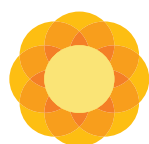


Independent Reviewing Officer (IRO) Service

Annual Report Full Report



BIRMINGHAM
CHILDREN'S TRUST

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The Contribution of Independent Reviewing Officers to Quality Assuring Birmingham Children’s Trust undertaking its functions for Children in Care

April 2022- March 2023

1. Overview

1.1 This Annual IRO report provides quantitative and qualitative evidence relating to the IRO Service within Birmingham Children’s Trust during the period 1st April to 31st March 2023, as required by statutory guidance. Overall, the information and data describe an established and quality service which continues to support BCT with providing good outcomes for children and young people in care in Birmingham. The report includes key information outlining the work of the service with and for children in care.

1.2 The IRO service has a collaborative approach, based on an understanding that the role and functions of the Independent Reviewing Officer (IRO) will contribute to achieving good outcomes for children in care. The service seeks to work alongside other BCT services and partner organisations through a relational approach underpinned by “High Expectation, High Challenge, High Support”.

1.3. The IRO Service continues to contribute positively towards Birmingham Children’s Trust’s development journey ensuring that the majority of children and young people in care have timely and good quality care and permanence plans. The IRO Service Quality Assurance Framework continues to provide added value and evidence to support the Trust’s improvement journey.

2,795 children and young people spend a period in the care of Birmingham Children’s Trust during 2022-23

1.4 The report considers the profile of children in care of Birmingham Children’s Trust during the year. There were 2,795 children and young people who spent some time in the care of Birmingham Children’s Trust during the period April 2022 to March 2023. On 31st March 2023, there were 2201 children in care, compared to 2094 children on 31st March 2022, an increase of 107 children. This reflects a steady increase in the number of children in care over the last two years. The report provides a more detailed profile about children in care, including their age, gender and ethnic background, the length of time in care, their legal status and type of placement.

5864 Reviews took place during 2022-23, 5609 (95.6%) of which were within statutory timescales.

1.5 Between April 2022 and March 2023 there were 5864 Child in Care (CIC) reviews completed. 95.6% of CIC reviews (5609) were held within statutory timescale.

The views of children and young people in care were available in 94% of all Reviews, with the number of children attending their review being 52.1%

1.6 The participation of children and young people in their reviews is examined in more detail. The views of children and young people were available in 94% of reviews. In 52.1% of reviews held the child or young person attended the meeting in person, this was an improvement by nearly 7% on the previous year but we are seeking for attendance to be higher.

- 1.7 The increase of the numbers of children in care has impacted the workloads of the service - we have assimilated two additional temporary IRO posts in year, and average caseloads for IROs have been between 73 and 75 children.
- 1.8 The report details the impact of the IRO use of resolution and escalation. There were 185 formal escalations during the year, an increase from 149 in 2021-22. The timeframe for resolution is on average 22.2 days with 57% of escalations resolved within the required 20 working days. There was improvement from the previous year in both a reduction of average working days and increase in disputes resolved within timeframe. Most escalations arise from delay in establishing suitable and permanent accommodation, lack of progress of plans, delays in accessing suitable education or therapeutic provision or establishing suitable contact with family members. IROs continued to informally raise issues of concern with 918 such escalations in the year.
- 1.9 The report considers the quality-of-care planning, informed by data and service audits. IROs identified that in nearly 94% of reviews (or 19 out of 20 children) the child had a suitable and clear plan for permanence, health, education and family and social relationships. Where this was not the case IROs had escalated concerns for delay. In 2nd reviews or 4 months after entering care, IROs identified that 88% (or 9 out of 10 children) had a clear plan for permanence.
- 1.10 Feedback for children and young people suggests that included 84% were happy that their IRO listens to them and involves them in decisions, 76% were happy with the involvement of their IRO, 83% said the plans and outcomes of the review was discussed with them. 73% had attended a least one review since being in care.

In 94% of CIC reviews the child has a clear plan for their permanence

In 88% of 2nd CIC Reviews held 4 months from coming into care the child has a clear plan for their permanence

In survey 84% of children said their IRO listened to them and involved them in decisions

2. Achievements and Progress during 2022-23

- 2.1 The report highlights a range of achievements and a summary of progress in 2022-23, which include:
- Every child is allocated a named IRO within 72 hours of the service being notified that the child is in care.
 - Most children and young people's reviews are held within statutory timescale and children and young people are routinely able to contribute their views to their reviews, with increased participation and attendance at review meetings.
 - The service has worked with young people and the Rights and Participation Service, to reflect on and look at developing our delivery to promote more child led participation.
 - The Service has commissioned, and now successfully using, an animated video to communicate to children and young people; the role of their IRO, what is and why they have a CIC review and how they can participate.

link to video - <https://vimeo.com/750399636/2cca109b4d>

- Updating and refresh of Review Record, simplified and more focused on views of children and young people.
- The Dispute resolution and escalation process has continued to work successfully to address some difficult care planning issues for some children and has seen a marked improvement in effectiveness this year.
- The Long-Term Fostering Early Ending work continues to support learning and practice development for the Trust around permanent foster placement planning for children and improvements are now routinely agreed with the Children in Care Service and Practice Hub.
- A continued stable and highly skilled and knowledgeable team of practitioners working with children and young people and developing links to support social workers.
- Increasing awareness and use of performance data and information to inform and improve practice both within the service and for individual IRO practice.
- The service has effectively worked within the Trust to promote better outcomes for children, for example, in respect of children's personal finances and savings, supporting the mental health and wellbeing for children in care, and implementing the Trust's participation strategy.

3. Practice Improvement Themes

3.1 The report identifies several practice themes to improve care planning. These are communicated regularly to the Trust through the IRO QA Framework reporting arrangements. Highlighted issues include:

- Concern about the number of children under 16 years being placed in unregulated accommodation and young people 16 and 17 years being placed inappropriately in supported accommodation. IROs have worked with the Trust to effectively embed processes to support statutory regulations.
- Delays in establishing life story work and other life narrative work for some children requiring this, led to a Trust refocusing project on progressing life story work.
- Protecting young people's personal allowances from deductions paid to accommodation providers.
- Delays in progressing assessments for children returning home or in progressing the revocation of care orders to discharge children from care who are living at home with their parents. The Trust has now established a focused project to improve progressing of discharge from care.
- Delays for some assessment and plans to place children with connected carers and secure their permanence or in the timely placement of children for adoption including early permanence.

- Concerns about limited social worker availability, and continuity, for some children in care and delays this causes for progressing their care and permanence planning.
- Delays in progressing pathway planning for young people in care aged 16 and 17.
- Placement sufficiency issues resulting in some children being placed in inappropriate accommodation resulting in increased instability and continuity of care.

4. Service Priorities for 2023-24

4.1 The report identified a number of IRO service priorities

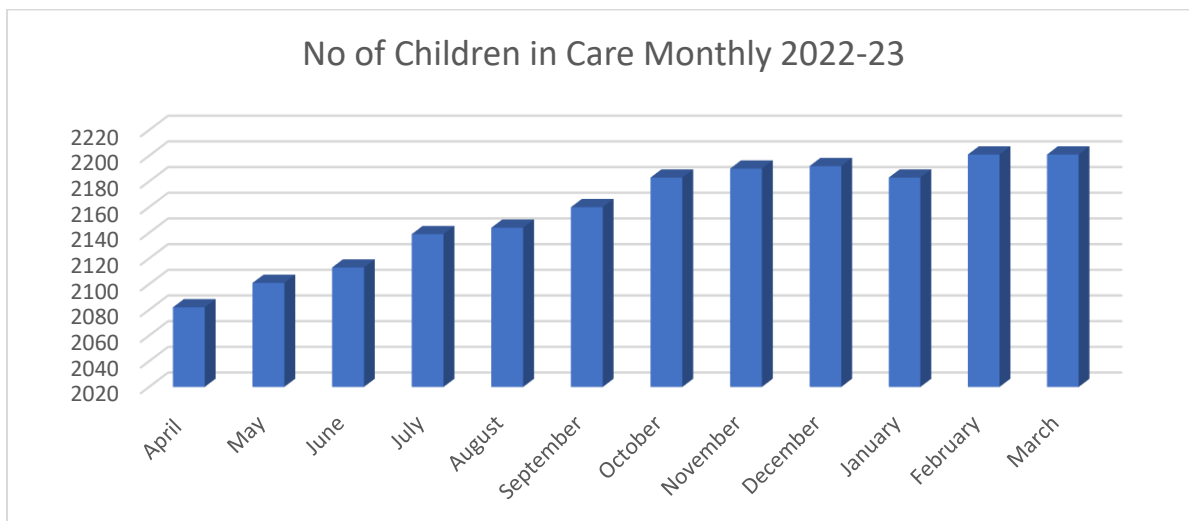
- Continued development of the use of performance information to improve practice both within the service and across the Trust (linked to embedding of Quality Assurance Framework as a means of identifying improvements and issues)
- Using findings of commissioned research, a refresh of the participation work and direct work with children and young people, to:
 - Implement systems to support ensuring children and young people are fully consulted and lead on the location, attendance and timing of their reviews;
 - Support children and young people to have stronger relationships with their IRO;
 - Creatively use apps such as Mind of My Own to support children and young people to more fully participating in reviews;
 - Enable records to be more child focused and written more directly to the child or young person;
 - Refresh how we support children and young people to chair or directly lead review meetings.
- Establishing IRO Profiles and making these accessible to children and young people
- Streamlining plans for children and young people with care plans and EHC Plans
- Working with the Trust to implement new arrangements for children and young people in care savings and personal finances.
- Working with Trust Practice Hub to enable learning from IRO QA Framework to be integrated with The Trust's Quality Assurance work, to enable more timely and relevant improvements to practice.
- Embedding the adoption of "Connections Count" the Trust practice model within IRO practice.
- Working with Trust projects to develop life story work, improving arrangements for Health Assessments and supporting exiting care for children living within their birth or extended families.

