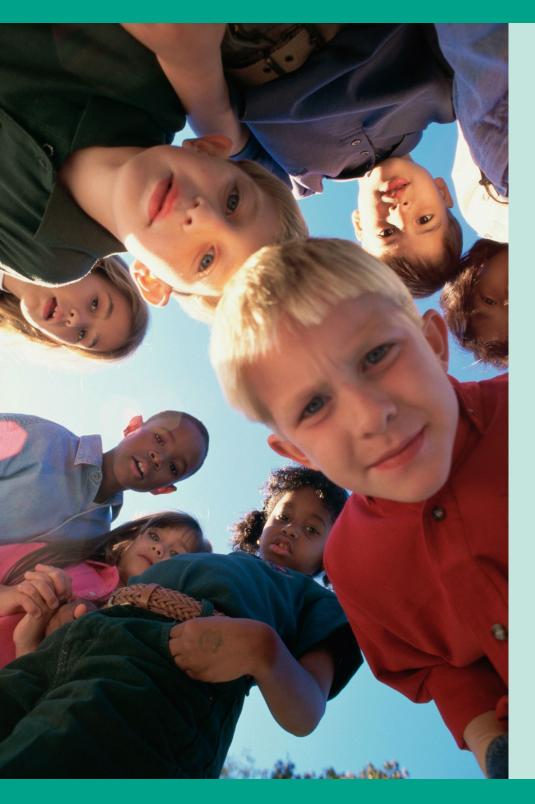
The Quality Assurance and Safeguarding Service (QAAS)

IRO Annual report



The Contribution of Independent Reviewing Officers to Quality Assuring and Improving Services for Children in Care and Care Leavers

This report provides quantitative and qualitative evidence relating to the West Berkshire IRO Service for 2020/21 as required by statutory guidance.

Reporting Period: 1st April 2020

– 31st March 2021



This annual report has been produced under the requirements of the Adoption and Children Act 2002. The Independent Reviewing Service has a key role in assuring the quality of a Local Authority's care planning for children in care and improving the overall quality of services offered.

It has been prepared for those with executive responsibility for children's services and corporate parenting, to enable consideration of the services on offer, and to consider whether the local authority is achieving optimum outcomes for our children in care.

This report must be presented to the Corporate Parenting Board. It provides an opportunity to highlight areas of good practice and areas for improvement, to identify emerging themes and trends, to report on work undertaken to date and outline the service development priorities for the coming twelve months.

Summary:

Practice within this period has been significantly different as a result of the Covid-19 Pandemic and the need to adjust working practices to ensure children, their families and carers and staff remained safe and were not unnecessarily exposed to risk of catching the virus. Risk assessments were completed by the Service on all children in care and face to face visits were suspended and moved to virtual means up until September 2020, when the level of the outbreak had reduced and it was deemed safe to return to face to face visiting. Children continued to be seen however prior to September 2020 where it was deemed essential, to ensure they remained safe and well.

All child in care reviews moved to virtual platforms, such as Zoom and TEAMS. Where this was not possible conference calling was used. Contact between the Independent Reviewing Officers (IROs) and children in care also moved to virtual means and telephone contact, with very few face to face visits occurring. Some of the older young people reported they preferred this way of communicating and the IROs noticed some they were more able to engage online. Predominantly however feedback received veered toward acceptance of the need to do this as a result of the pandemic, but with a sense of looking forward to returning to face to face meetings as soon as it was safe to do so.

There was some staff movement over this period within QAAS, which presented a challenge within a remote working environment, but staff met casually and formally via a number of forums over this period to maintain working links and relationships. The service continued to be well represented within relevant forums despite the lockdowns.

100% of the child in care reviews were held within timeframes, which was a particular achievement given the presenting challenges. The work of QAAS Business Support in supporting the IROs to achieve this is worthy of a particular mention this year. West Berkshire ranks amongst the highest nationally in relation to this performance indicator.

The number of children in care remained relatively stable despite national reports of numbers increasing. However no evidence has been found to indicate West Berkshire has not been picking up on concerns and the rate per 10,000 remains comparable to statistical neighbours. West Berkshire continues to have a strong focus on keeping children within families and the number of children in unregulated placements has reduced. Where this does occur this is with older children moving towards independence and placements are subject to rigorous scrutiny. Work with children on the edge of care remained timely, with focused work occurring to ensure that they were safe, problems did not escalate and children remained within their families.

All children in care continue to be offered advocacy and independent visitors (IVs), with there being a good level of take-up of this service. Children linked to IVs continued to meet with them, albeit online. The IVs were able to access a fund to support them to engage with the children

they were linked to online via a variety of means, such as having virtual bake-offs. The feedback from children in relation to this was they enjoyed this contact and appreciated the efforts made to maintain it.

Feedback from children in care within their reviews has been largely positive. Some Many experienced disruption within their education as a result of the school closures, but were supported to link into online learning and are being supported to catch up what they missed.

