

The Quality Assurance and Safeguarding Service (QAAS) IRO Annual Report

Reporting Period: 1 April 2023 – 31 March 2024



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 2022/23 as required by statutory guidance.



West Berkshire
COUNCIL

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Acronyms used within this report:

CIC	Children in Care
IRO	Independent Reviewing Officer
IR	Issues Resolution
IV	Independent Visitor
LA	Local Authority
NYAS	National Youth Advisory Service
PEP	Personal Education Plan
QAAS	Quality Assurance & Safeguarding Service
SEN	Special Educational Needs
SW	Social Worker
UASC	Unaccompanied Asylum-Seeking Child(ren)
WBC	West Berkshire Council

1. Executive Summary:

- 1.1. 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.
- 1.2. 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 and Family Services. They also provide cover for the Local Authority Designated Officer (currently a 0.6fte post) when they are out of the office.
- 1.3. The IROs within QAAS all have significant 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.
- 1.4. The IRO/CP Chair case load as of 31st March 2022 (average snapshot) was 80 (92) children per IRO, which is a decrease of 13% (15% increase last period) in comparison to the same period in the previous year. This breaks down to approximately 41 (54) children subject to child protection plans and 39 (38) Children in Care open to each IRO/CP Chair. The IROs also provide cover for the Local Authority Designated Officer when they are out of the office.
- 1.5. There has been considerable challenge in relation to workload management within QAAS due to the high number of children open to West Berkshire over this period who were subject to child protection plans. Two locum IRO/CPCs were recruited to assist with the rise during 2022-23 and remained in post until quarter 4 of this period. When the locum contracts ended, their caseloads were re-allocated to the permanent IROs and unfortunately this created delays for some of the reviews due to their capacity to honour the dates which had been originally set.
- 1.6. The IROs' capacity to maintain the quality and the timeliness of their work has been impacted this year by workload demands, particularly those arising from their child protection caseloads and the need to reschedule meetings because of children and young people moving foster homes.
- 1.7. More Child in Care Reviews have been held out of timescales over this period as a result of a lack of IRO capacity to accommodate reviews when delays have occurred.
- 1.8. The average number of children in care over this period was 196. The rate per 10,000 children in West Berkshire has remained lower than the southeast and National rates, no particular reason has been identified as to why this is the case. 13% of West Berkshire's children in care population are Unaccompanied Asylum-Seeking Children (UASC). Whereas in England the percentage is currently 9%. West Berkshire Council has a good record for putting itself forward to assist and for welcoming UASC into this locality. This is further evidenced through the percentage of UASC who are now care leavers. West Berkshire's percentage of children leaving care who were UASC is the highest in the southeast sector apart from Kent.

- 1.9. The IROs held 537 CIC reviews over this period, which equates to approximately 11 per week. 73 of these reviews were part 1 reviews. This means that the review was split into two meetings to enable the IRO to maintain their oversight of the progression of the child's care plan when an event has occurred which has prevented a full CIC review from taking place. The predominant reasons for part 1s being held over this period were children moving foster homes. However, IRO and SW capacity were also factors.
- 1.10. Despite these challenges 98% of the CIC reviews held over this period were held within the statutory timeframes, and performance within this area remains high in comparison to the southeast and National figures. 47 children's reviews were held late over this period, with foster home moves, and late social work reports being the predominant reasons for this occurring.
- 1.11. In previous periods the IROs have managed to accommodate unexpected events of this nature and to keep reviews within timeframes, but their capacity to do this over this period has been impaired because of the size of their caseloads and competing workload demands. This has also impacted upon their ability to send out the minutes of the reviews within the statutory 20-day timeframe. However, the child's care plans have all been sent out within 5 working days, which has ensured that all involved have remained clear on their roles and responsibilities for West Berkshire's children in care. The statutory timeframe for child in care plans being sent out is 10 working days and so this achievement is particularly noteworthy.
- 1.12. The number of children and young people entering and leaving care over this period has been relatively evenly split and a small number of care leavers continue to take advantage of the Post 18 Pathway Plan Offer within QAAS. West Berkshire was the first Local Authority to offer this service to Care Leavers.
- 1.13. 26 children in care have been reported missing over this period and an analysis of the data has indicated there are gaps in what we know when our CIC go missing, which would benefit from further exploration.
- 1.14. Performance data indicates that West Berkshire continues to put a strong emphasis upon keeping children and young people within their family network, this includes providing our children in care with the opportunity to remain with their foster parents when they leave care. It also indicates that children are consistently seen and spoken to and they have timely reviews of their care plans. Assessments are timely, as are PEPs and the majority of children living in care within West Berkshire provide positive feedback about where they are staying and their foster parents. Children and young people are also supported to see a dentist regularly and to access advocacy. Performance in relation to the timeliness of much of the work West Berkshire Children & Family Services undertake with its children and young people in care in the main remains higher than many other Local Authorities.

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2. Comparator of data:

The following are the current known statistics for CIC in England and a comparator of West Berkshire's performance over the same period.

Gov.UK: Children looked after in England - headline facts and figures - 2023

[Children looked after in England including adoptions, Reporting year 2023 - Explore education statistics - GOV.UK \(explore-education-statistics.service.gov.uk\)](#)



2.1. West Berkshire: Children looked after – headline facts and figures - 2023



3. Update on QAAS's Service Priorities over the 2023/24 period:

This year it will be essential to continue to endeavour to maintain practice standards and levels of IRO oversight despite a continued increase within the IRO caseloads

- This report provides evidence of the quality and effectiveness of the IROs work with WBC children in care over this period.

To work hard to achieve a date when we can go live with the updated child in care IRO report, which should in turn enhance reporting.

- This has been delayed following a decision to replace the current ICS case management system. The new ICS system is anticipated to go live during 2025 when this will be re-visited.

To review how feedback is gathered from children and young people, their families and professionals working with them, and strengthen the recording of how these are responded to and used within practice development.

- This work has commenced and has been carried forward to be finalised over the 2023-24 period.

To have an established set of practice standard/guidance for the IROs to use within reviews to ensure consistency of practice across the service.

- This work has commenced and will be finalised over 2023-24. It is intended these standards will apply to social workers, IROs and managers and be set against the Local Authority's responsibilities within the Children Act and the Care Planning Regulations.

4. Update on recommendations from the learning within the 2022-23 IRO Annual Report:

Recommended Action:	Who By:	Outcome:
To undertake a review of the current processes in place to track timeframes for the completion of statutory reports and file recordings to consider whether they are currently robust enough and what other measures might be put into place to support the SWs to address this issue.	All the Children & Family Services Service Managers	This has taken place and recruitment of a more permanent workforce has assisted in achieving some improvement within this area. Managers have systems to track this, but there remains a need for further improvement in this respect.