Quantitative information – Children in Care Population

2. Profile of Birmingham’s Children in Care

2.1 Birmingham’s Children in Care population stood at **2201** children and young people on the 31st of March 2023. This is a rise of 107 children compared to the previous year (2094 as of 31st March 2022) and represents a continued upward trend.

Number of Children in Care in Birmingham at end of each Month 2022-23 (Diagram 1)



2.2 There continues to be a high increase in the number of unaccompanied asylum-seeking children through the year with 168 UASC in care at 31/03/2023, with increases in admissions in the 2nd half of the year (from September). This continues a trend increase from 108 children at 31/03/2022 and 68 at 31/03/2021. These young people have heightened levels of trauma often as a result of injustice, war, and have often experienced bereavement meaning they have complex care and emotional needs.

2.3 As of 31st March 2023, the rate of Children in Care in Birmingham was 77 per 10,000 children, which is above the previous year end rate at 73 per 10K, and a step change from 67 per 10K at 31/03/2021, and Birmingham continues to be above the March 2022 national average for England (70 per 10,000). This rate of children in care however remains lower than our “statistical neighbours” and regional neighbours (at 87.2 and 88 respectively at 31/03/22). In the table below it is noticeable that in the rate in the south of the city remains much higher rate that other areas.

Rates of Children in Care per 10,000 (Table 3)

Birmingham Children’s Trust	Mar 21	Mar -22	Mar -23
East	48	46	48
NW & Central	53	56	58
South	92	124	127
City Total	67	73	77

England	67	70	
"Statistical Neighbours"	85.9	87.2	
West Midlands	85	88	

- 2.4 There continue to be more boys than girls in the children in care population with 55.8% boys compared to 44.2% girls. There is around 1.6% change increase for boys and decrease for girls. Currently systems do not record non-binary.
- 2.5 Of the 2201 young people in care on the 31st of March 2023 the majority 60.4% are 10 years and over. It is noticeable that there is a large increase in 16- and 17-year-olds in care, admissions which appear to be impacted by increase in UASC. The table compares percentage at 31/03/22.

Age of Children in the Care on 31-03-2023 (Table 4)

Ages of Children in Care at 31/03/2023					
	Under 1	1 to 4 Years	5 - 9 Years	10 - 15 Years	16/17 years
Number (& March 22)	111 (107)	381 (371)	379 (397)	809 (789)	521 (430)
Percentage of CIC & (March 22)	5% (5.1%)	17.3% (17.7%)	17.2% (19%)	36.7% (37.7%)	23.7% (20.5%)

- 2.6 The ethnic profile of the care population differs to that of the child population in Birmingham. There has been no significant changes year on year since 2022, except a percentage increase for Asian/Asian British of 2.6% of the whole. The increase is partially attributed to increase UASC of whom many share this ethnicity, but overall remains well below the local percentage population. Dual heritage children in care are proportionally significantly higher than the local population and at a higher rate than the proportion in care across the UK. The proportions of White and Black children in care reflect the city population.

Children in Care by Ethnicity March 2023 (Table 5)

Ethnicity					
	White	Asian/ Asian British	Black / Black British	Dual Heritage	Other
BCT CIC Mar 2023	1088 (49.4%)	288 (13.1%)	262 (11.9%)	509 (23.1%)	54 (2.5%)
BCT CIC Mar 2022	994 (51.9%)	201 (10.5%)	222 (11.6%)	462 (24.1%)	35 (1.8%)

Birmingham Pop 2021 census	48.6%	31%	11%	4.8%	4.5%
England CIC Mar 2022	73%	5%	7%	10%	4%
England Pop (2021 census)	74.4%	9.3%	4%	2.9%	2.1%

2.7 Table 6 below shows a snapshot of the children in care population on the 31st March 2023 by legal status. This shows after a number of year-on-year numerical increases of young people are in care subject to a legal order, compared to arrangements through a voluntary arrangement (S20) with their parents. Birmingham figures remain comparable with national data.

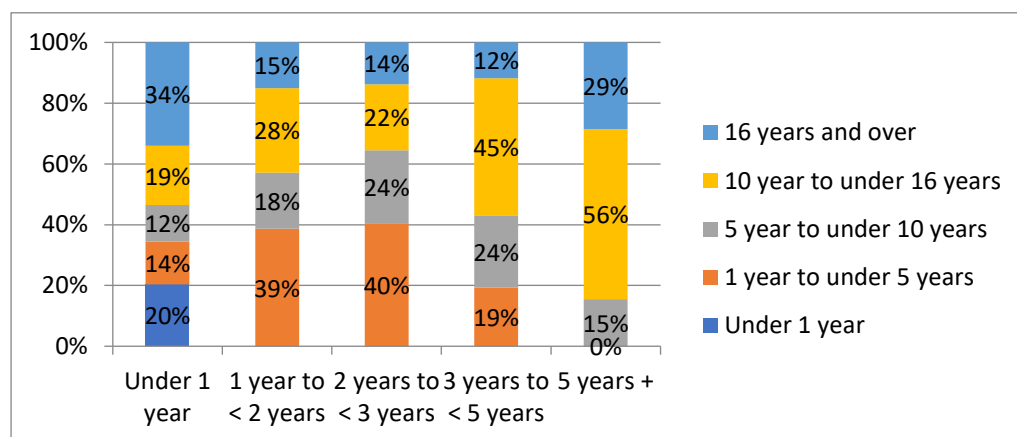
Percentage of type of legal status March 2023 (Table 6)

	31 st Mar 2021	31 st Mar 2022	31 st Mar 2023
Birmingham CiC through Legal Orders	85.6% (1644)	84% (1760)	83.1% (1828)
National CIC Through Legal Order	85%	83%	
Birmingham CiC through voluntary arrangement (s20)	14.5% (277)	16% (334)	16.9% (373)

- 2.8 On the 31st March 2023, 9 young people were in care by virtue of their remand status. These young people are a distinct and vulnerable group within our children in care populations, whose liberty is curtailed prior to conviction and require support within the setting and circumstances in which they are living.
- 2.9 The total number of new admissions in year 2022-23 was 701 children, which was a reduction from the 756 children being admitted to care in 2021-22, but remains much higher than the preceding 3 years, between 2018 and 2021.
- 2.10 Between the period 1st April 2022 – 31st March 2023, whilst 701 children were admitted to care, 610, this is slightly more than the previous year at 594, but based on such a large number admitted this accounts for the large increase in numbers in care.
- 2.11 In all 2,795 children and young people spent some time in care over the year 2022-23, 118 more children than in 2021-22 with a significant number entering and leaving the system after a short period of time.
- 2.12 Of those in care on the 31st of March 2023, 548 children and young people (24.8% of all children in care on that day) had been in care for less than a year. Whilst 695 children and young people (31.5%) had been in care for five years or more, this

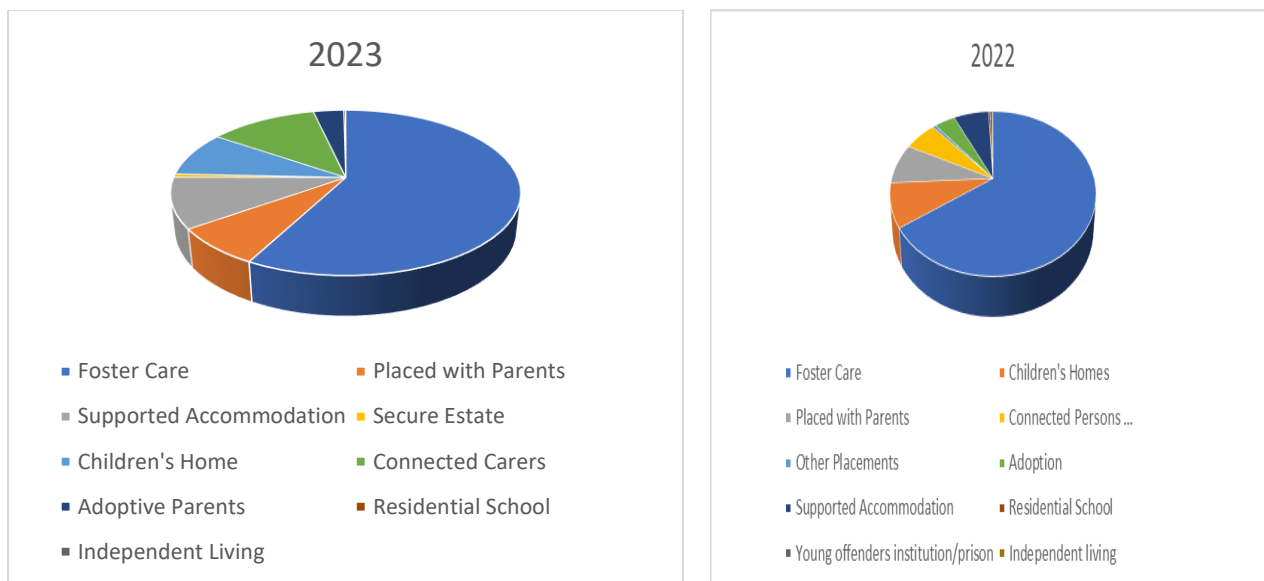
included 106 children who are under 10 yrs. Overall 1040 (47.2%) children and young people in the profile have been in care for a period of 3 yrs and over. The Trust has significant corporate parenting responsibility for these children who have spent a large part of their childhood in care.

