

Independent Reviewing Service Annual Report 2022-2023



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1. INTRODUCTION

Since March 2010 there is a requirement that the Independent Reviewing Officer service within each Local Authority will produce an Annual Report of activity, with regards to children in care. This allows scrutiny by the Corporate Parenting Board and Wirral's Safeguarding Children's Partnership along with Elected members and the children and young people themselves.

The purpose of this report is to evaluate the extent to which Wirral Council has fulfilled its responsibilities to these children for the period 1 April 2022 – 31 March 2023, including its corporate parenting function. The report includes the findings of the Safeguarding Unit, providing quantitative and qualitative data, contextualising the activity undertaken with supplemental commentary as to the activity of the service and where appropriate identifying themes and trends that require further work.

The overall aim of the safeguarding unit is to ensure that our looked after children are safe, secure and achieve the best possible outcomes. We have high aspirations for their future and encourage children and young people to express their views, wishes and feelings. We aim to ensure that all children and young people are supported to access services and are fully prepared for adulthood.

2. STATUTORY ROLE AND LEGAL CONTEXT

The role and function of the Safeguarding Unit and the Independent Reviewing Officers is governed by law and statutory guidance. Therefore, the functioning and responsibilities that IRO's exercise in undertaking their duties are embedded in the following:

- *Children Act 1989*
- *Children and Young Person's Act 2008*
- *Children Act 2004*
- *Care Planning, Placement and Case Review Regulations 2017*
- *Wirral's Safeguarding Children Procedures*
- *The Children Private Arrangements for Fostering Regulations 2005*
- *Fostering Services, National Minimum Standards*
- *Fostering Services (England) Regulations*

2.1 **The role of the Independent Reviewing Officer (IRO)**

Compliant with the requirements of the IRO Handbook each child and young person will be allocated an IRO who will work with the child. Each Local Authority has a legal requirement to provide an IRO for every child or young person looked after, fundamentally to ensure their Human Rights are respected. Every IRO is required to act in the child's best interests which includes giving the IRO's the capacity to refer cases to the Children and Family Court Advisory Services (CAFCASS). IRO's whilst working for the department are autonomous and can

act upon their own volition when they have significant concerns regarding a child's care plan or safety.

The IRO will ensure the child's voice is heard and their care plan is fully reviewed, ensuring it is fully meeting their needs. The service is not part of the operational line management structure of Children's Services, its position is to work alongside the department and be able to independently quality assure the Children's social care activity, offering high support along with high challenge where necessary. The aim is also to provide advice and guidance in order to promote the best possible outcomes for children and their families in Wirral.

The primary focus therefore is to ensure all care planning is promoting the most positive outcomes for a child/ young person by;

- *Providing robust challenge of social care decision making, where there is underlying poor professional practice and when decisions are taken that are not in the child's best interests.*
- *That views of children, parents, carers and other professionals are given sufficient weight in care planning.*
- *Ensure that permanence for children is not delayed and that plans are robust and timely.*
- *The IRO service will monitor the performance of the Local Authority will monitor the performance of the Local Authority and their functions in relation to the child's care plan.*

2.2 Profile of the IRO Service in Wirral

The IRO Service in Wirral sits within the Safeguarding and Quality Assurance Unit. The Independent Reviewing Officers (IRO's) in Wirral undertake a dual role working with children who are looked after as Reviewing Officers and as Child Protection Conference chairs within the child protection arena. Whilst some other Local Authorities have this role separated Wirral have kept this role combined. We are however considering the advantages of splitting the role in order to provide a consistent approach to child protection planning.

The team of IRO's consists of 17 IROs covering 16 posts including the Local Authority Designated Officer (LADO) who oversees allegations against professionals and volunteers who work with children. The Safeguarding unit is a stable team which means that for most children in Wirral they have lasting and consistent relationships with their IRO who will have been alongside them in their experience of care.

The IRO's also have a number of additional responsibilities including;

- *Contributing to the Liquid Logic User Group*
- *Attending the Court Liaison group*
- *Attending the Team managers forum*
- *Providing mentoring to colleagues*
- *Bi-monthly Auditing with Performance Improvement Team*

- *Team links*
- *LADO Duty when required*
- *Participating in the IRO regional forum*

Supplemental to the core roles as part of the safeguarding an IRO will be allocated to children and young people who are looked after in the community through Private Fostering. These children and young people are identified in accordance with The Private Fostering Regulations as set out in Part 9 and schedule 8 of the Children Act 1989.

Whilst an important function the impact upon the service remains somewhat limited with only 3 children by the end of the year having been identified and being subject to these regulations.

Service Managers within the unit are also required to chair Sudden or Unexpected Death in Infancy and Childhood Meetings (SUDIC) in line with Working together 2015 and Wirral's Safeguarding partnership procedures, along with Secure Accommodation Reviews (SAR) and Suspected Fabricated or Induced illness strategy meetings.

2.3 IRO Capacity

It is recognised that for IRO's to function and meet expectations in performance the levels of case allocations per IRO needs to reflect the levels as stated within the IRO handbook of between 50 and 70 cases. Caseloads at the end of the business year averaged at 71. Caseloads have remained broadly slightly above where we would like to be in relation to recommended levels, as outlined in the IRO Handbook. Whilst that figure can be offset by the number of CP cases as a dual role the expectations and level of intervention expected presents a challenge to the service in ensuring caseloads are manageable and children and families continue to receive a good service. The management team therefore ensure that allocations are carefully considered. Individual IRO's caseload consist of a third of child protection cases with the remainder being children looked after.

2.4 IRO Learning and Development

We have continued this year to ensure that IROs in Wirral are equipped with the right knowledge and skills that enable them to scrutinise practice, plans and arrangements for Our Children and Young People effectively. We have achieved this by holding regular team meetings where we examine changes in policy, procedures and a focus on performance within the unit. IROs also continued to receive supervision monthly in 2022/2023. Supervision provided the IROs with an opportunity to reflect on planning, progress and outcomes for our children and young people, along with examining any training or developmental requirements.

Staff have the opportunity to attend Staff Engagement Sessions and celebration events led by the Senior Management Team.

2.5 Regional and Local Links

The IRO Managers attend quarterly meetings with the North West Regional IRO Managers Group. This feeds into the National IRO Manager's Group and the Department of Education (DfE) which considers changes to policy and practice. The North West IRO Managers Group share data and good practice with the other Local Authorities across the Merseyside area. The IRO management team are integral to several panels in which the IRO perspective and overview of planning is valued as part of the decision-making process and over-view of practice. These include Permanence Panel, Multi Agency Child Exploitation panel (MACE), Multi Agency Public Protection Arrangements panel (MAPPA) and Pre-birth liaison panel.

2.6 Local Authority Designated Officer (LADO)

Wirral has one full time Designated Officer. The LADO has a specific function in overseeing the allegations and investigations relating to professional staff and those in a position of trust where the allegations involve children and young people.

