. Where children have an advocate, the advocate and IRO liaise ahead of a child's review to consider how the child wants their review to be held, the venue for this and who will be in attendance. IRO's will often have to hold a review over several meetings to ensure all significant people have been consulted / participate, it is not always possible to bring the adults in the child's life together in one meeting

Graph 9: Children's participation in their review



11.2 The above demonstrates that of the reviews held in this reporting period, 62% of reviews held included the child, with the child contributing themselves, via their advocate or their views obtained non verbally. Only 9.3% of reviews did not see the child attend or provide their views.

Feedback

11.3 The service continues in its attempt to develop a feedback strategy that enables the service to obtain feedback from children, their carers and families. The service has been exploring the potential methods in which feedback can be obtained, consideration being given to the use of QR codes for questionnaires, telephone calls throughout the year, use of advocates and capturing more systemically feedback that comes into the service.

11.4 In this reporting period, IRO's have received ad hoc feedback all of which has been positive. Some examples of the feedback received, include.

- Parents thanked an IRO for a letter they sent their child. The parents commented that they were glad their child was being involved in what was happening around them, that their child's views were being listened to and they appreciated the IRO keeping them updated about matters relating to their children.
- A Team Manager attended a child in care review following which they emailed the IRO to say how 'wonderful' the review was. The Team Manager felt the IRO enabled the reviews to be child led and focussed, they felt the children gained a lot from (and enjoyed) being able to share their views in their way.
- The Consultant Social Worker within Children's Social Care highlighted challenges they faced in gaining an understanding of the child's lived experience since being in care however the IRO's CIC review records were deemed 'a significant aid', providing detailed understanding of the child's experiences and were written in a child-centred way. The Consultant SW gave

their sincere appreciation for the IRO's oversight and excellent summary of the experiences the IRO provided in each review.

- A member of the ACE team complemented an IRO on a child in care review and how the IRO's approach engaged the parent and contributed to the plans for the child progressing.
- A parent thanked an IRO for their child's review and shared it was the first time she had seen their daughter be herself at a review.

11.5 There have been two formal complaints in this reporting period, a parent complained they did not feel the IRO was responsive to their communication and concerns and highlighted that recommendations by the IRO were not being taken forward by the social work team. Whilst this complaint was not upheld, there was learning about how to ensure parents of children in care were engaged by the service. The second complaint was directly from a child in care, supported by their advocate. The child did not feel they had been fully supported to participate in their final review, having not been present. Some aspects of the complaint were upheld and the learning for the service and IRO related to ensuring all children in care were consulted with as to arrangements surrounding their reviews, where attempts unsuccessful IRO's to pursue contact with child and / or those supporting them.

12. Dispute resolution protocol:

12.1 The key function of the IRO is to resolve problems arising out of the care planning process, ensuring a child's care plan fully reflects their needs and any actions within the plan are consistent with the Local Authority's legal responsibilities for the child. All IRO's seek to establish positive and trusting working relationships with the children to whom they are allocated. IRO's will seek to ensure plans for a child consider their wishes and feelings and promote their individual needs as well as their aspirations. IRO's are expected to raise any concerns relating to the child respectfully and without delay. Any concerns should in the first instance be discussed with the Social Worker before utilising the Dispute Resolution Protocol (DRP).

12.2 The DRP was reviewed following the Local Child's Safeguarding Practice Review³ in January 2024. A subsequent review was undertaken by the permanent Head of Service in June 2024 following concerns about the understanding of the DRP across children's social care, the timescales within the DRP and how its use was recorded and reflected in the child's record. Following consultation with children's social care and IRO's the new DRP was launched in September 2024⁴.

12.3 In October 2024 the service implemented a system which sees regular review and tracking of the use of the DRP, the service can now see the number of DRP's raised by IRO's, under what stage, what the area of concern for the child related to and resolution date. DRP's are now embedded within liquid logic, this change has created a greater level of transparency around the use of DRP's and has

³ https://bcssp.org.uk/assets/7a7eb990/cspr_skye_executive_summary.pdf

⁴ <https://trixcms.trixonline.co.uk/api/assets/bathnes/9f84471e-adb4-47ab-a8ff-6623203e3526/dispute-resolution-protocol-sept-2024.pdf>

