

## HAMPSHIRE COUNTY COUNCIL

### Report

<b>Committee/Panel:</b>	Children and Families Advisory Panel
<b>Date:</b>	27 May 2014
<b>Title:</b>	Independent Reviewing Service
<b>Reference:</b>	5843
<b>Report From:</b>	Director of Children's Services

**Contact name:** Dave Watson, Head of Safeguarding Unit and Reviewing Service

**Tel:** 01962 876222

**Email:** dave.watson@hants.gov.uk

#### 1. Summary

- 1.1. The purpose of this report is to bring to Members' attention the work and activity of the Independent Reviewing Service. The report also presents an annual audit of Care Planning activity for children looked after by Hampshire County Council which informs, challenges and develops practice. The report is therefore presented in two parts.

#### 2. Contextual information

- 2.1. The Independent Reviewing Service is a statutory service, delivered by Independent Reviewing Officers (IROs) within Hampshire Children's Services Children and Families branch. Their work is guided by the statutory guidance contained within the government published 'IRO Handbook'.

#### 3. Finance

- 3.1. There are no financial issues arising directly from this report

#### 4. Performance

- 4.1. The report of the recent Ofsted inspection of Hampshire's services for children was positive about this service, commenting that; "Children's care plans are reviewed regularly. Independent reviewing officers (IROs) are challenging in their monitoring of care plans and place a strong emphasis on driving forward plans for children to avoid delay wherever possible. Review recommendations are specific and relevant to meet the changing needs of individual children."

## 5. Other key issues

- 5.1. The Ofsted report included a specific recommendation that the Local Authority should: “Ensure that independent reviewing officers (IROs) have the capacity to carry out all their required duties effectively, including making contact with children between reviews so they can take full account of children’s wishes and feelings when planning for their futures.”

### Part 1. The Reviewing Service

#### THE INDEPENDENT REVIEWING SERVICE (IRS)

##### Background

1. The IRO Handbook states that the IRO manager should be responsible for the production of an annual report for the scrutiny of the members of the corporate parenting board.
2. In addition the IRO Handbook specifies a further six areas that an annual report should make reference to which are outlined in this report as follows:-
  - Development of the IRO service including information on caseloads, continuity of employment, the make up of the team and how it reflects the identity of the children it is serving.
  - Number of reviews that are held on time, the number that are held out of time and the reasons for the ones that are out of time.
  - Extent of participation of children and their parents.
  - Outcomes of quality assurance audits in relation to the organisation, conduct and recording of reviews.
  - Procedures for resolving concerns, including the local dispute resolution process, an analysis of the issues raised in dispute and the outcomes.
  - Whether any resource issues are putting at risk the delivery of a quality service to all looked after children.

This report will also identify good practice and issues for further development, including where action is needed.

##### **Development of the IRO service, including, information on caseloads, continuity of employment, the make up of the team and how it reflects the identity of the children it is serving**

3. There are currently 20.5 FTE IRO posts. The one recent vacancy has been recruited to. Use of locum hours continues to manage capacity but use of more expensive agency staff ended in early November 2013. This is an improvement in the position reported at the half-year mark in June 2013 when three posts were vacant. The service is well served by a stable core of experienced IROs.

4. A further post agreed by members would have come into establishment in April 2014, but due to pressures on the service it was been agreed that this post be brought forward and filled earlier and this has been done.
5. The IRO Handbook states that an estimated caseload of between 50 to 70 children for a full time IRO would represent good practice in the delivery of a quality service for looked after children.
6. The average looked after caseload for IROs in Hampshire has increased slightly to 65, reflecting the increase in CLA numbers in the County. However alongside their role as IROs these officers also chair Child Protection Conferences. Over the last year the number of children subject of a CP Plan has risen from 893 (end Nov 2012) to 1033 (end Nov 2013). On average each IRO now services Child Protection Conferences covering 50 children in addition to their statutory CLA IRO function
7. These figures translate to the IRS servicing 2,427 CLA reviews, 693 Initial CP Conferences and 1,366 Review CP Conferences in the last 12 months. A small number of reviews (less than ten) have arisen from the change of status of young people remanded to secure settings from Youth Courts.
8. Having a dual chairing purpose is helpful from a safeguarding perspective, delivering continuity for children and families and ensuring that care plans incorporate robust risk management where the same officer has seen cases through CP Conference processes to CLA status. It does however bring the risks associated with carrying high caseloads and if CP Plan numbers further increase there is a particular threat to the IRS delivering effectively on its core statutory function.
9. 'Reg. 15 Reviews' of children held in secure accommodation for welfare reasons are shared across the service, rather than being the responsibility of one officer. There have been 8 such reviews in that last 12 month period.
10. Hampshire members have evidenced a commitment to addressing high case loads for IROs by the provision of additional IRO resource in 12/13 and 13/14. The Department has shown an openness to considering other solutions to work pressures such as piloting the use of mobile and voice recognition technology, which is planned to commence in the next few weeks.
11. Whilst the service has continued to experience some staff changes in the last year, some of these are attributable to awarding of new posts and planned retirements. Of the 3 other employees who left IRS, 2 retired and 1 left for a promotion with a neighbouring authority. The service continues to attract a generally high calibre of applicant from both within and external to the current Hampshire workforce.

12. The majority of children in care in Hampshire are White British, this being reflected by the majority of IROs within the IRS. Only 25% of IROs are male compared with over half of the looked after population.

**Number of reviews that are held on time, the number that are held out of time and the reasons for the ones that are out of time**

13. The result for review timeliness in the last twelve months is that 83.7% of reviews are held on time. This is almost identical to the figure to year end for 12/13. Any analysis of this and other data needs to be in the context of the overall increased workload as referenced above.
14. Common reasons for reviews being late included:
  - Late changes of social worker
  - Initial reviews not being booked
  - Lack of proper preparation for reviews by operational staff

**Extent of participation of children and their parents**

15. The current position on participation by young people in reviews is 83.7%. This is a slight increase on the 83.4 % reported for the last year. Adoption and CWD team's results are less positive in this area which may be an indication of how participation is being measured for these children. The care plan audit results may further assist this understanding.
16. There is no mechanism at present for reporting on figures for parental participation in reviews.

**Outcomes of quality assurance audits in relation to the organisation, conduct and recording of reviews**

17. The audit of care plans and reviews carried out over the two months of September and October by the IROs has been completed and data is now being processed with assistance from the DaIT. Results will be shared as soon as available.
18. An audit of agency participation in, and report contribution to, CP Conferences was conducted in 2013, using minutes of Conferences held during a week of December 2012. This exercise has been repeated for Conferences held during one week in December 2013. At the time of writing the latest results of this are due to be reported to the Hampshire Safeguarding Children Board Quality Assurance Group.
19. Lead Independent Reviewing Officers continue to regularly conduct audits of review records and Child Protection Plan quality. The results from this

work are shared with individuals within supervision and contribute to evidence for IPPs.

20. A Children Looked After Review spread sheet is used to provide evidence regarding timeliness of the production of the review record.
21. Direct observation by the Lead IROs of IROs chairing Conferences is undertaken to provide supporting evidence of practice standards.

**Procedures for resolving concerns, including the local dispute resolution process and an analysis of the issues raised in dispute and the outcomes**

22. The Problem Resolution Process (PRP) is now established within Hampshire and has been commenced 10 times since December 2012 which is a slight reduction from the figure of 13 for the previous 12 months, but it should be noted that 9 of these 10 occurrences have come in the second half of 2013.
23. Key themes from the use of the PRP over the last year have been a lack of permanency plan, lack of paperwork and non completion of life story work. One PRP related to the withdrawal of a residential placement following the incarceration of a young person. One resolved this year from late in 2012 focussed on execution of a Child Protection Plan, rather than issues for a Child Looked After. Two issues have been escalated to Area Director level and all those concluded to date have been satisfactorily resolved in the opinion of the IRO concerned.
24. A meeting held earlier in December has formulated guidance on when this formal process should be used which it is anticipated should give both an appropriately increased use and a consistent application across the County.
25. It is still reported that many issues are resolved locally through dialogue with Team Managers negating the need for the formal PRP to be initiated. In order to evidence this resolution work, IROs have received clear guidance on the use of the 'IRO note' on the children's records system. This recording has been monitored on a three monthly basis since April 2012 and better allows the Lead IROs to quality assure IRO practice and recording. The use of an 'IRO note' and CP Chair note' is differentiated on the system and in reporting.
26. Increased use of 'IRO note' on ICS can be clearly evidenced in this calendar year. In the eight months to December 2012 an average of 37 IRO notes and 14 CP chair notes were recorded each month. In the first ten months of 2013 an average of 80 IRO notes and 26 CP Chair notes per month were placed on the system.

27. The reporting of IRO recording allows differential levels of recording between individual IROs to be seen and challenged by Lead IROs.
28. This is an area of work which it is acknowledged still needs development within the service, given the volume of reviews and CP Conferences as reported above. Guidance on recording has been issued within the service and Lead IROs will continue to monitor activity.

**Any resource issues putting at risk the delivery of a quality service to all looked after children**

29. Lack of placement choice for children reduces the scope for effective placement matching and in turn for permanency to be achieved and sustained.
30. IROs report a lack of capacity within operational services to undertake life story work.
31. IROs report that a lack of appetite for Special Guardianship Orders from many carers is born of a concern regarding level of financial and other support available.
32. The increase in activity around recruitment of prospective Adopters has not yet fed through to significant numbers of children awaiting adoption being placed.
33. From the IRS perspective the lack of a more discrete admin support service for this County service continues to create difficulties and affect delivery.
34. The IRS recognises that all of the above issues are being considered by current workstreams within the branch.