The timeliness of paperwork being completed for reviews continues to remain the most common reason for an Issues Resolution (IR) being raised by IROs and the incidence of this has increased over this period. It should be noted that the number of IRs raised over this period in relation to late/missed visits was low given the challenges the SWs faced over this period with the Covid-19 restrictions and this is to be commended. There has also been no concern raised this period in relation to late progressions of applications for SGOs, which was an identified theme last year.

The predominant challenge for QAAS over the next period will be to maintain a good quality of service and IRO oversight within a working landscape that is having to continually adapt to the changes in restrictions as a result of the Covid-19 outbreak. There is a plan in place to return to face to face meetings with children and to face to face CIC reviews once the IROs have all received their vaccinations and the restrictions are reduced/removed.

1. The Impact of Covid-19:

Practice within West Berkshire following the Covid-19 outbreak and the 3 subsequent national lockdowns has been set in accordance with central Government guidance. All managers and staff within Children Services have been provided with local guidance and the key changes made within practice (this is listed for information within Appendix 1 at the end of this report).

Social Work visiting to some of our children in care, whilst initially held predominantly virtually, returned to face to face visiting as of September 2020. Decision making in respect of visiting has remained subject to a risk assessment being completed. There has continued to be a high level of management oversight both at Team Manager and Service Manager level within the social work teams in respect to changes of practice and the social workers have ensured that the relevant IRO/CP Chair has been kept informed.

When the lockdown first came into place all the IROs moved to having contact with their children and young people via virtual platforms, rather than through face to face contact. This has largely remained the case, with only a small number of children being visited. Where visits have occurred a risk assessment has been completed by the IRO and contact has adhered to Covid restrictions in place.

The IROs have reported that some of the young people they work with have found communicating more comfortable and convenient online and via telephone rather than face to face. QAAS intends to take this learning forward when a greater level of normality is achieved through the planned Covid-19 vaccinations which commenced in December 2020.

The IROs have quality assured all visits and contact with the children and young people open to them and have to date identified no occasion where they have felt the new working arrangements have compromised the safety, or well-being, of any child or young person.

2. Profile of the West Berkshire Quality Assurance & Safeguarding Service (QAAS):

The IROs within QAAS operate within the framework of the IRO Handbook 2011 and Working Together to Safeguard Children 2018. The IROs hold a key role in relation to the improvement and quality assurance of the Care Planning for children in care and for challenging any drift and delay through use of the Issues Resolution process.

IROs have a responsibility to ensure that all their children in care have care plans in place which are relevant, timely and effective and are achieving the best outcomes for them. They have a responsibility to promote best practice and high professional standards across the Children's Social Work Service.

IROs make an important contribution to the consistency of practice from all those who have a corporate responsibility for children in care and care leavers. They have a duty to prevent drift and delay in care planning and ensure that the local authority's efforts are focused on meeting the needs of children and achieving the best possible outcomes. IROs monitor the activity of the local authority as a corporate parent, in ensuring that appropriate actions are taken to meet the child's assessed needs, and that the Local Authority is operating in line with care planning regulations. They have a responsibility to identify patterns of concern that emerge in respect of individual children and collectively, and to make senior leaders aware.

The Independent Reviewing Officers in West Berkshire continue to hold dual roles and Chair both Child in Care Reviews and Child Protection Conferences, this ensures that their relationship with the children they are working with endures and provides children with consistency

throughout their journey within West Berkshire Children Services. QAAS has seen a change within staffing over this period. Staffing levels reduced by one IRO/CP Chair for a period of 7 months after an IRO left the Service. Consistency was maintained through holding case handovers before this staff member left the service. QAAS later recruited an IRO/CP Chair into this vacant post after caseloads began to climb within child protection as a result of the impact of the Covid-19 outbreak.

There was further impact through another IRO moving into a secondment opportunity within West Berkshire and later applying for and being successfully recruited into this post under a permanent contract. A locum IRO was employed to assist. A business Support Officer also left on secondment and has subsequently taken up a non-qualified family support post. This was a positive move for this staff member, who was being supported within QAAS to move toward her goal to qualify as a social worker.

There is some cultural and ethnic diversity within the service, however with no male workers within the service at this time, the staffing cohort does not reflect the diversity of the Children in Care population in West Berkshire.

Staff within QAAS receive monthly supervision and have access to informal supervision as and when needed. The current Service Manager remains committed to ensuring the level of supervision and support to Independent Reviewing Officers is consistent and of a high standard. During 2020/2021 all the IROs received an appraisal which considered their individual strengths over the preceding 12 months and learning needs.

All the IROs within QAAS have over 20 years post-qualifying experience as a social worker and are registered as social workers with Social Work England. They have all previously held roles as managers within other service areas. The IROs have been able to access a diverse range of training appropriate to their developmental needs and the specific areas of knowledge required by the needs of the young people on their caseloads.