<p>Explore take up of advocacy with our children in care to be assured it continues to be promoted.</p>	<p>Principal Social Worker</p>	<p>Take up remains lower for CIC than children subject to child protection processes. The availability of advocacy for our CIC however continues to be promoted at the point that children/young people are received into care and via the CIC reviews by the IROs.</p>
<p>Explore why the completion rate for Pathway Plans for former relevant children has dropped for the second consecutive year.</p>	<p>Service Manager for the 16+/Care Leaver Service</p>	<p>There are challenges in this respect as the young people who would sit within this criterion do not always want to engage or keep in touch. Every effort is made to engage with them. This is monitored and will continue to be so.</p>

5. Profile of the West Berkshire Quality Assurance & Safeguarding Service:

- 5.1. 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.
- 5.2. 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. The IROs work hard to deliver a high-quality service for West Berkshire's children in care and the success of this work is reflected within the high performance which has been maintained year on year within the service and the quality of the feedback received in relation to this work. They are clear on the independence of their role and use the Issues Resolution process to good effect. They keep their children and young people as the central focus within all the work they do with the primary aim to achieve the best possible outcomes for them; ensuring there is no undue delay or drift occurring; that each child's care plan meets their needs, that all children have a voice and feel that their wishes and feelings are heard.
- 5.3. 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 and Family Services.
- 5.4. There has been considerable challenge in relation to workload management within QAAS due to the high number of children open to West Berkshire over this period who were subject to child protection plans. Two locum IRO/CPCs were recruited to assist with the rise during 2022-23 and remained in post until quarter 4 of this period. When the locum contracts ended, their caseloads were re-allocated to the permanent IROs and unfortunately this created delays for some of the reviews due to their capacity to honour the dates which had been originally set.
- 5.5. There is some cultural and ethnic diversity within the service, however with no male workers within the service currently, the staffing cohort does not reflect the diversity of the Children in Care population in West Berkshire.
- 5.6. Staff within QAAS receive monthly supervision and have access to informal supervision as and when needed. They also meet as peers and meet face to face for monthly team meetings. 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 2023/2024 all the IROs have received an appraisal and a six-month appraisal review, which considered their individual strengths over the preceding 12 months and learning needs.
- 5.7. The IROs within QAAS all have significant 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.

- 5.8. 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:
- Holding reflective sessions with social workers in relation to children the IROs are holding when requested
 - Designated Safeguarding Leads Training
 - Undertaking case specific audit activity

Feedback in relation to this work has been positive.

- 5.9. The QAAS Service Manager sits on several Panels, 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 Child Exploitation Strategic Group, the Corporate Parenting Panel, the Policy and Procedures BWSCP sub-group 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 regarding multi-agency planning for children in care.
- 5.10. The IRO Service Manager also represents West Berkshire Children and Family Services at the Southeast 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.
- 5.11. The IRO's have had opportunity to network with peers from other Local Authorities within Berkshire as part of the Berkshire IRO Networking Meetings, this includes a regular peer support networking meeting with the IROs in Bracknell Children & Family Services.

6. IRO Caseloads:

- 6.1. 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 2022 (average snapshot) was 80 (92) children per IRO, which is a decrease of 13% (15% increase last period) in comparison to the same period in the previous year. This breaks down to approximately 41 (54) children subject to child protection plans and 39 (38) 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, young people who are open under the 18+ Pathway Plan review offer and unaccompanied asylum seekers.
- 6.2. The IROs also provided cover for the Local Authority Designated Officer for annual leave, sickness absences and outside the LADO's working hours (the LADO post is currently 0.6fte) over this period.

7. Quantitative information in relation to West Berkshire Children in Care:

7.1. Number of Children in Care:

The average number of children in care over this period was 196. The actual number of children in care by the end of March 2024 had reduced to 187.

CIC numbers (snapshot) March 2019 to March 2023:

	March 2019	March 2020	March 2021	March 2022	March 2023	March 2024
Total No. Children in Care	175	158	146	166	197	187
Children in Care per 10000 of Total Population	49	44	41	46	55	41
England Rate per 10000 population (2022/23)	79 (67)					
SE Rate Average per 10000 (2023/24)	57 (48)					

The rate per 10,000 of children in the care of West Berkshire has consistently been lower than the SE and National average rates, no specific reason has been identified for this difference. There has been a slight decrease in the number of children in care over this period in comparison to the previous period. The reasons for children leaving West Berkshire care are explored later in this report.

	2019/20	2020/21	2021/22	2022/23	2023/24
No. of Children Entering Care	60	47	78	102	81
No. of Children Leaving Care	77	58	57	71	71

Currently just under 9% of the population of children in care within England are UASC. In West Berkshire 13% of the children in care are UASC.

[Children looked after in England including adoptions, Reporting year 2023 - Explore education statistics - GOV.UK \(explore-education-statistics.service.gov.uk\)](https://www.gov.uk/explore-education-statistics/service.gov.uk/children-looked-after-in-england-including-adoptions-reporting-year-2023)

7.2. There have also historically been a significant number of UASC received into West Berkshire care because this locality has a large number of service stations in the area where many UASC have been left by traffickers over the years. In 2016 the Government introduced the National Transfer Scheme Protocol for UASC a voluntary agreement with Local Authorities (LA) to enable the safe transfer of UASC presenting in one Authority (predominately the port Authorities, such as Kent) to another LA. West Berkshire has always volunteered and been proactive in accepting UASC into the Locality, unfortunately not all LAs were as proactive and in late 2021 the Government compelled all Local Authorities to participate within the scheme and expected numbers are now set for each LA. This ensures a fairer, more equal distribution of UASC across counties and reduces delay in finding homes for these children. West Berkshire's number of UASC has remained relatively consistent as a result since then.

7.3. The table below shows the number of Unaccompanied Asylum-Seeking Children (UASC) who have been received into care within West Berkshire over the last two periods:

2023/24:

CHILDREN IN CARE NUMBERS												
	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24
Total Number of Children in Care	197	202	209	201	199	188	193	192	193	198	194	187
Number of CiC that are UASC	27	29	28	27	27	26	27	29	29	28	28	25

2022/23:

CHILDREN IN CARE NUMBERS												
	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23
Total Number of Children in Care	166	174	174	183	193	196	198	198	191	187	201	197
Number of CiC that are UASC	29	30	32	31	30	32	33	33	29	25	28	26

The majority of the UASC coming into West Berkshire are approaching adulthood and therefore move relatively quickly into the Care Leaver Service. There are currently 79 (79) UASC open to and receiving ongoing support from the Care Leaver Service. This has remained consistent because of the expectations set for Local Authorities within the Government Dispersal Scheme.