When the LADO is not available the Duty IRO or Managers within the unit act on behalf of the LADO to ensure there is no delay and maintain a level of independence required in exercising the role

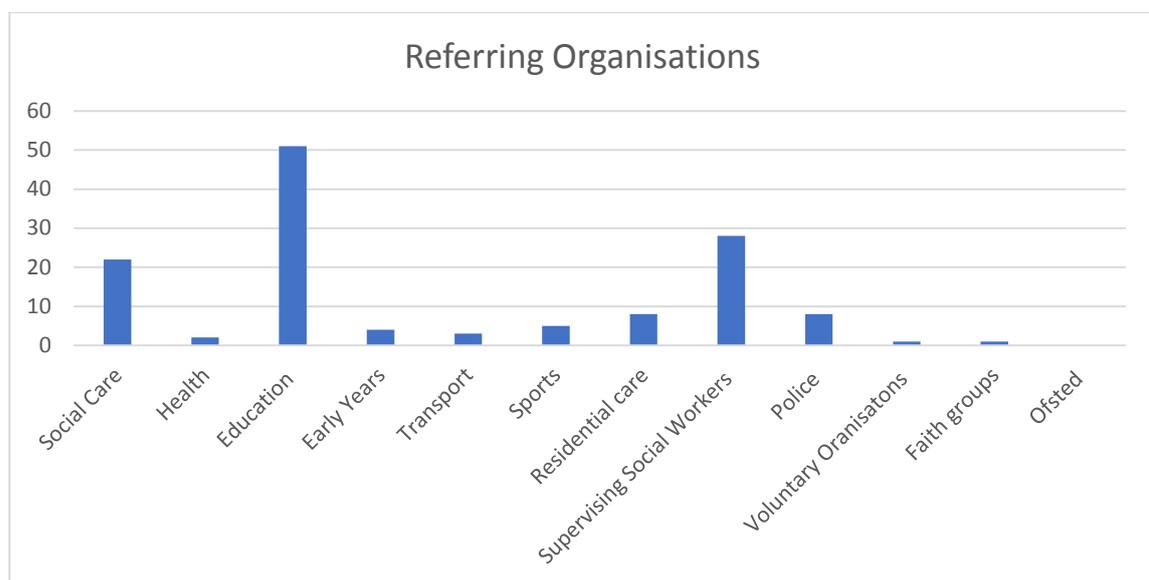
As with the Consultation process the LADO has ensured all open cases have an Initial Management of Allegations Meeting chaired by the LADO, a regular Review meeting and a Closure meeting. All the meetings are chaired by the LADO and notes are taken by the LADO. The LADO has recently been provided a minute taker to assist in this task.

Total number of Contacts (see definition)	No of referrals leading to multi-agency strategy meeting or discussion
Initial Consultations 267	
Referrals 133	133 (33.25%)
Total 400	

There has been an increase in initial consultations with a total of 267 initial consultations held, compared to 159 for the previous reporting period. The number of referrals has been consistent in comparison to the previous reporting period.

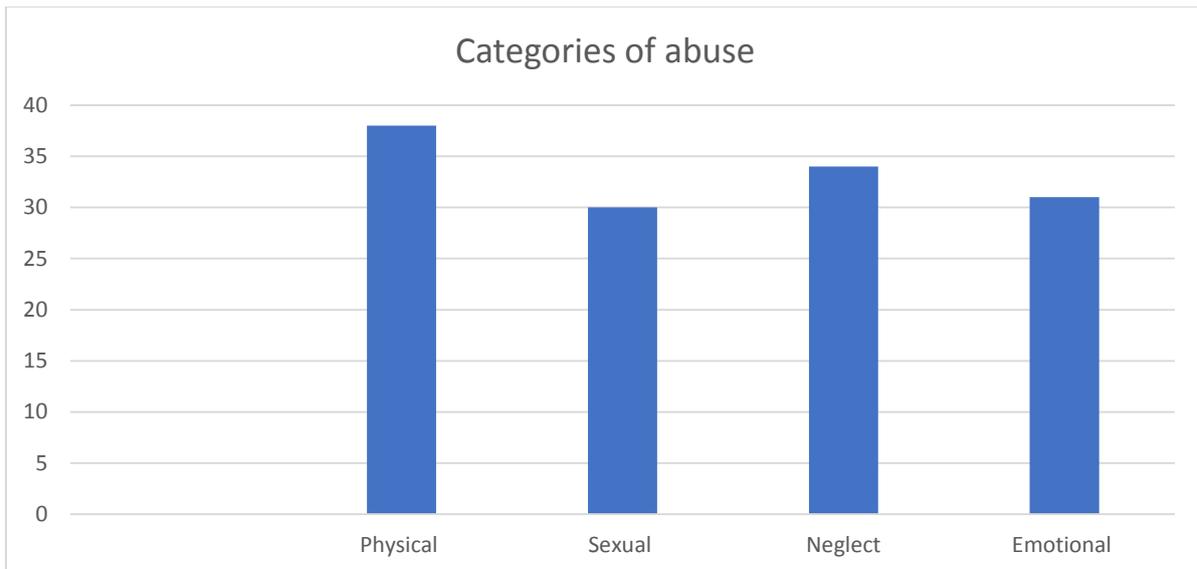
Initial Consultation forms are used as first contact on Wirral, to enable us to record all concerns reported to the LADO. A multi-agency strategy meeting would only be held on referrals. The table below shows a breakdown of the agencies who referred to LADO during the reporting period of 2022/23. This is the number of referrals reported to the LADO by an agency, irrespective of where the individual works, e.g. parent attends local police station and accuses teacher of physical assault against her son. Police inform LADO of concern this would be recorded as a police referral.

The highest number of referrals were received from Education and Supervising social workers.



With regards to categories of abuse these are split into 4 categories:

Physical Abuse, Sexual Abuse, Neglect and Emotional Harm. As you can see from the table below these are equally distributed throughout the year.



A total number of 87 cases were concluded/closed within the reporting period of 2022 /23 regardless of whether they were referred within that period or not. The conclusion date is the point at which there is no further action to be taken by the employer, social care, the police or courts regarding the allegation. 34 cases (39%) were concluded/closed within 30 days, 22 cases were concluded/closed within 3 months, 28 cases were concluded/closed between 3-12 months and 3 cases took over 12 months to conclude/ close. The cases which take the longest to conclude are often complex cases which have resulted in a police investigation. The LADO ensures that a full closure summary is completed before any case is closed.

There are a number of possible outcomes following a referral to LADO:

- The allegation is malicious
- The allegation is unsubstantiated
- Possible Disciplinary measures for the employee
- A police investigation
- A police prosecution

It is important that the correct definitions are used when determining the outcomes.

- Substantiated – there is sufficient evidence to prove the allegation
- False – there is sufficient evidence to disprove the allegation
- Malicious – there is clear evidence to prove there has been a deliberate act to deceive and the allegation is entirely false.
- Unfounded – there is no evidence which supports the allegation being made.
- Unsubstantiated – there is insufficient evidence to prove or disprove the allegation.

Out of the 87 cases that were concluded 44 were deemed to be substantiated, 18 were unfounded and 38 were unsubstantiated.

3. CHILDREN LOOKED AFTER DATA 2022/23

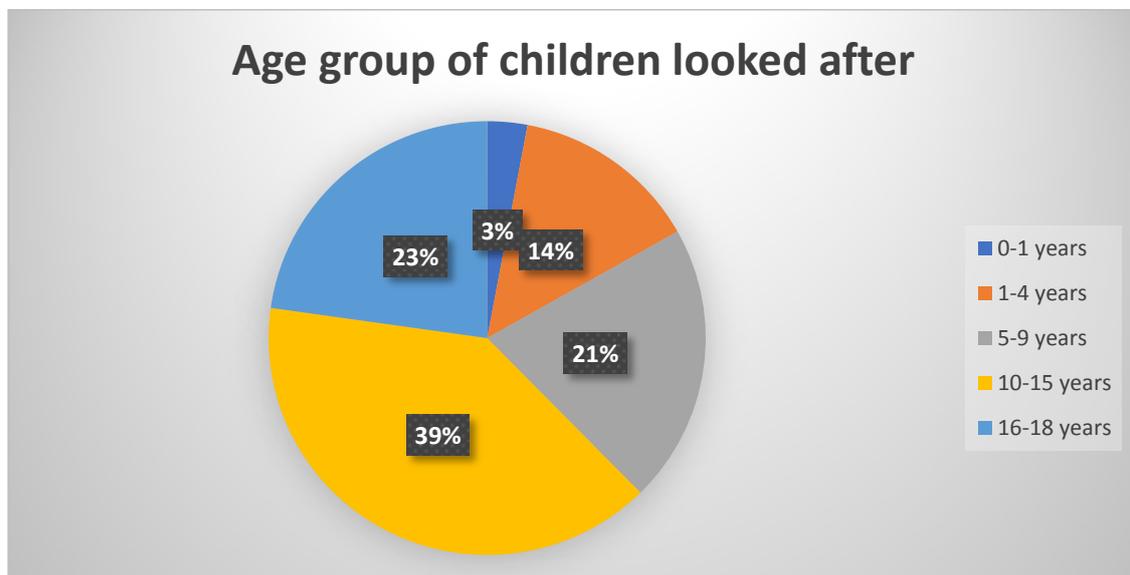
3.1 Children and Young People Population in Wirral