**Good practice**

35. Services for children in care remain a Hampshire County Council priority. The current administration has made a commitment to children, front line service delivery and the finance to support this within the 2012 – 2015 budget programme.
36. There is high quality participation of looked after children and young people at the individual, service and strategic levels which continues to be an outstanding feature. The IRS has continued to work with Care Ambassadors as part of the interview process for new staff and their contribution in this regard has been both influential and significant.

37. Response to use of the PRP from operational colleagues remains positive and its use is properly seen in the context of driving better outcomes for children.
38. IROs and Lead IROs have continued to input to all of the Care Matters sub groups and contributed to the policies on permanency.
39. The IRS has produced guidance on the management of Reg. 15 reviews for both the service and operational staff.
40. The IRS has contributed to training, particularly having input to the series of mandatory training events run round the county on Education and Children in Care.
41. The service has ensured continued delivery of an effective Child Protection Conference system despite the significant increase in work volume in this area of activity.
42. Lead IROs continue to input to area and district Performance Action Groups using an agreed data set and analysis format and attend local management meetings when appropriate. The Head of Service reports relevant data to the County Performance Action Group and is part of the Children and Families Wider Management Team.

#### **Issues Identified for Development in 2012/13 and Outcomes**

43. *The IRS will liaise with the participation officer to ensure that information about the service is available to young people on the website.*

Information about the IRS will be included on the website when this goes live.

44. *The IRS will produce a guidance document to ensure that all IROs and operational staff are clear about practice in relation to completing Reg. 15 reviews.*

This has been completed and disseminated via manager's communications.

45. *The IRS will identify and reflect back any themes resulting from use of the Problem Resolution Protocol.*

This feedback is included within the body of this report

46. *The IRS will provide a written policy regarding the manner in which the child's case will be reviewed and provide the child, the parents and any other relevant person with a copy.*

The Care Planning and Reviewing Policy has been revised and workstreams are planned for the new year to consider communication of process to children and families, alongside the development of the website.

47. *The IRS will produce guidance regarding the trigger points for use of the problem resolution protocol.*

This guidance has been developed

48. *The IRS will contribute to the drive to improve permanency planning for young people, for example by using the Problem Resolution Protocol where permanency plans are not evident at the 4 month statutory review.*

The use of the PRP is reported elsewhere in this report.

49. *A pilot using mobile technology and voice recognition software is to be run by 2 IROs to see if this indicates possible efficiencies.*

This pilot has been re-instated and is being progressed (see para. 10 above)

### **Issues Identified for Development in the year from December 2013**

50. The use of the Problem Resolution Protocol in terms of volume and relation to agreed guidance for commencing the formal process will be monitored in the coming year.
51. The service will input positively to the review of delivery of admin services through a clear presentation of the service's needs, recognising the finite nature of these resources.
52. The audit of multi-agency input to CP Conferences will be reported to the HSCB Quality Assurance Group.
53. Discussion of 'The right to private family life' as opposed to a 'Right to Permanency' for children currently who are Looked After will be continued.
54. The mobile technology and voice recognition pilot will be run, evaluated and reported on.

## **Part 2. The Care Plan Audit**

### **Executive Summary**

The audit work shows significant improvement in the timely production of care plans and some continuing improvement in these plans being up to date and clearly identifying need.

The production, recording and quality of PEPs could still be improved. It is noted that training for all parties on the importance of Education for Children in Care is continuing to be delivered by the virtual school. Health assessments are more likely to have taken place but recording and quality issues could also be further improved upon.

The area of evidencing child and parental participation in care planning remains a particular area for further development.

Overall the IRS has been demonstrably effective in improving the quality of care planning and reviewing of care plans.

## IRO Care Plan Audit report 2013

### Introduction

This report is an analysis of the responses from the 2013 Audit looking at Care Plans for Children in Care, completed by Independent Reviewing Officers (IRO) in respect of every statutory review held between 1 September and 31 October 2013.

The survey was sent out to the IROs via SurveyMonkey.com, to be completed for every review held between the 1 of September and the 31 October 2013. Once all IROs had completed the survey the responses were analysed by the Youth Analysis Service (YAS).

The survey contained 37 questions covering 6 topics and used a combination of open and closed questions. Mixtures of mandatory and logical questions were dependant on the respondent's previous answers. The mandatory questions are highlighted using an asterisk (\*), in the questionnaire template (*See appendix 1*).

Below is a summary of the six topics with the number of mandatory questions and the number of questions that follow logically.

#### 1) Survey Population

- Contained demographics of the young person.
- 7 questions all of which were mandatory.

#### 2) The Care Plan

- 7 mandatory questions
- 3 logical questions, these only followed when the YP had an issue with their Care Plan.

#### 3) PEP

- 2 mandatory questions
- 2 logical questions, these followed when the YP said they had already held a PEP

#### 4) Health Assessment

- 3 mandatory questions
- 3 logical questions, followed when the YP had issues with their Health Plan or general overall needs.

#### 5) The Review

- 5 mandatory questions
- 2 logical questions, followed when the YP was not participating in the review, or when changes were made to the review.

#### 6) Equality and Diversity

- 1 mandatory question
- 2 logical questions, only followed when they recognised equality and diversity within the Care Plan.

From the breakdown of the questionnaire you can see that the primary focus of the survey was to look at the quality of Care Plans for Looked after Children in Hampshire.

At the end of the report is an appendix.

## Appendix 1: The SurveyMonkey's blank questionnaire template

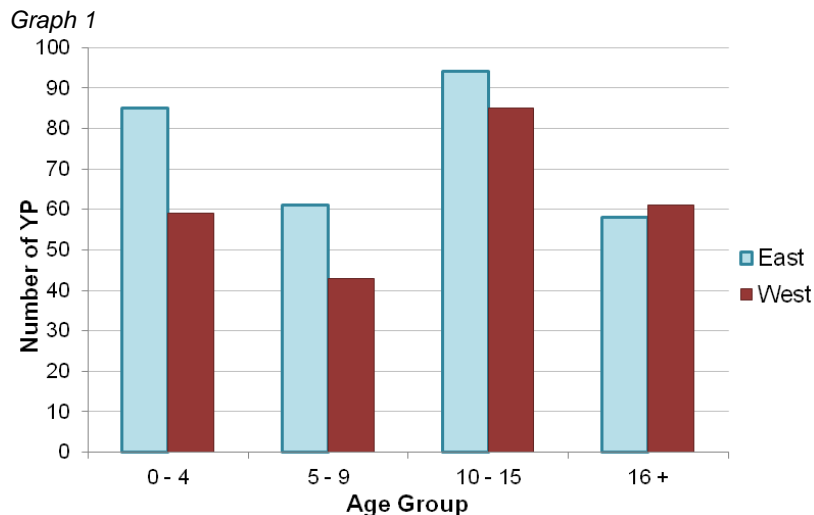
### 1) Survey Population

The first part of the survey established the basic demographics (i.e. age, area etc. of the young person/child (YP)), as they existed at the time of the audit, as well as the IRO for the YP. In total there were 546 surveys completed. Table 1 shows the number of forms returned by each IRO, split by Age Group.

Table 1

<b>IRO</b>	<b>0 - 4</b>	<b>5 - 9</b>	<b>10 - 15</b>	<b>16 +</b>	<b>Total No. of YP</b>
<b>Alison Nealis</b>	0	2	0	0	<b>2</b>
<b>Casual IRO</b>	3	1	3	4	<b>11</b>
<b>Davina Malkin</b>	1	4	8	9	<b>22</b>
<b>Denise Roch</b>	3	6	12	14	<b>35</b>
<b>Kavitha Maxy</b>	5	4	5	9	<b>23</b>
<b>Kay Stone</b>	7	9	10	4	<b>30</b>
<b>Lesley Wheeler</b>	5	6	6	3	<b>20</b>
<b>Linda Webster</b>	7	4	6	6	<b>23</b>
<b>Margaret Cann</b>	12	11	14	5	<b>42</b>
<b>Matthew Hunt</b>	6	3	5	6	<b>20</b>
<b>Nigel Burton</b>	7	8	8	6	<b>29</b>
<b>Nigel Newham</b>	9	5	7	4	<b>25</b>
<b>Sandra Norval</b>	5	3	9	9	<b>26</b>
<b>Scott Mansfield</b>	6	5	18	5	<b>34</b>
<b>Susan Parish</b>	9	2	12	5	<b>28</b>
<b>Tania Styles</b>	9	5	4	2	<b>20</b>
<b>Teresa Cachia</b>	16	7	12	7	<b>42</b>
<b>Tim Wildridge</b>	10	5	11	5	<b>31</b>
<b>Tony Halter</b>	6	1	4	2	<b>13</b>
<b>Virginia Burton</b>	13	4	16	6	<b>39</b>
<b>Yvonne Light</b>	5	9	9	8	<b>31</b>
<b>Grand Total</b>	<b>144</b>	<b>104</b>	<b>179</b>	<b>119</b>	<b>546</b>

Graph 1 shows the number of YP in each age group by area. Of the 546 responses 298 were from the East area (55%) and 248 from the West area (45%).



For the three age groups covering 0 to 15, there were more YP in the East than the West. For the 16+ group there were 3 more YP in the West than the East.

Table 2 shows the age groups of YP and what SW teams they came from. The largest team was the South East CIC (73 YP) followed by North East CIC (61 YP).