7.4. Number and type of CIC reviews held:

7.5. There were 537 (568) CIC reviews held over this period, equating to approximately 11 (12) meetings being held a week. Of these:

- 114 (133) were initial reviews for children entering care
- 109 were the second reviews of children in care
- 314 were subsequent reviews of children in care

7.6. 73 part 1 CIC reviews were held. This means that the review was held over two separate meetings (and dates) because of the circumstances at the time of the initial review. The reason for the split reviews were as follows:

Reason:	No of times:
Placement move or placement breakdown	31
Social Worker availability (sickness/annual leave/in Court)	12
IRO availability (sickness/capacity)	06
Need to ratify the care plan before Court	04
Went ahead in the child/young person's best interests	05
Parental/professional availability	03
Report not available for the review	03
Young person not available (sickness)	02
Foster Parent not available (holiday)	02

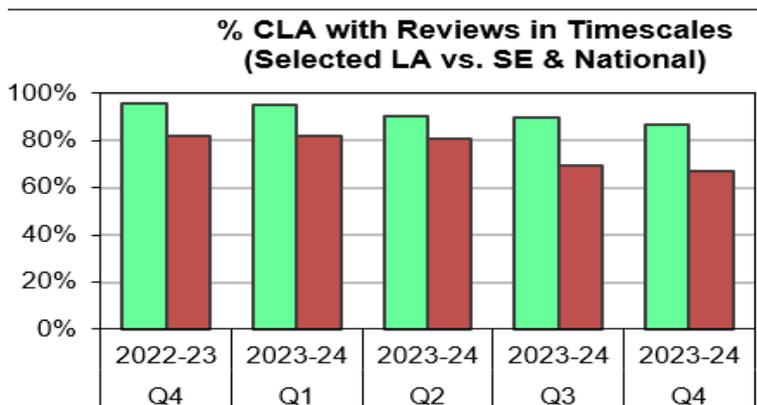
8. Timeliness of the CIC Reviews:

8.1. 98% (98%) of the CIC reviews held took place within the statutory timescales. Performance within this area remains high within WBC in comparison to the SE & National Averages:

Key:

West Berkshire – green

SE/National Average - red



[\(Freely Available Data Benchmarking Reports – SESLIP\)](#)

8.2. The number of CIC reviews held over this period also remains in line with the previous year, which saw a 25% increase in the number of reviews in comparison to the 2022/23 period. Of the 537 (568) CIC reviews held this period 47 (9) reviews were held outside the statutory timescales for the following reasons:

(The overall number in this table is higher as there may have been more than one reason for the delay)

No. of reviews:	Reason the review was rescheduled:
17 (0)	Foster home breakdown/Foster home change
12 (3)	The updating information (including the care plan) were not available in time for the review
10 (2)	The IRO was unwell
5 (1)	SW availability (Court/capacity/error)
5 (0)	Foster Parent availability
2 (0)	Young person's availability
1 (0)	IRO administrator's error in their calculation in relation to the due date
1 (2)	The SW was late notifying QAAS of these children coming into care
2 (0)	IRO capacity when a CIC was transferred to them from another IRO

8.3. The higher number of incidences leading to delays in the CIC reviews being held are not necessarily because they have occurred more frequently over this period in comparison to the 2022/23 period. IRO capacity to accommodate any delays and to continue to hold the CIC review within timescales has been less over this period due to competing workload demands.

8.4. It should be noted however that there has been a significant number of changes of foster homes for children over this period. This has meant that these new foster homes have required a CIC review to take place earlier than what might have been necessary had this move not occurred. There were 31 part 1 reviews held over this period because of a change of foster home for a child, these would all need a part 2 meeting to finalise the review and would have been held on a different date. Where necessary the IRO has raised an issues resolution in relation to any delays and they were appropriately addressed by the relevant line manager.

8.5. The IROs receive a weekly report to assist them in tracking reviews to avoid reviews being late, or the resulting documentation being sent out late and this has usually worked relatively effectively. However, the number of children subject to a child protection plan has remained high in West Berkshire and this has impacted upon the IRO's availability to reschedule reviews to keep them within timescales, despite the above issues. It has also meant that not all their documentation has been sent out within the procedural timeframes over this period. 217 (3) sets of minutes were sent out outside the 20-day procedural timescale over this period. The vast majority of these were sent out within 2 weeks of this timeframe. Delays in recordings occurred predominantly because of staffing changes, sickness and volume of work within QAAS. It is key to note however that despite the challenges the IROs have faced over this period, all the CIC care plans were sent out within statutory timescales following the child/young person's CIC review meeting, which has ensured that everyone involved in supporting the children in care have remained aware of their roles and responsibilities.

9. Post 18 Pathway Plan Reviews:

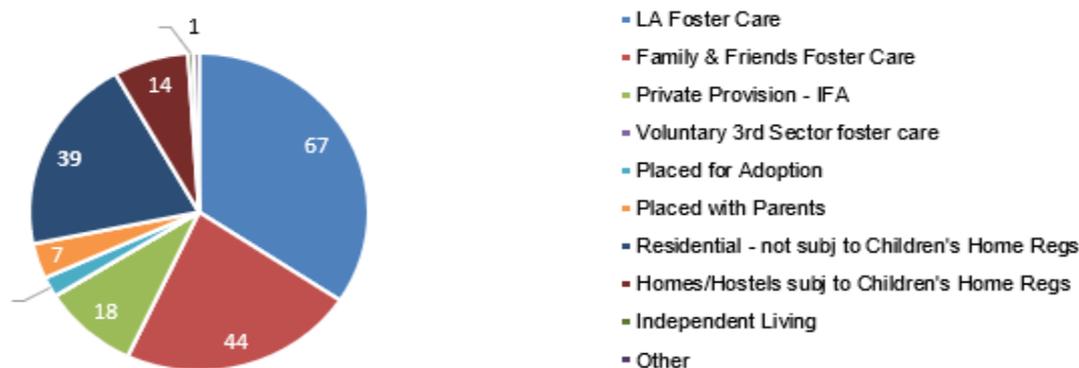
9.1. 11 care leavers have requested a post 18 pathway plan review (PPR) offer at their last CIC review. None progressed beyond one review post 18 years of age. All 11 were UASC young people. Many UASC have been in LA care for a very short period and have not developed the confidence that the support they are receiving will endure once they leave LA care. The IROs have reported that after the initial post-18 PPR, none of these young people felt the need for any further post 18 pathway plan reviews.