Children and young people aged 0-17 make up just over one in five (21%) of Wirral residents (67,508) and is projected to decrease by 3.5% by 2030. The population of Wirral is 320,200 including approximately 70,500 children and young people (0-18). The population is predominantly white British (93%) but significant ethnic minority groups exists, particularly Irish, Chinese and Polish

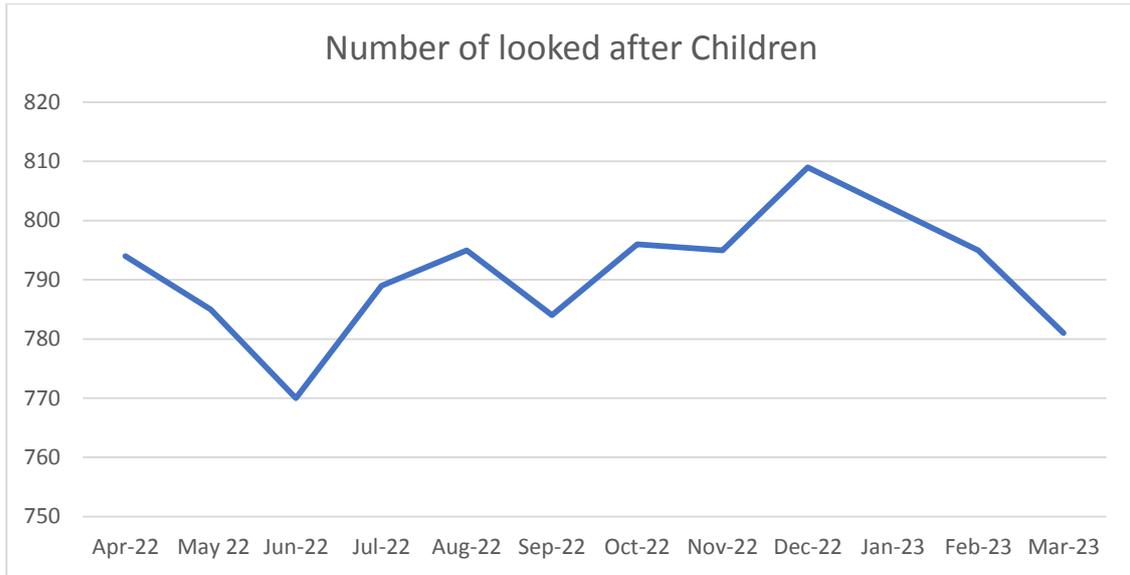
3.2 Profile of our Children Looked After

The Department for Education has set figures for the numbers of children who are looked after based on population figures per 10,000. The benchmark set being 83.2 – 95. However, our figures report 115.8 at the end of the year.

In relation to the children in care we serve, as of March 2023 Wirral had 781 looked after children. The overall number has remained consistent with 789 children looked after as of 31 March 2022. The majority of children and young people (40%) aged between 10-15.

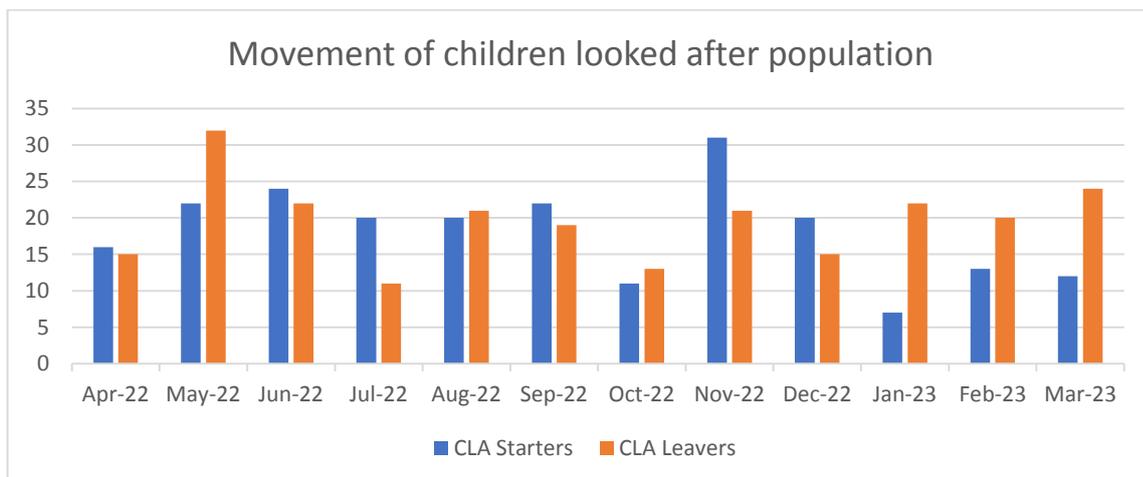


Approximately 92% are white British and 8% from a variety of other ethnic backgrounds. Of our looked after population 10% of this cohort are recorded as having a Disability. At the time of this report, there are slightly more boys than girls in our care with boys representing approximately 52% of the cared for population.



The number of Children Looked After by Wirral has remained largely consistent throughout the year. We have however seen a steady decrease in the numbers from June 22 onwards, then a decrease from Dec 22. To assist in understanding the figures we need to consider whether the reason for the decreased numbers relates to children and young people leaving care or less children entering the looked after system.

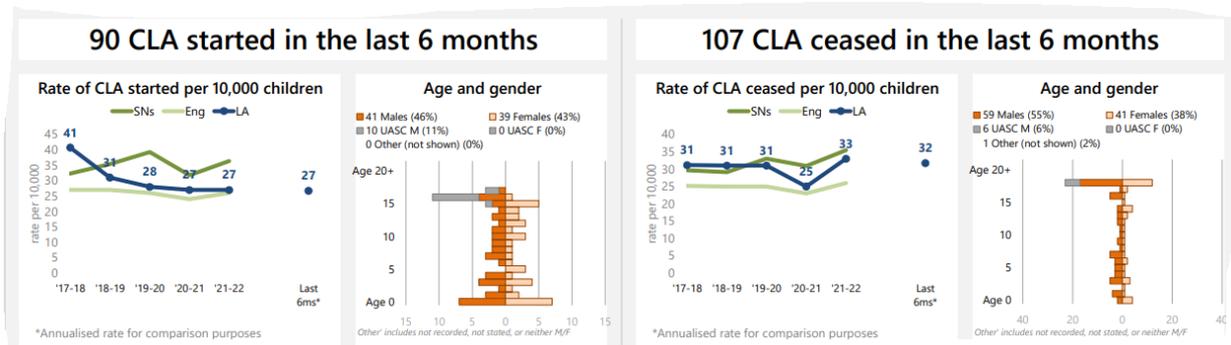
As you can see from the table below during May 22, we had more young people leaving care than entering care. This has also been a consistent factor month by month since the start of the year.



As you can see from the table above the majority of our children and young people left CLA during this reporting period due to being rehabilitated to parents or relatives,

(64 young people).

Snap shot of the data and where Wirral compare to our statutory neighbours and England as a whole.