Table 2

SW Team/District:	0 - 4	5 - 9	10 - 15	16 +	Total No. of YP
Adoption Team East	18	7	1	0	26
Adoption Team West	26	11	0	0	37
Basingstoke CIC 1	1	3	7	10	21
Basingstoke CIC 2	0	2	9	8	19
Basingstoke CIC 3	0	4	3	3	10
Basingstoke CIN 1	1	0	3	1	5
Basingstoke CIN 2	2	2	2	0	6
Basingstoke CIN 4	1	0	1	0	2
Basingstoke CIN 5	1	3	1	0	5
Basingstoke DCT	0	1	5	5	11
East Hants CIN	5	8	7	1	21
Eastleigh CIN	3	0	0	0	3
Eastleigh/Winchester CIC	6	2	20	10	38
Eastleigh/Winchester R&A	0	0	2	1	3
Fareham & Gosport CIN 1	5	4	3	0	12
Fareham & Gosport CIN 2	10	5	8	0	23
Fareham & Gosport R&A	0	0	2	0	2
Hart & Rushmoor CIN 1	2	0	3	1	6
Hart & Rushmoor CIN 2	5	1	3	3	12
Hart/Rush/E Hants DCT	0	2	5	3	10
Havant CIN 1	6	5	3	0	14
Havant CIN 2	9	1	2	0	12
Havant R&A	0	1	5	0	6
New Forest /Test Valley CIC	4	8	16	19	47

<b>New Forest CIN 1</b>	5	3	2	0	<b>10</b>
<b>New Forest CIN 2</b>	1	2	2	0	<b>5</b>
<b>New Forest R&amp;A</b>	0	0	2	3	<b>5</b>
<b>North East CIC</b>	10	9	21	21	<b>61</b>
<b>Rushmoor/Hart/E Hants R&amp;A</b>	0	0	0	1	<b>1</b>
<b>South East CIC</b>	13	15	27	18	<b>73</b>
<b>South East DCT</b>	2	3	4	10	<b>19</b>
<b>Test Valley CIN</b>	1	0	2	0	<b>3</b>
<b>Test Valley R&amp;A</b>	0	0	1	1	<b>2</b>
<b>West DCT</b>	0	1	3	0	<b>4</b>
<b>Winchester CIN</b>	7	1	4	0	<b>12</b>
<b>Grand Total</b>	<b>144</b>	<b>104</b>	<b>179</b>	<b>119</b>	<b>546</b>

## 2) Care Plan

### Is there a Care Plan in Place?

Table 3 displays the number of YP who had Care Plans in place last year (2012 Plan Audit). The total was 87% (375 of 433 children).

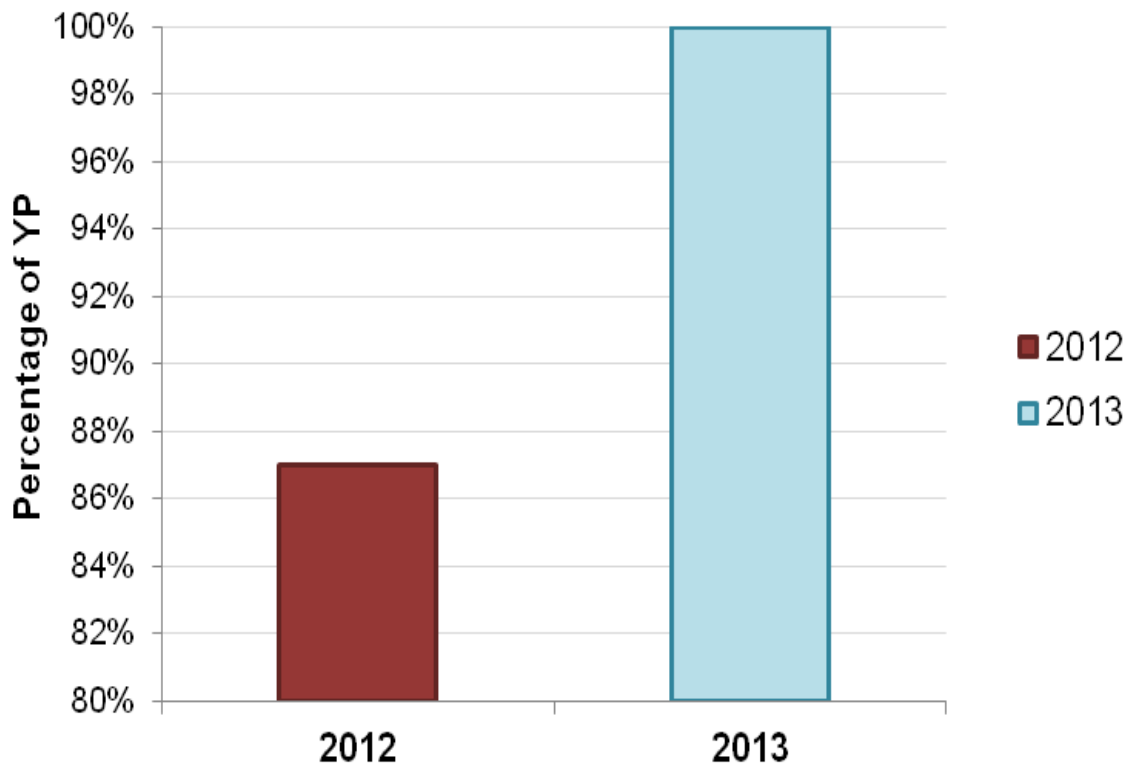
*Table 3*

<b>Year</b>	<b>Area</b>	<b>Yes</b>	<b>%</b>	<b>No</b>	<b>%</b>	<b>Total No. of YP</b>
<b>2012</b>	<b>East</b>	237	89%	28	11%	<b>265</b>
	<b>West</b>	138	82%	30	18%	<b>168</b>
	<b>Total</b>	<b>375</b>	<b>87%</b>	<b>58</b>	<b>13%</b>	<b>433</b>

**The 2013 Audit has shown that 100% (546 YP) of the YP had Care Plans.** The increase in the percentage of YP with a Care Plan in place should also be noted in the context of the increased cohort (rising from 433 in 2012 to 546 in 2013).

Graph 2 illustrates the percentage of Care Plans in place 2012 and 2013.

Graph 2



### Is the Care Plan up to date?

The responses from the survey show that overall 86% of the YP had an up-to-date Care Plan this year compared with 73% in 2012.

Table 4

2013	Age Group	Yes	%	No	%	Total No. of YP
<b>East</b>	<b>0 - 4</b>	84	99%	1	1%	<b>85</b>
	<b>5 - 9</b>	59	97%	2	3%	<b>61</b>
	<b>10 - 15</b>	87	93%	7	7%	<b>94</b>
	<b>16 +</b>	46	79%	12	21%	<b>58</b>
<b>East Total</b>		<b>276</b>	<b>93%</b>	<b>22</b>	<b>7%</b>	<b>298</b>
<b>West</b>	<b>0 - 4</b>	48	81%	11	19%	<b>59</b>
	<b>5 - 9</b>	36	84%	7	16%	<b>43</b>
	<b>10 - 15</b>	64	75%	21	25%	<b>85</b>
	<b>16 +</b>	44	72%	17	28%	<b>61</b>
<b>West Total</b>		<b>192</b>	<b>77%</b>	<b>56</b>	<b>23%</b>	<b>248</b>
<b>Total No. of YP</b>		<b>468</b>	<b>86%</b>	<b>78</b>	<b>14%</b>	<b>546</b>

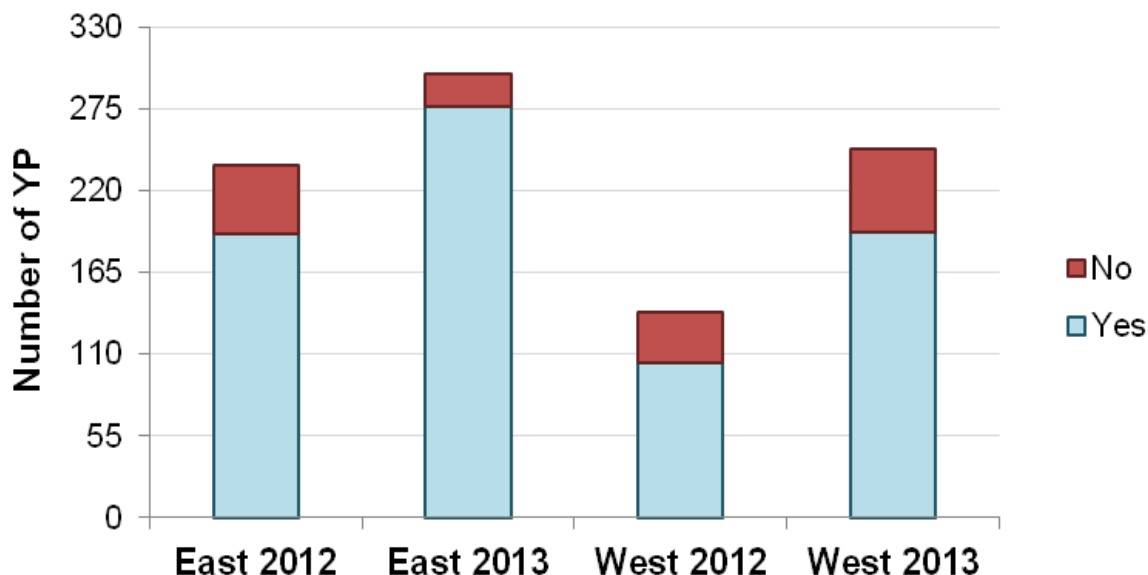
Table 4 presents that overall the East had 93% up-to-date Care Plans in 2013, this figure was 81% in 2012. The West had 77% of up-to-date Care Plans; this figure was 75% in 2012.

Graph 3 shows comparative statistics of those who have an up-to-date Care Plan from 2012-2013 in each area. It is important to recognise the increase in the size of the

Audit cohorts. The West has grown by 80% (138YP in 2012 – 248YP in 2013) and the East has grown by 12% (237YP in 2012 – 298YP in 2013).

Graph 3 displays the size of the cohorts in 2012 and 2013 and demonstrates the increase in Care Plans being up-to-date.