9.2. The Post 18 PPR service is always promoted within the young person's last child in care review by their IRO prior to them reaching 18 years of age. A letter detailing the offer is also sent out with their last child in care plan and child in care minutes, reminding them this service remains open for them to access at any time whilst they hold care leaver status.

9.3. One young person who had already left WBC care contacted their IRO to request a post 18 pathway plan review over this period due to being unable to confirm the availability of funding for their education, the review was held and this was quickly resolved for this young person, who received the assurances they were seeking.

10. Types of foster homes:

2022/23 (March 2023 snapshot):



2023/24 (March 2024 snapshot):



The tables above show the continued strong focus within West Berkshire for keeping children within families.

- 10.1. On average 80% of the population of WBC CIC have been placed with WBC foster parents over this period.
- 10.2. The young people listed as being placed within unregulated settings in the main relates to young people who are moving towards independence. These placements are matched to their needs 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. The IROs have had no concerns in relation to the quality of these arrangements over this period.

11. Number and location of the CIC reviews:

- 11.1. There is a significant amount of travel involved within the IRO’s roles due to where children and young people are living. IROs are required to see all their children prior to their reviews and due to distance this is sometimes immediately before the actual meeting. There are occasions where there is a particular identified need when the IRO will visit a child or young person outside of their statutory CIC review timeframe in addition to the actual review (not included within the following figures):

Number of reviews	Locality area:
135	West Berkshire
66	Berkshire (not including West Berkshire)
29	Hampshire (1 Isle of Wight)
12	Wiltshire (8 Swindon)
12	Oxfordshire
10	Lincolnshire
8	Buckinghamshire
8	Surrey
7	Gloucestershire
6	Bedfordshire
4	Greater London
3	Dorset
3	Kent

3	Somerset
2	Shropshire
2	Staffordshire
2	Sussex
2	Lancashire
2	Cornwall

12. Children leaving care:

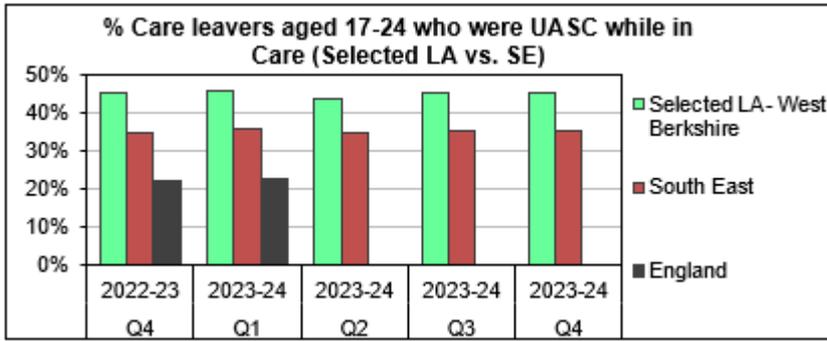
12.1. IROs are responsible for ensuring West Berkshire children in care achieve permanence and that this occurs without unnecessary drift or delay. During 2023-24, 71 (58) children are recorded as having left care.

12.2. Reasons for leaving local authority care:

12.3. The table below provides a breakdown of the reasons why West Berkshire children left care over this period in comparison to the previous 4 years. Excluding children of 18 years of age, 62% (42%) of children in care within West Berkshire were either adopted or left care to live with their parents or a relative, indicating that permanency planning for children in care continues to remain focussed on achieving permanence through family-based options.

Reason the child left care:	April 2019 to March 2020	April 2020 to March 2021	April 2021 to March 2022	April 2022 to March 2023	April 2023 to March 2024
Special Guardianship Order made to former foster carers who were a relative	4	8	9	3	10
Residence order granted/Child Arrangement Order	1	6	0	1	1
Adoption	7	6	3	5	4
Other	8	3	2	8	11
Sentenced to custody	1	1	0	0	0
Left care to live with parents, relatives, or other person with no parental responsibility	17	2	12	9	28
Age assessment determined UASC to be aged 18 or over	2	0	0	0	0
Moved Into Independent Living	12	15	9	17	15
Transitioned into Leaving Care/Adult Services	24	5	1	0	1
Aged 18 but remained with current carers under a staying put arrangement	This category did not exist at this time.	12	18	24	11
Total	76	58	57	71	81

12.4. 11 young people have remained living with their foster families post 18 years of age, as with most young people their need for family support does not end when they reach 18 years of age, and this arrangement ensures this support continues for them where it is an identified need.



12.5. WBC's percentage of care leavers who were UASC whilst in care has been consistently higher than all other Local Authorities in the South-East region apart from Kent (data comparison was made via the reported figures within SESLIP) and is significantly higher than the England average, further evidencing how proactive West Berkshire has been in this respect.

2023-24	Quarter 1	Quarter 2	Quarter 3	Quarter 4
West Berkshire	45%	44%	45%	45%
SW Regional Average	36%	35%	35%	35%
England Average	22%	22%	n/k	n/k

13. Child in Care Reviews and Care Planning:

13.1. Before each child in care review IROs undertake an audit of the child's case file to ensure the statutory responsibilities of the Local Authority are being met. After the review they complete a Child in Care Chair's Report, which is placed on the child's file within Care Director, this includes the outcome of their audit and a letter written directly to each child telling them about discussions and decisions made in their child in care review. The information within their reports is aggregated and fed into West Berkshire's monthly Datazone Performance Reports to inform whole service performance and delivery.

13.2. Many of the actions set by the IROs following case file audits related to the child's chronology either missing or being out of date in the child's ICS case file.

13.3. QAAS undertook work some time ago with the Care Director Systems Analyst to improve the structure of the Chair's Report and the information it captures to improve upon QAAS's ability to provide more qualitative information in this respect, unfortunately the move to an updated version of Care Director has not taken place and a move to a new ICS system is planned to take place sometime over 2025. QAAS anticipates that this will improve upon reporting in this area.