Length of time in care on 31st March 2023 (Diagram 2)

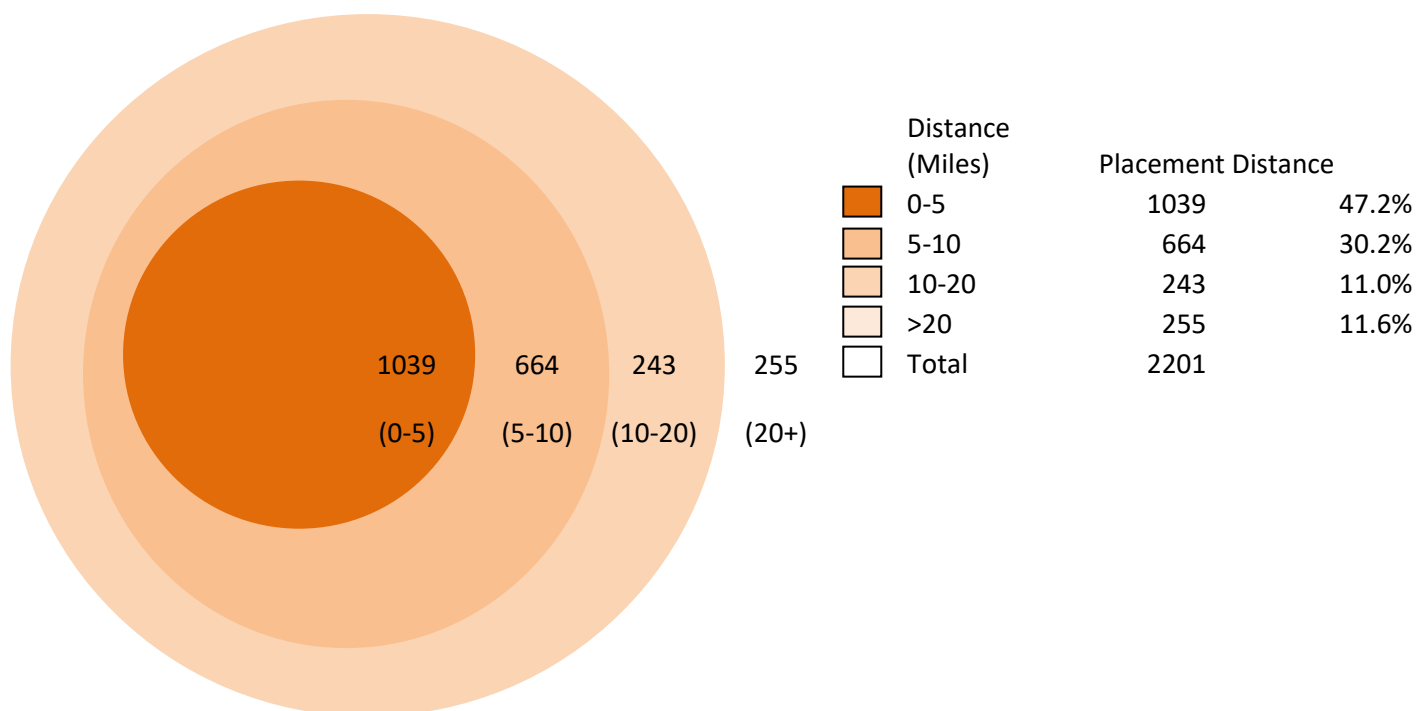


- 2.13 On 31st March 2023, the majority (80.4%) of children and young people in the care of Birmingham Children’sTrust are placed in a family-based placement; this is a small reduction from 2022 of around 1% after continuing trend increase between 2017 to 2021. This includes (as a percentage of the whole 58% placed in foster care, 11.9% in the care of family or connected foster care, 7.4% in the care of parents and 3.3% are placed for adoption. The remaining 19.6% are in respect of 9% are placed in residential care, 10% in supported accommodation and 0.6% in the secure estate. Changes from snapshot on 31st March 2022, indicate an increase of 2% of those in supported accommodation and, a 1.5% increase in care of family connected foster carers, minimal changes for those placed with parents decreased by 0.6%, with reductions of 1% and 2% decreases in residential and foster care respectively.
- 2.14 The majority (88.4%) of the children in care of Birmingham Childrens Trust are living in accommodation within 20 miles of their home address with 59.7% of children being placed within the City Council local authority boundary. This compares closely with national figures from 2021-22 where 84% of children in care in England 85% of children in care in the West Midlands, lived with 20 miles of home address. (see Diagram 4 below).

Placement Profile of Children in Care (diagram 3)



Distance Children Placed from Birmingham (diagram 4)

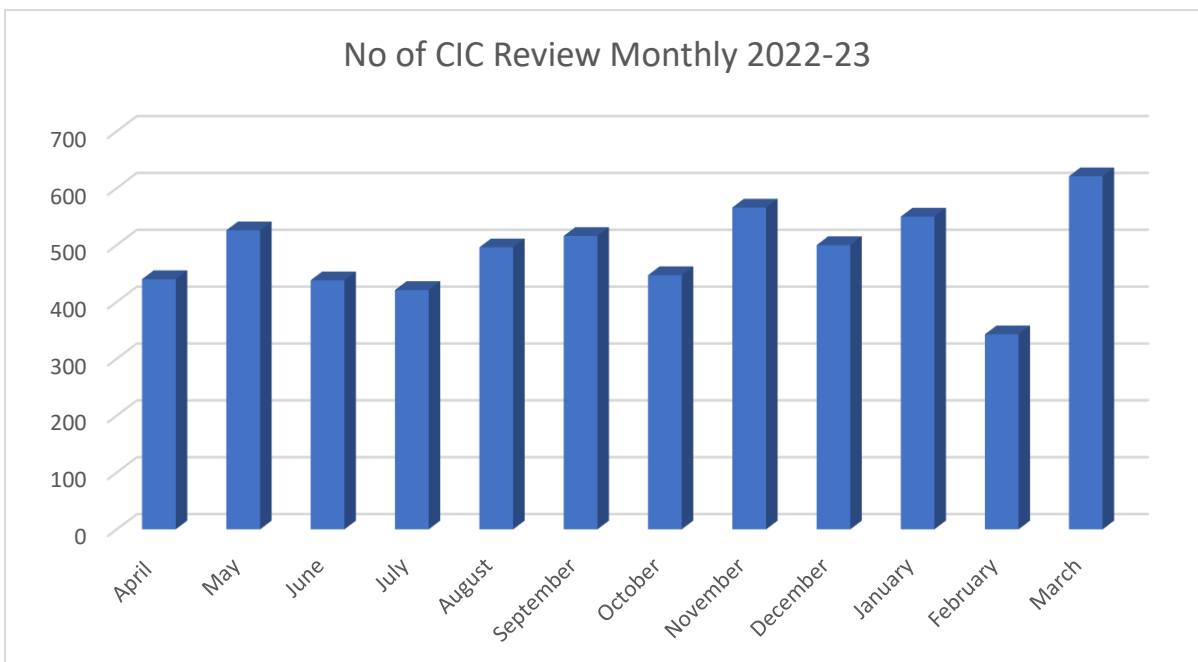


Quantitative information - The IRO Service

3. Child in Care Review Timescales and Frequency

- 3.1 The IRO service completed **5,864** reviews between 1st April 2022 and 31st March 2023, which is more than the previous 2 years (with 5,397 reviews held in 2021-22 and 4,932 in 2020-21), which reflects the increase numbers of children in care and increased responsiveness by IROs to children’s unplanned accommodation moves.
- 3.2 On average there are **489** reviews chaired each month with peaks of 621 in March 2023 and 566 in November 2022, with the less busy months being February 2023 and July 2022 where there were 343 and 421 respectively. (See Diagram 5 below).