Graph 3



**Are all the YP’s current needs clearly identified in the Care Plan?**

Table 5

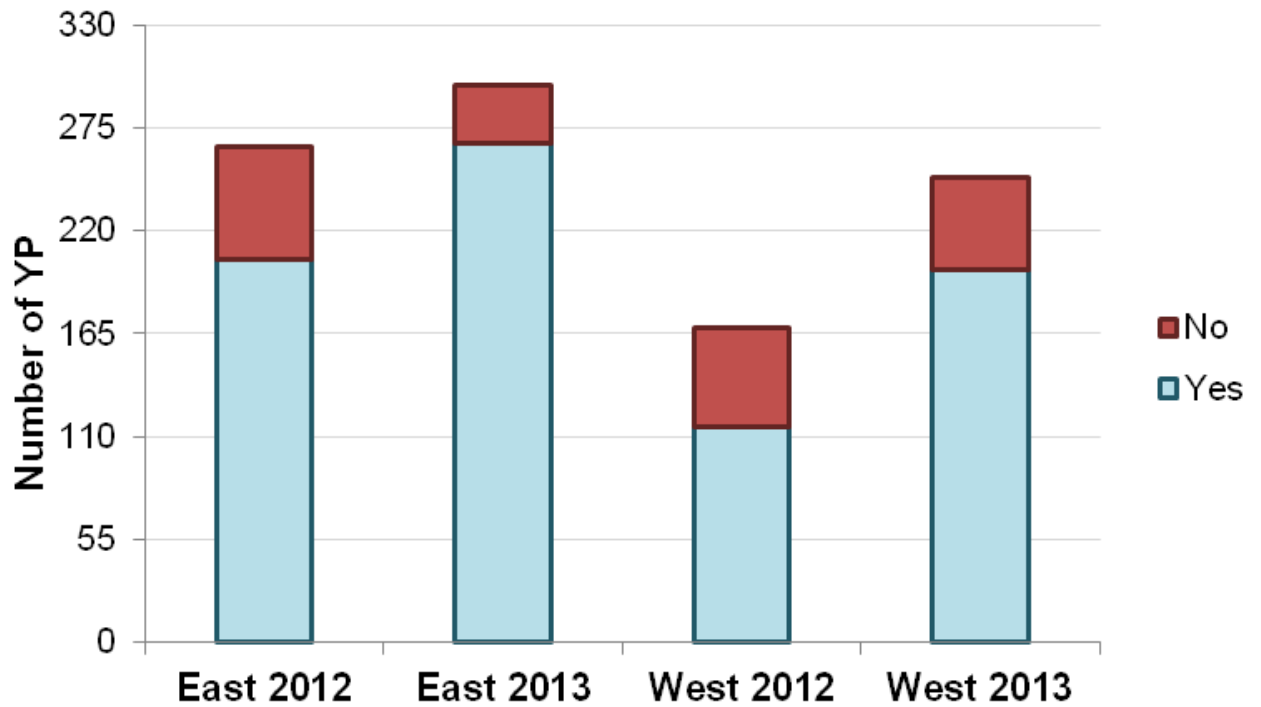
2013	Age Range	Yes	%	No	%	Total No. of YP
East	0 - 4	82	96%	3	4%	85
	5 - 9	80	85%	14	15%	94
	10 - 15	49	84%	9	16%	58
	16 +	56	92%	5	8%	61
<b>East Total</b>		<b>267</b>	<b>90%</b>	<b>31</b>	<b>10%</b>	<b>298</b>
West	0 - 4	50	85%	9	15%	59
	5 - 9	69	81%	16	19%	85
	10 - 15	42	69%	19	31%	61
	16 +	38	88%	5	12%	43
<b>West Total</b>		<b>199</b>	<b>80%</b>	<b>49</b>	<b>20%</b>	<b>248</b>
<b>Total No. of YP</b>		<b>466</b>	<b>85%</b>	<b>80</b>	<b>15%</b>	<b>546</b>

Overall 85% of those who have Care Plans also have their needs clearly identified within their Care Plan, in contrast to 79% in 2012. The East had a more positive overall response with 90% of the YP’s needs being identified compared to 80% in the West.

There is a 5% increase in Care Plans that identify YP’s needs in the East, and a 3% increase in the West since 2012.

Graph 4 shows the size of the cohorts in 2012 and 2013. It demonstrates an actual increase of the needs being identified in the Care Plans.

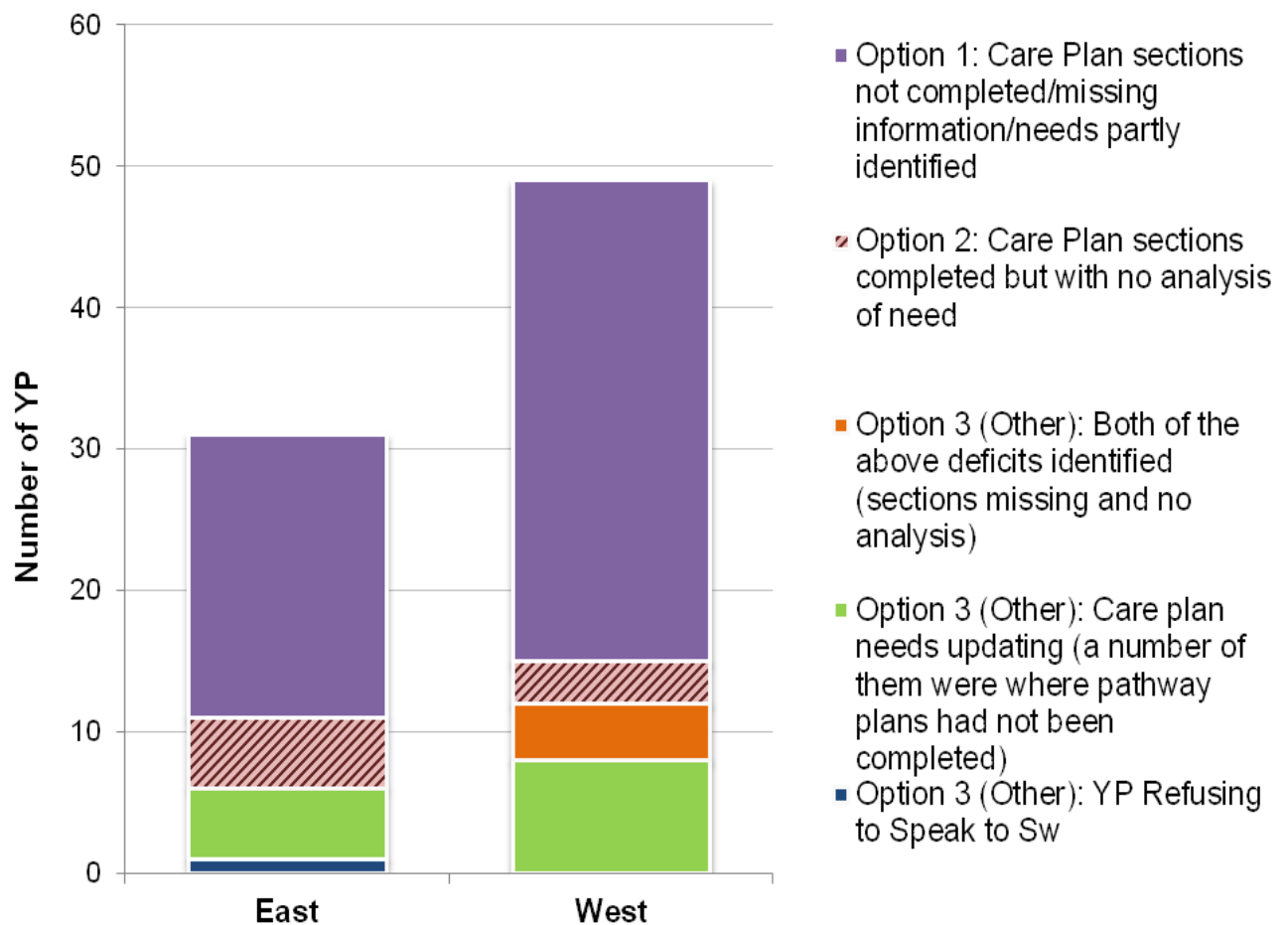
Graph 4



Graph 5 shows the reasons for why the needs are not clearly identified. This question allowed for three multiple choice options:

- Option 1: Care Plan sections not completed/missing information/needs partly identified
- Option 2: Care Plan sections completed but with no analysis of need
- Option 3: Other

Graph 5



Graph 3 suggest that the most common reason that the Care Plan was not being up-to-date was the sections were not completed/missing information/needs partly identified (20YP in the East and 34YP in the West).

Those that answered “Other” have been summarised into separate themes from the qualitative answers. Both areas had IROs that responded with “Other” (6 YP in the East and 12 YP in the West). These answers are grouped and are represented in the table as, “Care plan needs updating (a number of them were where pathway plans had not been completed)”, “Both of the above deficits identified (sections missing and no analysis)” and “YP Refusing to Speak to Sw”.

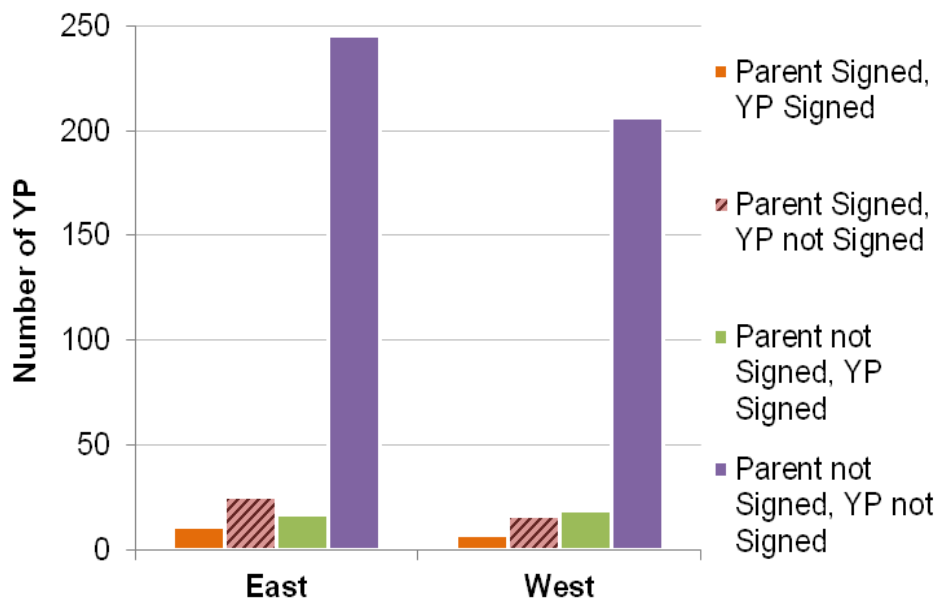
### Have the YP or Parents/Family (Parent) signed the Care Plan?