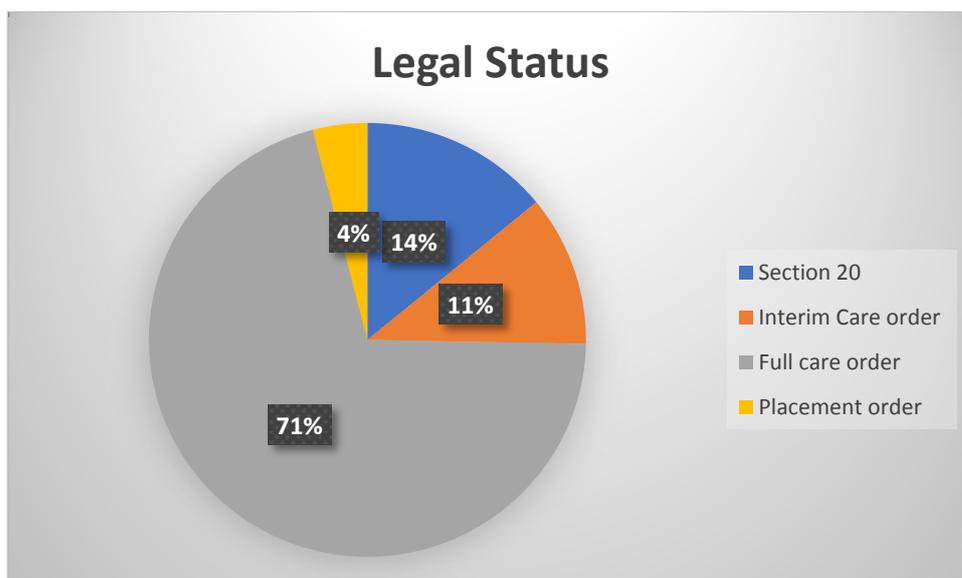


This snapshot records the number of children becoming looked after from Nov 22 to April 23

It is important to note that the decrease in Children Looked After is also as a result of less children coming into care. It is positive to note the data showing that Wirral is now in line with our statutory neighbours and England national average.

3.3 Legal Status of our children looked after

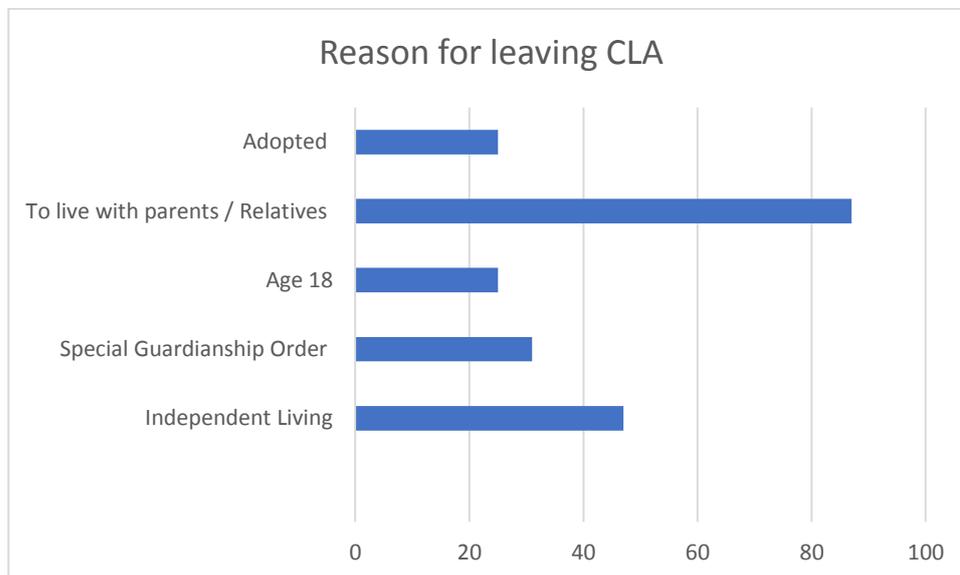
As you can see from the graph below the majority of our children and young people are subject to either an interim care order (86 children) or a full care order (543). The number of children subject to Care Orders has remained relatively stable over the last 12 months.



- **Section 20** is a voluntary agreement between the child and young person's parents or whoever holds parental responsibility for the child.
- **Interim care order** is an order that can be made by the court before the final hearing which allows the Local Authority to share parental responsibility with the child's parents or whoever holds parental responsibility for the child.
- **Placement order** is an order that allows the Local Authority to place a child with prospective adopters.
- **Full care order is an order** which allows the Local Authority to share parental responsibility with the child's parents or whoever holds parental responsibility for the child until the child reaches 18 years or the care order is discharged by the court.

3.4 Outcomes for children and young people

In 2022/23 231 children and young people ceased to be looked after, this is a slight increase compared to 218 the previous year. The breakdown of children leaving care for specified reasons is below.



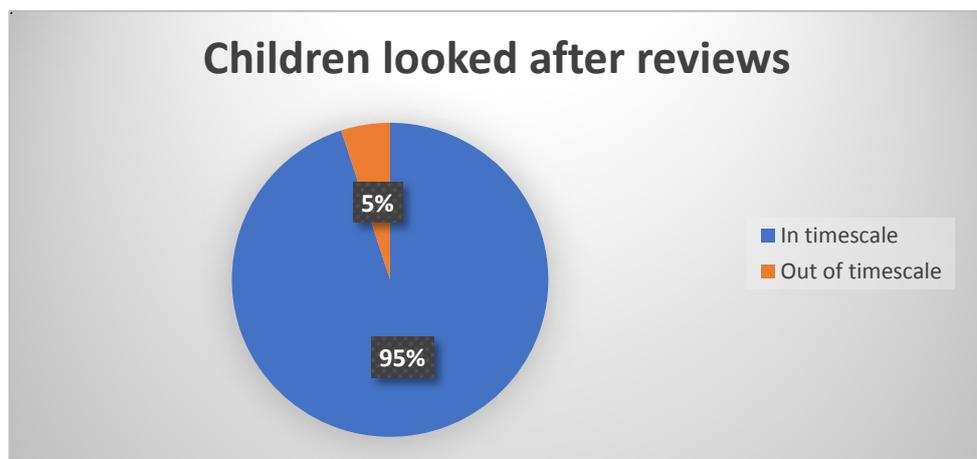
The chart above demonstrates that Children leaving care to live with parents or relatives is the most common outcome. This can be viewed as an illustration of positive planning for children who ultimately return to live with family.

4.0 STATUTORY REVIEWS

4.1 Children Looked After reviews

A total of 2100 Children's Looked After review meetings were held in 2022/23. CLA reviews are held every 6 months and therefore each looked after child will have their care plan reviewed twice per year. 93% of CLA reviews have been held in within statutory timescales and reflect the hard work and commitment of the Independent Reviewing Officers. The CLA reviews that were held out of time were due to a significant change of care plan resulting in the review needing to be rescheduled once the care plan was determined or the carer/child asking for the review to be rearranged. These reviews whilst out of time were all completed within 1 week of the original due date.

CLA reviews have remained predominantly virtual, resulting in less travelling time and more flexibility in terms of how the review was completed through using technology, therefore performance in this area has been maintained. The data demonstrates that children are having regular independent oversight of their plan and progress against their plan in a timely manner.



The minutes of reviews continue to be written to the child and young person, avoiding the use of jargon. Ultimately giving children and young people a greater understanding of their care plans. During this review period Power Bi reports that 58% of the minutes were completed within timescales. Further analysis of the data is required due to some identified data errors. This is an area that will continue to be monitored by the unit and our performance data team.