14. Consultation with children and young people

14.1. A key responsibility for the 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 their CIC reviews and contributing directly
- Completing consultation documents
- Speaking to their advocate
- Speaking with their social worker or another trusted adult
- 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-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24
% of reviews this month	100%	90%	94%	80%	100%	100%	95%	90%	60%	92%	100%	91%
% of reviews year to date	100%	92%	91%	91%	93%	94%	95%	94%	92%	92%	93%	93%

PERCENTAGE OF CHILDREN IN CARE REVIEWS FOR THOSE AGED 4+ WHERE THE CHILD/YOUNG PERSON CONTRIBUTED TO THEIR REVIEW												
	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23
% of reviews this month	94%	73%	65%	75%	69%	82%	82%	83%	88%	68%	100%	95%
% of reviews year to date	94%	91%	88%	87%	86%	87%	87%	88%	88%	87%	88%	88%

- 14.2. 93.8% of WBC children in care over the age of 4 years are recorded as having contributed to their reviews. 3 (4) young people chaired their own reviews over this period. The IROs record this when the meeting is entirely led by the young person, however there are a number of children and young people who co-chair with the IRO.
- 14.3. Where children/young people are recorded as not having contributed at all toward their reviews over this period, a review of their case files has indicated they were all consulted. The only exceptions to this have been children who have not wanted to contribute (this is generally with older adolescent CIC who do not want to participate) or if they are too young to engage. The IROs do however continue to try to encourage and support all children to participate and where possible take the lead within their reviews.
- 14.4. The information children and young people have provided for their reviews within consultation papers still indicates a high proportion of them feel that they have not been adequately consulted regarding how their review should be held. However, this is now consistently explored by the IROs as part of the CIC reviewing process and they have identified no occasion where the child/young person has not been consulted about their reviews beforehand. It is therefore unclear why they are continuing to state this in consultation documents.

15. Consultation Documents - Child's Voice:

- 15.1. The following is a selection of feedback provided by children and young people for their reviews:

How I feel about where I live:

I'm very happy here. It's a lovely place
(17yr old – UASC)

Nana, Grampy, I like when Nana cooks me dinner. I like it when Nana takes me to bed
(8 yr old)

I would like to say about where I live is that X and Y are funny
(17yr old)

Yes I like where I live and who I live with. I like where I live because I'm local to most of the family and I find it's a happy place to live! The best!
(10yr old)

Its good, I like X, Y, myself and Z. I have a nice room with my den. I like Z and Z and Z!! I like the movies when it is movie night
(7yr old)

I like it. It is fun. I would not change anything
(7yr old)

I go to school more often, sad sometimes because I miss mummy. Wish sister could come sleepover?
Change - Bunk bed with slide
(8yr old)

What I would want to Change:

home good. Blood - mum good, sister good, dad just to see him
(13yr old)

I like this family because they look after you and there is no hitting
(8yr old)

I don't want to change anything, Uncle X is doing everything perfectly fine, grandad can do changes and you grandma, keep voices down because you seem to be quite loud. I don't like the way you and grandad talk when I do something wrong
(12yr old)

I want to hug my mum. I love my mum.
(6yr old)

I have had contact over text with dad after birthday, to see mum (plan). Don't talk about family at school with me around as I struggle when talked about family
(13yr old)

How I think I am getting on at school:

I like it when I do maths at school and I got 8/8 in my spelling test
(8yr old)

I'm getting on ok at school but when I am stuck I'm too nervous to ask the teacher
(9yr old)

I think I am doing very well at school in all the tests I've done. I have got where I am expected or 2 times higher than what is expected
(11yr old)

I am having a few wobbles but I am trying to sort them out. I am helped a lot at school
(7yr old)

I think I'm getting on at school really bad, all the stuff going on is affecting my mental health I'm sad all the time getting myself into trouble all the time
(14yr old)

Bad, I'm a bit boring, I'm a chicken nugget. I'm not amazing at work. I'm a annoying little sister because (she) keeps telling me this
(6yr old)

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

I would like an IV to take me out by myself and I would like one with a puppy
(11yr old)

To get me to go to Mortimer School
(9yr old)

More time with my parents please
(9yr old)

When can I go home, I miss my mum? Have nightmares when not at home
(8yr old)

I want to be able to see my sisters more.
(11yr old)

Grandad winds me up, I really like grandad
(12yr old)

16. Advocacy & Independent Visitors:

16.1. West Berkshire children and young people in care are 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 and Family Services.

16.2. The provider for this service is the National Youth Advisory Service (NYAS). NYAS provide quarterly progress reports which are discussed with the QAAS Service Manager within quarterly monitoring meetings. The following information contains extracts of these reports alongside WBCs' own data.

16.3. **Advocacy:**

16.4. A child or young person's right to advocacy support when making a complaint or representation is set out within:

- The Children Act 1989 (s24D and s26).
- The Adoption and Children Act 2002.
- The Advocacy Services and Representations Procedure (Children) (Amendment) Regulations 2004.
- Guidance: Providing Effective Advocacy Services for Children and Young People making a complaint under the Children Act 1989.

16.5. The number of children being referred for advocacy services has increased again over this period in comparison to the previous periods, driven predominantly by the continued high number of children subject to a child protection plan. The use of these services within child in care reviews represents only a small proportion of the number of children accessing advocacy.

Number of Advocacy Contacts this period in comparison to the previous period:				
Period:	April 2020 to March 2021	April 2021 to March 2022	April 2022 to March 2023 (not including data from October and November 2022)	April 2023 to March 2024
Total overall for the period regardless of child status/reason:	381	417	437	486

16.6. During this period, it has been necessary to provide advocacy through a variety of different avenues due to the high demand for it, which went over and above the current commissioning arrangements. NYAS supported 224 children and young people over this period out of the 486 who requested it. Not all advocacy support involves complaints or representations and so some of the advocacy support for children and young people was provided through someone the child themselves had identified; a trusted adult (such as a pastoral support worker) or a family support worker not connected to the work with the family. The IROs have been generally satisfied with the advocacy provided for their children and young people and have used the Issues Resolution process when they haven't.

16.7. NYAS's contract period is approaching its end and whilst the service they have provided has been excellent, WBC is in the process of going back out to tender to

ensure that future demand for advocacy can be entirely met through the independent provider.

16.8. Independent Visitors:

16.9. There were 8 (15) children matched to Independent Visitors (IV) by the new provider between 1st December 2022 and 31st March 2023. The Children in Care Service Manager regularly reviews the number of children waiting for IVs and Mentors to ensure they are matched in a timely way. Children and young people are prioritised according to level of need and there are ongoing discussions with the provider regarding steps being taken to identify the right matches for the children still waiting to be provided with one.

Provision of Independent Visitors and Mentors over 2023/24: (Snapshot March 2024)	
Young people matched with an IV	12
Young people waiting for suitable IV / Mentor	11

16.10. The independent visitors undertake a wide variety of activities with their children and young people such as archery and axe throwing, cinema, bowling, virtual reality experience, prom dress window shopping, dog walks and cooking skills/lesson.

Service requested:	IV	Mentor:
Reason for the delay in allocation of an IV/Mentor:	2 - young people are waiting for a male IV	3 – awaiting information from the SW to proceed
	1 - SW to confirm if IV is required.	1 – young person is 18yrs old and the mentorship scheme is being explored for them.
	1 – Young person is living out of County and an IV has been recruited and is currently being trained.	
	1 – match meeting is arranged	
	2 – seeking a younger IV	

As can be seen from the above table there are some occasions where it has been difficult to allocate an IV despite having provision for one because of specific requests.