The IROs contribute, through their expertise and experience, to improvements in wider practice through delivery of training and briefing sessions to staff in children's services and for partner agencies in the following areas:

- Designated Safeguarding Leads Training
- Providing bespoke Child Protection Training
- Providing bespoke Child in Care Review Training
- Undertaking themed audit activity

Over the Covid period some of this training was halted however, but plans are now in place for this to resume as soon as restrictions are lifted.

The QAAS Service Manager sits on a number of Panels and forums and planning groups, in which the IRO perspective is valued as part of the decision making process alongside that of children's social work service. These include the Berkshire West Safeguarding Children Partnership (BWSCP) Independent Scrutiny and Impact Group, the Exploitation & Missing Risk Assessment Conferences (EMRAC), the Child Exploitation Strategic Group, Corporate Parenting Panel and the Advocacy and Independent Visitor Monitoring Meetings. This also provides a useful setting to strengthen links across agencies and to share the perspectives of the IRO service with regard to multi-agency planning for children in care.

The IRO Service Manager also represents West Berkshire Children Services at the BWSCP Policy and Procedures sub-group, the South East Regional IRO Managers forum and meets quarterly with all the Berkshire Safeguarding leads, providing an opportunity to network with peers and share information and good practice.

The IRO's have had opportunity to network with peers from other Local Authorities within Berkshire as part of the Berkshire IRO Networking Meetings.

3. Quantitative information in relation to the Quality Assurance & Safeguarding service *Data from the previous period is entered in brackets

During 2020-2021

A total of 423 (490) Child in Care Reviews have been chaired during the year equating to approximately 9 per week. 82 of these reviews were initial reviews of children entering care.

100% (99.8%) of all the Child in Care Reviews were held on time.

West Berkshire continues to rank high nationally in relation to the timeliness of conferences and reviews.

The IRO Handbook recommends that a child in care caseload for a full-time IRO is between 50 and 70. There is no guidance in relation to average caseloads for Chairs who hold both children in care and children subject to CP plans. The IRO/CP Chair case load as of 31st March 2021 (snapshot) was 73 (69) cases per IRO, which is an increase of 6% (+3%) in comparison to the previous year. This breaks down to approximately 37 (26) children subject to child protection plans and 36.5 (43) Children in Care open to each IRO/CP Chair. The size of caseload alone however does not fully indicate the workload for each IRO/CP Chair as this is determined by a number of other responsibilities e.g. the number of out of authority placements, the number of families within CP and unaccompanied asylum seekers.

Number of Children in Care April 2020 to April 2021

	Apr 2018	Apr 2019	Apr 2020	Apr 2021
Total No. Children in Care	149	175	158	146
Children in Care per 10000 of Total Population	42	49	44	41
National Rate per 10000 population (2016/17)	67 (62)			
Comparator Average per 10000 (2016/17)	49 (45)			

The table above shows the overall number of children in care during the year in comparison to the previous 3 years. The number of children in care has reduced again this year. There have been reports of the number of CIC rising within some Local Authority areas as a result of the impact of the Covid Pandemic, however there is no evidence to indicate that West Berkshire have not continued pick up and act upon concerns quickly. West Berkshire's rate per 10,000 children is comparable to our statistical neighbours and there has once again been more children leaving care than entering care over this period:

	2019/20	2020/21
No. of Children Entering Care	60	47
No. of Children Leaving Care	77	58

A large number of the Unaccompanied Asylum Seeking children in care within West Berkshire have reached the age of 18 years and become care leavers. As a result the number of UASC in care within West Berkshire overall has fallen and as of 31st March 2021 sat at 11 (23). However West Berkshire has chosen to receive additional Unaccompanied Asylum Seeking

Children (UASC) into care as part of the Government Dispersal Scheme and so this number is likely to rise again.

There are currently 40 UASC open to and receiving ongoing support from the Care Leaver Service. It is important to note that responsibility does not stop when these children leave care as they then become care leavers and continue to be supported by the Care Leaver Service. A small number of these children continue to meet with their IROs as part of the Post 18 Offer.

Types of placement:

2019/20:

	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
LA Foster Care	73	75	73	78	75	74	72	69	66	62	58	55
Family & Friends Foster Care	21	22	19	17	19	19	23	24	26	25	25	25
Private Provision - IFA	29	29	30	31	34	36	36	36	35	34	34	32
Voluntary 3rd Sector foster care	0	0	0	1	1	1	0	0	0	0	0	0
Placed for Adoption	2	0	0	0	1	2	3	3	3	2	1	1
Placed with Parents	4	2	2	2	2	2	2	3	3	5	7	6
Residential - not subj to Children's Home Regs	24	21	23	23	18	24	24	24	26	23	25	21
Homes/Hostels subj to Children's Home Regs	15	15	15	15	17	17	18	17	17	16	16	16
Independent Living	3	2	2	2	1	2	1	0	0	0	1	2
Other	0	0	1	0	0	1	0	0	1	3	0	0
Total LAC	171	166	165	169	168	178	179	176	177	170	167	158
Percentage of those in Foster												
Placements that are with F&F Carers	17%	17%	16%	13%	15%	15%	18%	19%	20%	21%	21%	22%

