



# The role of Independent Reviewing Officers (IROs) in England

Helena Jelacic, Ivana la Valle and Di Hart, with Lisa Holmes from the Centre for Child and Family Research, Loughborough University

This NCB Research Summary presents the key findings from a study that was funded by the Nuffield Foundation and undertaken by a team from NCB Research Centre in partnership with Loughborough University. The aim of the study is to provide an evidence base about the way the Independent Reviewing Officer (IRO) role operates in order to inform future policy and practice.

The research involved: national surveys of IROs, their managers and Directors of Children Services (DCSs); analysis of administrative data on IROs' access to independent advice; an analysis of resources need for the IRO service; case studies of four local authorities, including analysis of care plans, interviews and focus groups with IROs, social workers, other key professionals and looked after children.

## Introduction

Independent Reviewing Officers (IROs) were introduced to represent the interests of looked after children following a number of cases where care plans had not been implemented, leading to harm. Their role was strengthened through the introduction of statutory guidance in April 2011 but there has been continuing scepticism about whether they are making enough difference to the quality of the service and whether their independence is compromised by being under local authority control.

The question of how the effectiveness of the IRO service can be measured is, however, complex. In their thematic inspection of the IRO role within

ten local authorities published in 2013, Ofsted suggested that IROs were still not making enough positive impact.

The House of Lords Committee on Adoption Reform (2013) recommended that it was time to employ IROs outside the local authority but the Government did not agree and are committed to making the role work within the current arrangements.

The challenges faced by IROs are even greater now than when statutory guidance was introduced in 2011. It is hoped that the evidence afforded by this study will inform the debate about how to maximise the effectiveness of the role to ensure that looked after children get the independent support they need and deserve.

## Creating the right context

The IRO<sup>1</sup> guidance makes it clear that an effective service requires IROs who have the right skills and experience, working within a supportive context. The findings indicated that most IROs had many years of relevant social work and management experience, and were respected by their colleagues because of their professional expertise.

Being paid at the same level as a team manager (as suggested by the guidance) was important for IROs in terms of their professional status, giving them the authority and professional standing required to challenge poor practice. The lower pay grade applied in some of the case study authorities did not make IROs less competent, but it impacted on their morale and indicated that the authority valued its IRO service less than other authorities where IROs were appointed at a higher level. It also led to recruitment and retention difficulties for IROs and it was argued that it constituted a threat to an authority's ability to provide an effective service.

This study shows that most (95%) IROs were directly employed by the local authority and the findings highlighted many benefits from this.

- It enabled IROs to have a good understanding of the local authority context, to build productive relationships with social work teams and encouraged information sharing and partnership working.
- It also meant that IROs were able to contribute to policy and practice improvement in the looked after children's service, which was particularly valued by senior managers.
- This contribution further raised their professional status and profile within the authority where they worked.

Although some may argue that being employed directly by the local authority does not allow IROs to work 'independently' of the organisation, participants described the true test of independence as IROs' ability to challenge the local authority on poor practice. The location of the service, whether within the local authority or outsourced, was not crucial as long as IROs recognised when they needed to challenge and were encouraged to do so.

Being employed by the local authority usually meant carrying out other duties not specified in the IRO guidance, including:

- chairing child protection conferences
- chairing looked after children's reviews
- conducting Regulation 33 visit.

Having to chair child protection conferences as well as looked after children's reviews was mostly, but not universally, seen as a benefit in providing continuity for children subject to a child protection plan who then become looked after. However, other duties, such as conducting Regulation 33<sup>2</sup> visits or foster carer reviews, were not always seen as appropriate for IROs. There were concerns that these activities could lead to a conflict of interest and compromise IROs' independence.

Even where IROs did not think that additional duties were in conflict with their primary role, high caseloads created pressure in choosing which tasks to prioritise, particularly when IROs were chairing child protection conferences. This reduced the time available for work on their cases and IROs expressed concern that looked after children will cease to be the priority. It was highlighted that a manageable workload was key if IROs are to meet the expectations set out in the guidance and it would be unfair to describe the role as failing if the problem really lies in the capacity available to fulfil it. This was a particular concern in the case studies with the highest case loads.