17. Feedback regarding the children and young people’s experience of their Independent Visitors:

Thank you for the service, we wish it could have started sooner. YP and his IV got on really well - it was a great match. You message to the IV. (Feedback from foster parent)

X told me (IV) he had his best days out with me which was lovely to hear (Young person’s feedback to IV)

This was probably our best visit so far. X thoroughly enjoyed the activities and the time we spent driving to and from activities... X loves theme parks so I know he would love to return to Thorpe Park or Chessington. Also quad biking is on his list. (Feedback from IV)

YP loves hanging out with his IV, and they are having fun times! He has said nothing but positive things and he really likes her. I am so thankful you sorted this out so quickly for him. So thank you!
(feedback from SW)

YP's IV has done wonders for him - we can't thank her enough. Before he was matched, YP found it hard to visualize leaving the house. He had never been to the shops on his own and was terrified of the world (we) have overheard him speaking with peers about how much he enjoys going out with his IV and the independence it has encouraged. He now comes up with ideas for what he wants to do on visits and is learning to dress himself appropriately for the visits. He is learning invaluable skills such as his recent cooking visit and he allows his IV to help/teach him with things he does not allow us to do.
(Feedback from foster parent)

18. Quality of Care Planning:

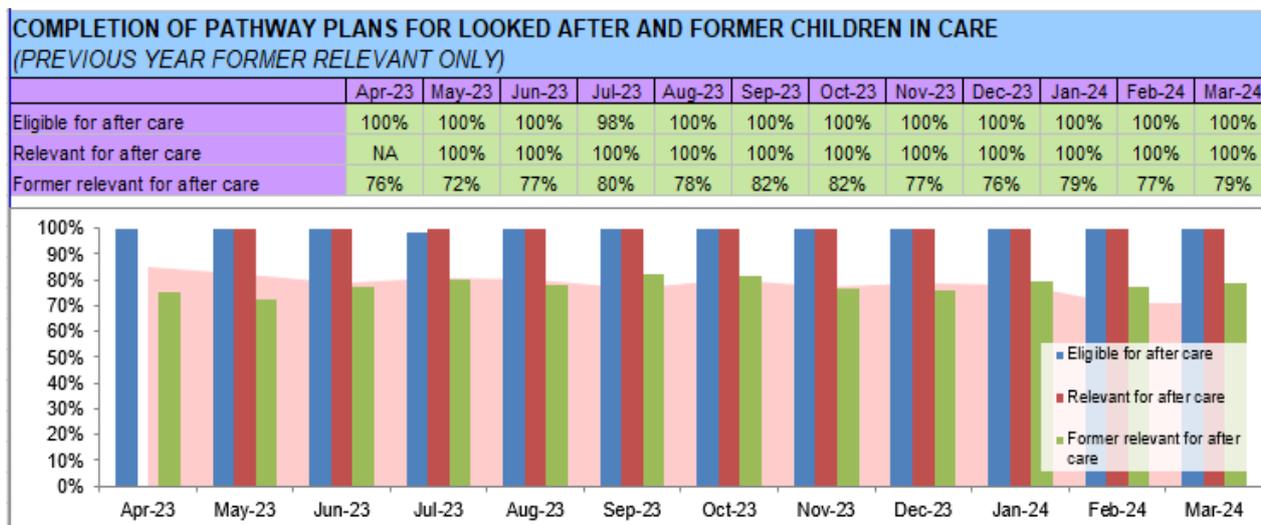
- 18.1. Monitoring information indicates that there are timely assessments undertaken for children and focused work from the point children in need enter the front door ensures they receive the right support. There is also timely, focused work occurring with children on the edge of care to ensure that they are safe, that problems do not escalate, and children remain within their families. An average of 92% (91%) of the children in care to West Berkshire are visited within the statutory timeframes each month. When a visit to a child in care is late without good reason the IROs raise an issues resolution to ensure a plan is in place to avoid this occurring again.
- 18.2. The timeliness of health assessments for West Berkshire children in care has remained consistently high over this period, with an average of 91% (92%) having been completed on time over this period. This remains aligned with the national average of 91% and higher than the England average of 89%.
- 18.3. Most PEPs have been completed within timescales. The average percentage of PEPs completed within timescales over this period was 96% (98%).

Children Looked After in England:

"During the COVID-19 pandemic the percentage of CLA having had their teeth checked by a dentist fell to 40%; this improved to 70% last year and in 2023 is 76%, however this is still below the pre-pandemic level of 86%."

[Children looked after in England including adoptions, Reporting year 2023 - Explore education statistics - GOV.UK \(explore-education-statistics.service.gov.uk\)](https://www.gov.uk/explore-education-statistics/service.gov.uk)

18.4. The percentage of dental checks being completed within timescales has remained high at 86% (85%), particularly in comparison with the National figures (see above). Not all children and young people will consent to seeing the dentist, but every effort is made to encourage them to attend, and this is monitored within their child in care reviews by their IRO.



18.5. Whilst practice has always been consistently good, the chart above shows an improvement in the completion rate of Pathway Plans for all the eligible and relevant young people in WBC in comparison to 2022/23. 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.

18.6. On average 78% (78%) of Pathway Plans are in place and up to date for former relevant children. The completion of reviews of pathway plans for former relevant children is dependent upon their willingness to engage in a review and upon ability to keep in touch with them.

19. Children and Young People in care who are reported missing:

19.1. WBC has a Missing Children Co-Ordinator, who holds regular mapping meetings and closely monitors work undertaken with children who are missing. This includes liaison with the allocated SWs who complete the Return Home Interviews (RHIs). The Missing Child Co-Ordinator also writes a Missing Children Annual Report, which includes analysis of any themes or patterns arising. This report is not specific to children in care and includes all children reported missing regardless of their legal status.

19.2. When a child or young person has been missing for 3 or more episodes within a period of 3 months, a children and families strategy meeting is held by the team the child is allocated to with all relevant partner agencies to share information and plan what needs to happen to safeguard the child/young person.