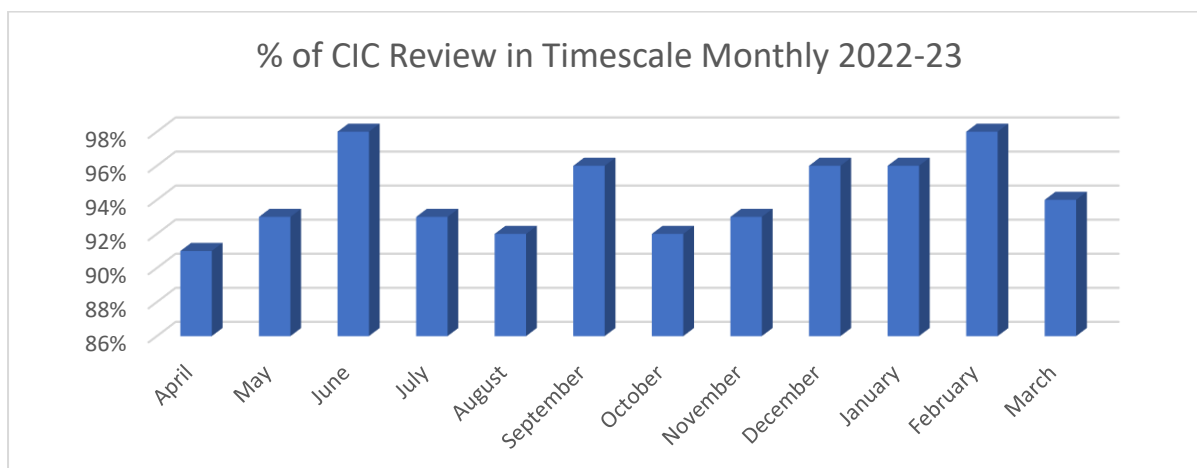
Numbers of Statutory CiC Reviews held per month (Diagram 5)



- 3.3 95.6% of CIC reviews (5609) were completed within statutory timescale in 2022-23, which means that 255 reviews were out of timescale during the year. This demonstrates that despite the increase in the number of reviews being held, performance in respect of timeliness has remained good. We have needed to address some issues of late notification of new admissions to care which has influenced timeliness of 1st CIC review, 105 (or 41%) of the 255 reviews out of timescale were 1st reviews.
- 3.4 Following the impact of the Covid-19 pandemic, we have sought to increase the number of reviews taking in place whilst utilising the technologies available to enable some reviews to take place virtually or as hybrid meetings (partly in person and partly virtual). Venues for reviews have been a key issue - in a sample taken in final quarter of the year January to March 2023, 39% of reviews took place where the child lived, 14% at the child’s school, 6% at an office venue, (59% completely in person), 22%

virtual through “teams” and 19% hybrid virtual and in person. It is now expected that CIC reviews will take place in person, and we continue to seek to move away from meetings being held virtually. This progressed from previous audit in June 2022 where in that quarter, where 28% had been in person, and around half were on solely virtual.

Timeliness of Statutory CiC Reviews (Diagram 6)



4 **Timeliness of Review Records Availability**

- 4.1 The service has continued to look at timeliness of completion of review records as a key measure of our effectiveness, i.e., for children’s plans to be progressed effectively the reviews and records that drive the plans need to be available in a timely manner to support social workers and team managers.
- 4.2 Our data and figures for 2022-23 (see table 7 below) show the average days for review recommendations being available to Team Managers, completion of Review Records, and distribution of review records all averaging just above our statutory expectations. We have looked at the reasons for this, changed the Review Record form to enable easier inputting onto the form and reaffirmed the priority of getting review records completed in a timely manner.

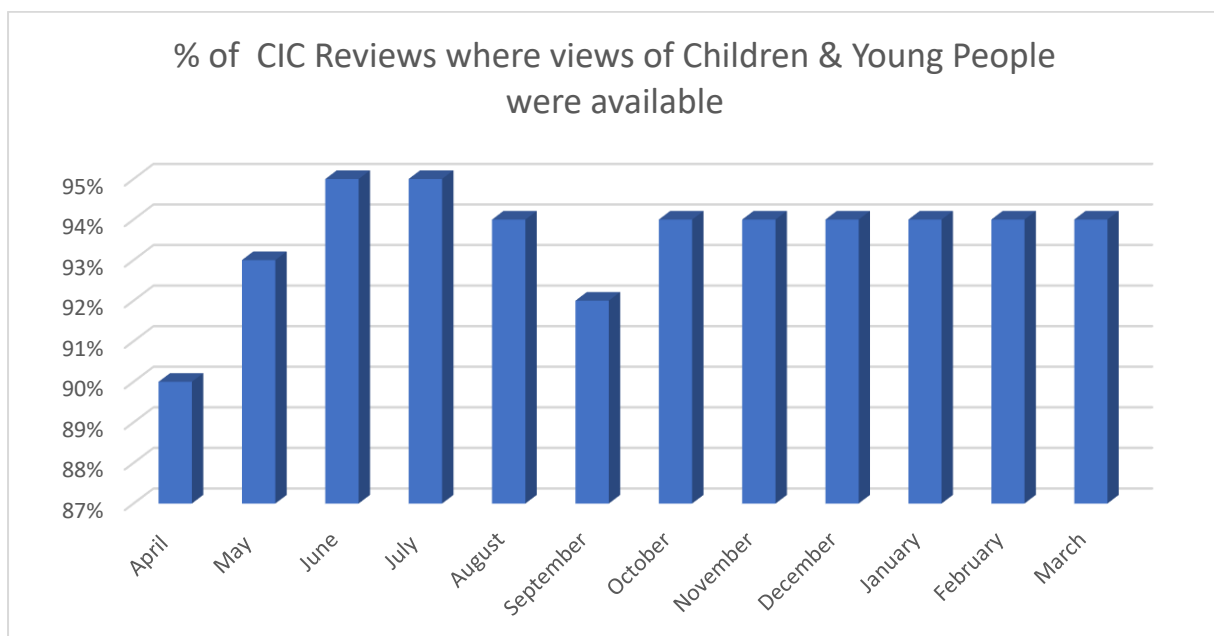
Working days to complete statutory tasks for Review Records. (Table 7)

	Review to TM informed	Review to Record completed	Review to Record distributed
2022-23	6.6 working days	18.8 working days	28.2 working days
2021-22	5.82 Working days	14.58 working days	26.05 working days
2020-21	3.82 working days	10.16 working days	20.88 working days
Statutory Timescales	5 working days	15 working days	20 working days

5. Voice of the Child and Child and Young People Participation.

- 5.1 A primary objective of the IRO is to ensure children are central to decisions about them and that their voice is evident in their care plans. A key element in delivering this objective is the measure of the young person's participation in the Statutory Review of their care plan and care arrangements. Across the year from April 2022 - March 2023, 94% of Children in Care aged 4 yrs and over had participated and had views presented clearly in their reviews.
- 5.2 The overall figure takes into accounts the full range of methods of participation agreed by the DfE (see diagram 7 below). All methods of participation add value to the review process and for some young people it can take considerable effort from them and those working with them to achieve it.

Young Peoples 4-18 Participation in CiC Review totals (Diagram 7)

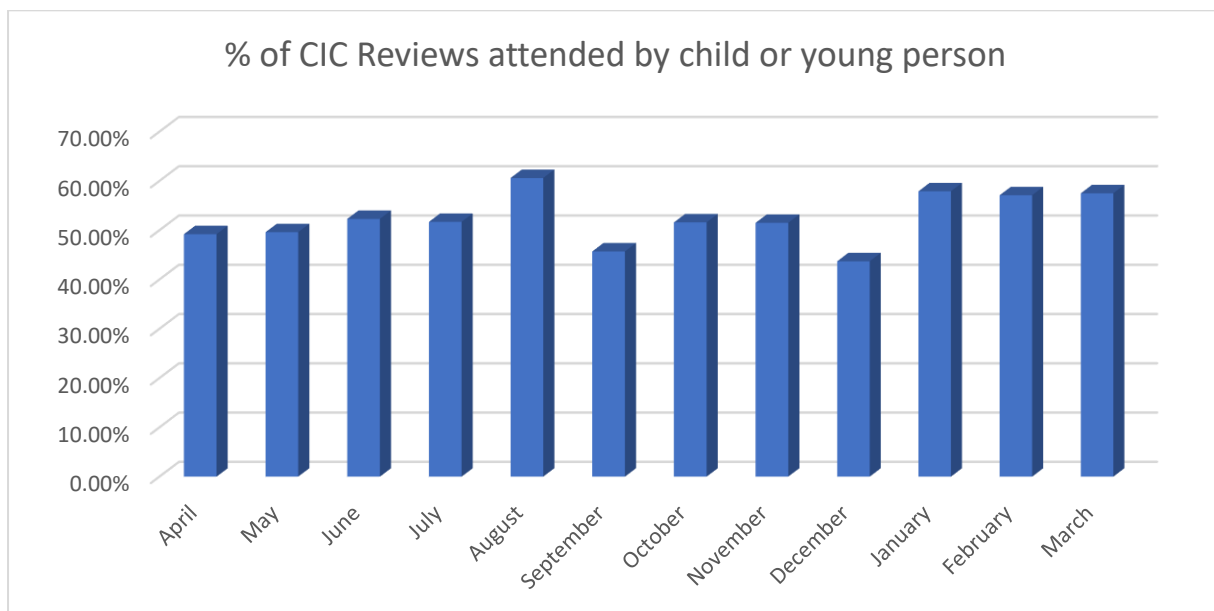


- 5.3 A closer look at the ways that children and young people have taken part in their review (Diagram 8) tells us that in 52.1% of reviews were attended by the child or young person. This represents a small overall increase from 2021-22 of over 6% of CIC Reviews in year. We have noted increased attendance as we have moved to more in person meetings. We continue to work to seek to increase attendance, balancing this with feedback surveys that indicate 73% of children and young people surveyed attend at least one review each year and around 84% say they are involved in decisions. Going forward the IRO Service is taking learning from the Participation Research completed in March 2023 and building on development sessions held with children and young people.
- 5.4 Development sessions held this year with children and young people from Rights and Participation has resulted in consideration of work to support greater participation including involvement in deciding venue and who attends., increasing use of "mind of my own" app as a means to convey views in a structured way and creation of an

animated video advising on the role of the IRO and functions of the CIC review for children and young people, also available in most frequent languages used by unaccompanied young people – link to video – <https://vimeo.com/750399636/2cca109b4d>

5.5 There is no identified single reason why children are not motivated to participate. IROs have identified that where the child or young person has not attended in two thirds of these occasions, this was the child or young person’s choice not to attend, and survey findings have suggested for the most part those who chose not to attend do so because they are satisfied about how the review will function and what it will do.

