

HAMPSHIRE COUNTY COUNCIL**Report**

Committee/Panel:	Children and Families Advisory Panel
Date:	9 June 2015
Title:	Independent Reviewing Service and Safeguarding Unit Annual Report
Reference:	6657
Report From:	Director of Children's Services

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1. Summary

- 1.1 The purpose of this report is to update members as to the work of the Independent Reviewing Service (IRS) and Safeguarding Unit in the last year and to produce a document which meets statutory requirements.
- 1.2 This report is presented in two parts. Part 1 which can be found at appendix A, contains the annual report of the work of the IRS and Safeguarding Unit. Some of the annual report related to the IRS draws on work presented in Part 2, appendix B, which is an overview report of the findings from most recent Care Plan and Review audit conducted by Independent reviewing Officers (IROs).

2. Recommendations

- 2.1. That the Children and Families Advisory Panel note the Independent Reviewing Service and Safeguarding Unit Annual Report

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

Hampshire safer and more secure for all:	yes
Corporate Improvement plan link number (if appropriate):	
Maximising well-being:	yes
Corporate Improvement plan link number (if appropriate):	
Enhancing our quality of place:	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.)

<u>Document</u>	<u>Location</u>
IRO Handbook	gov.uk website

IMPACT ASSESSMENTS:

1. Equality Duty

1.1. The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act;
- Advance equality of opportunity between persons who share a relevant protected characteristic (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation) and those who do not share it;
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

Due regard in this context involves having due regard in particular to:

- a) The need to remove or minimise disadvantages suffered by persons sharing a relevant characteristic connected to that characteristic;
- b) Take steps to meet the needs of persons sharing a relevant protected characteristic different from the needs of persons who do not share it;
- c) Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity which participation by such persons is disproportionately low.

1.2 Equalities Impact Assessment:

No adverse impacts identified

2. Impact on Crime and Disorder:

2.1. None

3. Climate Change:

3.1 No impact

PART 1. Annual Report: The IRS and Safeguarding Unit

THE IRS

1. Background, context and key facts

There is a statutory requirement for the local authority to have an Independent Reviewing Service (IRS) to have oversight of work related to Children Looked After (CLA) by the authority. The service comprises of Independent Reviewing Officers (IROs) who participate in case reviews, monitor the local authority's performance and ensure effective oversight of the child's case, independent of the operational teams and their line management.

In Hampshire IROs also have the role of Child Protection Conference chairs, chairing all of the Initial and Review Child Protection Conferences for children whose circumstances suggest a formal Child Protection (CP) plan is potentially necessary.

The statutory guidance within the 'IRO Handbook' (2010) states that the IRS manager should be responsible for the production of an annual report for the scrutiny of the members of the corporate parenting board. That requirement is discharged through the presentation of this report to the Children and Families Advisory Panel.

Additionally the IRO Handbook specifies a further six areas to which an annual report should make reference. They are as follows and provide the structure for the first part of this report.

- 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.

Particular context is given to the elements of this report relating to the IRS by the continued rise in numbers of children subject to a CP plan. At 31 March 2014 this figure was 1,113, at that time the highest number of CP plans ever recorded in Hampshire. By 31 March 2015 this figure stood at 1,351 having peaked at 1,455 at 7 January 2015. It is hoped that other activities such as the roll out and consolidation of the Early Help Hubs are now impacting to reduce this headline figure and that further impetus to the recent reduction will be given by the work streams arising from the successful 'Innovation' bid.

2. 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

There are currently 20.5 FTE IRO posts, line managed on an area basis by two Lead IROs. This figure remains unchanged during the year to end March 2015.

There has been some small amount of 'churn' in the staff group through retirement and one IRO moving to a more senior position in another local authority. In light of the pressures within the service engendered through the high number of CP plans agreement for use of two agency IROs and continuing use of a number of 'bank' staff (recently retired IROs returning on a sessional basis) has allowed the service to continue to function. A successful round of recruitment has seen two previous appointees recently return to the service.

It is known that further vacancies will be arising in the coming months with two staff seeking a reduction from full time to half time hours as part of a flexible retirement and one long-serving IRO taking up a Head of Reviewing Service post in another local authority. Permission to recruit processes are underway. The Deputy Director, as line manager of the IRS Head of Service, has requested a more detailed report on staffing in the service and this is being completed.

Overall the service continues to be well served by a stable core of experienced IROs and two well regarded Lead IROs.

The statutory guidance within 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 caseloads for looked after children.

The average caseload for IROs in Hampshire at 31 March 2015 stood at 65 CLA, a figure slightly increased from 62 at 1 April 2014.

However alongside their statutory role as IROs these officers also chair Child Protection Conferences. Over the year to 31 March 2015 the number of children

subject of a CP Plan has risen from 1,113 to 1,351, an increase of 20%. On average each IRO currently services Child Protection Conferences covering 66 children in addition to their statutory IRO function related to CLA.

These figures translate to the IRS servicing 3,589 CLA reviews, and 2,881 CP conferences in the 12 months considered. During this period we had 17 youth 'remand' CLA episodes.

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. However the increased CP plan numbers and associated conferences continue to bring pressures to the service in respect of good quality delivery of the full statutory IRO function.

Hampshire recognises the issue, and impact, of high case loads for IROs and this matter has been further addressed in a report to Children and Families Management Team on 26 November 2014. Solutions to work pressures such as piloting the use of mobile and voice recognition technology and a potential redesign of the template for recording CLA reviews are being progressed.

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.

3. 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.

The result for review timeliness in the last twelve months is that 78.4%, of reviews are held on time. This is a reduction from the 84.2% reported in the last report and is in part a consequence of the need to move CLA reviews to accommodate Initial CP conferences. The data needs to be seen in the context of the overall increased workload as referenced above.

Other common reasons for reviews being late, as reported regularly to Area PAGs, include:

- Late changes of social worker
- Initial reviews not being booked
- Lack of proper preparation for reviews by operational staff

4. Extent of participation of children and their parents

The current reported position on participation by young people aged over 4 years in reviews is 81.3%. This is a slight decrease on the 84.2 % reported for the last report, with the overall figure being slightly reduced by participation of children in adoption and disabled children's teams.

The annual care plan audit further considers this issue.

There is no mechanism at present for reporting on figures for parental participation in reviews.

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

The audit of care plans and reviews carried out over four weeks in January and February of 2015 has been completed comprises part 2 of this report.

A repeat audit of agency participation in, and report contribution to, CP Conferences was conducted in the Autumn, using minutes of CP conferences held during a fortnight of July 2014. The results of this audit have been reported to the Hampshire Safeguarding Children Board Quality Assurance Group.

All IROs have been asked to report on needs for Life Story Work arising within their caseloads. Alongside this they have been asked to identify cases where perceived financial or other disincentives mean carers are not providing private permanence outside of the care system for children who therefore remain looked after by the authority. The results of this activity will feed into other work streams.

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 individual IROs within supervision and will contribute to evidence for the 'Valuing Performance' processes.

The CLA Review spread sheet is used to provide evidence regarding timeliness of the production of the review record (as opposed to timeliness of the actual review meeting).

Direct observation by the Lead IROs of IROs chairing Conferences is undertaken to provide supporting evidence of practice standards.

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

The Problem Resolution Process (PRP) was commenced 39 times in the year to end March 2015. This is a further increase on previous reported use, evidencing a continuing robust and increasingly appropriate level of formal challenge. However it is noted that some IROs are far more likely to use this formal mechanism than others and the service will continue to monitor thresholds for use to ensure consistent application across the service.

Key themes emerging over the last year from use of the PRP have been around lack of Personal Education Plans and/or Health assessments or provision (11); Pathway Plan issues (care plans for children approaching adulthood) (6); permanence issues (5); inappropriate placement/accommodation (4); Life Story Work (4) and care plan quality (3). A range of other issues have been addressed.

A pragmatic approach has been taken to some issues, so where for example the completion of a health assessment seems to be beyond the gift of operational colleagues and managers it is recognised that taking the formal PRP route is not appropriate and the issues are flagged otherwise.

The issue of permanence is further highlighted through the care plan audit – and this suggests that IROs could and should be more challenging in expecting permanence plans at second reviews. This will be discussed and progressed within the service.

Many issues are resolved locally through dialogue with Team Managers, negating the need for the PRP to be initiated. This is evidenced in part through management recording of use of 'IRO notes and CPC chair' notes in ICS although there is some coincidence of lower recording and lower PRP use by some IROs. The reporting of IRO recording on a quarterly basis allows differential levels of recording between individual IROs to be seen and challenged by Lead IROs.

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

From an IRS perspective the need to chair an increased number of CP conferences brings the risk that the main focus of the service shifts away from its statutory function, which is to quality assure delivery of plans and assessments related to Hampshire's CLA population.

Some issues are highlighted from use of the PRP, as above.

Placements for children continue to be made more often on the basis of availability than choice due to pressures within the system.

The lack of a discrete admin support service for the IRS was reviewed as part of the wider review of admin in the social work part of the branch but this remains as an unresolved issue.

8. Good Practice

There are continuing efforts to ensure high quality participation of looked after children and young people at the individual, service and strategic levels.