4.2 Achieving Permanence

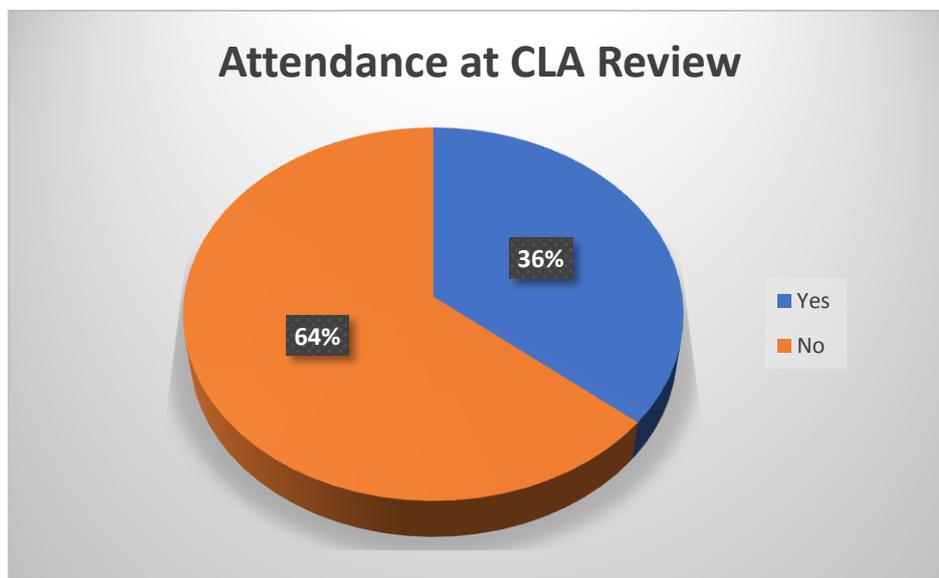
The term 'achieving permanence' refers to a long-term plan for a child or young person whom is looked after by the Local Authority which has been ratified within the CLA review and agreed by the agency decision maker. In 2022/23 the end of year figure of children who had a permanence plan identified at second review was 81%. This is an improved picture from last reporting period with only 66% of this cohort achieving permanence

4.3 Pathway Plan Reviews

When a Looked After Child reaches 15 years and six months old, they become a Care Leaver. The Local Authority will initiate their Pathway Plan. There are two parts to a Pathway Plan. Part 1 is all about what the young person needs (leaving care assessment of need) and part 2 is all about their goals and plans. The young person's first Pathway Plan will be completed by their 16th birthday. For this year a total of 734 Pathway Plans were reviewed.

5.0 PARTICIPATION AND ADVOCACY

The primary objective of the IRO service is to ensure that children and young people are included in the decisions made about them and they actively participate in their meetings. 64% of children and young people participated in the reviews in some form this year.



IRO's have regularly reported having more participation from children and young people virtually rather than in person. Most will meet via Teams or the telephone to have a consultation with their IRO - it is sometimes just the actual meeting they wish to avoid.

IRO's are beginning to hold more reviews in person however this is dependent upon an appropriate venue being identified. We are also seeing more children being visited in person and this is something we continue to encourage.

Participation can be through completion of consultation documents, providing views via an advocate or their carers, or attendance at the review meeting. Whilst this is the recorded figure we believe the actual figure to be higher. Given the restrictions in place during that time certain IRO's had recorded that the child had not participated in their review as they were not physically present, despite them contributing their views prior to the meeting either via teams or WhatsApp. The feedback indicated that whilst these young people did not wish to attend their actual CLA review they preferred to give their views in other forms. Moving forward, all young people whom have contributed to their review will be recorded as having participated and in what form.

During this review period –

17% of children and young people refused to attend their CLA review.

11% did not participate due to limited understanding.

18% were too young to participate.

We are currently developing our data in this area to give more detailed reasoning as to why a young person has refused to attend or unable to attend their CLA review. IRO's are also being encouraged to add into case notes the attempts made to encourage the young person to participate in their CLA review.

We have received a number of compliments from young people during this review period, below are some examples of what our young people have told us.

'You have played a huge part in my life and I won't ever forget you. Thank you for making sure I had the majority of the things I needed. I'll miss you for definite. xxx'

'I just want to say a massive thankyou for all the help and support you have given me over the last few years'

'Thank you for always being there for me when I needed you'

In Wirral the Children's Rights and Advocacy Service continues to be provided by Barnardo's. The contract specifically covers Advocacy support (including

complaints) for Children Looked after and Care Leavers up to age 25. Advocacy support for Children aged 8 and above subject to a child protection plan Age. Children looked after foster care reviews. Provision of independent visitors for Children who are Looked After.

Within the reporting period 2022/23 78 children looked after were supported by Barnardo's in the form of Advocacy or from an Independent Visitor. Below are some case examples of how this service has supported our looked after children.

WHO WAS THE PERSON AND WHAT WAS THE ISSUE?
<i>First, tell us a little about the person. Second, describe a challenge they faced. How did that problem affect their life, independence, wellbeing, and safety and security at home?</i>
<p>YP has a diagnosis of Autism affecting their ability to develop relationships with others and make safe choices.</p> <p>YP is very keen to do things independently and have more freedom, however, often needs additional guidance to do this safely. They can sometimes push back against boundaries, and struggle to regulate and verbalize their sense of frustration and anger that arises.</p> <p>YP has limited contact with family members and lives in foster care. YP's Care Plan promotes them accessing activity groups for young people. The majority of the groups that YP attends are specialist groups for children/young people with additional needs.</p> <p>YP thrives when doing activities that promote their particular interests and find engaging with others easier when interaction centers around an activity.</p>
WHAT DID THE CLIENT/FAMILY/REFERRER EXPECT FROM THE SERVICE - MAIN GOAL
<p>To widen YP's support network with a trusted adult.</p> <p>To provide a consistent safe space separate from professional involvement and a different social experience from "young people like me".</p> <p>To enable YP to develop socially and emotionally and support their goal of becoming independent.</p>
HOW WE HELPED AND THE SUPPORT PROVIDED.
The YP was encouraged to discuss their vision of the right IV for them and how this

person can help them to meet their individual goals.

The Service considered YP's expressed preferences and needs in line with the skills, abilities and motivations of available volunteers, in order to identify the best match. It was important to YP to have an IV who enjoyed being active and eating!

The Service identified an IV with experience in supporting younger children who showed commitment to learning about YP's needs and confidence in responding to behaviours.

YP was provided with information and photographs of the IV and was supported to consider this information in line with their goals.

An introductory meeting was arranged and following this, YP's IV consistently meets up with YP on a monthly basis. They spend quality time together doing a variety of activities that build on YP's existing interests and introduce new experiences and places.

YP's IV sends letters and cards via post in between visits to keep the momentum of the relationship going in between visits.

OUTCOMES ACHIEVED FOR THE PERSON/FAMILY

YP's IV complements the support of YP's foster carer in developing a meaningful relationship that can be relied upon.

The IV is learning to interpret YP's behaviours to be responsive to their needs. This has enabled the IV to help YP to verbalize their wishes and feelings about things that are important to them.

IV is encouraging YP to make decisions and choices about visits e.g. what activities to do and how to travel there to build confidence and independence. YP's growth of confidence in the relationship has meant they have trusted their IV to introduce them to activities and places outside of their usual routine.

YP is being guided as to how to build relationships with others, such as being reminded to ask questions about the other person, being encouraged to share, and seeing the world from another person's point of view.

Behaviours are being modelled by YP's IV to encourage safer choices e.g. using a crossing on the road.

WHAT WAS THE IMPACT OF THE SERVICE? WHAT DIFFERENCE DID YOU MAKE FOR THE PERSON/FAMILY?

- **Advice and support**
- **Health and Well Being**
- **Social Isolation**
- **Finances**

- **Emotional well being**

YP has had opportunity to reduce their social isolation by expanding their support network, and promote their independence through provision of social opportunities and activities to build emotional wellbeing.