## Being child-centred

One of the most important aspects of the IROs' role, as described by all participants in the study, was to meaningfully engage with children and to remain child-centred in everything they do. Building a relationship with children was seen as crucial in terms of making sure the child's needs are met and being able to '*fight their corner*'.

However, the experiences of both children and professionals were variable: some IROs were very good at engaging with children in a meaningful and flexible way, conveying that they were genuinely interested in them and making sure their needs and views were at the fore-front

<sup>1</sup> Department for Children, Schools and Families (2010) *IRO Handbook - Statutory guidance for independent reviewing officers and local authorities on their functions in relation to case management and review for looked after children*. London: DCSF

<sup>2</sup> Regulation 33 visits involve quality assurance of children's homes.

but others were less successful in this. These differences in IRO performance were attributed largely to individual skills and attitudes, but other professionals also recognised the negative impact of high caseloads and conflicting priorities.

IROs need to demonstrate true commitment to looked after children in order for children to recognise the benefits of having an IRO.

- Children who reported that their IROs listened to them and respected their views also described their IROs as acting on their behalf to tackle concerns about the service.
- IROs also made a difference just by taking the time to explain to children what they had done in between reviews.
- Those who felt their IROs were not listening to them did not see how IROs could make a difference in their lives and, therefore, saw little point in telling them about their wishes and feelings.

## IROs and care planning

The research findings show that, in line with the 2011 IRO guidance, there was a clear and shared understanding that, as well as a child-centred approach, IROs need to have an ongoing engagement with a case to be able to properly quality assure the care planning process. However, practice varied considerably and alongside examples of good practice, reflecting very much the spirit of the guidance, there were examples of IROs struggling to be sufficiently visible and to leave the IRO 'footprint': the quality kite mark evidencing that adequate services were provided to meet a child's needs and support good outcomes.

The IRO Handbook provides clear guidance on IROs' role in and processes around the case review:

- what IROs should do to prepare for the meeting and support the child to be meaningfully involved
- what should happen at the meeting
- what are the immediate post-review actions.

This guidance was generally well understood by IRO and social work teams, but some IROs struggled to put it into practice. While a number of factors contributed to determining how effectively IROs could engage with the review process, time was certainly a key influence. Out

of the four local authorities involved in the study, in the authority with the lowest caseload, IROs estimated they had seven and half hours to carry out the review including immediate pre- and post-review tasks; in the authority with the highest caseload, IROs had four hours and ten minutes to carry out the same tasks.

When it comes to monitoring and influencing a case on an ongoing basis, a lack of prescription about the way this should be done within the national guidance was reflected in considerable variations in expectations of what IROs should do to 'keep on top of a case'. While IROs need to have some discretion in deciding the level of monitoring each case requires, it seems that the combination of limited (national and local) guidance and lack of time could undermine IROs' ability to meaningfully monitor and influence.

This situation was compounded by formal processes for raising issues and challenging poor practice that did not work particularly well and were 'culturally' not yet accepted by social work teams – who saw them as being more about judging their work rather than part of the checks and balances required to quality assure care plans.

The research findings suggest that processes to enable IROs to engage and influence cases require considerable fine tuning, with a national framework provided to support the development of local protocols. Furthermore, key to IROs' effectiveness in quality assuring care plans on an ongoing basis is the role played by senior managers, who need to provide a clear message that the IRO service is valued. One of the case study authorities, with manageable caseloads and a monthly report of IROs' concerns and challenges provided to and discussed with the Assistant Director, reflects the kind of support the IRO service needs from senior managers if it is to operate as intended by the IRO guidance.

While a number of implementation issues were identified by the research, the findings on how IROs and social workers operated together suggest that IROs are becoming a valuable resource to social work teams. IROs can help social workers to improve care planning and the services provided to children in care, complementing rather than duplicating their work. Where this is in place and IROs are quietly raising standards behind the scenes, the need for them to challenge poor practice is reduced.