2020/21

	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
LA Foster Care	52	53	52	58	54	52	55	55	50	53	49	49
Family & Friends Foster Care	24	24	24	24	27	27	27	27	29	29	28	26
Private Provision - IFA	33	33	32	30	29	29	28	29	29	27	26	26
Voluntary 3rd Sector foster care	0	0	0	0	0	0	1	0	0	0	0	0
Placed for Adoption	2	2	1	1	1	0	0	0	0	0	3	1
Placed with Parents	6	6	7	6	6	11	11	11	13	10	9	9
Residential - not subj to Children's Home Regs	22	20	14	16	17	12	13	14	10	11	18	11
Homes/Hostels subj to Children's Home Regs	17	16	16	17	15	17	17	18	18	19	13	19
Independent Living	2	2	2	3	5	5	4	3	3	3	2	2
Other	0	0	2	1	3	3	3	3	5	3	3	3
Total CiC	158	156	150	156	157	156	159	160	157	155	151	146
Percentage of those in Foster												
Placements that are with F&F Carers	22%	22%	22%	21%	25%	25%	25%	24%	27%	27%	27%	26%

The 2 tables above show there is a strong focus within West Berkshire for keeping children within families. The number of children placed with family and friends carers has increased from 22% (as of 31st March 2020) to 26% (as of 31st March 2021). The number of children placed within unregulated settings has also reduced from 21 children to 11 children (snapshot March 2020 and March 2021). All the children in this cohort are moving towards independence and their placements are matched and subject to ongoing 6 weekly reviews by the Family Placement Team, alongside the usual child in care reviews, and so are subject to robust scrutiny.

Post 18 Pathway Plan Reviews:

There has been 4 post 18 pathway plan review meetings held over this period, three of the young people who took up the offer were UASC. It remains the case that the uptake of this service is predominantly UASC who are seeking reassurance that plans will continue regardless of their care leaver status. All 4 young people who took up the offer have reported being happy with the arrangements in place for them following their first post 18 pathway plan review and are not seeking any further reviews.

Whilst young people have appreciated knowing this additional support is available, many have chosen not to take up the offer as they are aware of the support plans around them post 18 and had no identified need to do so. They have all been made aware however that this offer remains open to them at any time whilst they hold care leaver status.

QAAS is of the view the low level of take up is a reflection of the quality of the support available to them from within the Care Leaver Service.

4. Children coming out of care:

IROs are responsible for ensuring West Berkshire children in care achieve permanence and that this occurs without unnecessary drift or delay. During 2020-21, 58 (76) children are recorded as having left care.

Reasons for leaving local authority care:

The table below provides a breakdown of the reasons why West Berkshire children left care over this period in comparison to the previous 2 years. 38% (35%) of the overall child in care population within West Berkshire were either adopted or left care to live with their parents or a relative, indicating that care planning for children in care continues to remain focussed on achieving permanence through family—based options.

	April 2018 to March	April 2019 to March	April 2020 to March
Reason the child left care:	2019	2020	2021
Special Guardianship Order			
made to former foster carers			
who were a relative	12	4	8
Residence order granted/Child			
Arrangement Order	8	1	6
Adoption	6	7	6
Other	6	8	3
Sentenced to custody	0	1	1
Left care to live with parents,			2
relatives, or other person with			
no parental responsibility	3	17	
Age assessment determined			
UASC to be aged 18 or over	1	2	0
Moved Into Independent Living	16	12	15
Transitioned into Leaving			
Care/Adult Services	2	24	5
Aged 18 but remained with	This category	This category	
current carers under a staying	did not exist	did not exist	12
put arrangement	at this time.	at this time.	
_ , .			
Total	54	76	58

5. Timeliness of reviews

All of the 423 (490) child in care reviews held this year all took place within the statutory timescales. There were no late requests for initial reviews over this period. The IROs receive a weekly report to assist them in tracking reviews and to avoid reviews being late or resulting documentation being sent out late and this has worked particularly effectively over this period.

All documentation following reviews was also sent out within the procedural timeframes.

The focus and level of work required on the part of QAAS staff and the social work teams to achieve this is particularly noteworthy given the challenges over 2020 as a result of the Covid Pandemic

6. Qualitative information

After every review they chair, IROs complete a Child in Care Chair's Report, which is placed on the child's file within Care Director, this includes a letter written directly to each child telling them about discussions and decisions made in their child in care review. The document also captures information such as the quality of preparation for review, the quality of the care plan and permanency planning and the level to which children have been consulted. This data is aggregated and fed into West Berkshire's monthly Datazone Performance Reports to inform whole service performance and delivery.