Children and Young People Attendance at CiC Review (Diagram 8)



5.6 IROs have reported that in 78% of CIC reviews it is identified that in care plans for children, the voice of the child has been considered. The data alone does not specify the quality and understanding as to how the voice of the child is considered.

5.7 The key findings from the continuous online feedback survey for children and young people about their CIC reviews remain largely positive, identifying that:

- The majority of young people attend review meetings, including **38% who attend all** their review meetings and **35% who attend some**.
- Three key reasons for not attending reviews were raised: **(i) doing something else, (ii) did not know about it,** and **(iii) find them boring**.
- Young people who attended **overwhelmingly reported positive feelings,** predominantly feeling **involved, supported, listened to,** and **happy**.
- **84%** said their IRO **listens to them** and **involves** them in **decisions** some or all of the time.

- **50% always understand the decisions made** during review meetings and **37% sometimes** do.
- **95%** said someone **contacts them for their views** either sometimes or always when they **cannot attend** their reviews, and of these **76% always** contacts them for their views.
- **65%** said they were **always informed** about **what happened** at their review **if they did not attend**, and **18%** said this happened **sometimes**.
- **76%** said they **happy with how often they see and talk to their IRO**, while **19% would like to see them more**, and open comments also suggested this.
- **Young people who never attend meetings are more likely to not feel listened to, not be involved in decisions or understand decisions made than other young people who attend meetings.**

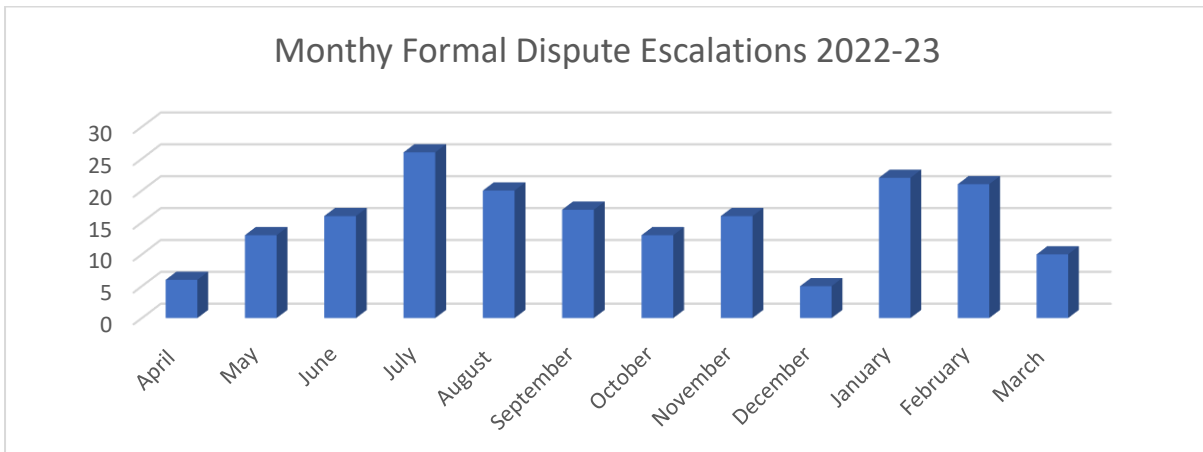
5.8 The service continues to use "Have Your Say". The availability of hard copies has been limited and these are now being used more routinely as pdf's and are available to children and young people and carers directly from the Birmingham Children's Trust website. In addition, for reviews, BCT has now required that all young people in care should be supported to have access to their own "Mind of My Own" app account, and children and young people use advocates available from the Rights and Participation Service.

6. Dispute Resolution and Escalation

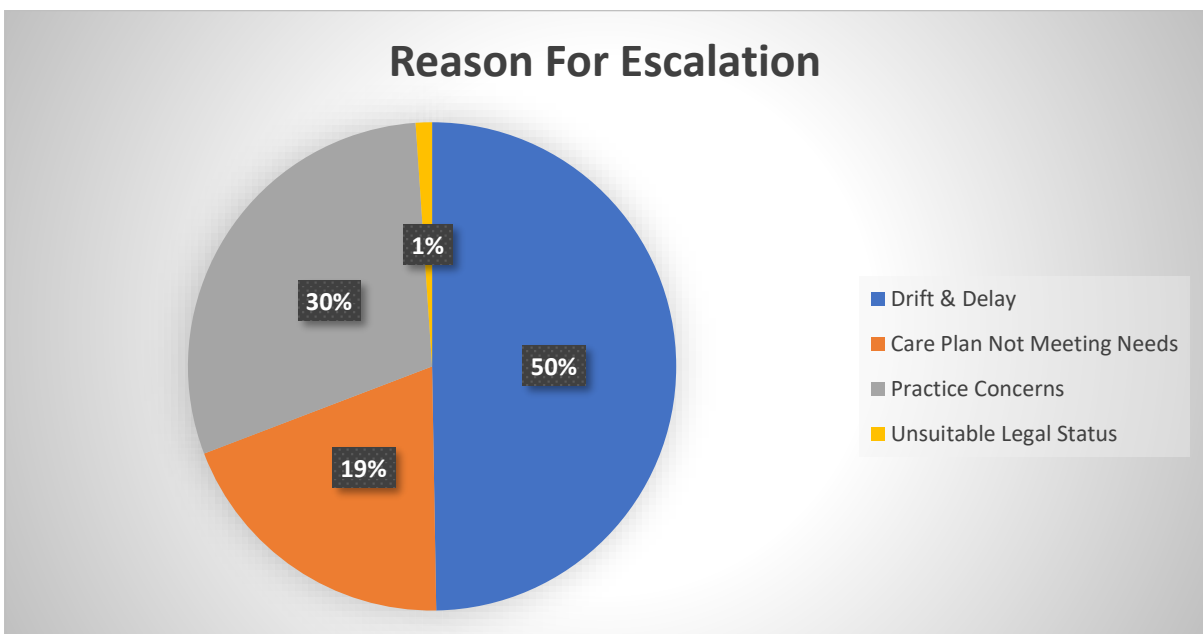
6.1 One of the pivotal roles of the IRO is to raise issues affecting a child's care with the social work service where, for example, performance issues, care planning and resources are affecting the child or young person's plans progressing and their needs being met. There is an established Resolution and Escalation process available in Trust procedures and practice. IROs continue to seek resolutions informally to issues through collaborative dialogue with the social worker and team manager before and at each stage of the procedure, but if no resolution is achieved the dispute can, and should be, escalated to the attention of senior managers and ultimately the Trust Director of Practice/Chief Executive and or Cafcass. The process is supported by IRO managers advising Assistant Directors of escalations that are outside of timescales.

6.2 Between April 2022 to March 2023, there were 185 formal dispute resolution and escalations opened, an increase from 149 (or 19%) in 2021-22. these were completed and escalated by 29 different IROs. Audits of escalations have identified continuing positive outcomes for children. Children's cases that were escalated for a range of reasons but can be grouped around 4 areas, illustrated in the chart below.

Dispute Resolutions made monthly in 2022-23 (Diagram 9)



Dispute Resolution Reasons for Escalation 2022-23: (Diagram 10)



Drift and Delay in planning and care arrangements for the child/young person – this made-up half of all escalations, opened (50%), in all other categories there is also some level of delay. The issues essentially included:

- Delays in matching long term foster homes.
- More general delays in progressing planning and permanence
- Delay in pursuance of life work
- Delay in pathway planning
- Drift in returning a child home from care.

Care Plan not meeting the child/young person’s needs – these made-up 19% of escalations. The issues considered included:

- Young people under 16 placed in unregulated accommodation.

- Children not having school or education provision that was suitable for their needs.
- Lack of progress in assessment and pathway plan and other preparation for leaving care
- Lack of progress for supporting a child remaining at home and discharge from care

Practice Concerns that impact the care planning and needs of the child – these made up 30% of escalations and included:

- Limited quality of assessment leading to poor planning for child
- Delay in health assessments and also PEPs.
- Lack of visits and consistent contact with child by social worker that was necessary for child.
- Limited consideration of mental health needs for a child’s care plan

The child/young person’s care legal status does not meet their care plan needs – these issues were identified in just 1% of escalations and included concern about

- Legal status was s20 and did not reflect needs of child’s plan.