The IRS will continue to work with Care Ambassadors as part of the interview process for new staff. Their contribution in this regard has been both influential and significant.

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.

IROs, Lead IROs and the Head of Service will have continued input to the reconstituted Care Matters Board and its sub-groups

The service has ensured continued delivery of an effective Child Protection Conference chair service system despite the significant increase in work volume in this area of activity.

Lead IROs continue to input to area and district Performance Action Groups using an agreed data set and analysis format. They attend local management meetings when appropriate. The Head of Service reports relevant data to the County PAG and is part of the Children and Families Wider Management Team.

9. Issues Identified for Development in the last report

Increase capacity of the service, in line with the Ofsted recommendation, to allow contact with CLA between reviews

Attempts to increase capacity within the service to allow contact with young people in between reviews are focused on efforts to gain efficiency from process changes, releasing IRO time, as discussed in the report taken to CFMT 26 November 2014. It is recognised it is not possible to further increase the number of IROs at this time.

Run and evaluate the IT mobile working project

This remains in progress. The IROs involved in the pilot met with software suppliers on 8 May 2015 to receive training. This followed significant delays whilst system security and issues related to fit with corporate IT goals and strategies were resolved.

Increase the quality and quantity of participation in PC and CLA processes by children and young people

This remains a challenge for the IRS as also highlighted in part within the care plan audit report.

10. Issues for Further development over the next year

Continue to seek efficiencies through better and different use of processes related to IRO work and recording.

Ensure that young people are appropriately and fully involved in processes and meetings which relate to their care and protection.

More balanced use of the PRP across the IRS workforce.

More balanced use of recording by use of IRO note and CP chair note across the IRS workforce.

Report on the IT pilot project and plan next steps as appropriate.

THE SAFEGUARDING UNIT

11. Overview

The unit has continued to deliver effective services in the last year. The core staff group has remained stable with one change to admin staff.

12. Detail of work within the unit

In the year to the end of March 2015 the number of referrals recorded by Local Authority Designated Officers (LADOs) was 552. LADOs have oversight of concerns related to any employee or volunteer within the broadly defined children's workforce. This is a significant increase on the 399 reported for the year covered by the last report and is probably due in part due to more robust recording, as well as a an undoubted actual increase in LADO activity.

Changes in Working Together 2015 now mean that any new officer appointed to oversee allegations will need to be a qualified social worker, or to have fulfilled the LADO role previously.

The LADOs contribute to the work of the Safeguarding Children Board, one sitting on each of the three MASFs and all three being members of the Board's education sub group.

Additionally the LADOs work with the Board to produce the published model safeguarding policies and lead on the work associated with the audit safeguarding audit the schools are required to complete. The next audit will take place through the next two school terms and will include all education providers.

The work of the LADOs is considered in detail in an annual report presented to the QA sub group of the Board.

One of the full time LADOs manages the two Child Employment and Entertainment officers. Their work is subject of a separate annual report to the Children and Families Management Team, next due to be presented on 13 July 2015.

An agreed set of LADO service standards is being jointly developed with the IOW LADO and their manager. When issues of independence have compromised the IOW LADOs in cases Hampshire LADOs have offered cover.

The anticipated move to full use of an on-line system by Family Placement and Adoption Teams to manage DBS checks continues to be slow to manifest itself and the unit continues to monitor this area of work.

The movement of some admin functions within the unit to the Central Referral Team remains under consideration although notifications regarding adults who are a 'Risk To Children' and cascade to other agencies and areas of 'missing' notifications has now moved.

The Head of Safeguarding Unit acts as a children's social care representative to the police lead Multi Agency Public Protection Arrangements Strategic Management Board, the joint 4 Local Safeguarding Children Board's procedures group and the Child Death Overview Panel.

PART 2. The IRS Care Plan Audit

Part 2 of this report details the Care Plan Audit conducted by IROs.

IRO Care Plan Audit report 2014/15

Introduction

This report is an analysis of the responses from the 2014/15 Audit looking at Care Plans for Children in Care, completed by Independent Reviewing Officers (IRO) in respect of every statutory review held between Monday 19th January and Friday 13th February 2015. Previous surveys have covered a period of 8 weeks. Year to year outcome comparisons therefore focus on percentages rather than overall numbers.

The survey was sent out to the IROs via SurveyMonkey.com, to be completed for every review held in the period indicated. Once all IROs had completed the survey the responses were analysed by the DaIT and commentary added by the Independent Reviewing Service Managers.

The survey, changed slightly from last year, contained 44 questions covering 7 topics and used a combination of open and closed questions. Mixtures of mandatory questions and subsidiary questions were dependant on the respondents' previous answers. The questionnaire template can be seen at the end of the report (*See appendix 1*).

Below is a list of the seven topics. Each topic contained mandatory questions and a number of questions which followed logically dependent on answers given.

- 1) **Survey Population**
- 2) **The Care Plan**
- 3) **PEP (Personal Education Plan)**
- 4) **Health Assessment**
- 5) **Are Needs Met Overall?**
- 6) **The Review**
- 7) **Equality and Diversity**

The primary focus of the survey was to look at the quality of Care Plans for Looked after Children in Hampshire but recommendations may also be drawn for IRO practice.

As with any such large audit some data inaccuracies may result from input errors. This will result in an outcome which is close to, but not 100% accurate. The interpretation of the data remains valid.

The term 'Child' is used throughout to refer to any looked after child or young person.

Generally the data does not show significant differences in results for the two areas but where this is an issue it is highlighted. Due to the size of the audit it is not meaningful to break the data down to team level.

1) Survey Population

The first part of the survey established the basic data related to the audit population of the 236 children whose care plans and reviews were audited.

Table 1 shows the number of forms returned by each IRO, split by Age Group.

Table 1

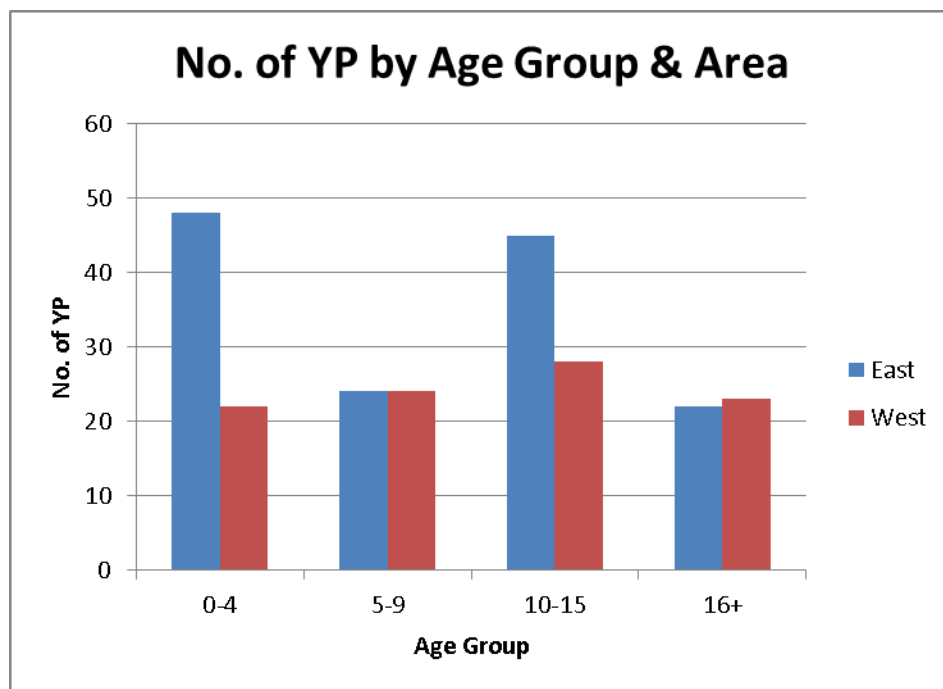
Reviewing Officer	Age Group				Total
	0-4	5-9	10-15	16+	
A				1	1
B		2	2	4	8
C	1	3	3	1	8
D			1		1
E	7	1	4	2	14
F	1		2	2	5
G	1	4	5	3	13
H	2	1	5	2	11
I	5	3	2	4	14
J	3	3	1	4	11
K	7	3	4		14
L	4	1	2	2	9
M	5	1	5	2	13
N				1	1
O		1	1	2	4
P	4	4	2	1	11
Q	5	6	8	4	23
R	5	7	1	2	15
S			1		1
T	6	2	1	1	10
U			6	1	7
V	12	3	12	2	29
W	2	3	4	4	13
Total	70	48	73	45	236

Graph 1 and its tabulated data shows the number of children in each age group by area. Of the 236 responses 139 were from the East area (59%) and 97 from the West area (41%). The previous audit had comparative area returns of 55% and 45%.

Graph 1 data

Age Group	Area		Total
	East	West	
0-4	48	22	70
5-9	24	24	48
10-15	45	28	73
16+	22	23	45
Total	139	97	236

Graph 1



For the three age groups covering 0 to 15, there were the same number or more care plans audited arising from cases in the East than the West. For the 16+ group there was 1 more YP in the West than the East. This pattern is the same as seen in the last completed audit (2013).