## Quality assurance and support

The guidance clearly spells out the role of IRO managers and senior managers in ensuring the effectiveness of the IRO service. The study findings suggest that this guidance is inconsistently applied, primarily due to lack of time and resources. IRO managers seemed to rely mainly on information provided by IROs to judge their effectiveness or on general audits of cases which were not designed to generate feedback specifically on the IRO service.

More comprehensive quality assurance systems, such as collating feedback from children, families and other professionals, observing IRO practice, and regularly auditing IROs' recording, were not common, which raises a question mark on how effectively IROs' performance was monitored and quality assured.

IRO managers played an important role in providing both formal and informal support to IROs through regular supervision and ad hoc consultation. This was seen as crucial in ensuring that IROs felt supported in raising concerns about poor practice and making sure they stayed on top of the care planning process. IRO managers also made sure they involved IROs when planning their training and professional development.

IROs reported being only partially satisfied with the training on offer and identified a number of gaps. The findings also indicate that not all IROs were equipped with the right skills to engage with children, successfully carry out reviews or challenge poor practice and further training in these areas would be beneficial.

Senior managers were also critical in ensuring IROs felt supported and valued but their commitment was not always evident. The failure to deal with high caseloads and to provide effective mechanisms for dealing with concerns raised by IROs were seen as reflecting a lack of senior management commitment to ensuring the service operates as intended.

Access to external sources of support also varied greatly and the findings from our review of CAFCASS enquiries showed that there were deficiencies, such as the provision of independent legal advice or a dispute resolution protocol that worked. This meant that some IROs were turning to CAFCASS for advice on cases where this may

not be appropriate. Examples here included IROs resorting to using CAFCASS as a 'threat' where their complaints were being ignored or to resolve conflicts in professional opinion.

The study findings confirmed these gaps in support, particularly in making arrangements for IROs to have easy access to genuinely independent legal advice. This seemed to be poorly understood by local authorities, who often relied solely on the local authority's legal department, in contravention of the guidance. IROs need to have external sources of support to discuss cases, and to intervene where necessary. The best way to provide this support deserves further consideration.

## Does the IRO service make a difference?

Making sure that a child's care plan is reviewed in a timely fashion was perhaps seen as the area where IROs had the greatest impact. This was one of the reasons why the IRO service was created in the first place, and just because timely reviews could now be taken for granted in most cases, their role in ensuring this happens should not be underestimated.

IROs were also seen as having had an ongoing influence on cases, particularly in ensuring that the care planning process focused on permanency, was child centred and evidence based. However, respondents' accounts suggest that the extent of the impact was variable, affected by the barriers IROs were facing in operating as intended by the national guidance, as well as differences in individual performance.

IROs were recognised as contributing to improved support and services for looked after children mainly through their involvement in individual cases. Participants' accounts showed what a difference IROs could make when they operated as intended, but also, their limited ability to make a difference when the service was not implemented effectively.

Although examples were found of IROs having an influence at the more strategic level to improve a local authority's functioning as a corporate parent, this is an area of IROs' work that seems rather under-developed. Greater clarity is required about expectations, as well as the creation of structures and processes to enable them to have strategic influence.

When looking at the difference IROs made to children's lives, respondents had some understandable difficulties attributing any improvements in child outcomes specifically to IROs, given the range of services involved in supporting children. The fact that the IRO service has only recently been subject to strengthened guidance compounds this difficulty and it is probably too soon to establish if it has made a difference to children's outcomes. However, assessing the IRO contribution is important and thought should be given, both nationally and locally, as to how to assess if and how IROs make a difference to children's lives.

## Conclusions and recommendations

The findings of this study indicate that the IRO role in ensuring high quality care planning is yet to be fully realised. There is, however, consensus about the characteristics of an IRO service that are working well; the challenge is how to ensure that the theory is translated into practice.