The survey indicated that 83% (451 YP) of the Care Plans haven't been signed by either Parent or YP. However, it is found that of the 451 YP, 77YP were under the age of 2 and therefore could not sign. Only 3% are signed by both, and just 14% are signed by either Parent or YP.

Table 6

Parent Signed	YP Signed	East	West	Total
Yes	Yes	11	7	18
	No	25	16	41
No	Yes	17	19	36
	No	245	206	451
Total No. of YP		298	248	546

Graph 6



### Apart from the signatures is there any other evidence of participation/contribution by the YP or Parent?

Responses showed that altogether 414 YP (76%) have some sort of evidence from either YP or Parent of participation/contribution to their Care Plans. 132 YPs Care Plans (24%) had no evidence of contribution, 59 YP (20%) in the East and 70 YP (27%) in the West.

Table 7

Evidence of participation/contribution		East	%	West	%	Grand Total	%
Yes YP	No Parent	57	19%	50	20%	107	20%
	Yes Parent	97	33%	88	36%	185	34%
No YP	No Parent	59	20%	70	27%	132	24%
	Yes Parent	82	28%	40	16%	122	22%
						546	100%

In addition to the analysis above, Table 8 shows that 144 YP were aged 0-4 and therefore they would have had a restricted ability and understanding to participate to their Care Plan.

Of those 144 YP, 117YP (81%) did not participate, 43 YP Care Plans had no evidence of contribution from either YP or Parent, 74 YP Care Plans had evidence of Parental contribution but no evidence of the YP contribution.

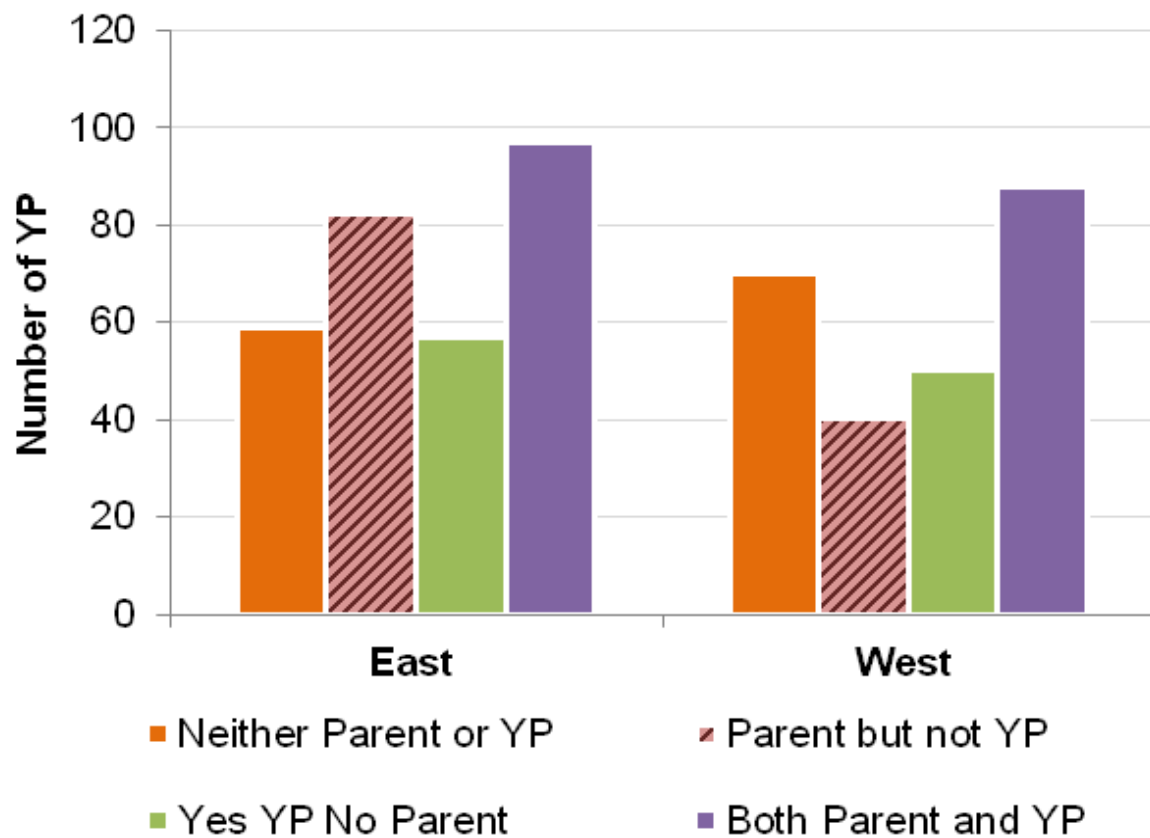
There were 27 Care Plans in the 0 – 4 Age Group where there was evidence of either both parental and YP contribution or YPs contribution.

*Table 8*

<b>Evidence of participation/contribution</b>		<b>0 - 4</b>	<b>5 - 9</b>	<b>10 - 15</b>	<b>16 +</b>	<b>Total No. of YP</b>
<b>Yes YP</b>	<b>No Parent</b>	12	7	29	59	<b>107</b>
	<b>Yes Parent</b>	15	51	88	31	<b>185</b>
<b>No YP</b>	<b>No Parent</b>	43	25	43	21	<b>132</b>
	<b>Yes Parent</b>	74	21	19	8	<b>122</b>
<b>Grand Total</b>		<b>144</b>	<b>104</b>	<b>179</b>	<b>119</b>	<b>546</b>

Graph 7 demonstrates that most Care Plans do not evidence contribution from both Parent and YP. This could indicate that Care Planning is not as robustly participative as we would expect, and will need to be an area of work addressed.

Graph 7



**How is the participation and contribution evidenced in the Care Plan?**

This question was asked twice, once concerning the YP participation and then again concerning the Parents. The options available to select were:

- Throughout the plan, reference is made to the expressed wishes and feelings of the child/young person or parents/family
- Other

Table 9 includes those who had a Care Plan in place and had said they showed evidence of contribution.

Table 9

Area	Parent “Throughout”	Child “Throughout”	YP “Other”	Parent “Other”
East	142	134	20	37
West	92	117	21	36

As with previous questions, selecting “Other” allowed for additional written responses to be submitted. Some recurring themes from these responses included that their wishes were specific to a section within the plan but not throughout, there had been dialogue between the social worker, the YP and the Parent or the YP/Parent attended the review.

It should be noted that attendance at a review provides the Parent with the opportunity to comment on a Care Plan, but this should not be considered the same as the Care Plan explicitly demonstrating consultation with the Parent in its formulation and we would be cautious about this being considered as evidence of participation in care planning.

### 3) PEP

#### Has the PEP meeting been held?

34% of the people surveyed (186 YP) were not required to hold a PEP meeting because of the YPs age.

360 YP were required to have held a PEP meeting, which should be available on ICS and robustly evidencing how it is meeting the YPs needs.

Firstly we established if a PEP meeting has been held. Table 10 shows that in the East 130 YP had PEP meetings completed. In the West this figure was 114. Therefore 244 YP (68%) of the 360 required had held PEP meetings. This means there were 116 (32%) who had not held their PEP meeting but were required to.

Table 10

Has the PEP meeting been held?	East	%	West	%	Grand Total	%
<b>Yes</b>	130	53%	114	47%	<b>244</b>	<b>68%</b>
<b>No</b>	67	58%	49	42%	<b>116</b>	<b>32%</b>
					<b>360</b>	<b>100%</b>

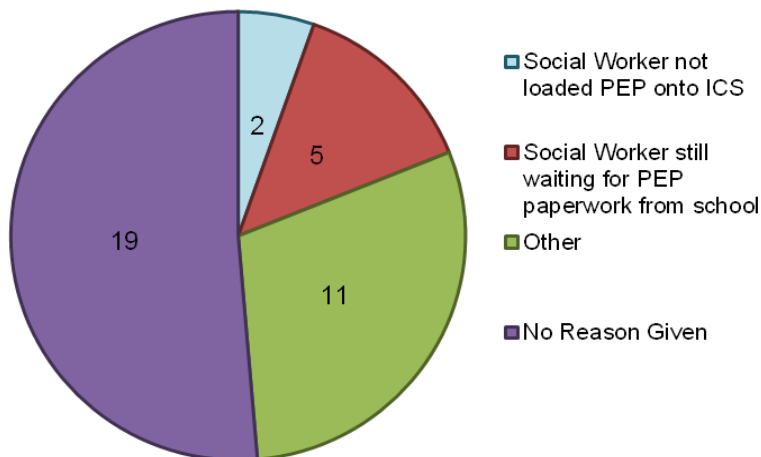
Of the 244 who held a PEP, 207 (85%) of the PEP's were available on ICS. 111 YP (54%) in the East compared to 96YP in West (46%), leaving 37 YP who had held a PEP meeting but was not available on ICS.

The survey asked the 37 respondents why the PEP was not available on ICS. Table 11 shows their responses.