CHALLENGES AND DIFFICULTIES ENCOUNTERED

Supervision with the IV has focused on ensuring they remain committed and motivated in their support to enable YP to continue to benefit from their support. YP does not always give verbal feedback about their experience or perspective on the IV relationship, so the IV is being supported to consider non-verbal cues that YP is enjoying their time together and sees the value in this.

QUOTES FROM INVOLVED PARTIES (CLIENTS/FAMILY

From Foster Carer:

"Thank you for matching [YP] with [IV]. [IV] is an absolute delight and puts so much thought into their trips... [YP] can be quite reserved when it comes to giving any positive feedback but [YP] looks forward to all the treats [IV] organised.

I think [YP's] really lucky to have [IV]!

[YP] was very proud of [themselves] for sharing the pizza. Sharing is new so that's amazing. [They] are looking forward to next time!"

COMMISSIONED SERVICE OBJECTIVES - WHAT HAS WORKED WELL?

- Introducing YP to an available IV in a timely way.
- Providing IV with 'Need to Know Information' from the foster carer's insight into YP's needs, behaviours and effective responses to enable them to consider how they

will approach relationship building and feel confident in their responses to challenges.

WHO WAS THE PERSON AND WHAT WAS THE ISSUE?

First, tell us a little about the person. Second, describe a challenge they faced. How did that problem affect their life, independence, wellbeing, and safety and security at home?

Young person (YP) is a child looked after by Wirral local authority. YP is 11 years old and in their final year of primary school with a transition to secondary school imminent. YP lives in a foster placement with a connected carer on Wirral. They were referred to the service by their Social Worker from the Permanence Team.

YP has a diagnosis of ADHD and struggles with expressing and explaining their wishes and feelings. YP needed support from an advocate to enable them to talk about and share their views about family time*.

*Family Time is Supervised Contact

WHAT DID THE CLIENT/FAMILY/REFERRER EXPECT FROM THE SERVICE - MAIN GOAL

The YP's Social Worker referred them to Barnardo's Advocacy Service so that they had the opportunity to talk to an independent person about their views around family time.

Information from the referral form stated:

"YP resides with a Connected Carer. The relationship between YP's carer and YP mother is complex and it is unclear whether YP views regarding family time are being influenced by carer / mother. YP wishes and feelings need to be obtained independently as there is a long history of Social Care involvement, giving YP the opportunity to share what they would like and obtaining their views is important."

HOW WE HELPED AND THE SUPPORT PROVIDED.

An Advocate met with the YP whilst they were at school for 2 sessions and supported the YP to attend a care planning meeting to enable them to share their views.

Session 1

The Advocate met with the YP and introduced the role of an Advocate. The Advocate explained about the YP's referral to the service and the YP agreed that they would like support from an Advocate.

The YP completed direct work about who they spend time with from their family. They identified their Mum, Dad, brother and sister.

Whilst completing the direct work, the YP spoke with their Advocate about the following views:

- YP said they see their Mum, Dad and siblings once a month.
- YP said they used to see them once a week and the YP feels a bit "miffed" that contact has changed to once a month.
- YP said they would like to have one to one contact with their mum and do an activity with her like bowling or mini golf.
- YP said they would also like to have one to one contact with their Dad.

How were YP's views shared and listened to

The Advocate attended the YP's care planning meeting with their Social Worker and other professionals.

The Advocate shared the YP's views about time they spend with their family with the professionals at the meeting who all listened to what the YP would like.

Session 2

The Advocate met with the YP in school. The Advocate explained to the YP that they have shared their views at their care planning meeting with the professionals that attended. The Advocate explained about care planning meetings, what the purpose of the meeting is and who attends them. The Advocate asked the YP if they have ever attended a meeting, they haven't and confirmed with the Advocate that they would like the opportunity to attend the end of the next meeting to have an overview of what has been discussed and agreed. The Advocate agreed to raise this with the YP's social worker.

The YP completed direct work around what makes them feel happy, sad, scared and angry:

- Happy- *"Contact"*
- Sad- *"Leaving contact"*
- Scared: *"The dark, nightmares, spiders, Coco Melon (children's cartoon)"*
- Angry: *"Some children at school that annoy the YP"*

The YP shared the following views with the Advocate that they would like to be shared during their care planning meeting:

- YP would like to spend one to one time with Mum and Dad to do an activity with them without their siblings being there. This had not been organised, despite the Advocate sharing this during the previous care planning meeting.
- YP hasn't had contact with their sister for a while, they think this is because their carer has been in pain so not able to do contact.
- When the Advocate asked YP how they feel about not seeing their sister for a while, they shrugged their shoulders.

How were the YP's views shared and listened to

The Advocate shared the YP's wish to attend the end of their care planning meeting with their Social Worker. The Social Worker listened to this and arranged for the YP to attend the end of the meeting.

The Advocate attended the YP's care planning meeting and shared the YP's views. The Social Worker listened to the YP's views around wanting one-to-one contact time with Mum and Dad however did not offer a solution for this. The Advocate asked the Social Worker if this was going to be possible, The Social worker asked the YP's Mum to stay on the teams meeting and they would discuss possible dates for one-to-one time.

OUTCOMES ACHIEVED FOR THE PERSON/FAMILY

Following the YP's care planning meeting the Advocate contacted the Social Worker to ask them to keep the Advocate up to date with any developments regarding one-to-one contact.

The Social Worker contacted the Advocate to confirm that one to one contact dates have been put in place with Mum and Dad in addition to the whole family contact the YP has.

WHAT WAS THE IMPACT OF THE SERVICE? WHAT DIFFERENCE DID YOU MAKE FOR THE PERSON/FAMILY?

- **Advice and support**
- **Health and Well Being**
- **Social Isolation**
- **Finances**
- **Emotional well being**

- The YP has been supported to share their views, wishes and feelings about

family time and that they would like to have one to one contact with their parents.

- The YP was supported to attend their care planning meeting allowing them the opportunity to meet all the professionals working with them, share their views and listen to feedback and updates.
- The YP's views have been listened to and one to one time with Mum and Dad has been organized.

CHALLENGES AND DIFFICULTIES ENCOUNTERED

None

QUOTES FROM INVOLVED PARTIES (CLIENTS/FAMILY)

YP informed their Mum that they *"like their Advocate from Barnardo's and enjoy their sessions."*

COMMISSIONED SERVICE OBJECTIVES - WHAT HAS WORKED WELL?

- Referral process.
- Setting up sessions with the YP at school.
- Organising for the YP to attend their care planning meeting.

WHO WAS THE PERSON AND WHAT WAS THE ISSUE?

First, tell us a little about the person. Second, describe a challenge they faced. How did that problem affect their life, independence, wellbeing, and safety and security at home?

YP (15) had recently become looked after and moved to foster care.

The level of contact YP was having with their parents had reduced to enable them to settle, and YP was struggling with this period of adjustment and feelings of isolation.

As YP moves from childhood to teenage years, their IV's role is naturally developing to one of a genuine friend. YP seeks out their IV for guidance about relationships and their hopes and goals for the future.

WHAT DID THE CLIENT/FAMILY/REFERRER EXPECT FROM THE SERVICE - MAIN GOAL

YP's goals:

- "Someone to spend time with who isn't [foster carer]"
- "Someone to go to Spring City with"
- Spend time with someone who is "kind" and "funny".

Professionals' goals:

- Build on YP's enjoyment of 1:1 time and attention
- Long-term involvement to offer stability during a period of significant change
- Increase the number of trusted adults within YP's support network who are independent of professionals.

HOW WE HELPED AND THE SUPPORT PROVIDED.

YP has been matched with their IV, who makes them feel "happy", for 5 years.