QAAS undertook work with the Care Director Systems Analyst to improve the structure of this document and it had been hoped this new template would go live before the end of 2020. Unfortunately the move to an updated version of Care Director has resulted in a further delay in this report going live. QAAS has been advised the earliest the document is likely to go live is mid-2022.

7. Consultation with children and young people

Involving Children and Young People:

- IROs are routinely notified if any of their children in care make a representation or a complaint.
- IROs ask for feedback from reviews and a feedback sheet is sent to all children and young people for them to complete and return after every review meeting.
- Work is being undertaken by the newly appointed Principal Social Worker to explore how best to build upon and improve child participation across the service and this will include exploration of how best to ensure all children are supported to make a full contribution.

A key responsibility for IROs is to ensure that every child in care is aware of their rights and entitlements in law, also to ensure that every child in care's wishes and feelings are known and are influential in shaping their care plan. West Berkshire's Children in Care choose to share their views via a range of different mediums:

- Attending the reviews and contributing directly (55%)
- Completing consultation documents
- Speaking to their advocate
- Speaking with their social worker
- Meeting with and speaking to their IRO

PERCENTAGE OF CHILDREN IN CARE REVIEWS FOR THOSE AGED 4+ WHERE THE CHILD/YOUNG PERSON CONTRIBUTED TO THEIR REVIEW												
	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
% of reviews this month	92%	83%	100%	95%	96%	87%	97%	92%	97%	92%	97%	100%
% of reviews year to date	92%	89%	93%	94%	94%	91%	92%	94%	94%	95%	94%	95%

Despite the challenge for them of doing this online, 9 West Berkshire children in care chaired their own reviews over this period.

11 (13) children/young people are recorded as not having been consulted at all prior to their reviews over this period. A review of the case files has indicated this was for the following reasons:

Number of children:	Reason they are recorded as not having been consulted regarding their Child in Care Review:
1	Young person was unable to attend due to the Covid restrictions in place within the Young Offenders Unit where they were on remand.
1	Review occurred in the middle of the 3 month lockdown, young person did not speak English and no interpreter was available. Their views were provided via their Carer and SW.
2	This was their last review before they reached the age of 18yrs which they chose not to attend, their views were shared by their social worker.
5	Were unable to personally contribute due to complex learning difficulties/disability. Their views were identified/shared through other means.
1	The review was a joint child in care and review child protection conference. Child moved into care as a result of care proceedings and it was agreed due to their young age it would not be appropriate to include them, their views were shared through other means.
1	This child was supported to join the meeting briefly via Zoom, but did not attend the whole meeting due to their young age.

An e-mail address was set up and promoted with all West Berkshire children in care in place of the Mind of My Own App: Listentome@westberks.gov.uk. The new e-mail was promoted with all the children and young people open to services in West Berkshire Children and Family Services and with partner agencies. There was however still very little use of this and so it has been publicised within the Children in Care Newsletter to encourage its' use. The Principal Social Worker is planning to seek the views of all West Berkshire children and young people in care in relation to whether or not they want this service to continue and if so how this could best be managed and promoted. It is hoped that if they see a value in it they may want to take a more active role in shaping and promoting this service.

The QAAS Service Manager reads all the consultation papers which are sent in for the reviews and where it is clear a response is being sought these are tracked with the IRO to ensure they have been addressed and none are overlooked. The documents come in from a variety of sources; children, young people, parents, relatives and foster carers.

Consultation Documents - Child's Voice:

How I feel about where I live:

They are very nice, helpful, funny and jolly, nice behaviour, feel really safe here

(17 year old child in care)

I like it very much, Katy's very nice, I feel safe (6 year old child in care) My foster family has been very supportive and caring as we have been in quarantine I feel as though it has brought the family close together.

I feel more relaxed and less anxious when at home now due to the situation

(16 year old child in care)

I get to have my own bedroom all to myself, met nice new people (9 year old child in care)

What I would want to Change:

I don't want to see dad but I don't want him to get angry and come over. (6 year old child in care)

I want to see dad more and see X, X and other family members (13 year old child in care)

> It is good, I do not want anything to change (10 year old child in care)

How I think I am getting on at school:

I would not like to change anything regarding me, my foster family as I feel at home comforted and cared for (16yr old child in care)

I feel safe, it is fun, silent. I like quiet and school is quiet. (6 year old child in care)

I think I'm getting on really well, Maths is very fun, I learnt how to silently kill someone at World War 2 Day. I'm sad that my friends aren't all there. (11 year old child in care)

Very good, going well! Really enjoying, thank you. (17 year old UASC)

At school I am trying my best - since we have been put in to lockdown (& quarantine) I have been doing my school work via laptop (virtual) (16 year old child in care) I don't want to go into school most days it is just really hard (9 year old child in care)

Is there anything else you would like to tell your IRO?