Table 2 shows the age groups of children and the area/team type the audited case was held in.

Table 2

Area and Team Type by Age Group

Area	Team Type	Age Group				Total
		0-4	5-9	10-15	16+	
East	R&A	1	4	2		7
	CiN	27	9	19	3	58
	CiC	6	6	20	17	49
	Adoption	14	4			18
	DCT		1	4	2	7
West	R&A		2	1	1	4
	CiN	10	5	3	1	19
	CiC	6	12	21	18	57
	Adoption	6	2			8
	DCT		3	3	3	9
Total		70	48	73	45	236

The data in table 2 raises the question of whether CLA cases in the East could appropriately move more quickly from CiN to CiC teams. This may be worthy of further analysis in the area.

For the first time the audit asked whether the child was looked after by virtue of being remanded into care by a Court judgement.

Table 3

By Area & Age Group

		Is the child looked after solely as a result of being remanded into care by Court judgement?			
Area	Age Group	Yes	No	Not Recorded	Total
East	0-4		48		48
	5-9		24		24
	10-15	1	43	1	45
	16+		22		22
East Total		1	137	1	139
West	0-4		22		22
	5-9		24		24
	10-15		28		28
	16+	2	21		23
West Total		2	95		97
Total		3	232	1	236

The final question establishing base data asked which review was being audited, a first (1 month) review, a second (4 month) review or a third (10 month and subsequent) review. This data is presented in table 4.

Table 4

By Area & Age Group		Numbers					Percentages				
Area	Age Group	Which type of review is this?					Which type of review is this?				
		1st review (1 month)	2nd review (4 month)	3rd review and later (10 months and beyond)	Not Recorded	Total	1st review (1 month)	2nd review (4 month)	3rd review and later (10 months and beyond)	Not Recorded	Total
East	0-4	11	8	26	3	48	22.9%	16.7%	54.2%	6.3%	100.0%
	5-9	9	3	11	1	24	37.5%	12.5%	45.8%	4.2%	100.0%
	10-15	9	10	23	3	45	20.0%	22.2%	51.1%	6.7%	100.0%
	16+	2	1	18	1	22	9.1%	4.5%	81.8%	4.5%	100.0%
East Total		31	22	78	8	139	22.3%	15.8%	56.1%	5.8%	100.0%
West	0-4	4	3	15		22	18.2%	13.6%	68.2%	0.0%	100.0%
	5-9	6	2	16		24	25.0%	8.3%	66.7%	0.0%	100.0%
	10-15	2	4	22		28	7.1%	14.3%	78.6%	0.0%	100.0%
	16+	3	1	17	2	23	13.0%	4.3%	73.9%	8.7%	100.0%
West Total		15	10	70	2	97	15.5%	10.3%	72.2%	2.1%	100.0%
Total		46	32	148	10	236	19.5%	13.6%	62.7%	4.2%	100.0%

2) Care Plan

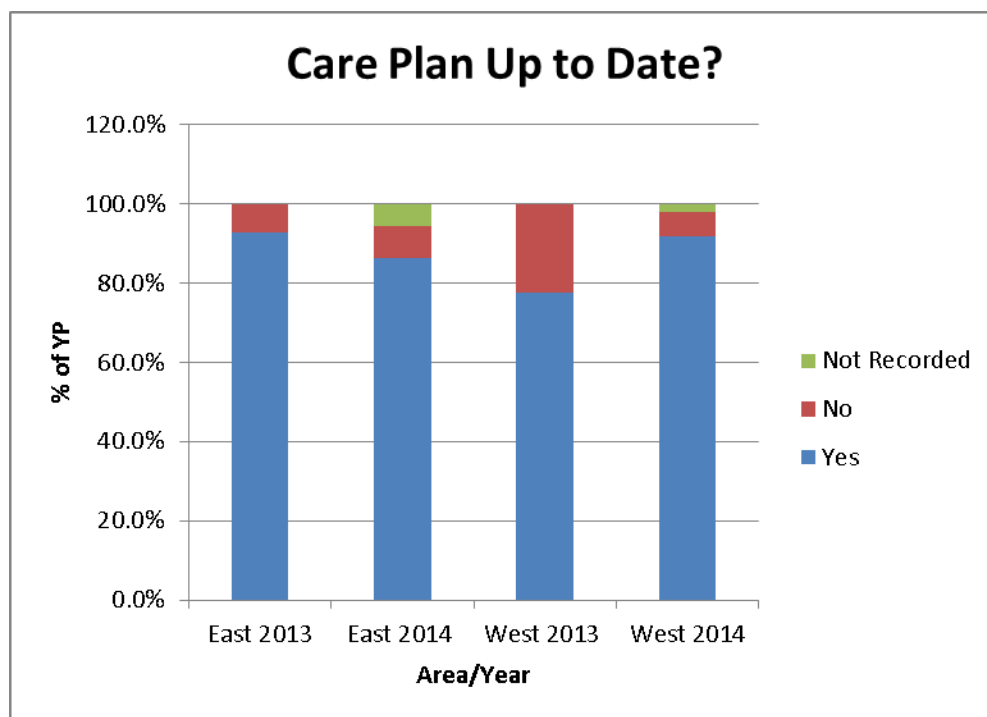
Is there a Care Plan in Place?

Following the audit in 2012 where only 87% of reviews were based on a care plan and the push to raise this number to 100% in 2013 it is positive to see the latter result repeated in the 2014/15 audit when all reviews were again based on a current care plan.

Is the Care Plan up to date?

The responses from the survey show that overall 89% of children had a care plan which was up to date, a year on year improvement from the 86% of 2013 and 73% in 2012. A slight drop in performance in the East in this regard is offset by a more significant improvement in the West of the County.

This data is presented in graph form below and in full on the following page.



Q13 - Is the Care Plan up to date?

Table 4		Numbers				Percentages			
Area	Age Group	Care Plan Up to Date?			Total	Care Plan Up to Date?			Total
		Yes	No	Not Recorded		Yes	No	Not Recorded	
East	0-4	41	4	3	48	85.4%	8.3%	6.3%	100.0%
	5-9	21	2	1	24	87.5%	8.3%	4.2%	100.0%
	10-15	39	3	3	45	86.7%	6.7%	6.7%	100.0%
	16+	19	2	1	22	86.4%	9.1%	4.5%	100.0%
East Total		120	11	8	139	86.3%	7.9%	5.8%	100.0%
West	0-4	21	1		22	95.5%	4.5%	0.0%	100.0%
	5-9	23	1		24	95.8%	4.2%	0.0%	100.0%
	10-15	28			28	100.0%	0.0%	0.0%	100.0%
	16+	17	4	2	23	73.9%	17.4%	8.7%	100.0%
West Total		89	6	2	97	91.8%	6.2%	2.1%	100.0%
Total		209	17	10	236	88.6%	7.2%	4.2%	100.0%

Graph 3 Data		Numbers			Percentages		
Year & Area	Yes	No	Not Recorded	Yes	No	Not Recorded	Total
East 2013	276	22	0	92.6%	7.4%	0.0%	298
East 2014	120	11	8	86.3%	7.9%	5.8%	139
West 2013	192	56	0	77.4%	22.6%	0.0%	248
West 2014	89	6	2	91.8%	6.2%	2.1%	97

Does the child have a permanence plan as part of their care plan?

Of the 236 cases considered 144 were identified as having a permanence plan. Of the 82 remaining 31 were being considered at a 1 month review. This leaves 51 of 205, or 25% of those cases being considered at a 4 month or subsequent review where a plan for permanence was not clear.

This indicates a need for further focus on practice and formal IRO challenge in this area.

The table related to Q14 below gives detail.

Further to this, as can be seen within the following table 128 children were identified as living in a placement designed to see them through to adulthood.

Q14. Does the child have a Permanence Plan as part of the Care Plan?

		Numbers				Percentages			
		Does the child have a Permanence Plan as part of the Care Plan?							
Area	Age Group	Yes	No	Not Recorded	Total	Yes	No	Not Recorded	Total
East	0-4	26	19	3	48	54.2%	39.6%	6.3%	100.0%
	5-9	11	12	1	24	45.8%	50.0%	4.2%	100.0%
	10-15	18	24	3	45	40.0%	53.3%	6.7%	100.0%
	16+	18	3	1	22	81.8%	13.6%	4.5%	100.0%
East Total		73	58	8	139	52.5%	41.7%	5.8%	100.0%
West	0-4	16	6		22	72.7%	27.3%	0.0%	100.0%
	5-9	16	8		24	66.7%	33.3%	0.0%	100.0%
	10-15	25	3		28	89.3%	10.7%	0.0%	100.0%
	16+	14	7	2	23	60.9%	30.4%	8.7%	100.0%
West Total		71	24	2	97	73.2%	24.7%	2.1%	100.0%
Total		144	82	10	236	61.0%	34.7%	4.2%	100.0%

Q15. Is the child currently living in their permanent placement (designed to last until they are at least 18 years old)?