The IV's unwavering dedication has created a valued friendship that is trusted, enabling YP to "feel safe". Recently, YP felt comfortable to reach out for their IV's hand for the first time.

The IV meets YP on a monthly basis and they now text one another between visits to make plans for their meet-ups. This encourages YP to take ownership of plans and express their choices.

YP often experiences low mood and there have been periods of time where they have withdrawn or pushed people away. Their IV has shown resilience and

sensitivity to reassure YP that she doesn't judge them, giving them permission "to be myself and not what others want me to be".

The IV loves for YP to experience fun and joy. They will push themselves outside their own comfort zone for the benefit of YP.

The IV seeks to understand how YP is feeling by giving them time and space to talk about the things most important to them. The IV responds with empathy and compassion when YP shares difficult details of trauma they have experienced.

The YP has had the opportunity for new and varied experiences from a forest adventure trail, to watching live poetry, to trampolining.

OUTCOMES ACHIEVED FOR THE PERSON/FAMILY

- Reduction in social isolation
- Introduction of new experiences, such as activities/places visited
- Growth of trust within relationships with adults, helping YP to “*feel safe*”.

WHAT WAS THE IMPACT OF THE SERVICE? WHAT DIFFERENCE DID YOU MAKE FOR THE PERSON/FAMILY?

- **Advice and support**
- **Health and Well Being**
- **Social Isolation**
- **Finances**
- **Emotional well being**

The variety of activities the IV has planned and organised for YP has helped YP to rekindle childhood, make new positive memories for missed experiences and to escape in simple childhood pleasures like playing eye-spy or jumping over the cracks in the pavement. The IV’s commitment offers continuity and “*time [for me] to escape from the world*” when YP feels isolated.

CHALLENGES AND DIFFICULTIES ENCOUNTERED

Ensuring the IV’s longstanding role in YP’s life is represented in care planning and discussions in a way that is meaningful, recorded within their social care record and does not compromise the independence of the role.

QUOTES FROM INVOLVED PARTIES (CLIENTS/FAMILY)

YP says:

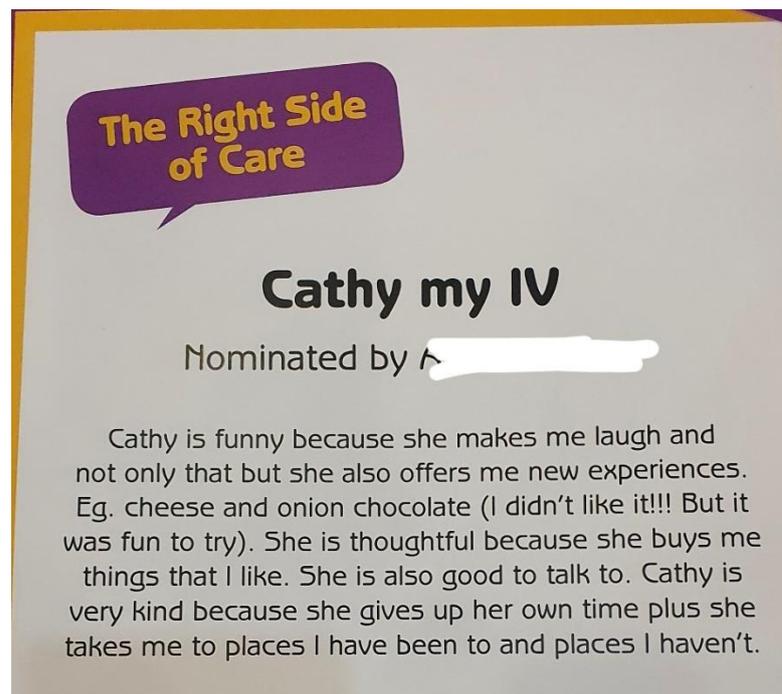
“*Every young person should have someone like [my IV]*”.

"I can tell [IV] worries or things I'm scared about"

COMMISSIONED SERVICE OBJECTIVES - WHAT HAS WORKED WELL?

- Referral process and timely introduction of an IV at the beginning of YP's care journey.
- Considered matching process ("*[my IV] reminds me of me*").
- Reviewing the support periodically, but enabling time and space for the relationship to grow
- Enabling opportunities for participation and engagement for service development-YP has participated in a consultation process via Wirral Participation and Engagement Team. They have also celebrated their IV winning Barnardo's Marsh Trust Volunteer of the Year Award 2022 by watching this live streamed and receiving a copy of the nomination that talks about their shared story as YP and IV.

An IV supporting a young male (13) with autism received the below Listen to Me Nomination from Wirral CYP Participation & Engagement Team.



6.0 QUALITY ASSURANCE

6.1 The Role of the IRO in Quality Assurance

The IRO's role is pivotal in providing independent monitoring of the child's care plan to ensure the children and young people achieve positive outcomes. In Wirral IRO's complete a Midpoint Review whereby they hold a meeting with the allocated social worker and discuss progression of the plan and whether recommendations from the previous review have been completed. This not only evidences their footprint but also allows them to discuss any gaps with the social worker and consider whether an escalation is required. We have seen a steady improvement in Midpoint reviews being completed this year with 1916 compared to 1449 in previous reporting period. The challenge now is to ensure that the Midpoint reviews are leading to better outcomes for children and young people and prevent drift within the care plan.

6.2 Quality Assurance Framework

Quality assurance and learning improvement activity has continued during this review period to ensure senior management oversight of the quality of service being delivered. Since July 21 IRO's have contributed to bi-monthly case file audits along with the Safeguarding unit managers conducting monthly audits. There are clear expectations that monthly audits will be completed alongside the social worker and viewed as learning opportunities and a reflective space for the practitioner.

A total of **117 audits** have been completed within the last 6 months with the following grades assigned.

Outstanding	18%
Good	51%
Requires Improvement	22%
Inadequate	9%

The audits identified areas for improvement including not considering the history, not examining in depth into the world of the adult, not including males, a resulting lack of good analysis and the quality of plans are themes which have also systematically come up in audits.

It is positive to note however that the audits have identified the quality of our social workers as high and their ability to engage with families is consistently seen to be strong including some good examples of relationship based practice. Case summaries are now generally presented on the consistent format and almost all observed contained a pen picture of the child. Assessments are also generally up to date.

7.0 DISPUTE RESOLUTION / ESCALATION PROCESS

One of the key functions of the IRO is to resolve problems arising out of the care planning process. It is expected that IROs establish positive working relationships with the social workers of the children for whom they are responsible. Where problems are identified in relation to a child's case, for example in relation to care planning, the implementation of the care plan or decisions relating to it, resources or poor practice, the IRO will, in the first instance, seek to resolve the issue informally with the social worker or the social worker's managers. The IRO should place a record of this initial informal resolution process on the child's file. If the matter is not resolved in a timescale (within 5 working days) that is appropriate to the child's needs, the IRO should consider taking formal action.

Taking into account different management structures within each local authority there are likely to be some variations in the process, but it will involve escalating the matter in dispute through a number of levels of seniority within the department with identified timescales (5 days) for a response at each stage. The IRO may bypass any stage and progress the dispute to the level s/he considers most appropriate. The formal dispute resolution process within each Local Authority should have timescales in total of no more than 20 working days.

The IRO has the power to refer the matter to Cafcass at any point in the dispute resolution process and may consider it necessary to make a concurrent referral to Cafcass at the same time that s/he instigates the dispute resolution process.

The individual IRO is personally responsible for activating the dispute resolution process, even if this step may not be in accordance with the child's wishes and feelings, but may, in the IRO's view, be in accordance with the best interest and welfare of the child, as well as his/her human rights.

There will be times when the IRO may be advised that obstacles in the way of resolving the issue are outside or beyond the control of the local authority, for example in relation to staffing, interagency or resources issues. However, if these are impacting on the ability of the department to meet the needs of a child as identified in the child's care plan, the IRO should continue to escalate the issue. The IRO should ensure that all actions s/he takes in an attempt to resolve a dispute are recorded on the child's case record.