All I want is to stay safe and live with Nanna and Grandad and my brothers. (8 year old child in care)

At school people tell the teacher on me when I didn't do anything wrong (9 year old child in care)

I can't do my birthday party due to lockdown and nothing else, thank you I am very happy:) (17 year old child in care)

I would like my social worker to try a little harder for me to have contact with my brother, and I would like to have telephone contact with my Auntie (12 year old child in care)

How long until I can go home to my family? (14 year old child in care)

Advocacy & Independent Visitors:

Advocacy: West Berkshire children and young people continue to be consistently offered access to advocacy and independent visitors, this is an essential service as it provides the opportunity for children in care within West Berkshire to express themselves and share their views and interests with someone outside of Children Services. The way in which Action for Children, who provide this valuable service, engaged with children changed considerably in March 2020 as a result of the first National lockdown following the Covid-19 outbreak in the UK:

"we have found ourselves in unprecedented times with the outbreak of the Covid-19 pandemic... the Advocacy Service/Here4me continues to be committed to supporting children and young people despite the suspension of face-to-face contact. When a referral is received, advocates contact young people via telephone and video apps. In addition to discussing their issues, wishes and feelings, during this call the advocates agree with the young people how they would like to be supported during the review meetings or conferences. Advocates then either send the advocacy notes over to West Berks colleagues to be included/read out in the meetings or the advocate supports the young person via telephone conference/video apps during the online meeting/conference. This has worked well so far" (Kerrie Hiscock, Action4Children, 2020).

The number of children using advocacy services over 2019/20 decreased by 57% in comparison to 2018/19, however there has been an 11% increase in the number of advocacy contacts overall during this period in comparison to the figures from 2019/20. The bulk of this rise is attributed to a rise in the number of children subject to a CP plan as a result of the Covid Pandemic, but there has also been a 12% increase in children's use of advocacy over this period within CIC review meetings (see table below).

It is clear that provision of advocacy remains in the forefront of both the SWs and the IROs minds and they continue to promote the use of this resource to the children they are working with.

Number of Advocacy Contacts this pe	eriod in comparison to	the previous period:
Period:	April 2019 to March 2020	April 2020 to March 2021
Total overall for the period regardless of reason:	343	381
CIC Reviews (the figure in brackets denotes the percentage this represents of the overall numbers)	95 (28%)	106 (28%)
RCPC/CIC Reviews	2	3
PEP/Emergency Educational Review	0	3
Complaints or Representations	1	0
Issue Advocacy	2	0

Independent Visitors (IV): "The IV/Mentoring service has continued to operate remotely this quarter... with increasing numbers of volunteers vaccinated and lockdown restrictions lifting, preparations are underway for resumption of face-to-face visits. Risk assessments are being put in place for each IV match in order to resume visits safely. Whilst not obligatory, (Here4Me) strongly encourage the volunteers to take up the government's twice weekly testing recommendation and report to (Here4Me) with results regularly." (Action4Children, March 2021).

There were 15 children matched to Independent Visitors as of 31st March 2021, the table below shows when each child was matched to their IV. Many of these children have been matched to their IV for a number of years, indicating they value this service. Where there are 2 dates this is because an IV has either left or retired and a new IV has been matched to the child:

Child No.	Date Matched						
1	11/06/2014						
2	29/09/2016 & 24/08/2018						
3	21/9/2017						
4	8/11/2117						
5	31/05/2018 & 13/03/2021						
6	15/11/2018						
7	20/02/2019						
8	20/06/2019						
9	26/07/2019						
10	05/11/2019						
11	13/04/2020						
12	03/02/2021						
13	12/02/2021						
14	02/03/2021						
15	12/03/2021						

Work undertaken over this period to reduce the length of time children are waiting for an IV has had some success and whilst there continue to be a number of children/young people waiting for an independent visitor, there are currently no children waiting to be linked to a mentor and the waiting list for an IV has reduced. This is particularly evident within the number of children who have waited 9 months or more where this number has halved:

Number of children w	Number of children waiting for matches at the end of this period and length of time they have been waiting.										
Waiting time	Waiting for Independent Visitors	Waiting for Mentors									
0 – 3 months	3 (4)	0 (1)									
3 - 6 months	0 (1)	0 (0)									
6 – 9 months	1 (1)	0 (1)									
9 months +	4 (8)	0 (6)									

Here4Me has 53 active volunteers at present, 18 of whom have been volunteering and providing a service to West Berkshire children for between 6 and 14 years. All volunteers are carefully matched according to each child's needs and interests. The delay in matching children has been predominantly due to the rigorous approach taken to ensure the match endures. The Service Manager for QAAS and the Service Manager for the Children in Care Service continue to meet quarterly with Action for Children to review services being provided.