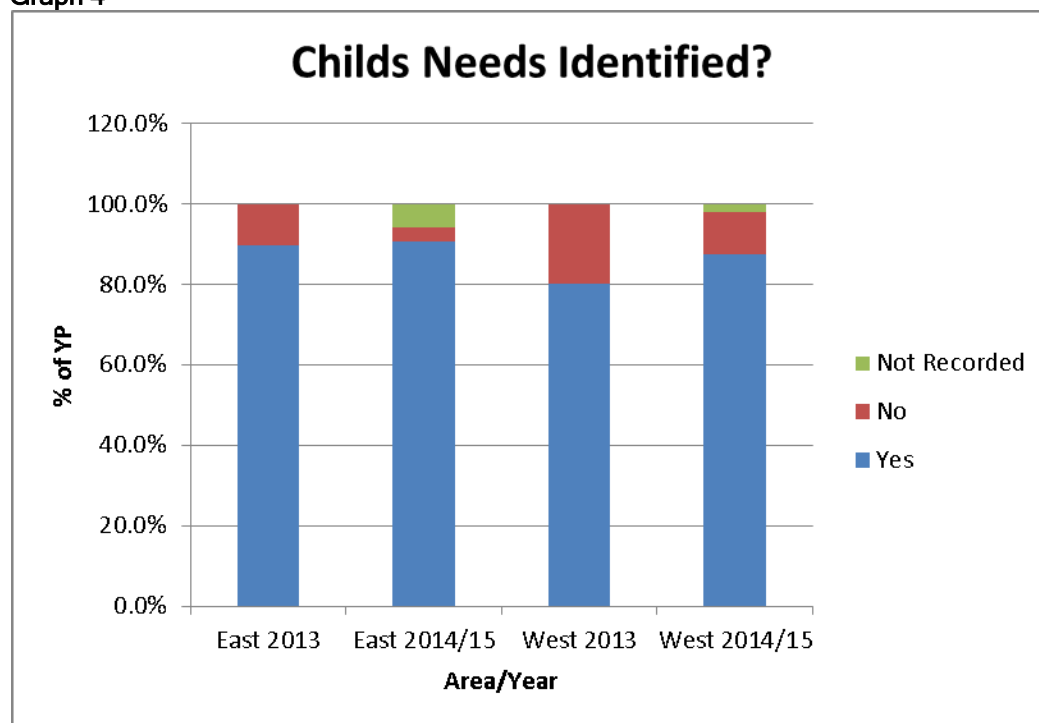
		Numbers				Percentages			
		Is the child currently living in their permanent placement (designed to last until they are at least 18 years old)?							
Area	Age Group	Yes	No	Not Recorded	Total	Yes	No	Not Recorded	Total
East	0-4	16	29	3	48	33.3%	60.4%	6.3%	100.0%
	5-9	11	12	1	24	45.8%	50.0%	4.2%	100.0%
	10-15	24	18	3	45	53.3%	40.0%	6.7%	100.0%
	16+	16	5	1	22	72.7%	22.7%	4.5%	100.0%
East Total		67	64	8	139	48.2%	46.0%	5.8%	100.0%
West	0-4	7	15		22	31.8%	68.2%	0.0%	100.0%
	5-9	14	10		24	58.3%	41.7%	0.0%	100.0%
	10-15	25	3		28	89.3%	10.7%	0.0%	100.0%
	16+	15	6	2	23	65.2%	26.1%	8.7%	100.0%
West Total		61	34	2	97	62.9%	35.1%	2.1%	100.0%
Total		128	98	10	236	54.2%	41.5%	4.2%	100.0%

Are all the child's current needs clearly identified in the Care Plan?

The audit showed that identification of needs is usually clear and performance in this area has improved slightly since the last audit as shown in the data table and graph following:

Graph 4 Data Area/Year	Numbers				Percentages			
	Yes	No	Not Recorded	Total	Yes	No	Not Recorded	Total
East 2013	267	31	0	298	89.6%	10.4%	0.0%	100.0%
East 2014/15	126	5	8	139	90.6%	3.6%	5.8%	100.0%
West 2013	199	49	0	248	80.2%	19.8%	0.0%	100.0%
West 2014/15	85	10	2	97	87.6%	10.3%	2.1%	100.0%

Graph 4



Has the child, young person or Parents signed the Care Plan?

Sign off of care plans, which should be a key indicator of the child and parents acknowledgement of the plan, if not agreement to its contents, remains a challenging area. Of the 236 circumstances considered only 11 were signed by both parent and child. Given that 70 of the children were under the age of 5 years old and a further 48 were over 4 but less than 10 years old, and a further number may not have had sufficient understanding or the ability to sign one might expect to see a large proportion of plans signed by a parent but not a child. However only a further 15 plans were signed by a parent alone. 18 were signed by a child alone.

The 2013 audit showed that 17% of care plans were signed by both child and parent, a parent or a child. This figure is little changed at 19% in this audit.

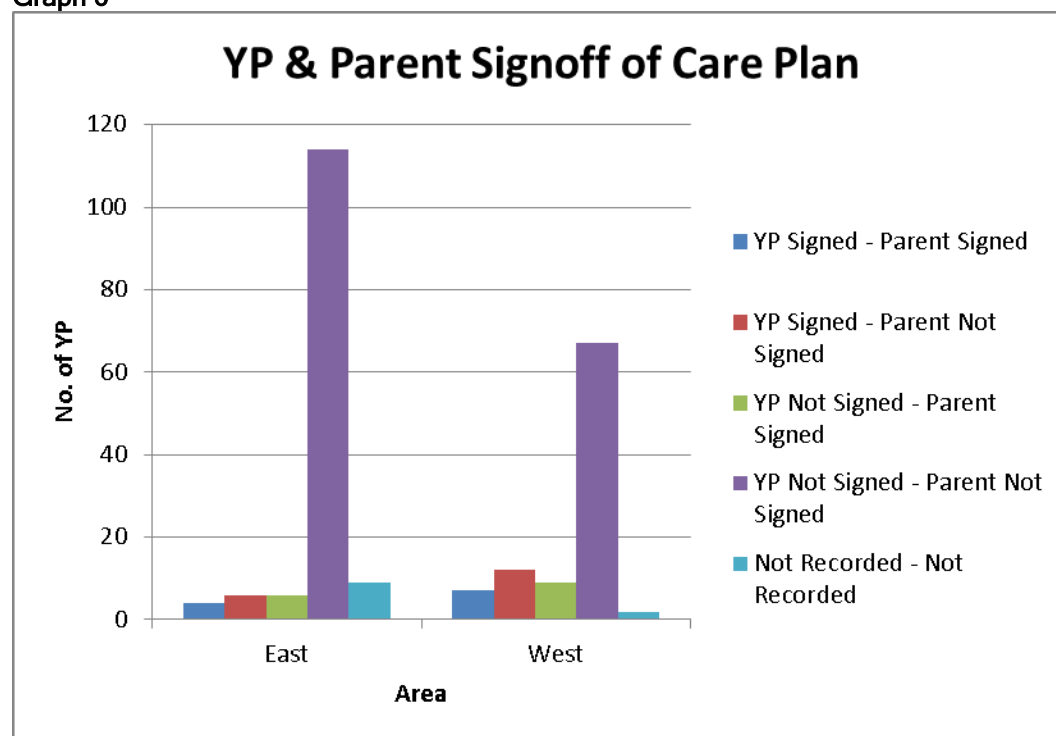
This is an area which needs a clearer operational focus. IROs comment that there is still an issue with Care Planning being a demonstrably inclusive process. Care Planning meeting minutes are not always found on ESCR and sometimes when these do occur they do not obviously include or take the view of the child or parent. A focus on more clearly inclusive care planning might well lead to significant improvement in this area of practice.

Data and graphic related to this issue follows:

Table 6

	Child Signed		Child Not Signed		Not Recorded	Total
Area	Parent Signed	Parent Not Signed	Parent Signed	Parent Not Signed		
East	4	6	6	114	9	139
West	7	12	9	67	2	97
Total	11	18	15	181	11	236

Graph 6



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

Responses showed that altogether 90% have some evidence of contribution from either the young person, parent or both beyond the Plan being actually signed. There is no significant area difference in this regard. This represents an increase on the figure of 76% from the previous audit.

As one would expect younger children (under 5 years) are less likely to have involvement demonstrated.

Details can be seen in the tables and graph below.

Q20. Aside from signatures, within the Care Plan is there evidence of participation/contribution by the Child/Young Person?