7.1 Development of the Escalation process in Wirral

Formal Escalation Forms are now embedded within Liquid Logic. Categories of Escalation are:

- **Failure to Adhere to statutory requirements**

Examples of this could include statutory visits, core groups, not taking place in a timely manner, care / pathway plans of poor quality, reports not including required information, reports not available or not shared with parent/carer.

- **Drift & Delay**

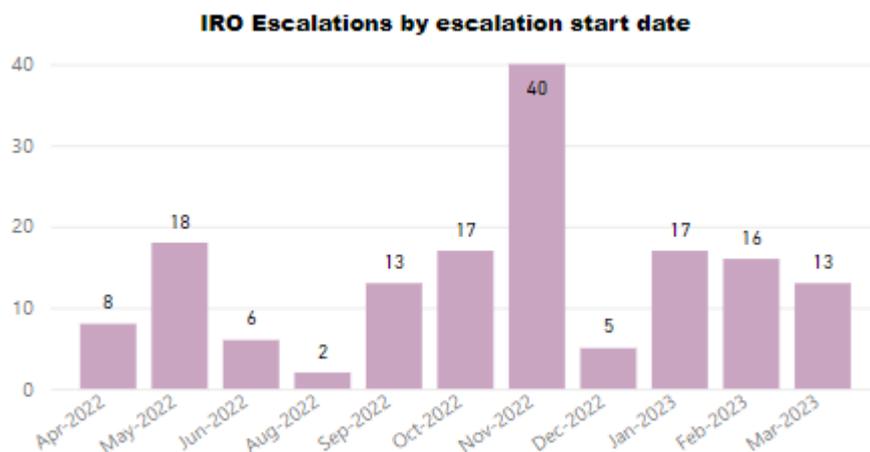
Examples of this could include drift in plan of permanence, actions from CP/CLA reviews not being completed.

- **Disagreement in Services**

An example of this could be where the IRO does not agree with the care plan. It's okay to disagree but this needs to be formally recorded on the child's file.

- **Safeguarding**

An example of this would be where the Social Worker has not responded appropriately/timely to a safeguarding concern.



Over the last year we have seen 155 formal escalations raised. The majority of these escalations (75%) were raised due to concerns regarding drift and delay and Statutory requirements not being met. We have also raised 483 informal escalations.

It has been found that escalations are not being consistently used across the team with 8 IRO's accounting for 60% of the escalation activity in the past year. The unit recognises that this is an area we need to strengthen. IRO's need to ensure that escalations are raised in a timely manner and lead to positive outcomes for the children of Wirral and strengthen practice. This is an area that is continually monitored through the monthly performance report by management within the unit and discussed in each supervision. Performance in this area has improved and the unit is escalating more cases appropriately and in a timely manner.

Equally important in the escalation process is how quickly they are responded to and the timely response to escalations across the service. It is positive to note that out of the escalations raised only 4 were not resolved within the 20 days timescale and most often resolved at Head of Service level. This evidences that

when escalations are raised, they are responded to in a timely manner.

It is positive to note that these escalations were resolved without requiring a formal escalation. This evidences that the concern was responded to quickly and avoided any negative impact upon the child or young person. The majority of these escalations (32%) related to concern regarding drift and delay of the care plan. Failing to adhere to statutory duties accounted for 21% of the escalations however were rectified and responded to before they had any negative impact upon the child or young person. It is positive to note that only 9% of these escalations resulted from concerns regarding safeguarding issues. These escalations were responded to and resolved quickly.

8. SUMMARY

8.1 What has gone well

- We have chaired 2100 Child looked after reviews this year.
- We have reviewed 354 Pathway plans this year.
- 95% of all reviews were held in statutory timescale.
- IROs have started holding CLA reviews in person. Visits to young people have increased to see children across their caseloads.
- The Safeguarding unit has developed our internal data sets which can now track the IRO's compliance with the Practice Standards based on the standards encompassed the IRO Handbook.
- The Strengthening Families Enhancing Futures (SFEF) Model is embedded into practice.
- We continue to have a longstanding stable team within the Safeguarding Unit.
- We have developed a number of forms / processes within the system to support IRO's in their function and meeting their statutory requirements.

8.2 What we need to strengthen

- Whilst child participation in their review, we remain keen to improve attendance figures at CLA Reviews and a focus moving forward with regards to engagement.
- Sufficiency of placements is a continuing cause of concern regarding achieving stability and permanency.
- Escalations are not consistently raised when practice concerns are identified. The management group are clear that there is a higher degree of dialogue and challenge between the unit and social care however this is not consistently recorded as part of the IRO footprint and oversight. Focus in the coming year will be to ensure that all IRO's have a good understanding of their statutory duties and responsibilities with regards to escalations.

- Whilst Midpoint reviews are being undertaken, we need to ensure that they are meaningful, ensuring the child's needs are met and preventing drift and delay.
- Performance with regards to CLA review minutes being completed within timescales requires improvement.
- Progression of discharges has caused some challenge due to difficulties with capacity in legal. This is being addressed by senior management.

9. KEY PRIORITIES FOR 2023/24

Objective	Impact	Measures of success	Actions
<p>Provide children with a variety of methods to participate in their review and encourage physical attendance</p> <p>Our aim is that all children 0 – 5yrs will be seen in placement by the IRO prior to the review.</p>	<p>More children will attend their review meetings and take part in the actual review</p>	<p>Children and young people will feedback that they enjoyed their review and felt it was their meeting.</p> <p>Increased numbers of children participating in their review evidenced within the checklist</p> <p>Increased feedback evidenced on casefile.</p>	<p>Increased Face to face meetings</p> <p>IRO's will ensure that they are seeing children and young people in person before every review and that their views are clearly recorded.</p> <p>Children and young people will also be encouraged to attend their CLA review. If they refuse then alternative methods will be used to ensure their views are sought. Clear rationale is also evident when the child / young person is refusing to be seen by their IRO.</p> <p>IRO's to encourage children and young people to complete feedback questionnaires.</p>

<p>Ensure all children understand the role of the IRO and what the child looked after review meeting is about.</p>	<p>Children will know their IRO and have a relationship with them to ensure they take part in the review</p>	<p>When asked children will be able to name their IRO and what they do and what can be achieved from their cared for review</p>	<p>For IROs to increase face to face visits to children and to keep in touch with them on a regular basis.</p>
<p>Embed new Quality Assurance Framework, using live audits with the team and reflecting upon practice.</p>	<p>Practice standards will improve and the impact of the IRO in relation to the experience they will bring to auditing activity will bring about shared goals and understanding of what good looks like. Networks and supportive relationships will be developed</p>	<p>Practice improvement will be clear from audit activity more audits will be good</p>	<p>IROs to partake in monthly audit activity with team managers across the service.</p> <p>IRO's to become more 'visible' as we move towards more face to face meetings and have a presence in order to maintain good links with individual Team Managers and Social Workers.</p>
<p>Focus on achieving permanency at the second review.</p>	<p>Children will achieve early permanency with fewer placement moves</p> <p>All options will be considered early in planning including the option of Special Guardianship to a connected</p>	<p>More plans of permanency will be achieved by the four-month review</p> <p>IROs will identify any gaps in the Children and Family Assessment at the first review</p>	<p>IRO's to complete the quality assurance on each new case will give opportunity to highlight any missing information such as a genogram to enable good preparation for the review.</p> <p>IROs to raise formal escalations if a permanency plan is not</p>

	person where possible	IROs will identify family members to be considered at the first review	achieved at the second review due to practice being below standard. Data to be improved to capture when permanence plan identified and subsequent ratification.
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