Table 11

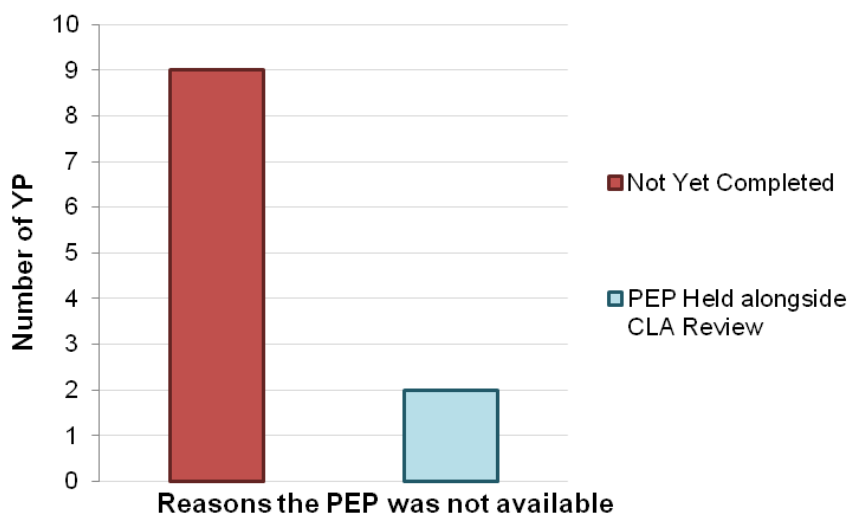
Was the PEP available on ICS? If not Why?	East	West	Grand Total	%
<b>Social Worker not loaded PEP onto ICS</b>	2	0	2	<b>5%</b>
<b>Social Worker still waiting for PEP paperwork from school</b>	2	3	5	<b>14%</b>
<b>Other</b>	5	6	11	<b>30%</b>
<b>No reason given</b>	10	9	19	<b>51%</b>
			<b>37</b>	<b>100%</b>

Graph 8



10 YP answered with “Other”, Graph 9 provides the common themes of their answers.

Graph 9



**Is section 7a of the YP’s PEP adequate? Does it identify the YP’s needs and is there an action plan to meet them?**

Of the 244 responses that said they had a PEP, 206 (84%) said that the PEP clearly identifies the needs of the YP and has an action plans in order to meet these needs. The other 38 (16%) of respondent said the YP’s PEP is not adequate.

Table 12

Is the PEP adequate?	East	%	West	%	Grand Total	%
Yes	112	54%	94	46%	<b>206</b>	<b>84%</b>
No	18	47%	20	53%	<b>38</b>	<b>16%</b>
					<b>244</b>	<b>100%</b>

Overall, 206 of the 360 YP (57%) who were required to have PEP meetings held, were also available on ICS and were completed appropriately.

Therefore 155 Care Plans were not compliant with the expected PEP standards.

### 3) Health Assessment

#### Has a Health Assessment taken place?

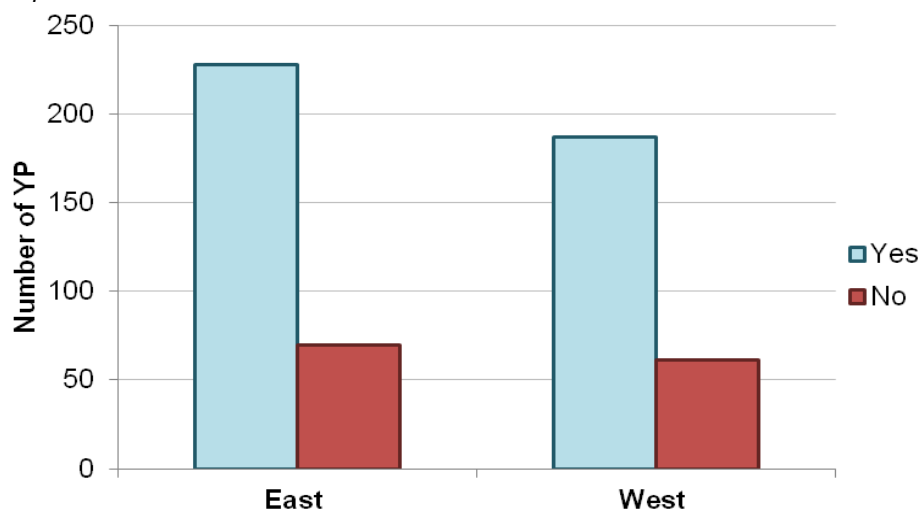
The East and the West both completed a similar percentage of Health Assessments (75% for the West, 77% in the East).

Table 13

Health Assessment	East	%	West	%	Total No. of YP
<b>Yes</b>	228	77%	187	75%	<b>415</b>
<b>No</b>	70	23%	61	25%	<b>131</b>
					<b>546</b>

Graph 10 demonstrates that the East and the West have the same profile.

Graph 10



#### Is there an adequate Health Plan for the child as evidenced under section 11?

After removing the returns where it was reported that a Health Assessment didn't take place, Table 14 shows that in the East 81% of the Health Plans were adequate and 76% were adequate in the West.

Table 14

Is there an adequate health plan for the child as evidenced under section 11?	East	%	West	%	Total No. of YP	%
Yes	184	81%	143	76%	327	79%
No	44	19%	44	24%	88	21%
					416	100%

### Was the Health Plan available on ICS?

Table 15 provides the numbers of YP whose Health Plan was available on ICS. The table only includes those who responded with “Yes” to having had a Health Assessment in the previous question.

Table 15

Was the Health Plan available on ICS?	East	%	West	%	Total No. of YP
Yes	199	87%	156	83%	355
No	29	13%	31	17%	60
					415

### What was the reason the Health Plan was not on ICS?

The survey then asked why the Health Plan was not available on ICS. The options respondents could have selected were:

- Social worker has not loaded the Health Plan onto ICS
- Social worker still waiting for the Health Plan to be sent
- Other

Table 16 shows that there were 46 Care Plans where the Social Worker was waiting for the Health Plan to be sent to them and 11 were the Social worker had not loaded Health Plan onto ICS. A further 3 YP also said “Other”.

Table 16

What was the reason the Health Plan was not on ICS?	Total	%
Social Worker still waiting for the Health Plan to be sent to them	46	77%
Social worker has not loaded Health Plan onto ICS	11	18%
Other	3	5%
Total No. of YP	60	

### Are the YP’s overall needs being met?

Table 17 shows whether the YP’s overall needs are being met. Overall 90% of all YP’s are having their needs being met (489 YP).

Table 17

<b>Are the YP's overall needs being met?</b>	<b>East</b>	<b>%</b>	<b>West</b>	<b>%</b>	<b>Total No. of YP</b>
<b>Yes</b>	268	90%	221	89%	<b>489</b>
<b>No</b>	30	10%	27	11%	<b>57</b>
					<b>546</b>

The common themes of the 57 respondents who said “No”, the YPs needs are not being met are presented in Table 18.

Table 18

<b>Why the YP's needs are not being met:</b>	<b>Total</b>
Do Not Meet Criteria For CAMHS Service	2
Failure To Provide Life story Work	2
Education Issues	3
Concerns About The Suitability Of Placement	4
Fragile Placement/Disruption	4
Miscellaneous	4
Delay In Achieving Long Term Plan/Permanence	5
Lack Of Adequate/Current Plan	5
Contact Issues	7
Multiple Reasons	8
Young Person Will Not Engage With Plan/Services	13
<b>Grand Total</b>	<b>57</b>

#### 4) The Review

316 YP attended their reviews, of these, 271 also participated in their reviews (86%).

Table 19

<b>Attended &amp; Participated in the Review</b>	<b>0 - 4</b>	<b>5 - 9</b>	<b>10 - 15</b>	<b>16 +</b>	<b>Total No. of YP</b>	<b>%</b>
<b>Yes</b>	23	39	118	91	<b>271</b>	<b>86%</b>
<b>No</b>	40	3	2	0	<b>45</b>	<b>14%</b>
<b>Total No. of YP</b>	<b>63</b>	<b>42</b>	<b>120</b>	<b>91</b>	<b>316</b>	<b>100%</b>

Table 20 shows the number of YP overall who participated in the review, this figure was 321 YP (59%).

Of the YP that did not participate, 225YP (41%), it is evident that 52% were aged 0-4 and therefore classed as too young to participate. We therefore had 81 YP who could have participated but didn't.

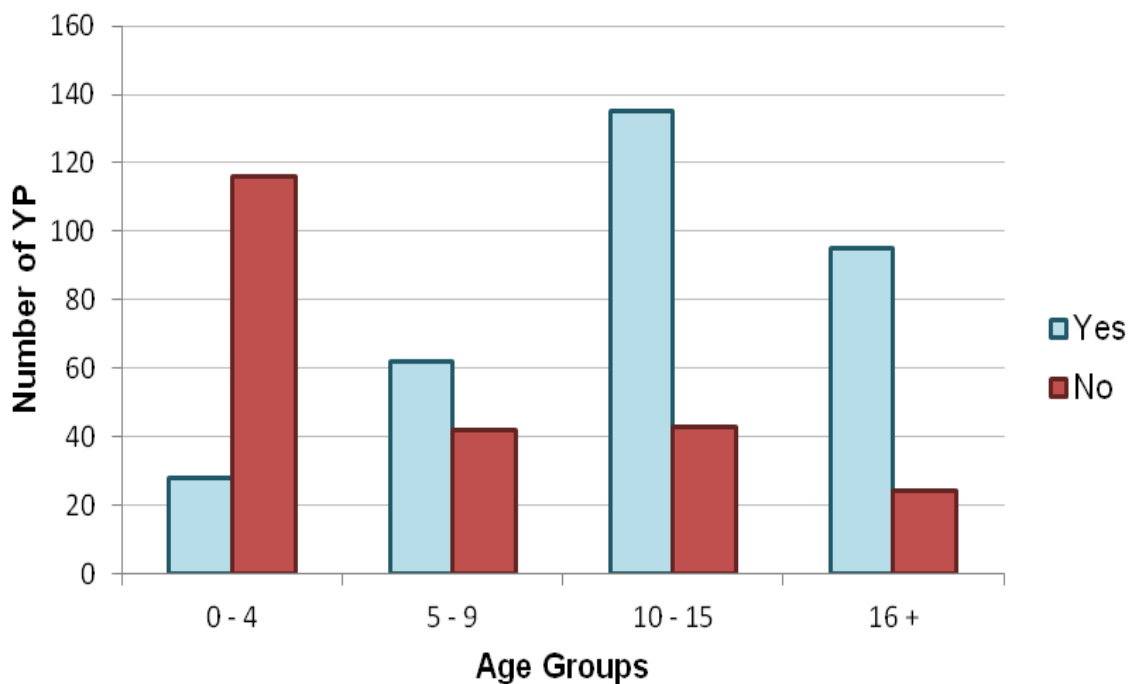
This data indicates that work to focus on how we remove the blocks that prevented participation is required over the forthcoming 12 months.