(Also includes Q22 - Participation by Parent)

Table 7

Area	Child Participation		No child Participation		Not Recorded	Total
	Parent Participation	No Parent Participation	Parent Participation	No Parent Participation		
	East	60	18	38	14	9
West	48	17	21	9	2	97
Total	108	35	59	23	11	236

Graph 7

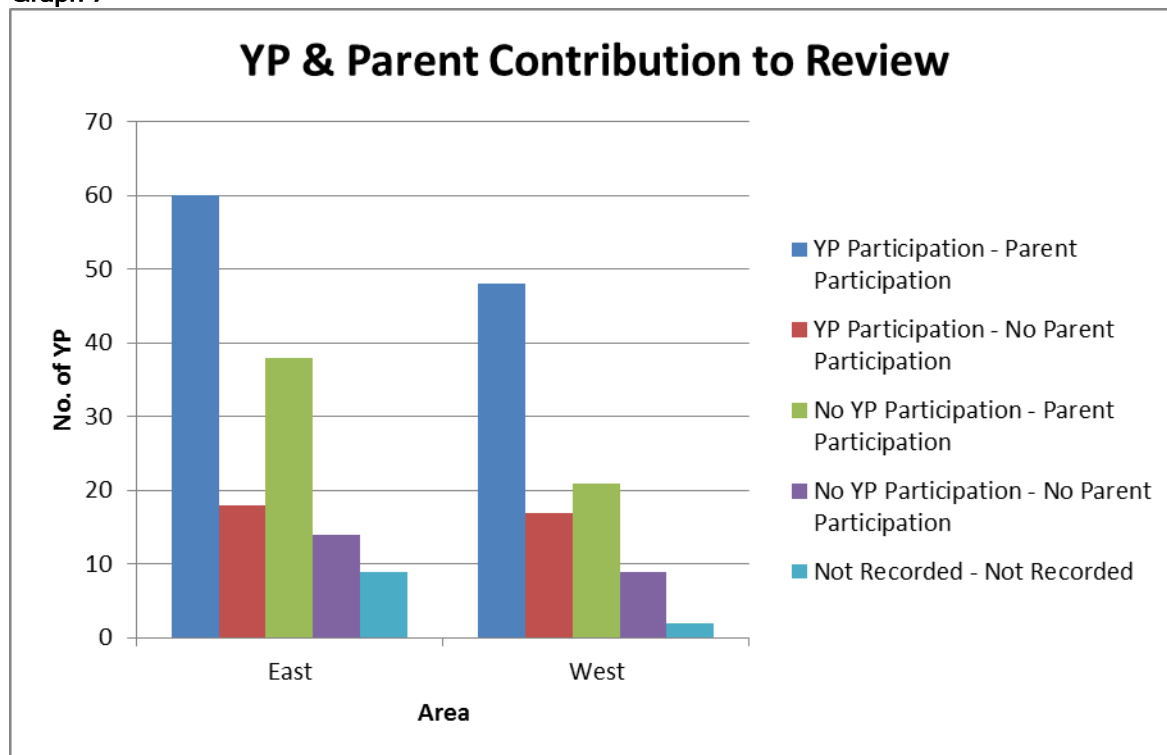


Table 8

Age Group	YP Participation		No YP Participation		Not Recorded	Total
	Parent Participation	No Parent Participation	Parent Participation	No Parent Participation		
	0-4	12	2	43		
5-9	30	4	8	5	1	48
10-15	46	10	7	6	4	73
16+	20	19	1	2	3	45
Total	108	35	59	23	11	236

3) PEP

The following section focuses on education, specifically the Education Plan element of the Care plan, covering whether the appropriate meeting has been held; is it recorded on ICS/ESCR; adequacy of the plan and use of funding streams.

Has the PEP meeting been held?

Further analysis indicates that of the 12 instances of there being no record of whether a PEP meeting has been held or is required 9 arise from a duplication of records or from young people remanded into a secure setting. Taking these out of consideration gives a figure 186 of 227 cases (82%) of PEP meetings being held when they should have been. This represents a positive and marked improvement from the figure of 68% given in the 2013c audit.

Of the remaining instances 17 relate to first (1 month) reviews giving some 10% of cases where a PEP meeting has not been held by the time a second or subsequent review is reached. Questions arise as to practice and IRS challenge through use of the formal problem resolution process in this regard.

Data as within the table below:

Q24. Has the PEP meeting been held?

Area	Numbers					Percentages				
	PEP Meeting Held?									
	Yes	No	Not Required	Not Recorded	Total	Yes	No	Not Required	Not Recorded	Total
East	70	17	42	10	139	50.4%	12.2%	30.2%	7.2%	100.0%
West	44	21	30	2	97	45.4%	21.6%	30.9%	2.1%	100.0%
Total	114	38	72	12	236	48.3%	16.1%	30.5%	5.1%	100.0%

Recording PEPs in ICS/ESCR

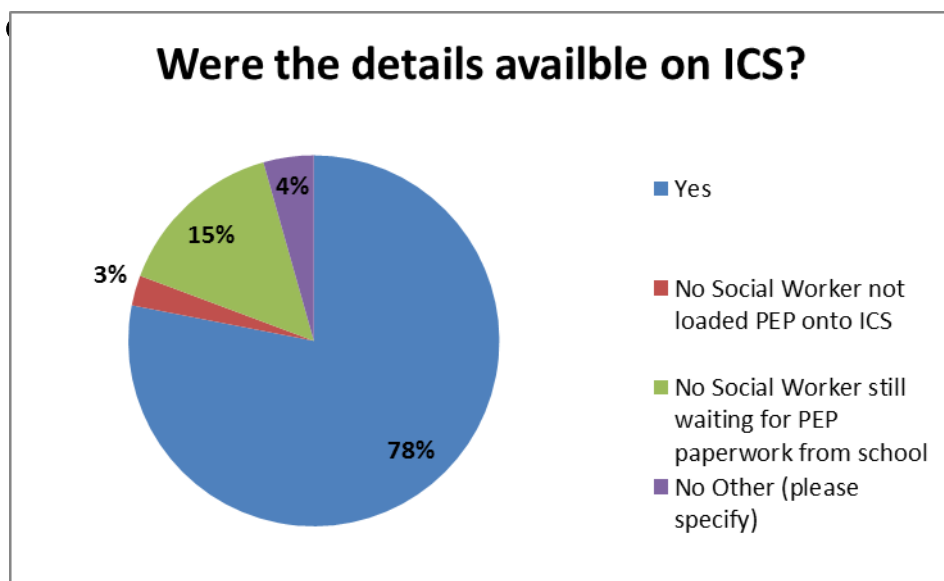
Where PEP meetings have been held they can usually be found within the electronic client record. Where this is not the case by far the most likely cause is delay in the school sending the paperwork to the social worker. See table and graph below:

Q25. Were the PEP details available on ICS/ESCR?

Q26. Reason why they weren't available?

Table 11

		Area			
Were the details available on ICS?	If not, why not?	East	West	Total	%
Yes		56	33	89	78.1%
No	Social Worker not loaded PEP onto ICS	2	1	3	2.6%
	Social Worker still waiting for PEP paperwork from school	12	5	17	14.9%
	Other (please specify)		5	5	4.4%
Total		70	44	114	100.0%



Is the PEP viewed as satisfactory?

Of the PEPs considered within the audit 86% were viewed as satisfactory, with satisfaction being an identification of need and a plan to meet the needs identified. This represents a slight improvement on the 84% figure found in the 2013 audit.

Whilst most PEPs are considered to be satisfactory there is far less clarity as to how available funding streams are being used to support individual children, as shown in the table below. There is no comparative data for this question as it was newly included in the 2015 audit.

Q28. Does the PEP show how the available funding streams, including the pupil premium grant, will be used to improve education outcomes?

Area	Numbers			Percentages		
	Yes	No	Total	Yes	No	Total
East	30	28	58	30.9%	28.9%	59.8%
West	25	14	39	25.8%	14.4%	40.2%
Total	55	42	97	56.7%	43.3%	100.0%

4) Health Assessment

Similarly to education the health section of the audit focuses on whether an appropriate assessment has occurred, recording of the assessment within the electronic client record and the adequacy of the resulting plan.

Has a Health Assessment taken place?

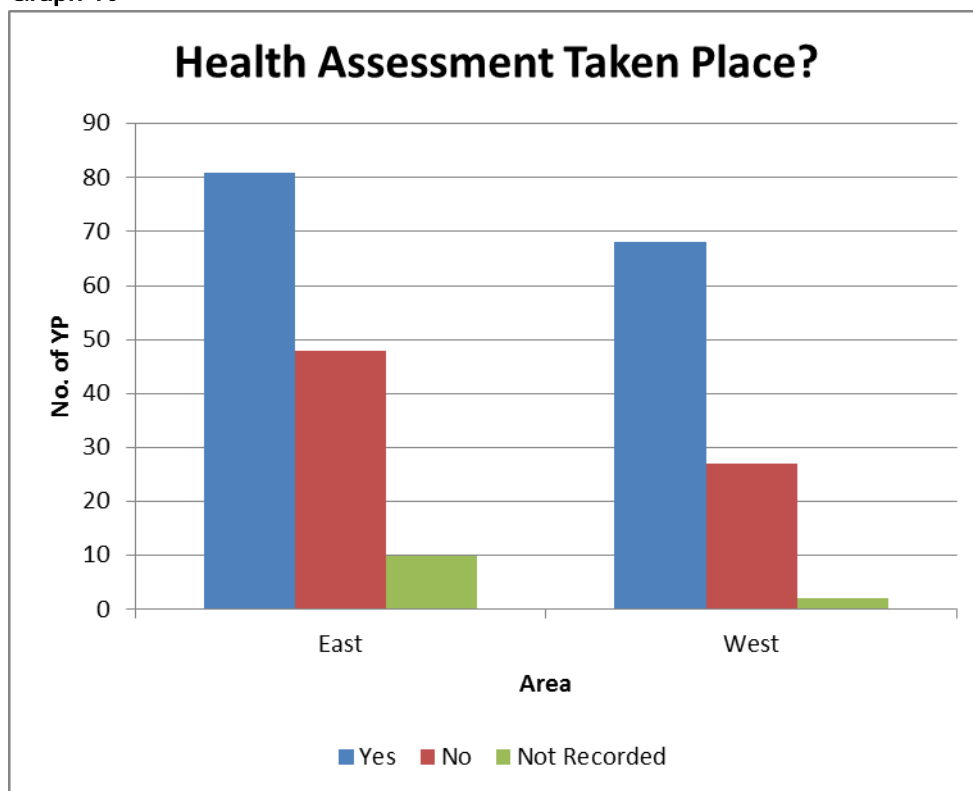
In headline, as shown in the table and graph below, health assessments were found to have taken place in 63% of cases. However as with PEPs there are a number of cases where this is data not recorded arising from duplicate records. Removing these 6 cases gives a slightly higher figure of 65%. This still marks a deterioration on the figure of 76% reported in the last audit.