Here4Me has been supporting their IV/Mentor's in finding different ways in which to engage with the children and young people they are linked to whilst contact remains remotely. They are sent weekly emails with activity ideas (suggestions include Virtual Zoo tour, National Theatre – Thursday broadcasts, Museum virtual tours, Joint Exercise challenges, sending positive challenges to young people – tailored to each child). The Service has also been granted access to the Action for Children Emergency Fund, which has enabled them to source arts & crafts materials, sports equipment, books, etc... that can be 'shared' during telephone contact times.

8. Quality of Care Planning

Quality of Care Planning: What are we doing about it?

• Improve the way in which data is gathered within the Child in Care Chair's report to capture a more in depth understanding of the quality of work being undertaken

The work to improve the Child in Care Chair's report is complete and it is hoped this document will go live by the end of 2022. The delay in completing this has been due to a change over to V6 and capacity within the Care Director Support Services.

• Strengthen links with the social work teams by attending team meetings quarterly, contributing to inductions for new social workers and team managers and meeting with team managers regularly.

IROs are linked to specific teams and attend the social work team meetings regularly.

The IROs and the social work team managers meet every 4 months to share information and review joint working protocols.

Monitoring information indicates that there are timely assessments undertaken for children and focused work from the point children in need enter the front door ensures they receive the right support. There is also timely, focused work occurring with children on the edge of care to ensure that they are safe, problems do not escalate and children remain within their families.

- ➤ The health needs of children in care within West Berkshire are well met although the timeliness of them has been impacted as a result of the impact of the Covid Pandemic upon health services. A snapshot taken at the end of March 2021 showed 89% (94%) of annual Health Assessments were completed on time, which is in line with the national average. A review of all the health assessments showing as overdue has indicated that those showing as outstanding at the end of the year were as a result of the child, or the adoptive parent refusing them.
- ➤ No PEPs were undertaken between April and September 2020 due to Schools being closed and restrictions in place as a result of the Covid Pandemic. When they resumed performance in this area has continued to be very good:

PERCENTAGE OF CHILDREN IN CARE WITH UP-TO-DATE PERSONAL EDUCATION PLAN												
	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
% of CiC of statutory school ag	е											
(snapshot)	98%	98%	99%	99%	99%	99%	99%	99%	100%	99%	100%	99%
% of CiC in further education												
(snapshot)							96%	98%	100%	100%	100%	97%

The Covid outbreak has meant that only emergency dental work has taken place over most of this period, which has inevitably impacted upon performance in this area. However performance over previous years has been good evidencing that West Berkshire children in care's health needs in this respect are prioritised and well met.

PERCENTAGE OF CHILDREN	CHEC	KS CON	IPLETE	D ON T	TIME	Ste	h Atall	a / Kar	l Davis			
	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
% completed on time (snapshot)	83%	74%	69%	69%	63%	58%	52%	50%	46%	43%	39%	41%

PERCENTAGE OF CHILDREN IN CARE WITH DENTAL CHECKS COMPLETED ON TIME Steph Atalla / Karl Dav							Davis					
	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
% completed on time (snapshot)	90%	90%	90%	91%	91%	93%	95%	95%	94%	93%	94%	89%

➤ 100% of Pathway Plans are in place and up to date for all eligible and relevant children in care and being progressed to the IROs satisfaction. 92% (86%) of Pathway Plans are in place and up to date for former relevant children. The 16+ and Care Leavers Service continues to work hard to engage with them and encourage their participation and the completion rates have increased in comparison to the last period when it sat at 86% (up from 73.8% during 2019/20).

COMPLETION OF PATHWAY PLANS FOR LOOKED AFTER AND FORMER CHILDREN IN CARE (PREVIOUS YEAR FORMER RELEVANT ONLY)												
	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
Eligible for after care	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Relevant for after care	100%	100%	100%	100%	100%	100%	None	None	None	None	100%	100%
Former relevant for after care	85%	87%	87%	88%	93%	96%	96%	94%	93%	96%	91%	92%

9. Quality Assurance role of the IRO Service

Rights and entitlements

IROs play a key role in ensuring that all children and young people in care are aware of their rights and entitlements and where necessary West Berkshire IROs support young people to make representations and complaints.

Issues resolution and escalation

A significant aspect of the IRO's work is focussed on continuing oversight and scrutiny of each child's care plan. For West Berkshire's IROs, this part of the role is about good quality conversations and appropriate challenge.

Issues Resolutions (IR) raised within this period – Timeliness of Dispute Resolution and escalations:

- 24 IRs have been raised by IROs in relation to children in care.
- > 20 of these IRs were raised and resolved within the informal stage.
- 4 IRs were raised directly at stage 1 during this period.

- 1 IR was raised directly at Stage 2 with the Service Manager
 No IRs were raised or escalated beyond Stage 2.
 No IRs went outside the statutory timescales.