Table 20

Did the YP participate in the review?	0 - 4	5 - 9	10 - 15	16 +	Total No. of YP
<b>Yes</b>	28	62	136	95	<b>321</b>
<b>No</b>	116	42	43	24	<b>225</b>
<b>Total No. of YP</b>	<b>144</b>	<b>104</b>	<b>179</b>	<b>119</b>	<b>546</b>

Graph 11 demonstrates the number of YP that participated in the review by age group. There is a high number of "No's" for Age Group 0-4. This is reflected in the table and is likely to be because the children are too young to participate.

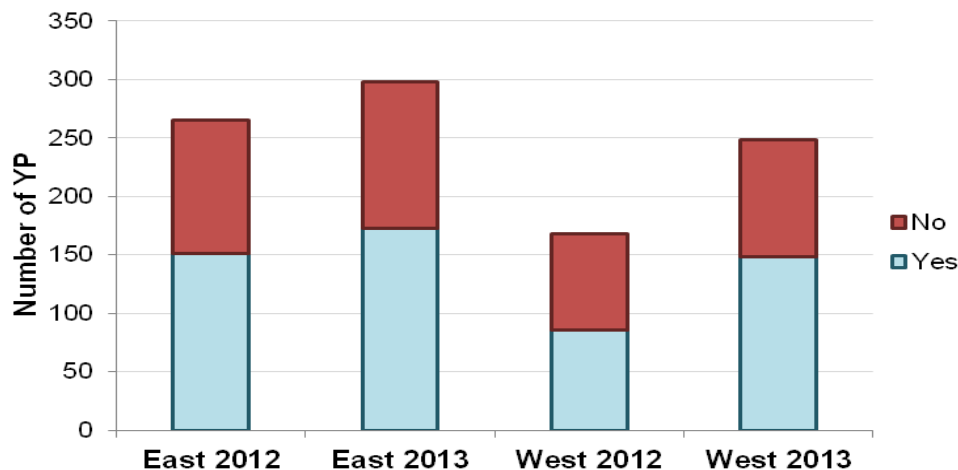
Graph 11



Graph 12 shows the number of YP that participated in the review between the areas. In 2013, 58% (173 YP) YP participated in their review, in the East, where as in the West 60% (148 YP) participated, compared to in 2012, 57% (151 YP) in the East and 51% (86 YP) in the West.

This reveals a 1% increase in YP participating in the East and 9% increase in the West.

Graph 12



### Why didn't the YP participate in the Review?

Respondents who had said the YP did not participate in the review had to answer this question. The options available to select were:

- Child/YP chose no to participate
- YP of insufficient age and/or understanding to participate
- Other

Table 21 presents their two options, followed by the common themes in their "Other" answers.

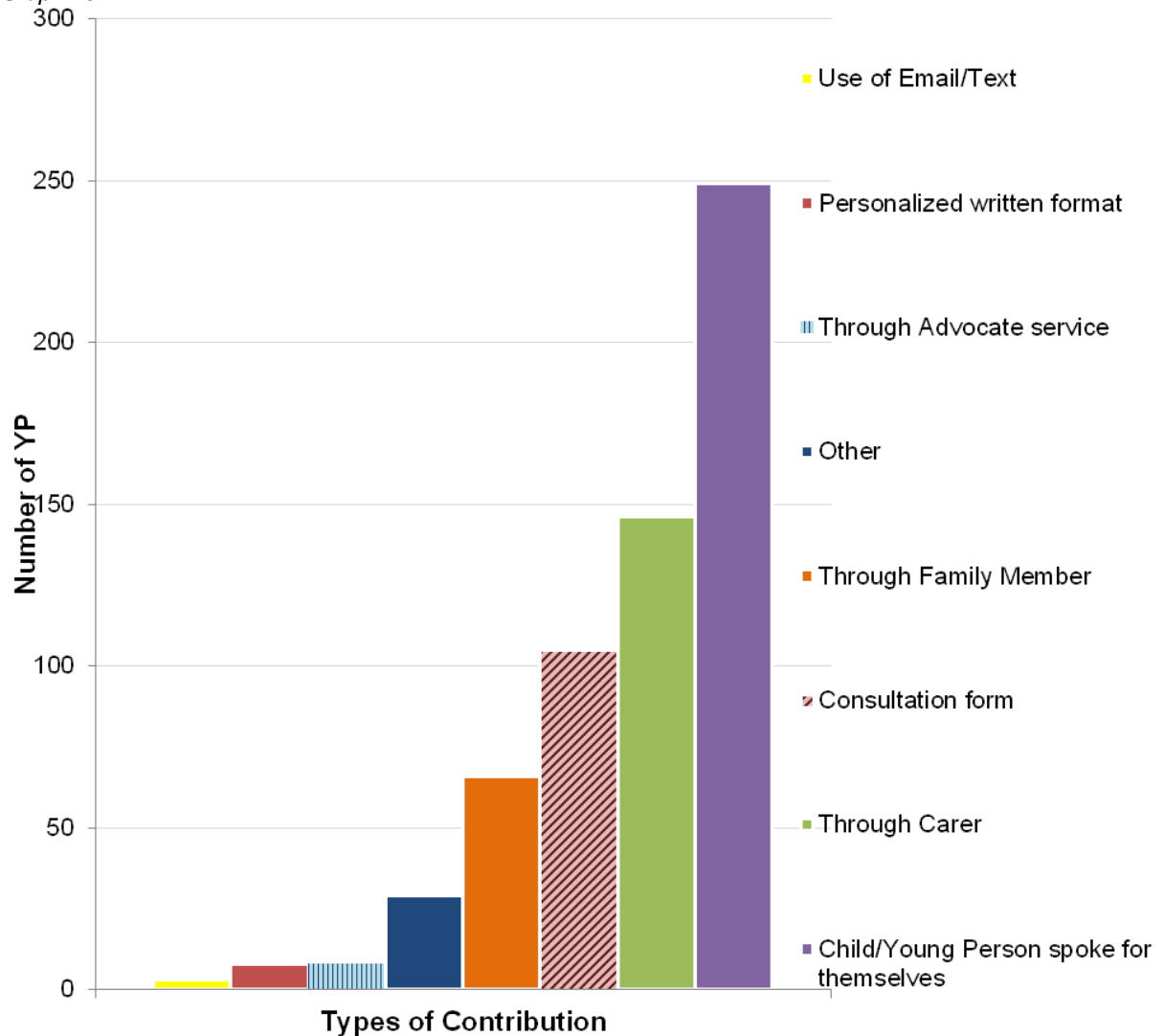
Table 21

		0 - 4	5 - 9	10 - 15	16 +	Grand Total
<b>Child/Young Person chose not to participate</b>		2	17	22	13	<b>54</b>
<b>YP of insufficient age and/or understanding to participate</b>		105	18	13	8	<b>144</b>
<b>Other</b>	<b>Placed for Adoption</b>	1	1	0	0	<b>2</b>
	<b>Not in the Child's best interests</b>	0	1	2	0	<b>3</b>
	<b>Unavailable</b>	0	1	2	0	<b>3</b>
	<b>Emotionally unable</b>	2	2	2	0	<b>6</b>
	<b>Not Known</b>	4	1	0	1	<b>6</b>
	<b>In Education</b>	2	1	2	2	<b>7</b>
<b>Grand Total</b>		<b>116</b>	<b>42</b>	<b>43</b>	<b>24</b>	<b>225</b>

The majority of the people who didn't participate in the review were because of their age or understanding, 144 YP (64%). The next most prevalent answer was, the YP chose not participate, 54 YP (24%).

Graph 13 demonstrates the techniques used in order to contribute to the reviews. Respondents were allowed to select more than one answer, so the total responses are greater than the number of YP in the survey.

Graph 13



YP “speaking for themselves” is the most prevalent response (249 YP, 41%), followed by “Through Carer” (146 YP, 24%) and then “via a consultation form” (105 YP, 17%). Compared to last year, this is a significant increase in the number of YP who spoke for themselves (216 YP).