6.3 In terms of the management level within the Trust that that resolution outcomes have been resolved at, our data indicates improved numbers are resolved without the need for senior management involvement:

- 67% at Team Manager level (Stage 1)
- 24% at Head of Service level (stage 2)
- 8% at Assistant Director/Director level (stage 3 and 4)
- 1 escalation referred to Cafcass

6.4 The timeliness of resolving disputes remains above the intended 20 working days. The average timescale is 22.2 days from the start to resolution in 2022-23. This has improved from 25 days in the previous year and is a continued trend improvement over the last 5 years. 57.3% of escalations (106) were resolved within 20 working day timeframe.

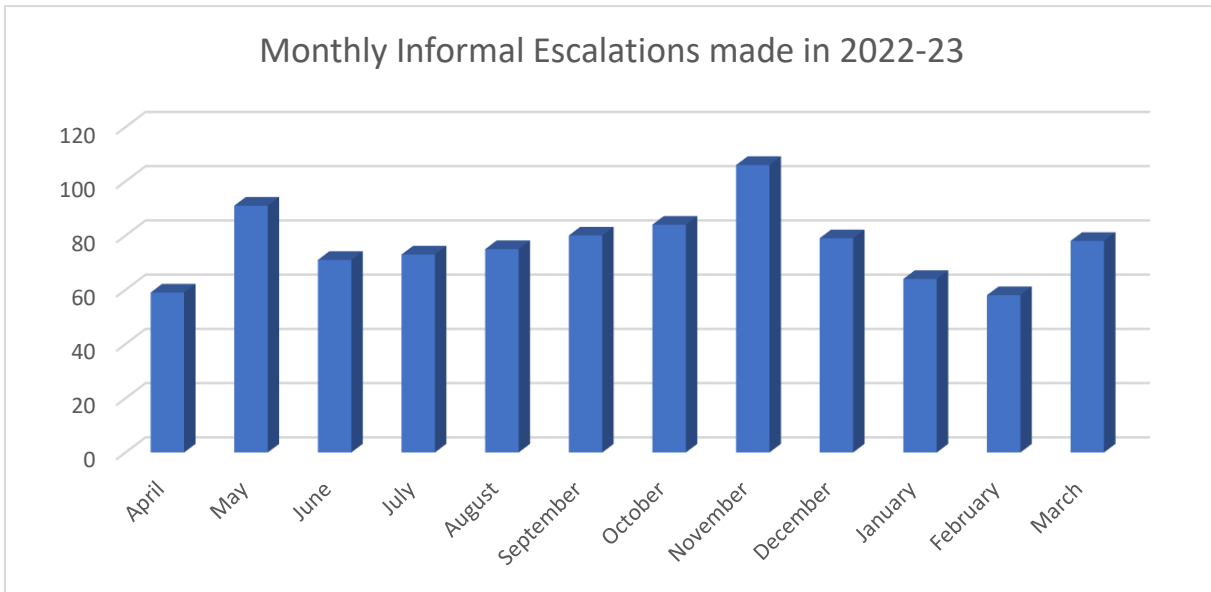
6.5 In addition to the formal Dispute and Escalation Process and in keeping with the service working within a relational high challenge, high support ethos, IROs are encouraged to add value to planning for children by developing relationships with key partners. The aspiration is not to formally escalate disputes unnecessarily but to achieve the desired outcomes for children by positively influencing social work practice through dialogue, negotiation and resolution meetings. Usually this will make resolutions timelier for the child. IROs have been encouraged to record interventions that fall short of formal escalations. Typical issues include:

- Delay in progressing matching of long term foster homes.

- Delay in undertaking life story work.
- Concern as to the stability and continuity of accommodation arrangement.
- Concerns about how a young person's needs will be met when leaving care, delay in pathway planning.
- General concerns about care arrangements, accommodation needs, some health and education needs being met and subsequent lack of action to address these issues.
- Disruption to planning, and an absence of pro-active social work to address issues for children.
- Delay in completing parenting assessment to assist child exiting care.
- Concern about delay in seeking consents and making arrangements for important health care.
- Concern about child needs in respect of neurodevelopment condition not being addressed.
- Concern about education needs not being met with no suitable provision.
- Delay in accessing assessment for provision from adult social care for young people leaving care.
- Care Plan not fully completed or available for children and young people and lack of robust care planning.
- Consideration with team around family where care planning is not clearly understood and those involved in plan and care and not consistently supporting the plan moving forward.
- Poor and slow response to care arrangement concerns raised by partner agency for the children.
- Lack of progressing of referral and action for family finding
- Some, where questions about suitability of legal status to support the child's care plan.

6.6 The above mirror many of the issues that progress to formal escalation but can be resolved as the complexity is less apparent. In the period April 2022 to March 2023 there was a total of 918. This is an increase from 865 in the previous year. This reflects upon the work IROs are doing to chase up and ensure children's needs are met.

Informal IRO interventions April 2022 to March 2023. (Diagram 10)



IRO Service Qualitative information - Quality Assurance of the IRO Service

7 Independent Reviewing Service Quality Assurance Framework and Data Set

- 7.1 As part of the Quality Assurance Framework, a data set of relevant information in respect of children in care is used to inform us about the effective working of the IRO Service. Performance information is now available through the Eclipse case record system and Performance data collection through Power BI.
- 7.2 The IRO data set includes details such as:
- timeliness and timescales for CIC reviews,
 - timeliness of completion of review records and sharing of key decisions and outcomes,
 - availability of social work reports and plans for children,
 - the participation and attendance of children and young people at reviews, as well as parental involvement,
 - whether the child has a suitable plan for permanence and CIC reviews and specifically at 2nd CIC reviews,
 - whether the child's views have been suitability considered in their plans
 - whether a midpoint check has been undertaken and progress of planning
 - details of children in care population
 - details as to escalations both formal and informal,
 - suitability of care plans and pathway plans being implemented
 - details about IRO visits and IRO footprint on case record.

The data set is reported to IRO managers monthly and is subsequently reported to the Trust quarterly through quarterly Quality Assurance framework report.

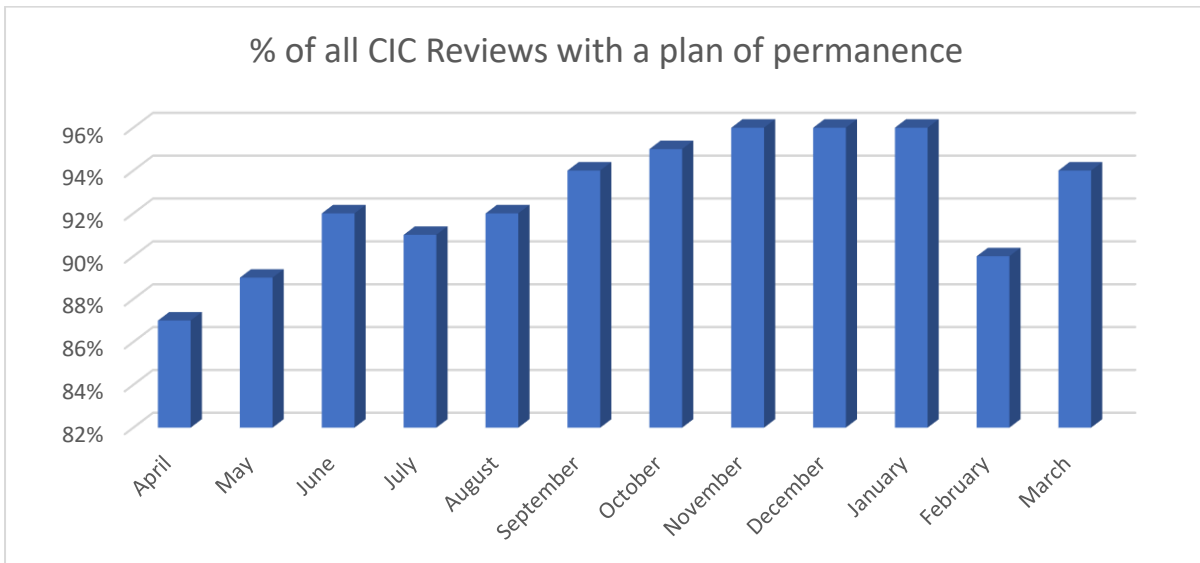
- 7.3 The Data Set, alongside service audits, learning from resolution and escalations, feedback from children and young people and feedback from IROs and learning from early endings of placements is used to form the Trust's overall QA Framework and reporting.
- 7.4 Routine monthly service audits focus on 4 areas of practice linked to the needs of the child and overall practice:
- 1) Timeliness and effectiveness of CIC review meetings and review records, 2) care planning for the child (findings from these are detailed in the quality of care planning in section 11 above)
 - 3) the Voice of the Child (some finding identified Voice of the child and participation in section 8 above)
 - 4) Monitoring and oversight of children's circumstances and cases.

These are completed monthly and audit previous 12 months involvement with the child, and wider learning is reported quarterly through a report.