The fundamental ingredients are:

- the importance of listening to children, and making sure their needs and rights are protected. This is the essence of the 'independence' that is crucial to success
- if there is a conflict of interests, the IRO must be on the side of the child.

The findings suggest that the factors enabling IROs to adopt a position of independent challenge are more complex than where the service 'sits'. Key elements that supported an independent approach seemed to be:

- professional status and respect, demonstrated both by resourcing the service properly and by openly giving IROs 'permission' to challenge
- IROs with the right skills, particularly the ability to communicate with children and young people, and to know how and when to challenge
- access to expert advice, including independent legal advice and opportunities for reflective practice
- dispute resolution protocols that work, from informal conversations to the escalation of cases to senior management
- child-centred IROs, who demonstrate their commitment to each child and work out the best way to seek their views

- having a focus on outcomes, and holding agencies to account for their contribution towards these rather than 'box-ticking'.

The study recommendations are targeted at three levels in recognition of the fact that improvement requires a multi-system approach. Although IROs do bear individual responsibility for the quality of their practice, they need to operate within a supportive culture.

### National level

Central government, national representatives of local government and agencies working together to:

- develop a consistent template for IRO annual reports
- lead a national debate about which additional duties are compatible with the IRO role and which constitute a conflict of interest
- ensure that Ofsted explicitly consider the effectiveness of local IRO services in improving outcomes for looked after children, and the local factors that are enabling or hindering their contribution
- consider how best to resolve disputes where internal processes have been exhausted, including the possibility of an independent arbitration service for disputes that do not require CAFCASS involvement
- develop a national set of standards for IROs, and their need for professional development in order to meet them.

### Local Authority level

Each Director of Children's Services to promote a culture demonstrating their support for the IRO service by:

- setting out the expectations of the role and disseminating this information to all those involved in services for looked after children, including children and young people
- creating systems to give IROs a voice
- specifying the process for producing the IRO Annual report, including who will be involved in contributing to it, how it will be responded to and how it will be used to contribute to improved outcomes for looked after children
- undertaking a review of how their dispute resolution processes are working, including the 'informal' stage and the involvement of other agencies.

- reviewing and strengthening quality assurance processes in accordance with the IRO handbook, including feedback from social workers and children, direct observation of IRO practice and opportunities for reflection
- assessing the training and development needs of IROs and IRO managers and commissioning role specific training/ support
- undertaking an analysis of the time required by IROs to undertake their duties, in order to then plan the number of IROs they need in order to provide the standard of service required by the IRO Handbook.

## IRO Service level

IRO teams and individual IROs to:

- take personal responsibility for ensuring that all children understand the IRO role (recording how they have done this). They should also negotiate with individual children on their caseload how they will maintain contact with each other and confirm this in writing to the child and/or carer
- where they perceive there to be barriers to their ability to fulfil their role, or systemic failures in the service to looked after children in their authority, raise this formally with senior managers
- clarify their method for monitoring cases, including how this activity will be recorded
- undertake a review of all additional tasks to establish whether they compromise IRO independence – or capacity – and act on their findings.

The role of the IRO is about to become more challenging as the numbers of looked after children increase and the Children and Families Act 2014 introduces new arrangements for care proceedings. Scrutiny by the IRO will be crucial to ensure that the quality of care plans is not compromised by these changes. Where the role works well, it can make a real difference to children's lives and good practice needs to be shared – and celebrated.



### NCB Research Centre

8 Wakley Street  
London EC1V 7QE

tel 020 7843 6073  
email [research@ncb.org.uk](mailto:research@ncb.org.uk)

Registered Charity Number  
258825

### Useful numbers

Book Sales: 0845 458 9910  
Conferences and Training: 020 7843 6041  
Fundraising: 020 7843 6329  
Information Centre: 020 7843 6008  
Membership: 020 7843 6080  
Young NCB: 020 7843 6099

[www.ncb.org.uk](http://www.ncb.org.uk)