There is no noticeable difference in the East/West profile related to this data.

Q29. Has the Health Assessment taken place?

Area	Numbers				Percentages			
	Yes	No	Not Recorded	Total	Yes	No	Not Recorded	Total
East	81	48	10	139	34.3%	20.3%	4.2%	58.9%
West	68	27	2	97	28.8%	11.4%	0.8%	41.1%
Total	149	75	12	236	63.1%	31.8%	5.1%	100.0%

Graph 10



DaIT have been asked to undertake further analysis to show whether there is a particular issue with older children not engaging with assessment processes, but an initial trawl of the raw data suggests that of the 75 instances of there being no assessment 38 relate to a first review and of the remaining 37 considered at a second or subsequent review 20 were considering older teenagers (14years +).

Recording in ICS/ESCR

Similarly to PEPs where assessments take place they are likely to be recoded in the system, and where this does not happen the most likely cause is delay in the social worker receiving the assessment. This is shown in the tables below:

Q30. Was the Health Plan available on ICS?

Table 15 Numbers Percentages

Was the Health Assmnt available on ICS?						
	Was the Health Assmnt available on ICS?					
Area	Yes	No	Total	Yes	No	Total
East	66	15	81	81.5%	18.5%	100.0%
West	59	9	68	86.8%	13.2%	100.0%
Total	125	24	149	83.9%	16.1%	100.0%

Q31. What was the reason the Health Plan was not on ICS?

Reason why not?	Total
Social worker has not loaded Health Plan onto ICS	2
Social Worker still waiting for the Health Plan to be sent to them	18
Other (please specify - 300 characters limit)	4
Total	24

Adequacy of Health Plans

Of the plans viewed 76% were considered to be satisfactory, as in the data presented below. It is difficult to say why there are a noticeably greater proportion of plans from teams in the East of the county seen to be unsatisfactory. The focus on PEP work within the IRS and inputs from the Virtual School suggest that input to the IRS from those leading on health of CLA may lead to a more fully consistent threshold being applied.

Q32. Is there an satisfactory Health Plan as evidenced under Section 11?

Table 14 Numbers Percentages

	Satisfactory Health Plan?					
Area	Yes	No	Total	Yes	No	Total
East	46	26	72	63.9%	36.1%	100.0%
West	53	6	59	89.8%	10.2%	100.0%
Total	99	32	131	75.6%	24.4%	100.0%

5) Are Needs Met Overall?

As in the table below those completing the audit were satisfied that overall needs were being met in 81% of cases with little area variation in data. This represents a fall from the figure of 90% reported in 2013 but may reflect a more robustly critical attitude on the part of the IRS alongside operational performance.

Q33. Having held the child's review are you satisfied that the Child/Young Person's overall needs are being met?

Table 17	Numbers				Percentages			
	Are you satisfied needs are being met?							
Area	Yes	No	Not Recorded	Total	Yes	No	Not Recorded	Total
East	115	14	10	139	82.7%	10.1%	7.2%	100.0%
West	77	18	2	97	79.4%	18.6%	2.1%	100.0%
Total	192	32	12	236	81.4%	13.6%	5.1%	100.0%

Within free narrative 32 different reasons were recorded for needs not being met overall, with some children having more than one reason cited. The most commonly reported identifiable themes, in order of prevalence, relate to education access and provision; permanence arrangements; health needs (including mental health); and lack of engagement and absconding leading to risk.

6) The Review

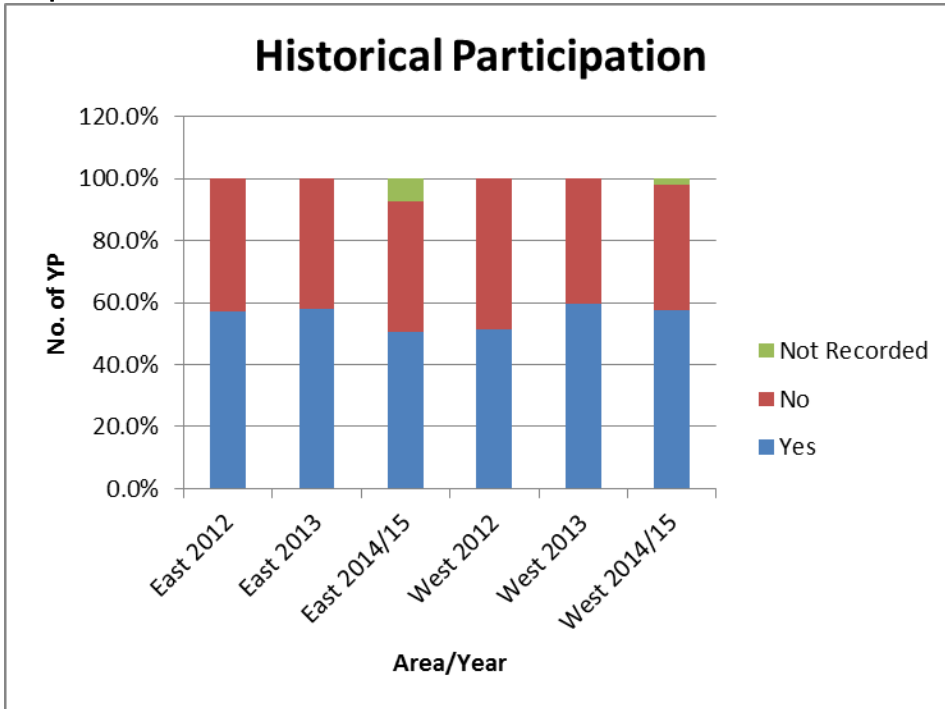
This section of the audit reports issues related to the review of care plans, covering children's participation, attendance and contribution; face to face contact with IROs prior to the review meeting and changes to review meeting arrangements resulting from views expressed by children.

Participation

Participation in reviews is recorded at 55% with 102 children not participating in their reviews. Whilst 77 of these children were deemed to be of insufficient age or understanding to participate this is little changed from previous audit results as shown in the graph below and this remains a potentially challenging area for all concerned.

The graph and table below give detail.

Graph 12



Q36. If the child/young person did not participate in the review why was this?

Table 21

If not, why was this?	Age Group				Total
	0-4	5-9	10-15	16+	
Child/Young Person chose not to participate		3	3	3	9
Child/Young Person of insufficient age and/or understanding to participate	56	14	5	2	77
Other (please specify - 300 characters limit)		6	9	1	16
Total	56	23	17	6	102

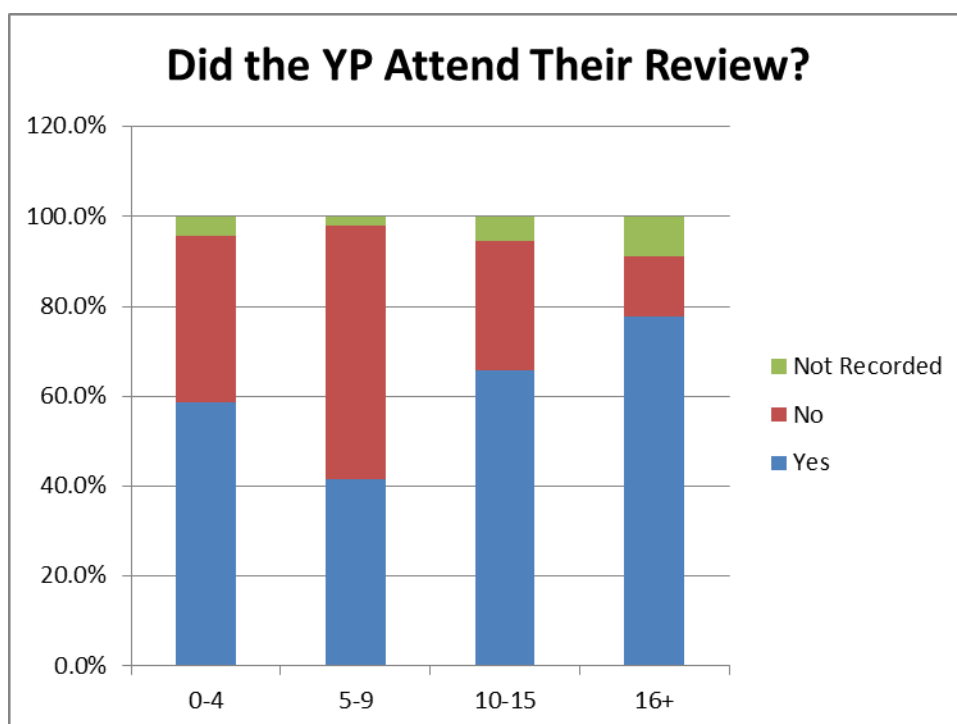
'Other' reasons were multiple and various ranging from contact being unexpectedly arranged through to being removed to a secure environment the evening before the review was held. In both instances the young person had planned to participate through attendance at their review.