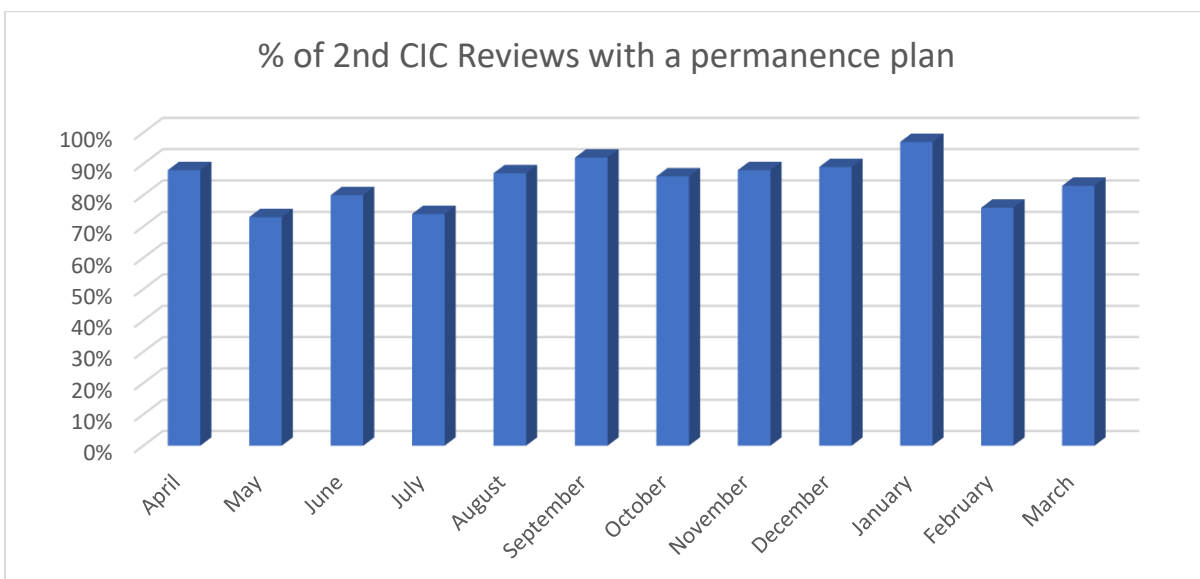
8. Quality of Permanence and Care Planning

- 8.1 The IRO Quality Assurance form records where children have a plan for permanence at each review and have recorded each month reviews where a child has a permanence plan. Overall, in 93.9% of reviews in year a permanence plan was in place this compares favourably 87% in 2021-22, with Diagram 11 below identifies the percentage for each month (to the nearest whole number). Overall, of these plans for permanence 84% were single track, 10% twin track and 6% triple track.
- 8.2 In addition, a permanence plan for the child is a statutory requirement at their 2nd CIC Review this is also measured. Overall, there were 87.7% of 2nd CIC reviews where the child had a permanence plan in place, which is a significant increase from 74.8% in 2021-22. Diagram 12 below identifies the percentage for each month (rounded to nearest whole number).
- 8.3 Analysis of the gaps for children with no clear permanence plans, suggest that in most cases this has come about more through a lack of clarity of care planning and articulation of the child's needs. The use of Child Care Planning Meetings has assisted greater clarity and audit work and IRO observation is that plans are clearer when social work practitioners have used care planning meetings have been effectively used. Additionally social worker turnover has impacted some delay in progressing plans.

Percentage of CIC Reviews in 2022-23 where a permanence plan was in place (Diagram 11)



% of 2nd CIC Reviews in 2022-23 where a permanence plan was in place (Diagram 12)



8.4 The level of specific types of permanence plan identified for children and young people in reviews as a percentage of all reviews are:

- Adoption as single-track plan in 9.5% of reviews and as part of parallel plan in a further 5.6% of reviews
- Long-Term Fostering as a single-track plan in 38.8% of reviews and as part of a parallel plan in a further 11.4% of reviews
- Long Term Residential Home as a single-track plan in 7% of reviews and as part of a parallel plan in a further 1.7% of reviews

- Return to family or parents care as a single-track plan in 8.5% of reviews and as part of a parallel plan in a further 12.9% of reviews.
- SGO/CAO as a single-track plan in 4.8% of reviews and as part of a parallel plan in a further 4.1% of reviews
- Supported living in the community was a single-track plan in 8.7% of reviews and a parallel plan in a further 0.6% of reviews (reflecting this is a plan usually for 16 and 17 yr. olds and would not be considered for parallel planning for children and young people below that age.

8.5 Some of the findings from service audits in relation to care and permanence plans were:

- In audits overall in 92% of reviews a plan of permanence is in place and most of these had a single-track plan, often the reasons for no plan being available was lack of clarity and articulation of the plan rather than no plan.
- 75% of children live with a permanent carer, and two thirds of these that required formal matching had been matched.
- Audits were confident that care arrangements were suitably covered in all reviews.

8.6 IROs ensure in reviews that the legal status of the child remains appropriate for the child's care plan and also maintain a significant role in reviewing plans for court to ensure that they meet children's needs and that undue drift and delay is avoided. IROs have direct access to Independent Legal Advice to enable them to effectively challenge plans. The IRO service's footprint is more visible in care plans to court and in communication with Guardians, and there are references to their recommendations in social work statements.

8.7 The LTF Early Ending work has continued to contribute to learning and information in respect of the quality of some care plans for children. The key findings identified have been extensive, however in noting key issues below it should be noted that this concerns a more limited number of children's cases and is concerned with a default position of a disrupted permanent placement which would likely indicate some more negative impacts for the child or young person or aspects of practice. Learning has focused on a) Issues for Foster Carers b) Assessment and Support for Foster Carers c) Practice Issues for Social Workers d) Family and Relationship Issues. We have worked with colleagues in Trust Practice Hub, Children in care Teams and Fostering service with action planning learning.

8.8 Key learning is regularly shared with the Trust and informs an action plan – examples of areas of practice improvement identified include:

- The availability and understanding for those working with the child of impact chronologies.

- Greater consideration in care and placement plans for the day-to-day circumstances and impact of neurolinguistic diagnosis and needs.
- Having timely and purposeful sustainability meetings (i.e., that they are focused on sustainability not ending).
- Ensuring professional curiosity and focus on the voice of the child prior, during and following placement endings and move.
- Ensuring support is available for the impact for children remaining in the placement/accommodation when a child moves and how the relationships are managed for all going forward.
- Greater consideration about giving information to children and young people and those concerned with the move supporting when and how.
- Curiosity around what the child is feeling about a placement and move and how this influences their future planning.
- Be clear about the child's networks and ensure this is known by relevant team around the child, including as applicable wider family.

9. Analysis of Safeguarding Issues for Children in Care

- 9.1 Of the 2201 children in care at 31/03/2023, 1591 (or 72%) of the children had experienced some form of abuse or neglect that had contributed to their need to be in care. Therefore, for a large majority of children in care the impact and trauma of experiencing abuse and neglect requires intervention and support to establish protection from further harm, and emotional support to address the trauma and impact.
- 9.2 We would ordinarily expect that accommodation and care planning for children will be mindful of safeguarding needs and ensure that the children and young people receive the care, safety and protection they require. We positively promote that where appropriate the impact of trauma and abuse is addressed through therapeutic work such as that offered by TESS.
- 9.4 In 2022-23 there were 575 CIC reviews held (or 10.5% of reviews) where specific and current safeguarding issues were identified for the child or young person as being prevalent at the time of the review. This included 425 children and young people (or 15.2% of children in care during the year) having a concern for their safeguarding at some point. This represents a drop from the previous year from when there were 12.5% reviews with a current safeguarding issue being apparent, and 18.5% of children in care had a current safeguarding issue. IROs continue to monitor the quality of safety planning where appropriate.

9.5 For those children and young people where there was an identified safeguarding concern, these related to the following:

- 14% involved children and young people being missing from care. Being missing indicates considerable vulnerability for a child or young person and this should be addressed in planning.
- 14% were identified as being exposed to risk due to child sexual exploitation and child abuse, and in all situations IROs were ensuring due safety planning is in place.
- 13% were identified as being involvement in criminal activity and risk of child criminal exploitation.
- 13% were identified as having substance misuse issues and additional risk from exposure to substance misuse.
- 9% were identified as having affiliation to gangs, in many cases linked to other concerns, especially criminal and sexual exploitation.
- 13% were identified as NEET (not in education, employment or training) who were usually 16 and 17 yr. olds and therefore at risk of involvement in concerning relationships and lifestyle.
- 9% were exposed to domestic abuse and violence, either within the accommodation, from family (including as in some cases being the perpetrator or violence), or for older young people from peer personal relationships.
- Other matters identified including mental health issues being a safeguarding issue, experiencing bullying, and sending and receiving explicit abusive images.