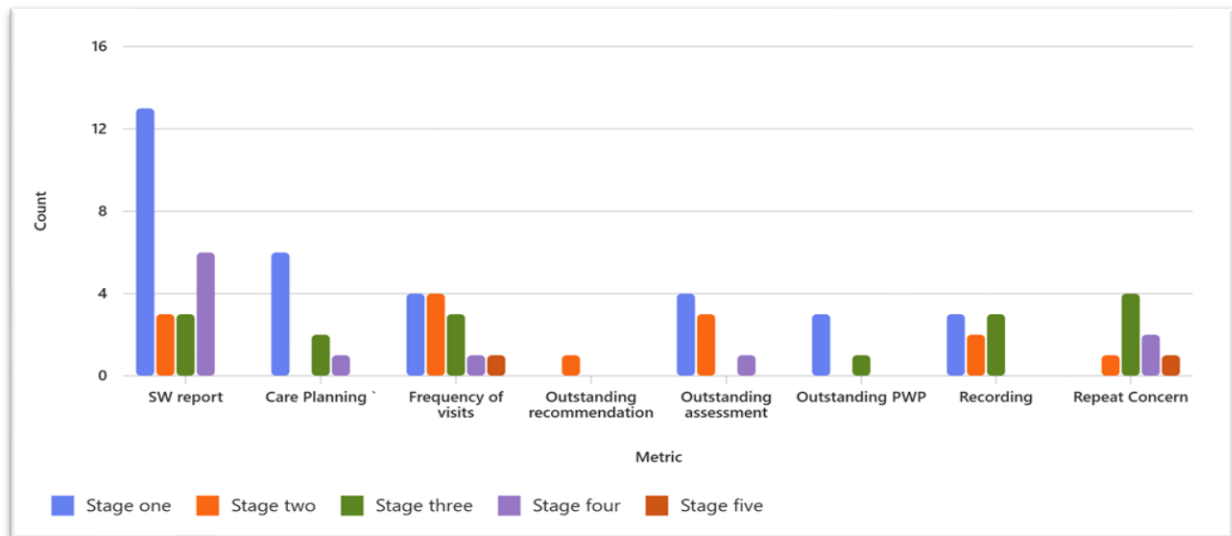
sought to make IRO's and children's social care managers more accountable to the issues raised and the resolution of these in a timely way for the child.

Summary of IRO's use of DRP October 2024 – March 2025

Q3 (Oct – Dec 24/25)		
Stage 1	Stage 2	Stage 3
8	10	5
Stage 4	Stage 5	Total
1	0	24
Q4 (Jan – March 24/25)		
Stage 1	Stage 2	Stage 3
14	5	3
Stage 4	Stage 5	Total
7	1	30

12.4 Across Q3 and Q4 there were 54 instances where IRO's used the DRP. Stage one is informal and captures issues raised directly with the child's social worker and the agreement reached. Stage two sees concerns raised with Social Workers Manager, stage three, the Team Manager, stage four the relevant Head of Service and Stage five the Assistant Director.

Reason for IRO use of Dispute Resolution Protocol



12.5 The above graph shows the category of concern leading to the IRO utilising the Dispute Resolution Protocol (DRP). Use of the DRP can include concerns about more than one issue for the child. The completion of a social work report (25) is the highest reason for use of the DRP by IRO's, in January 2025 a new approach was taken to this area of social work practice. Children's Social Care colleagues were advised that all children should have a review report available three days before their review, the expectation was set that reviews should only take place without a report in exceptional circumstances. If a review was held without a report the IRO would notify the social worker's line manager, Team Manager and the relevant Head of Service, with reports then expected to be completed no later than

five working days following the review date. This area of social work practice continues to be a challenge for the IRO service, data reporting around the completion of Social Work reports would strengthen the monitoring of this statutory requirement.

12.6 Usually, IRO's have made an escalation at stage one or two, when issues have not been resolved IRO's utilise the next stage of the protocol. In some instances, an IRO has escalated to the next stage due to either being unsatisfied with the response to the escalation or no response having been received.

12.7 The IRO service currently has no data reports available to support the tracking of the use of DRP's, the themes leading to escalation, timeliness of children's social care responses and outcome. A request has been made to Business Intelligence to develop a reporting mechanism that can support greater analysis of instances when the DRP is used and its impact for the child.

13. Quality Assurance by the IRO service

13.1 IRO's are required to maintain close oversight of the care planning for children in care. A significant part of an IRO's role is to quality assure the service provided to children in care, to ensure needs are being met, statutory requirements are being adhered to, and care plans are informed by a child's wishes and feelings and the completion of assessments. The IRO service whilst reviewing plans and level of service for individual children, also consider themes related to child in care cohort.

13.2 In this reporting period, the IRO service collectively raised concerns about the following areas of Social Work practice with Heads of Service in Children's Social Care and the Director of Children's Services.