Attendance at Review Meetings

In respect of attendance at review meetings a headline reported figure of 61% results from the audit. As with other data removal of duplicate records increases this slightly to around 64%, a slight increase on the 58% reported from the 2013 audit. Further work in this area is still needed by social workers and IROs. The table and graph below give further detail.

Q37. Did the Child/Young Person attend their review?

Age Group	Numbers				Percentages			
	Yes	No	Not Recorded	Total	Yes	No	Not Recorded	Total
0-4	41	26	3	70	58.6%	37.1%	4.3%	100.0%
5-9	20	27	1	48	41.7%	56.3%	2.1%	100.0%
10-15	48	21	4	73	65.8%	28.8%	5.5%	100.0%
16+	35	6	4	45	77.8%	13.3%	8.9%	100.0%
Total	144	80	12	236	61.0%	33.9%	5.1%	100.0%



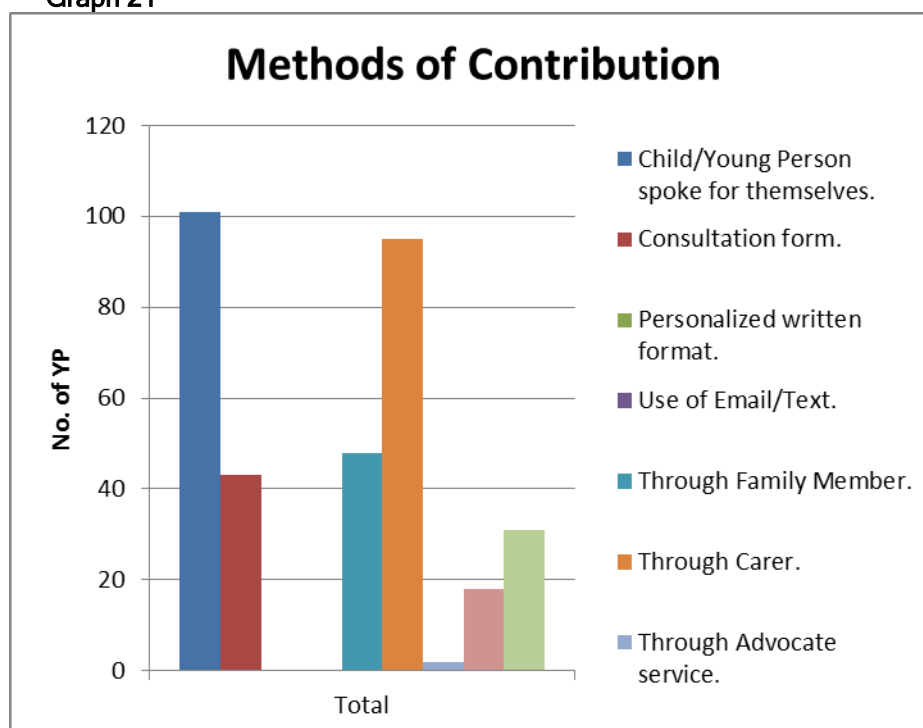
Various methods of contribution to review processes were used. The low use of advocacy is worthy of note and the nil use of email and text when these are often favoured methods of communication for young people warrants further discussion.

Details are presented in the following table and graph:

Q38. What methods of contribution were used?

Methods of Contribution	Total
Child/Young Person spoke for themselves.	101
Consultation form.	43
Personalized written format.	0
Use of Email/Text.	0
Through Family Member.	48
Through Carer.	95
Through Advocate service.	2
No contribution given.	18
Other	31
Total	338

Graph 21

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

There is an expectation that IROs will attempt and offer to meet with children privately prior to their reviews.

The audit shows 121 children either met their IRO prior to the review or actively declined the offer for such a meeting. This represents 53% of the audit cohort, a figure not changed from the 52% reported from the 2013 audit. This therefore remains an area where further work is needed, as shown in the data below.

Table 22

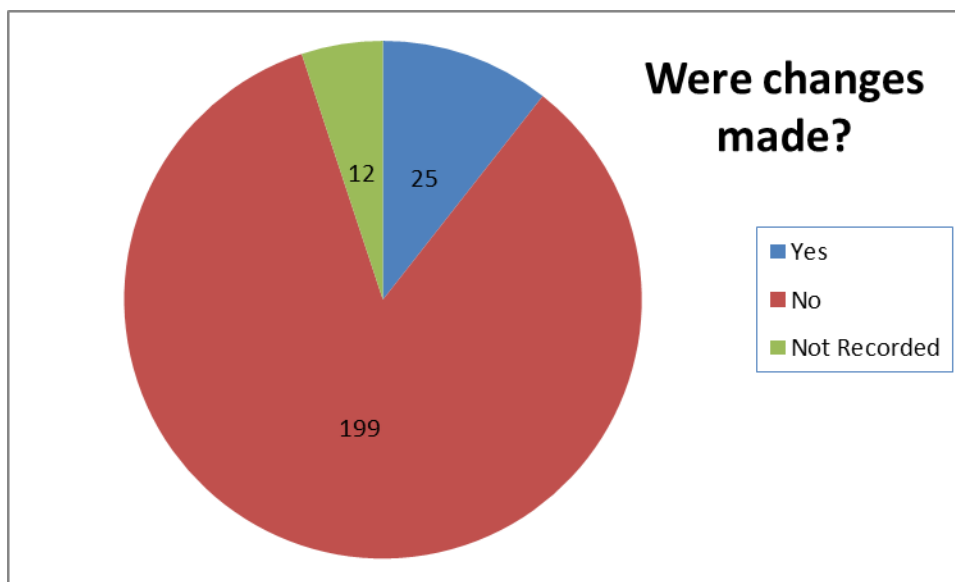
Did your (IRO) meet privately face to face with the child prior to the commencement of the statutory review?	Age Group	Total
Yes	0-4	8
	5-9	15
	10-15	34
	16+	17
Yes Total		74
No	0-4	55
	5-9	24
	10-15	17
	16+	7
No Total		103
No because child declined / did not wish to.	0-4	4
	5-9	8
	10-15	18
	16+	17
No because child declined / did not wish to. Total		47
Not Recorded	0-4	3
	5-9	1
	10-15	4
	16+	4
Not Recorded Total		12
Total		236

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

As seen from previous audits most reviews have no changes to arrangements resulting from requests from children, but where these are made they are likely to relate to time, venue and attendees.

Q40. Were any changes made, in respect of the review meeting, at the request of the Child/Young Person?

Changes Made?	Total
Yes	25
No	199
Not Recorded	12
No. of child	236



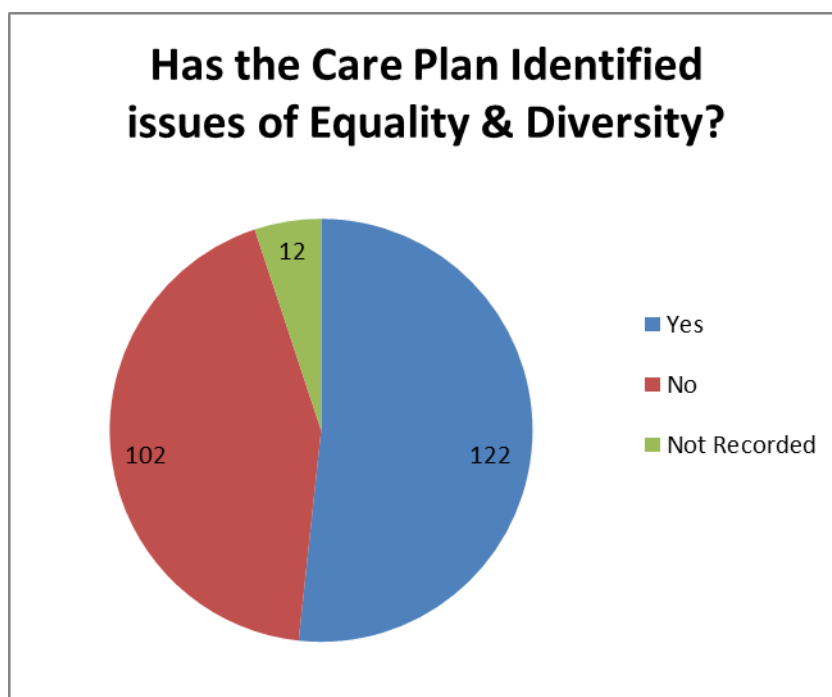
Q41. Changes made

Type of Change	Total
Venue.	17
Time.	17
Date.	2
Self Chair.	1
Those invited.	16
Other.	5