19.3. The QAAS Service Manager has completed an analysis of all CIC who have been reported as missing over this period to inform this report, with the following findings:

(The Data has been sourced from 'Datazone' - the Children & Families Service internal performance reporting tool)

- 19.4. There were 104 reported episodes of children missing from care, which involved 26 individual children and young people whose ages ranged between 11 years of age and 17 years of age. There were 11 females and 15 males within this cohort.
- 19.5. 17 of the children reported missing were living within foster homes in the West Berkshire locality area, 13 of the children reported missing were living in foster homes within other local authority areas (4 of the young people reported missing had experienced foster home moves and were reported missing whilst living both inside and outside of the WBC locality).
- 19.6. 22 of the missing children and young people were of White British ethnicity, whilst the remaining 4 were young people from other ethnic groups (all different). 3 of these 4 young people were UASC.
- 19.7. 79% of the 104 reported missing episodes involved children and young people going missing from their foster homes. 2% were reported missing from School. There are no entries for the remaining 19% of the missing episodes.
- 19.8. What happened whilst they were missing?

(Percentages are rounded to the nearest whole number)

2% of the missing episodes	child/young person went to the park
7% of the missing episodes	child/young person got onto a bus or train
8% of the missing episodes	child/young person stayed at a friend's home
9% of the missing episodes	child/young person refused to say
11% of the missing episodes	child/young person reason is recorded as 'other'
20% of the missing episodes	child/young person walked around town
44% of the missing episodes	the field is blank and the reason is not known

19.9. How were they found?

(Percentages are rounded to the nearest whole number)

- 7% were found by their foster parents
- 7% are listed as 'other'
- 18% were found by the Police
- 23% returned on their own
- 45% the field is blank, and this is not known.

19.10. Completion of Return Home Interviews (RHI):

(Percentages are rounded to the nearest whole number)

- 3% inappropriate (reason not stated)
- 19% field is blank
- 25% refused to have one
- 53% RHI completed

19.11. Number of missing episodes:

58% of the missing reports over this period related to the same 6 children/young people

Number of reported occurrences	Number of episodes	Number of children
14	1 st reported episode	10
30	2 nd to 5 th reported episode	8
18	6 th to 10 th reported episode	8
14	11 th to 15 th reported episode	4
14	16 th to 20 th reported episode	4
5	21 st to 25 th reported episode	1
5	25 th to 30 th reported episode	1
8	31 st to 37 th reported episode	2

Children and young people in care where there has been a high number of reported missing episodes:

Child	Number of reported missing episodes <u>ever</u> to 31 st March 2024	Age (years) at the time they were reported missing:
A	36	17
B	32	15
C	17	17
D	17	17
E	16	15 & 16
F	11	13 & 14

19.12. Length of time the children were missing per episode:

Number of reported incidences	Length of the missing episode	Number of children/young people
71	Found within 24 hours	22
14	Found within 2 days	6
3	Found within 3 days	3 (1 of these is the same young person in the next 2 fields)
2	Found within 4 days	1
1	Found within 5 days	1

19.13. There is a Statutory expectation in relation to how Local Authorities, foster parents/homes and the Police should respond when a child or young person in care is missing. The following is a link to the guidance setting out their respective roles and responsibilities when a child goes missing from care:

[Flowchart showing roles and responsibilities when a child goes missing from care \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/101222/missing-from-care-flowchart.pdf)

19.14. Contained within this guidance is an expectation that Local Authorities collate data on CIC missing episodes, including intelligence gained from return interviews and that these should be analysed regularly by all relevant partners to map problems and patterns. Regular reports should be provided to council members and the LSCB.

19.15. There are some key gaps in the data collection in relation to some of the children in care who have been reported as missing over this period:

19.16. 47 episodes (16 children) do not appear to have had an RHI completed and whilst some state the child refused to engage within one, there are 8 children (17 episodes) where it is not captured why an RHI was not completed.

- 19.17. These episodes, as a result, do not contain data in relation to what happened whilst the young person was missing and where they were found. It would be reasonable to assume that the allocated SW would know where the young person was found regardless of whether they engaged within an RHI. This would benefit from further exploration to establish a process for how known data should be captured, regardless of whether an RHI was completed, to better understand what factors lead to children and young people going missing to inform ongoing service development.
- 19.18. The QAAS service manager has held a reflective discussion with the IROs as a result of the learning from this analysis to raise their awareness of the identified issues and strengthen their understanding and oversight.

20. Quality Assurance role of the IRO Service

- 20.1. 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.
- 20.2. The IROs complete a case file audit of every child and young person's ICS record in the lead up to every CIC review they Chair. The aim of this is to ensure that statutory responsibilities for them have been met and this has happened in a timely way. It also enables the IRO to be clear on what may or may not have happened since the last review. This is particularly key given some of the IRs raised over this period relate to the IRO not having been notified of key events in the child/young person's life.
- 20.3. When any concerns arise from these audits the IROs will either set an audit action for the relevant professional to address them or raise an Issues Resolution (IR).

21. Issues resolution and escalation

- 21.1. 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. This is sometimes also achieved through use of the IR process.
- 21.2. One of the key functions of the IRO is to resolve problems arising out of the care planning process.
- 21.3. Every Local Authority is required to have a formal process in place for an IRO to raise concerns and to ensure that this process is respected and prioritised by managers. The process is referred to in the statutory guidance as the local dispute resolution process, however in WBC this is referred to as the Issues Resolution process. The WBC process has 5 stages, and when an IR is raised there is an expectation that it is responded to within 5 working days of the stage within which it was raised. The process involves an ability for the IRO to escalate the matter through a number of levels of seniority within WBC with an identified timescale for a response at each stage (set at 5 working days per stage). The IRO may bypass any stage and progress the Issues Resolution to the level they consider most appropriate. There is a statutory requirement that formal IRs (stage 1-4) do not take any more than 20 working days to resolve.

21.4. The IROs have positive working relationships with the social workers and their line managers and this is reflected in the fact that the majority of IRs are raised and resolved within the informal stage or stage 1 of the IR process. However, some have been necessarily raised at a higher stage in the best interests of the children and young people involved.

21.5. 22 (30) IRs have been raised by IROs in relation to WBC children in care over this period:

Stage the Issues Resolutions (IR) was raised and resolved within this period:

	Stage the IR was resolved ➡	Informal	Stage 1	Stage 2	Stage 3	Stage 4
Stage IR was raised ⬇	Number of IRs raised: ⬇					
Informal (Line Manager)	4	4				
Stage 1 (Team Manager)	10		8	2		
Stage 2 (Service Manager)	6			5		1
Stage 3 (Service Director)	1				1	
Stage 4 (C&FS Director)	1					1

Where IRs were escalated to stages 2 to 4, this was on occasion due to a delay in a response within earlier stages and on one occasion due to the IRO not being satisfied with the response they were given.