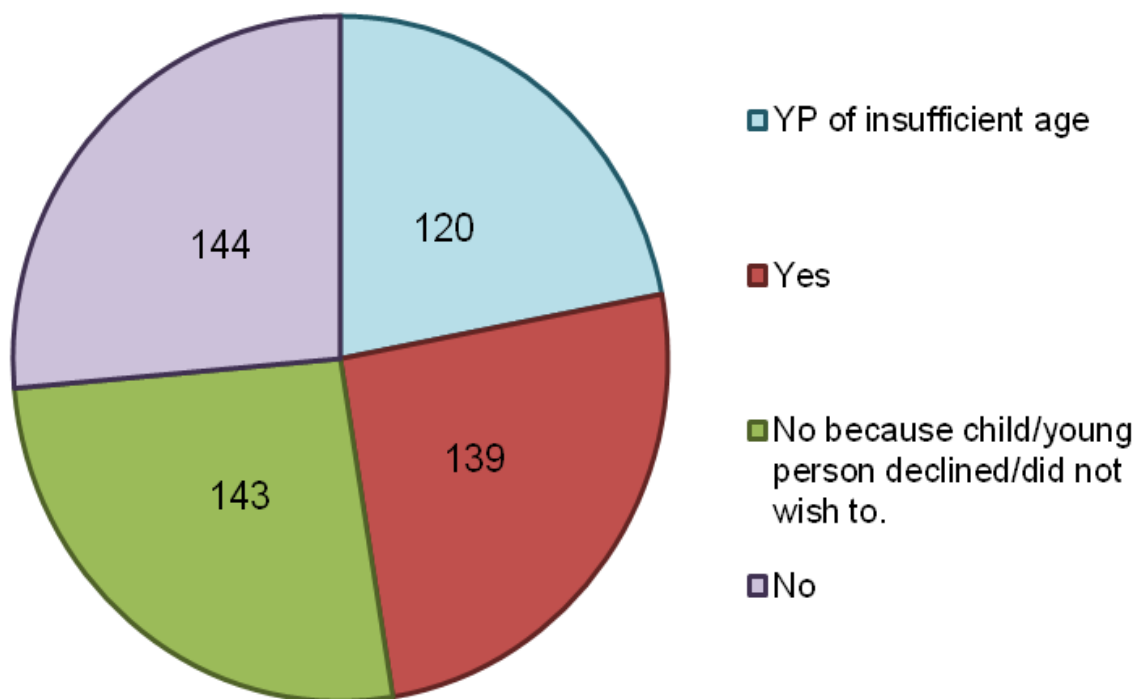
Use of Email/Text is surprisingly low given we know these are often YPs chosen mode of communication.

It is anticipated that the launch of the website “SPARK”, and E-Portal accessibility will improve this performance.

**Did the IRO meet face to face with the YP before the review?**

There appears to have been no change, since last year, for IROs meeting with the YP prior to the review. 282 (52%) YP either met or were offered and declined the opportunity to meet the IRO prior to the review.

Graph 14



Graph 14 shows that 74% (402 YP) of the YP reviewed met with their IRO prior to the review, were offered a meeting and declined or were too young to make use of this opportunity. This figure needs to be outline with the context of the increased demands on the service.

Table 22 provides information of who met their IRO prior to their review, grouped by age group and area. As before, of those that simply said “No” (48%), 120 of these people were too young to meet them, (45%). A Further 26% of the cohort (143 YP) declined seeing the IRO prior to the review, meaning that they had been offered to meet before hand. However it is unclear to why these YP declined the offer. 25% of YP met their IRO prior to the review, 71 YP in East (51%) and 68 YP in West (49%).

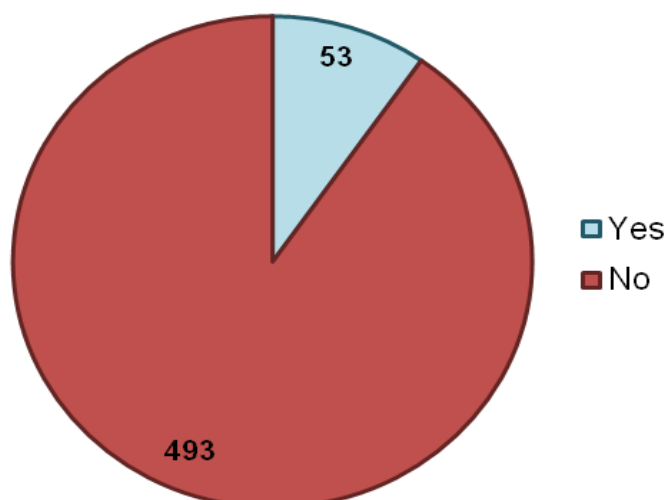
Table 22

Did you (IRO) meet privately face to face with the YP prior to the commencement of the statutory review?	Age Group	East	West	Total No. of YP
<b>Yes</b>	<b>0 - 4</b>	5	6	<b>11</b>
	<b>5 - 9</b>	17	6	<b>23</b>
	<b>10 - 15</b>	28	32	<b>60</b>
	<b>16 +</b>	21	24	<b>45</b>
<b>Yes Total</b>		<b>71</b>	<b>68</b>	<b>139</b>
<b>No</b>	<b>0 - 4</b>	70	50	<b>120</b>
	<b>5 - 9</b>	32	30	<b>62</b>
	<b>10 - 15</b>	31	22	<b>53</b>
	<b>16 +</b>	18	11	<b>29</b>
<b>No Total</b>		<b>151</b>	<b>113</b>	<b>264</b>
<b>No because YP declined/did not wish to.</b>	<b>0 - 4</b>	10	3	<b>13</b>
	<b>5 - 9</b>	12	7	<b>19</b>
	<b>10 - 15</b>	35	31	<b>66</b>
	<b>16 +</b>	19	26	<b>45</b>
<b>No because YP declined/did not wish to. Total</b>		<b>76</b>	<b>67</b>	<b>143</b>
<b>Total No. of YP</b>		<b>298</b>	<b>248</b>	<b>546</b>

**Were any changes made, in respect of the review meeting, at the request of the YP?**

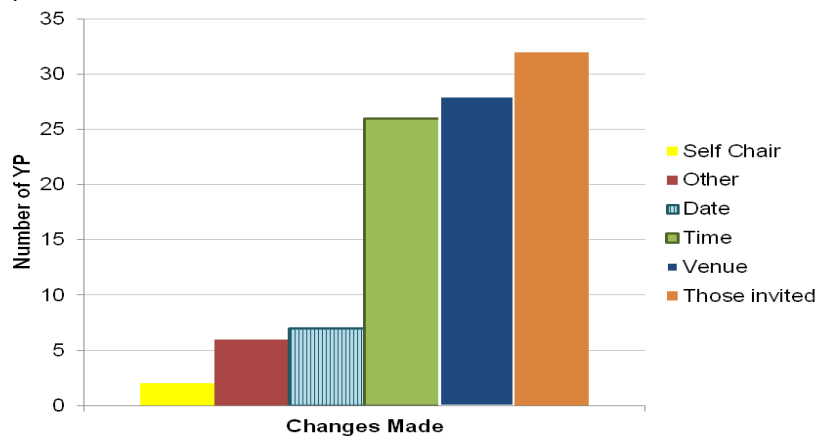
The majority of the reviews (90%) made no changes to their review meeting.

Graph 15



The types of changes for the 53 YP are presented in Graph 16. The results don't add up to 53 because people were allowed to select more than one response. The most prevalent changes were; 32 YP (60%) changed who they had previously invited, followed by Venue 53% (28 YP) and Time 49 % (26 YP).

Graph 16



## 5) Equality and Diversity

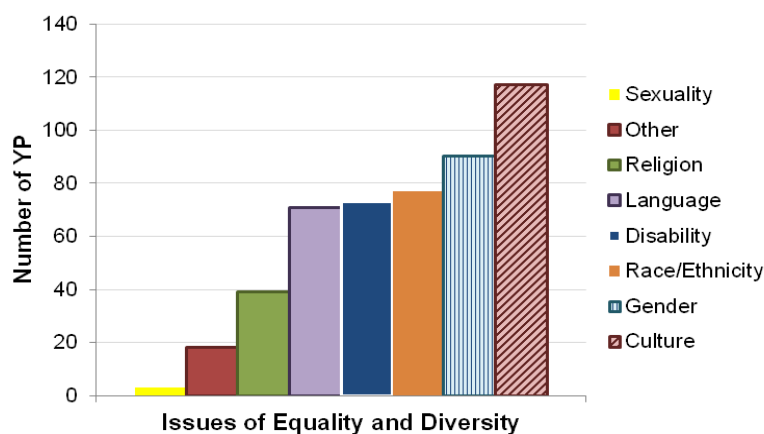
### Has the Care Plan identified issues of Equality and Diversity?

Table 23

Has the Care Plan identified issues of equality and diversity?	East	%	West	%	Total No. of YP
Yes	140	59%	99	41%	239
No	158	51%	149	49%	307
					546

239 YP identified issues of equality and diversity in their Care Plans. More people in the East identified issues 59 % (140 YP) compared to 41% (99 YP) in the West. Graph 17 demonstrates the breakdown of their group. As before the number of issues identified don't add up to 239, as the respondents were allowed to select more than one issue.

Graph 17



The final question asks how these issues are identified, however the answers were too varied to draw upon common themes.

**6. Future direction**

- 6.1. The IRS will continue its quality assurance work in respect of Children Looked after and Child Protection planning in Hampshire, striving to maintain the critical balance between support and challenge which is always objective but never collusive nor unduly negative, ensuring the voice and views of the child remain at the heart of all we deliver.

**7. Recommendation**

- 7.1. The Children and Families Advisory Panel is invited to note the content of the Independent Reviewing Service report.

**CORPORATE OR LEGAL INFORMATION:****Links to the Corporate Strategy**

<b>Hampshire safer and more secure for all:</b>	no
Corporate Improvement plan link number (if appropriate):	
<b>Maximising well-being:</b>	yes
Corporate Improvement plan link number (if appropriate):	
<b>Enhancing our quality of place:</b>	no
Corporate Improvement plan link number (if appropriate):	

**Section 100 D - Local Government Act 1972 - background documents**

The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)

DocumentLocation

None

## **IMPACT ASSESSMENTS:**

### **1. Equalities Impact Assessment:**

1.1. No adverse impacts identified.

### **2. Impact on Crime and Disorder:**

2.1. None

### **3. Climate Change:**

a) How does what is being proposed impact on our carbon footprint / energy consumption?

No impact

b) How does what is being proposed consider the need to adapt to climate change, and be resilient to its longer term impacts?

No impact