- Completion of Social Work reports for child in care reviews.
- Visits to children in care. IRO's were concerned that some children in care were not being seen within statutory timescales.
- Children having up to date care plans. IRO's were routinely receiving out of date care plans for child in care reviews. Head of Service for Children's Quality Assurance and Safeguarding identified that social workers were not updating the child's care plan within LCS following changes in care arrangement. Raised with relevant Heads of Service and Assistant Director.
- Needs assessments being completed every two years. There is a growing number of children in care who have not had a needs assessment for over two years.
- Completion of pathway plans continues to be an area of practice closely reviewed by IRO's.

13.3 The IRO service has challenges in collating quality assurance activity as there are no reporting mechanisms that bring together all the QA activity, the service is therefore reliant on IRO's openly raising with one another the issues they are identifying in respect of children in care and bringing these to the Head of Service of Children's Quality Assurance and Safeguarding.

14. Internal audit

14.1 In Q4 of this reporting period, Internal Audit undertook a review of the risks and controls related to the Independent Reviewing Officers Service. This was part of the 2024/2025 annual audit plan. The audit reviewed the following key risks/control objectives:

1. IRO's are promptly allocated to Children in Care and reviews are conducted in line with statutory timescales and regulations.
2. The view and wishes of children in care are heard and considered when decisions are being made about them.
3. The IRO function contributes to positive outcomes for children in care.

14.2 The IRO service was awarded an assurance rating of 'Level 4 -Substantial Assurance. The three areas of assessment were assured as:

Assessment	Key Control Objectives
Good	Independent Review Officers (IRO) are promptly allocated to Children in Care and reviews are carried out in line with statutory timescales and regulations.
Excellent	The view and wishes of Children in Care are heard and considered when decisions are being made about them.
Good	The IRO function contributes to positive outcomes for Children in Care.

14.3 Key findings:

'It is the opinion of the auditor that the IRO Service is a dedicated team who are committed to achieving improved outcomes for children in care. The audit review highlighted that the IRO footprint within children's case records is good, and all supporting records/case notes reviewed were clear and comprehensive. Key developments and achievements has seen improvements in the timeliness of statutory reviews, development of the feedback strategy and midway review process, along with the review and relaunch of a clear and transparent dispute resolution process for IRO's to follow when becoming aware of practice issues that are/may be having a detrimental impact on a child in care.

The IRO service is also accountable and transparent in terms of its own performance concerns, in the main: timeliness of the completion and distribution of CiC review records and completion rates of midway reviews. The challenges and current performance in these areas are subject to ongoing reporting and monitoring via the Service Improvement Board, and the service is continuing to assess the level of quality assurance activity placed upon IRO's within current capacity/ caseloads; along with the impacts on children's care planning arrangements and outcomes.

The key improvements identified within this audit report, in the main, are in relation to the quality and availability of key performance data to support robust reporting and monitoring arrangements, along with clear accountability and actions to drive and deliver the necessary improvements to practice standards and performance.

14.4 There were two high risk recommendations arising from the audit relating to the availability / timeliness of social work reports and the impact of the IRO service in achieving improved outcomes for children in care. Whilst the Head of Service for Children’s Quality Assurance and Safeguarding was seen to be raising practice concerns / areas for improvement with the Service Improvement Board, directly with the Director for Children’s Services and Assistant Director, the IRO Service has not been seen to have received any formal feedback/reports on enquiries and actions taken to address identified practice issues. The recommendations from internal audit will be areas of focus for 2025-2026. Please see Section 16 for recommendations and action taken.

15. Update on areas identified for development in 2024-2025

15.1 Each year, the IRO service identifies areas of practice that require further development or improvement, the following were areas for the service to take forward in this reporting period.

Area for development / improvement	Update
Improving timeliness of CiC reviews. To ensure quality assurance of children's plans by midpoint review. (2024-2025)	<p>There has been a 16% increase in the timeliness of child in care reviews this year, with 87% occurring on time, compared to 71% in 2023-2024.</p> <p>Midway reviews have been paused due to capacity within the service. The service is currently considering how the use of MWR’s can be approached to strengthen their impact.</p>
Feedback from children, young people, their families and carers. (2021-2022)	The service is developing a strategy that will promote feedback into the service using differing approaches. The service will work with the advocacy service and in care council to gain feedback from children in care as to how best to gain their views about the service.
Improving the number of children in care review records disseminated within 20 working days. (2024-2025)	This is an area requiring improvement, it is hoped the use of magic notes and Co Pilot will strengthen this area of practice for IRO’s.
Audits to be undertaken, identified by the themes emerging from the quality assurance activity with the Service and data reports.	There have been two audits undertaken in this reporting period, relating to Social Work reports and completion of midway reviews. A report was also presented to senior managers in children’s services about some of the themes emerging from IRO activity. In 2025-2026 the IRO

	service will undertake an audit into children placed with connected persons/kinship care under a Care Order.
Pathway plans and needs assessments of all children in care aged 15 years and 9 months. (2024-2025)	This is an area of need considered for all children in care by their IRO at every child in care review. Where the pathway plan is outstanding, the IRO will include this in their recommendations and include reference to this within their quality assurance reporting.
DRP protocol and policy is to be embedded across the service. DRP data is to be monitored. SQA HoS is to review the new DRP and protocol by 17.10.24. (2024-2025)	New DRP launched in September 2024, the use of the DRP is tracked and reported into service improvement board on a quarterly basis.