21.6. Reason why the IR was raised:

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:
Reports for the reviews were not available for the review/within statutory timescales:	6 (17)	In all of these instances, the relevant team managers advised they had tightened up their tracking systems and provided advice and training where relevant to the staff members involved.
Delays in completion of later life work.	1 (4)	A worker was identified to address the issue raised and this was successfully resolved.

IRO not notified of a significant event:	5 (2)	<p>There has been an increase in the number of occasions this has happened. The QAAS Service Manager sent a reminder to the Service Managers of the SW responsibilities in relation to this as set out within the Care Planning Regulations.</p> <p>The Team Managers apologised for this oversight and reminded their staff of the necessity and importance of doing this.</p>
Delay in the completion of a care plan for a child new to WBC care (should be in place within 10 working days of coming into LA care)	2 (0)	Line manager addressed this as a training need for the SWs.
IRO was not sent the child's care plan before it was filed and their views were not included.	2 (0)	The Service Manager reminded all staff they must ensure this is done.
No advocate in place	1(0)	Referral for advocacy was made and one was allocated.
Delay in progressing care proceedings	3 (0)	Proceedings were issued.
Visits not completed within statutory timeframes	4 (0)	Manager apologised and took steps to avoid this re-occurring.
The IRO challenged a delay in setting up the child's allowances.	3 (1)	This was resolved and back dated.
Delay in the child being allocated a SW.	1 (0)	Capacity issues caused a delay, the child was allocated to a SW.
IR raised with a care provider due to a failure to provide key items for the young person as had been requested.	1 (0)	The provider apologised and ensured the items were purchased without delay. This enabled the young person concerned to attend a key religious festival.
IR raised with the SEN Team in relation to a delay in the provision of education for a CIC with additional needs.	1 (0)	A full explanation was provided, child was placed out of area and the delay related to delays in responses from the OLA Schools. Alternative provision was being provided in the meantime whilst this was challenged.

- 21.7. The number of IRs being raised in relation to the timeliness of paperwork remains the highest reason for IRs, but there has been significant improvement in this area. If the reports are not ready on time this can lead to delays in the child's review being held.
- 21.8. The number of occasions where the IRO has not been notified of a significant event has continued to be a factor and rose over this period. The QAAS Service Manager sent a reminder out to the relevant service manager for them to remind all their social workers of their responsibilities under the regulations in this respect and the potential impact upon the child concerned when this does not happen.
- 21.9. The IROs went directly to stages 2 to 4 for a small number of children and young people because of the impact of what was occurring upon them and the need to ensure it was very quickly resolved.

Issues Resolutions raised by service area:

Service Area	Stage IR was raised:		Total number of IRs raised:	
	2022-23:	2023-24:	2022-23	2023-24
Family Safeguarding West	Informal: 2 Stage 1: 2 Stage 2: 1	Informal: 2 Stage 1: 4 Stage 2: 2	5	8
Family Safeguarding East	Informal: 2 Stage 1: 6 Escalations: 1 x Stage 1 to Stage 2	Informal: 1 Stage 1: 1	8	2
Children With Disabilities	Stage 1 - 4	Informal: 1 Stage 1: 1 Stage 2: 1 Escalations: 1 x Stage 1 to Stage 2	4	3
Children in Care	Informal: 1 Stage 1: 6 Stage 2: 1 Escalations: 1 x Stage 1 to Stage 2	Stage 1: 1 Stage 2: 1 Stage 4: 1	8	3
16+/Care Leavers	Informal: 1 Stage 1: 3 Escalations: 2 x Stage 1 to Stage 2 1 x Stage 1 to Stage 3	Stage 1: 1 Stage 2: 2 Escalations: 1 x Stage 2 to Stage 4	4	3
	1 – Stage 1	0	1	0

Family Placement Team				
SEN Service	0	Stage 1: 1 Escalations: 1 x Stage 1 to Stage 2	0	1
Back to Back (Care Agency)	0	Informal: 1	0	1

21.10. No specific patterns have arisen for any particular team in respect of the number and type of IRs raised. Timeliness of the paperwork for the reviews has been a factor across all the teams. It is also clear that workload demands within the social work teams have continued to be a key factor from the management responses to the IRs.

22. Feedback:

22.1. The way in which feedback is gathered is an area which needs review to strengthen the process. Currently it is gathered via a variety of means; consultation documents, full case file audit documents, 1-1s, within reviews and on occasion is spontaneously sent in via e-mail or other means.

22.2. The following is a cross-section of feedback received in relation to the IROs:

Relationship/role:	Feedback received:
Child's relative to the IRO	Well, you probably already know but I was awarded special guardianship today. I'm so happy. Just want to say a massive thank you for everything you have done for me and the children over these last few years. In a weird sort of way I am gonna miss you and the meetings. But then also so happy that we don't have them no more.
Adoptive parents to the IRO:	We wanted to send a thank you for the beautiful gifts you gave.... What a treasured gift this will be...they are much adored and carried around remind us of you and your kindness that you have shown to us all along the way.
Supported Lodgings worker to the IRO:	I just wanted to say how struck I was by your kind and gentle style with X (UASC). He responded well to your humour and I took notice of how much care you took to explain things in such a human and easy to understand way. I've already taken away a few of your comments to use with other young people, especially the ones who feel frustrated at the lack of education provision. Your patience in repeating the reasons is something to remember!

Foster carer to the IRO:	I have reflected upon how blessed we are to have you as our IRO, I love your clarity, professionalism, efficiency, good humour and lots more. I thought I ought to tell you thank you for all you do.
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23. QAAS Service Priorities for the Coming 12 months:

- To continue to strive to achieve excellence for all CIC
- To have a clear set of guidance in place in relation to CIC reviews to ensure that all are clear on their roles and responsibilities as set out within the Care Planning Regulations.
- To improve upon the quality of the consultation documents for CIC, their families and the professionals involved.
- To review the current processes in relation to how feedback is obtained and collated within the service.
- To improve upon how IRO work is captured and reported upon within the ICS system once it goes live during 2025.

24. Recommendations from the learning within this report:

Recommended Action:	Who By:	When By:
Action to be taken to ensure that child chronologies are present within their ICS case files and kept regularly updated.	C&FS Team Managers	This has been raised as an expectation with all the Children & Families Managers and will be tracked over this period.
Consideration to be given to undertaking a themed case file audit with a focus on CIC who have been reported missing.	Within the bi-monthly reporting period by all the managers who participate.	Scheduled to take place in November 2024
Consideration to be given as to how information can be captured for children and young people in care who have been reported missing, particularly if they have refused to engage within an RHI.	Within the Children & Families Leadership Team Meeting by September 2024	Updated on progress to be provided next reporting period.

Nicola Robertson
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Quality Assurance & Safeguarding Service