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July 2023

IRO Annual Report 2022-23

Appendix 1

- **Purpose of Service and Legal Context**
- **Professional Profile of BCT IRO Service and Workload**
- **Training and Supervision**
- **National and Local Links**

1. Purpose of Service and Legal Context

- 1.1 The purpose of the IRO role is set within the statutory framework of the IRO Handbook (2010), linked to revised Care Planning Regulations and Guidance, and established in the Children and Young People's Act 2008. which were introduced in April 2011.
- 1.2 The IRO has a key role in relation to the promotion and quality of care Planning for Children in Care and for challenging drift and delay in children's care and permanence planning. One of the key tasks for IRO is to build relationships with children, young people and their professional and family network to enhance effective decision making and care planning to establish positive outcomes. The Handbook sets out the requirement for the IRO service to produce an annual report and the legal context and the purpose of the service.
- 1.3 The functions and requirements of the IRO and the service are:
- All Children in Care should have a named IRO who, as far as possible, remains a consistent figure in the child's life, during their journey through care.
 - There should be the same IRO for sibling groups where possible.
 - The IRO should chair the child or young person's Child in Care Reviews (within 28 days of the child being in care, then within 3 months after, and every six months thereafter).
 - Promote, and ensure that due regard is given to, the voice of the child in their care plan, permanence plan and care arrangements.
 - Ensure that plans for the child are based on a detailed and informed assessment, which is up to date, effective and provides a real and genuine response to each child's needs.
 - Meet with the child and consult with him or her, making sure that the child understands what is happening to them, can make a genuine contribution to plans, fully understands the implications of any changes and understands how an advocate could help, and his/her entitlement to this, and legal advice.

- Be aware of, and if necessary, take action to prevent any unnecessary delay in care and permanence planning for children in care and the delivery of services to them.
- Have an overview of the Children’s Trust and the Local Authority as a corporate parent in ensuring that care plans have given proper consideration and weight to the child’s wishes and feelings.
- To provide challenge and support to social workers and their managers to ensure the best life chances for children and young people.
- To have an effective means of challenging the Children’s Trust including, a Dispute Resolution Procedure, with the ability to convey concerns to CAFCASS and access to independent legal advice.

2 Professional Profile of the Birmingham Children’s Trust IRO Service and Workload

2.1 The Independent Reviewing Service is a citywide service that sits within the Commissioning and Corporate Parenting Directorate of Birmingham Children’s Trust.

2.2 Management capacity in the IRO Service includes an Assistant Director, Head of Service and two Assistant Heads of Service.

Agency /Permanent staffing Split (Table 1)

BCT Independent Reviewing Officers (FTE)			
	1st April 2021	1st April 2022	1st April 2023
Permanent	29.1	29.7	27.1
Agency	3	1.4	4.6
			0.4 vacancy
Total	32.10	32.10	31.7

2.3 The service has experienced some limited, change in workforce, with 3.5 permanent IRO staff leaving to other posts, career break or retirement in year and 1 AHOS acting up to a role outside of the service during the reporting year and an IRO acting up to the AHOS role. We have recruited 3 permanent IRO starters in the year. Overall the workforce is stable with recruitment being successful and staff retention is excellent.

2.4 The identity profile of the IRO workforce provides a mix of gender and cultural and ethnic backgrounds. The Service employs a mix of male (7) and female (25) staff and contains people from a range of cultural backgrounds. In terms of the cultural/ethnic make-up of the staff group, 51% are White, 32% Black African or Caribbean; and 17% are of Asian background. The diversity of the workforce potentially enables a better awareness and understanding, as well as response to the cultural needs of children in care and the diversity of

population in Birmingham. The IROs consider and promote the different needs of children, to ensure that their care plan addresses their specific identity including ethnicity and diversity needs.

- 2.5 The average case load for an IRO in Birmingham has been at the top end and over recent months exceeded the IRO Handbook estimated level through the year. The actual experience for most IROs has been over estimated levels. (see Table 2 below), The highest caseload has never been above 80 through the year, so generally caseloads are manageable within estimated range. That said the requirements for IROs of monitoring each case and carrying a constant overview means the work is relentless for staff involved and the tenacity and commitment of IROs to children is immense.

Average FTE caseloads per Month (Table 2)

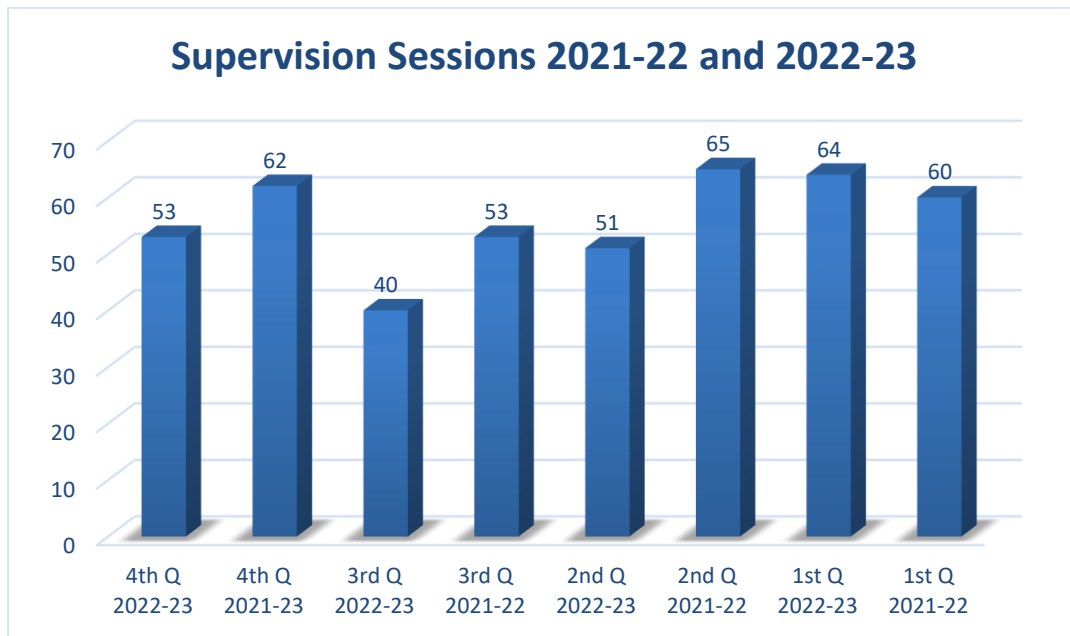
	Apr 22	May 22	Jun 22	Jul 22	Aug 22	Sept 22	Oct 22	Nov 22	Dec 22	Jan 23	Feb 23	Mar 23
FTE (mean)	74	75	74	73	74	76	76	73	72	74	74	73
Mode (most IROs with No)	73	76	74	77	77	77	78	74	75	74	75	75
Highest (individual)	79	77	79	85	86	82	82	81	81	83	81	80
CIC	2082	2101	2113	2139	2144	2160	2182	2190	2192	2183	2201	2201

3 Training and Supervision

- 3.1 Supervision is an essential activity for providing support and development to individual IROs and to work toward creating consistency across the service in terms of practice and process. The team's supervision and appraisal arrangements have been conducted in accordance with BCT supervision policy. Each IRO should have has around 9 to 10 formal supervision sessions a year as well as the annual process of development discussion culminating in April/May.

- 3.2 The service’s commitment to supervision has been consolidated across the year with 208 individual sessions, this reduced from 240 individual sessions in 2021-22. This has shown a reduction and looks like only an average of 7 sessions of supervision for each IRO, but we have developed bi monthly group supervision sessions which now compliment individual supervision sessions

Staff Supervision 2022-23 comparison with previous year



- 3.3 Within these sessions in addition to discussing standard professional issues, the learning from case audits and performance data information is discussed with the individual IRO. In addition, direct observations of IRO practice within reviews has been undertaken by managers. Each supervision includes routine benchmarking of review records IROs have completed since their previous supervision. In short, with the level of supervision, service managers read and evaluate over 800 review records completed in the year

- 3.4 IROs have access to courses available through Birmingham Children’s Trust Academy (BCTA) including training in a wide range of generic social work-based subjects. IROs also have access to training events such as community care live and other seminars on specific issues including NIROMP Community of Practice sessions, and other Conferences and Training. New staff members are provided with a comprehensive induction programme and membership of Research in Practice and BCTA.

- 3.5 Practitioners from other service areas regularly attended IRO Service learning and development meetings and discussed practice issues relating to their service area. This has included sessions with the Virtual School around PEPs and education issues, advocacy and rights and participation with young people, presentation from designated CIC health leads, family-based placement

project, adoption service, connected carers and mainstream fostering services. Training from KIND re immigration issues for children and EUSS. Long-Term Fostering early ending learning updates, and training in respect of adultification.

4. National, Regional and Local Links

- 4.1 The Head of Service is a West Midlands regional representative to NIROMP (National IRO Managers Partnership) and one of the facilitators of the West Midlands Regional IRO Managers Group. Two IRO's are part of the West Midlands regional IRO Advisory Group, which feeds into a national IRO advisory group.
- 4.2 The protocol in place to provide a framework for communication and working practice between Cafcass and the IRO services. Direct liaison between IRO service managers and local CAFCASS service managers has developed with regular liaison between the services.
- 4.3 The service has sought to maintain direct working relationships and links with BCT social work services. The Head and Assistant Heads of Service (AHOs) routinely attend relevant senior management meetings and events held by the Trust with IROs attending wider Trust leadership events. There is regular liaison with HOS across Trust services. IRO service has routinely contributed to the Trust's practice evaluation and learning processes. IRO are directly participating in the Corporate Parenting Board and contribute towards Trust project work and area teams and other service area links. The service continues to ensure liaison with local partners in Education and Health, and especially Birmingham Virtual School and CIC Health. This has included meetings between managers and shared attendance at service team meetings to promote partnership working. The service has maintained a close working relationship with BCT Rights and Participation service, across advocacy and participation functions and engaged in Research into participation led by Clive Diaz commissioned by BCT