16. Summary and areas for development in 2025-2026

- 16.1 This year, the IRO service in Bath and North East Somerset maintained stable numbers of children in care and improved the timeliness of statutory child in care review, with 87% completed on time. The service maintained strong participation by children in their reviews and received positive audit feedback. The service has continued to challenge areas needing improvement such as completion of social work reports.
- 16.2 Looking ahead, priorities include reinstating midway reviews, continuing to embed the use of the dispute resolution protocol, developing practice guidance for children, parents and carers so there is clarity as to the role of the IRO and the processes involved. The service aims to have in place a feedback strategy which informs service delivery and captures how children, their carers and families experience the service.

Areas for development 2025-2026

Service development 2025-2026	Action
1. 90% of child in care reviews to be held within statutory timescales.	<ul style="list-style-type: none"> • IRO's to arrange review date four weeks before the statutory due date to allow scope for changes in date which should only be result of child requesting change in date. • Review timeliness to be included in weekly data reporting across children's services to highlight the

	<p>performance in this area of practice.</p> <ul style="list-style-type: none"> • IRO's to seek Head of Service for Children's Quality Assurance and Safeguarding agreement before any review is held out of timescale.
<p>2. 75% of child in care review records to be completed and distributed within 20 working days of review date.</p>	<ul style="list-style-type: none"> • IRO's to use Magic notes and Co-Pilot to support the completion of child in care review records. • Monthly review of timeliness in this area to be undertaken and findings distributed across IRO service and children's social care senior managers. • This to continue to be an area of performance reported to Service Improvement Board.
<p>3. 90% of child in care reviews to have a social work report available three days before the review date.</p>	<ul style="list-style-type: none"> • Data report to be developed that supports the monitoring of this area of practice. • IRO's to ensure Senior Managers are informed of reviews held where there is no social work report.
<p>4. IRO's to meet with social workers 15 days in advance of the child in care review. (statutory requirement and area identified within internal audit April 2025)</p>	<ul style="list-style-type: none"> • IRO's to ensure that when setting date for child in care review, they are diarising meeting with social worker 15 days before. • This meeting to be captured in child's record, including date meeting held, summary of discussion and next steps/actions including when social work report will be received by IRO.
<p>5. IRO's to strengthen practice in respect of reunification and contribute towards this become a primary area of consideration for children in care.</p>	<ul style="list-style-type: none"> • IRO's to attend reunification panel. • Child in care review records completed by IRO to reflect considerations given by IRO to care plan for child. • Where reunification being explored, IRO's to ensure these features in recommendations from child in

	<p>care reviews with clear timescales as to completion of reunification assessment.</p> <ul style="list-style-type: none"> • IRO's to challenge any delay in progressing reunification assessments / plans. <p>Head of Service for Children's Quality Assurance to work with Head of Service in Care Outcomes to closely review children identified for possible reunification and to track the progress of these children.</p>
6. Midway reviews for children in care to be reinstated.	<ul style="list-style-type: none"> • Midway reviews will commence at the start of Q3 2025-2026 for all children in care. • Midway review to be embedded within the child's record for easy identification and accountability. • Data reporting for this area of practice to be established to support monitoring of these being completed in a timely way.
7. Audit to be undertaken into children in care placed with connected person under Care Order.	<ul style="list-style-type: none"> • Audit to be completed in Q4 of 2025-2026 to review number of children in care placed with a connected person under a Care Order, the rationale for such a care plan and the plans for these children going forward.
8. Data reporting	<ul style="list-style-type: none"> • Exploration of developing date reports for statutory requirements of the service such as allocation of IRO within five days, outcome of Quality Assurance activity, completion of review records by IRO and distribution, midway reviews, use of the dispute resolution protocol.
9. Development of feedback strategy for the IRO service	<ul style="list-style-type: none"> • IRO service to develop a feedback strategy to ensure children, their carers and family members can provide

	<p>feedback about the service provided.</p> <ul style="list-style-type: none"> • Input from the in care council and off the record to develop feedback process and promote its use.
10. Practice standards / guidance to be developed.	<ul style="list-style-type: none"> • IRO service to have workflow process maps and practice standards for the IRO service.

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November 2025