Issue raised: (NB: more than one issue was raised in some of the disputes and so the total in this table will be higher than overall number of them raised by IROs)	No of times raised as an issue:	Resolution:
Report not available prior to the CIC review for child/IRO	10	All resolved. Taken forward by the team managers as a learning point and addressed with individual SWs.
Issues with content of Care/Pathway plans:	6	All were addressed, training provided where relevant.
IRO not notified of significant change for child	2	Apology given and SWs were provided with support to learn from this omission and prevent re-occurrence.
Chronology out of date.	2	Now up to date.
Visits out of timescales	1	Some, not all, of the delay was due to carer shielding during Covid lockdown, team manager revisited how visits are tracked to tighten the process and avoid repetition of missed visits to child.
Delay in completing contact risk assessment impacted on child.	1	Completed and contact now in place.
Concerns regarding the quality of the placement match and subsequently the support being provided to the carer to support the placement.	1	Explanation given by team manager, placement made in emergency in light of no other options available. Safer Care Plan was updated and supports provided.
SW did not arrive for the CIC review	1	Omission was due to an electronic diary malfunction, which has now been addressed.

IRO challenging SW team decision to change child with disabilities school placement.	1	Decision reviewed by service manager and child remained in their school.
Miscommunication between FSW and SW led to Mother being unable to join the CIC review. Family time had been booked over the arranged meeting. IRO not made aware until just before the meeting was due to start.	1	Apology given to mother by the SW team and the team manager took this forward to the team meeting as a learning point.
IRO raising concern in relation to delay in progressing care planning and permanency for the child.	1	Team Manager provided an explanation for the delay and confirmed documentation had now been submitted to the legal team to commence the process.

The timeliness of paperwork being completed for reviews continues to remain the most common reason for an IR being raised, the frequency of occurrence has increased. There was some indication of the Covid outbreak having been a factor at times.

There has been some concern on the part of the IROs in relation to the quality and relevance of the information within care plans and pathway plans over this period. Given the significance of these documents to each child it is recommended that the Principal Social Worker organises training to improve on the quality of the plans.

It should be noted that the number of IRs raised over this period in relation to late/missed visits is low given the challenges the SWs faced over this period with the Covid-19 restrictions and this is to be commended.

There has been no concern raised this period in relation to late progressions of applications for SGOs, which was an identified theme last year.

10. Feedback:

Feedback is gathered via a variety of means; consultation documents, 1-1, within reviews and on occasion is spontaneously sent in via e-mail or other means.

Feedback received over this period has been predominately focused upon the use of conference calling or virtual online meeting forums for the reviews. The general consensus has been that face to face meetings were preferable, although participants expressed their understanding as to why this could not be the case at the time.

Difficulties raised related to poor connectivity, not being able to see participants over the phone and background noise interrupting ability to hear what was being said.

There was a small proportion of attendees who felt online meetings were better, in the main this was the convenience of not having to travel to attend.

The following is a cross-section of other feedback received:

Relationship/role:	Feedback received:
Grandmother	Everyone listened to what I had to say
Children's Home	Good communication, positive feedback and as always child focused
Supervising SW	It was good to see (X) attend his meeting
Health Visitor	Very clear and concise meeting, another colleague also commented on how good the IRO was
SW	Child's voice and wishes were heard
Police	Well run with everyone getting a say
Foster Carer	(X) was able to join, meet everyone virtually, it was relaxed and positive for him. Professionals spoke to him on a level he could understand
IFA to QAAS Business Support	I appreciate that West Berks are always good at getting minutes and care plans turned around quickly and sent out efficiently. I work with several LA's and I do not find this consistency with all of them! Thank you.

11. Challenges moving forward:

The predominant challenge over the next period is to maintain a good quality of service and IRO oversight within a working landscape that needs to continually adapt to the impact of the Covid-19 outbreak. There is a plan in place to return to face to face meetings with children and to face to face CIC reviews once the IROs have all received their vaccinations and the restrictions are removed.

12. Service Priorities for the Coming 12 months:

- ➤ To forward plan in readiness for a return to face to face review meetings, taking account of the learning from the new ways of working which have arisen as a result of the Covid-19 outbreak.
- > To establish a go live date for the Chair's CIC Report on Care Director
- QAAS took over the annual foster carer reviewing process and this has become a specialist role for one of the IROs. A thorough review of the process has been taking place and a separate report will be produced to track progress and quality of practice/placements.

➤ To work in partnership with the Principal Social Worker to build upon child participation both within Children Services key meetings, but also on a strategic level within the Organisation.

Recommendations:

Action:	Who by:	When by:
Training to be provided for the SWs to improve the quality, content and timeliness of care plans and pathway plans.	Principal Social Worker	To be set by PSW but it is recommended it is undertaken within the next 3 months.

Nicola Robertson Service Manager Quality Assurance & Safeguarding Service