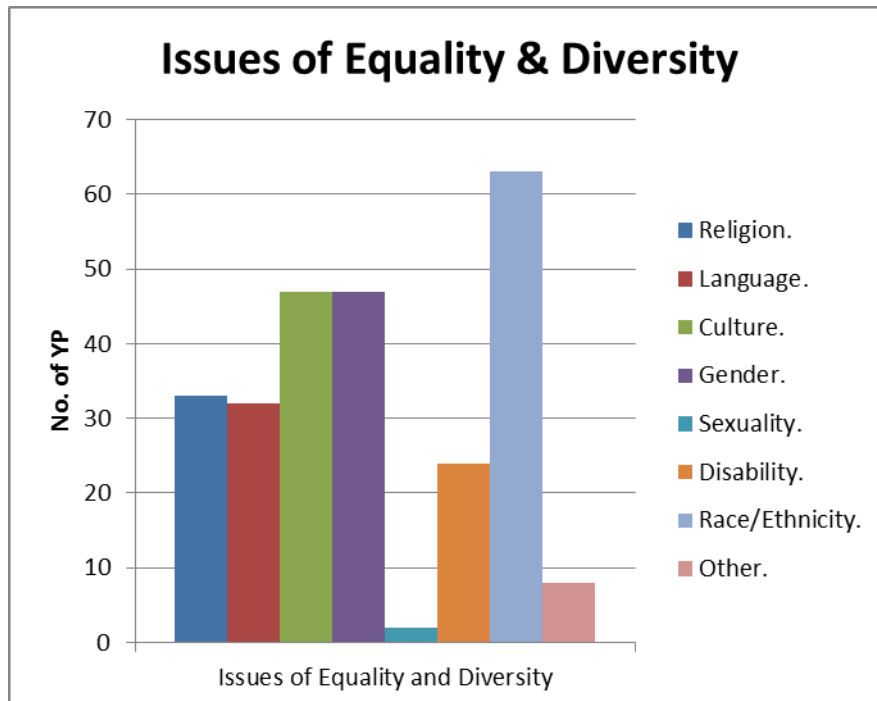
7) Equality and Diversity

The final section of the audit addresses issues related to the identification of equality and diversity. Given the demography of Hampshire's CLA population these questions may need to be differently or better targeted in future audits as the degree of interpretation in responding is probably unhelpful in allowing meaningful conclusions to be drawn. However it is clear from the following graphs that in many circumstances issues are recognised and addressed within the care planning and review processes.

Q42. Has the Care Plan identified issues of equality and diversity?



Q43. What are the issues of equality and diversity for this Child/Young Person and how have they been identified?



Appendix 1 – Audit questions

Question No.	Question/Column Title
	RespondentID
	CollectorID
	StartDate
	End Date
	IP Address
	Email Address
	First Name
	Last Name
	Custom Data
	Child/Young Person's name: - Open-Ended Response
	ICS/SWIFT ID of child: - Open-Ended Response
	Child/Young Person's date of birth: - Please enter a valid date of birth:
Q4	Q4. SW Team to which the child is allocated at the time of the review: (please choose the team name from the drop down boxes - If the team name is not listed please type the name of the team in Other)
	R&A
	CiN
	CiC
	YSS
	DCT
	Adoption
Q5	Name of Reviewing Officer:
Q6	Is the child looked after solely as a result of being remanded into care by Court judgement?
Q7	Is there a Detention Placement Plan in place?
	Date Care Episode began: - Please enter the date that the care episode began:
	Date of Statutory Review: - Please enter the date that the statutory review was completed:
Q10	Which type of review is this?
Q11	Is there a Care Plan in place? (HCC Looking after Children Care Plan document)
Q12	Please select why the Care Plan is not in place from the following options:

	Please select why the Care Plan is not in place from the following options: - Other (please specify - 300 characters limit)
Q13	Is the Care Plan up-to-date?
Q14	Does the child have a Permanence Plan as part of the Care Plan?
Q15	Is the child currently living in their permanent placement (designed to last until they are at least 18 years old)?
Q16	Are all the Child/Young Person's needs clearly identified?
Q17	If not please select the reason why from the following options:
Q17	If not please select the reason why from the following options: - Other (please specify - 300 characters limit)
Q18	Has the Child/Young Person signed the Care Plan?
Q19	Have the Child/Young Person's parents/family signed the Care Plan?
Q20	Aside from signatures, within the Care Plan is there evidence of participation/contribution by the Child/Young Person?
Q21	How is the child/young person's participation evidenced?
Q21	How is the child/young person's participation evidenced? - Other (please specify - 300 characters limit)
Q22	Aside from signatures, within the Care Plan is there evidence of participation/contribution by the parent/family?
Q23	How is the participation of the parents/family evidenced?
Q23	How is the participation of the parents/family evidenced? - Other (please specify)
Q24	Has the PEP meeting been held?
Q25	Were the PEP details available on ICS/SWIFT?
Q26	Please select the reasons the PEP was not available on ICS from the following options:
Q26	Please select the reasons the PEP was not available on ICS from the following options: - Other (please specify)
Q27	Is section 7a of the Child/Young Person's PEP adequate? i.e. Does it identify the Child/Young Person's needs and is there an action plan to meet them?
Q28	Does the PEP show how the available funding streams, including the pupil premium grant, will be used to improve education outcomes?
Q29	Has the Health Assessment taken place?
Q30	Was the Health Plan available on ICS?
Q31	What was the reason the Health Plan was not on ICS?
	What was the reason the Health Plan was not on ICS? - Other (please specify - 300 characters limit)
Q32	On the Child's Health Assessment form (IMA-YP/RHA-YP) Health Recommendations for Young Persons Care Plan, is there an adequate health plan for the child as evidenced under section 11?
Q33	Having held the child's review are you satisfied that the Child/Young Person's overall needs are being met?
Q34	Why are the Childs/Young Person's needs not being met? - Open-Ended Response

Q35	Did the Child/Young Person participate in the review?
Q36	If the child/young person did not participate in the review why was this?
	If the child/young person did not participate in the review why was this? - Other (please specify - 300 characters limit)
Q37	Did the Child/Young Person attend their review?
Q38	What methods of contribution were used? - Child/Young Person spoke for themselves
Q38	What methods of contribution were used? - Consultation form
Q38	What methods of contribution were used? - Personalized written format
Q38	What methods of contribution were used? - Use of Email/Text
Q38	What methods of contribution were used? - Through Family Member
Q38	What methods of contribution were used? - Through Carer
Q38	What methods of contribution were used? - Through Advocate service
Q38	What methods of contribution were used? - No contribution given
Q38	What methods of contribution were used? - Other (please specify - 300 characters limit)
Q38	What methods of contribution were used? - Other (please specify - 300 characters limit)
Q39	Did you (IRO) meet privately face to face with the Child/Young Person prior to the commencement of the Statutory review?
Q40	Were any changes made, in respect of the review meeting, at the request of the Child/Young Person?
Q41	Please select any changes made from the following options: - Venue
Q41	Please select any changes made from the following options: - Time
Q41	Please select any changes made from the following options: - Date
Q41	Please select any changes made from the following options: - Self Chair
Q41	Please select any changes made from the following options: - Those invited
Q41	Please select any changes made from the following options: - Other (please specify - 300 characters limit)
Q41	Please select any changes made from the following options: - Other (please specify - 300 characters limit)
Q42	Has the Care Plan identified issues of equality and diversity?
	What are the issues of equality and diversity for this Child/Young Person and how have they been identified?
Q43	Please select all that are relevant and add any further under "Other" - Religion
	What are the issues of equality and diversity for this Child/Young Person and how have they been identified?
Q43	Please select all that are relevant and add any further under "Other" - Language
	What are the issues of equality and diversity for this Child/Young Person and how have they been identified?
Q43	Please select all that are relevant and add any further under "Other" - Culture
	What are the issues of equality and diversity for this Child/Young Person and how have they been identified?
Q43	Please select all that are relevant and add any further under "Other" - Gender

Q43	What are the issues of equality and diversity for this Child/Young Person and how have they been identified? Please select all that are relevant and add any further under "Other" - Sexuality
Q43	What are the issues of equality and diversity for this Child/Young Person and how have they been identified? Please select all that are relevant and add any further under "Other" - Disability
Q43	What are the issues of equality and diversity for this Child/Young Person and how have they been identified? Please select all that are relevant and add any further under "Other" - Race/Ethnicity
Q43	What are the issues of equality and diversity for this Child/Young Person and how have they been identified? Please select all that are relevant and add any further under "Other" - Other (please specify - 300 characters limit)
Q43	What are the issues of equality and diversity for this Child/Young Person and how have they been identified? Please select all that are relevant and add any further under "Other" - Other (please specify - 300 characters limit)
Q44	Are you satisfied that any needs arising from equality and diversity are being met?
Q44	Are you satisfied that any needs arising from equality and diversity are being met? - (if no please explain)