

## Children's Services

# ANNUAL INDEPENDENT REVIEWING OFFICERS (IRO) REPORT

## MEDWAY IRO SERVICE

<b>Portfolio Holder</b>	Cllr Adam Price
<b>Report from</b>	Dr Lee-Anne Farach, Director of People – Children and Adults Services.
<b>Author</b>	Teresa DeVito, Head of Service Safeguarding and Quality Assurance- Children and Adults Services.  Amanda Harris, Service Manager, IRO Service- Children and Adult Services.
<b>Date</b>	30.05.2025

## 1. SUMMARY

The purpose of this report is to provide an account of the IRO service activity for the period 1st April 2024 to 31st March 2025, to consider the profile of the Local Authority cohort of children cared for, and trends and themes in how the Local Authority has discharged their duties for these children.

The IRO role is set within statutory framework of the IRO Handbook (2010), <https://www.gov.uk/government/publications/independent-reviewing-officers-handbook> linked to the revised Care Planning Regulations and Guidance, established in the Children and Young People's Act 2008, introduced in April 2011.

The IRO has a key independent role in relation to the promotion and quality of care planning for Children in Care, and for challenging drift and delay in children's care and permanence plans. The service is an independent one, regulated through statute, to effectively provide this challenge, sited in the Local Authority. The IRO Handbook (2010) establishes the need for formal reporting of the service to the Council and is a published report on the council's website. The Independent Reviewing Officer (herein referred to as the IRO) post is a statutory one, supported by legislation.

IROs build relationships with children, young people, and their professional and family networks to ensure effective decision making and care planning by the Local Authority and its partners, to establish the most positive outcomes for children the Local Authority care for.

The Handbook sets out the statutory requirement for an IRO service to produce an annual report and the legal context and the purpose of the service. In brief the functions and requirements of the IRO and the service are:

- That all children being cared for should have an IRO who should remain a consistent figure in their (and if also in care, their siblings' lives), during their journey through care who they see at their reviews, in between them and who they know how to contact.
- That the IRO will chair (or help the child to chair) their Child in Care Review meetings (within twenty working days of them entering care, within 3 months after, and every 6 months thereafter).
- The promotion of the voice of the child or young person being cared for in their care plan, to include their views about their permanence options, and their day-to-day care arrangements.
- To ensure that plans made by the Local Authority for children they care for are based on current, detailed, and informed assessments, identifying their needs and effective interventions and services.

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- To meet and consult with children and young people cared for, about their review meetings and their care plan, enabling them to authentically contribute and ensure that they understand the implications of any changes and how to access an advocate to help them. That they can make a formal complaint and seek their own legal advice regarding their care plans and how the Local Authority is discharging their duties.
  - To identify, and when necessary, take action to prevent any unnecessary delay in care and permanence planning for children and the delivery of services to them; provide challenge and support to social workers, managers, and senior managers to ensure these are timely. To act to improve the daily needs of children from those who are caring for them.
  - To hold an overview of the Local Authority's performance, as a corporate parent, and report on themes, trends, and any gaps in their duties to children they care for.
  - To use an effective means of challenging the Local Authority including, a Dispute Resolution Procedure, with a right once these are exhausted, to convey concerns to CAFCASS, and to access their own independent legal advice. This includes powers to ask the Local Authority to suspend any planned moves for children, where there are disputes.

The IRO service is well-established and supports Medway in providing good outcomes for children and young people who are cared for. The service takes a collaborative approach, understanding that the role and functions of the IRO will contribute to achieving good outcomes for children. The IRO service provides high support and challenge to the Local Authority in respect of its corporate parenting and safeguarding duties towards children and young people they care for.

## **2. IRO SERVICE**

The IRO service is made up of 8.6 IROs. The Fostering Independent Reviewing Officer (FIRO 1x F/T post) is managed in the Service and provides extra IRO capacity for up to 12 additional children. During this year 2 permanent IROs left the service in August 2024 and January 2025. An additional IRO post was added to the established posts this year, to meet the needs of Unaccompanied Asylum-Seeking Children. IROs are qualified, experienced social workers, many of whom have been previously employed in a management role; their role is commensurate with a Team Manager role in children's social care.

The IRO group enjoys diverse representation regarding ethnicity and gender. Across the year, interview panels for IROs, included care experienced young people, and recruitment to IRO posts did not pose any difficulties, despite some challenges seen across the wider southeast region.

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This year the IRO service continued to perform well. All children's statutory review meetings were held within timescales and children continued to be allocated a named IRO within 72 hours of the service being notified they had entered care. Children and young people were routinely able to contribute their views to their reviews, with maintained high participation and attendance at review meetings taking place above the local targets. The service continued to help children and young people to chair their meetings for child led participation and chairing opportunities. IRO's further developed their links with services to support social workers and teams. The Dispute Resolution and Escalation process has continued to work successfully to address some difficult care planning issues for some children, as it did last year.

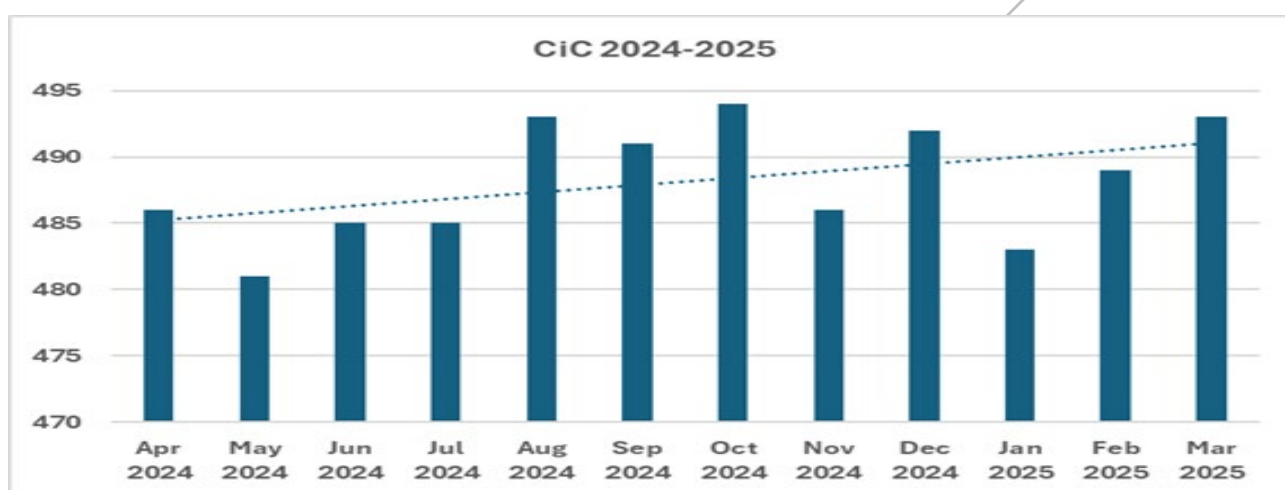
Children continue to receive a personalised account of their review meeting, from their IROs, in the form of a letter, which explains their care plan, comments on the care they are being offered, noting resulting actions and timescales. These letters are written compassionately and using accessible language and the preferred terms of children. This year IROs have worked hard to complete these records within 15 days, sending these electronically, to the other participants. Feedback suggests that children experience this personalised letter as meaningful. IROs continue with the work across Children's Social Care, to promote records to be more child focused and written more directly to the child or young person in all their other recordings on children's files.

### **3. CHILDREN IN CARE, DATA AND TRENDS**

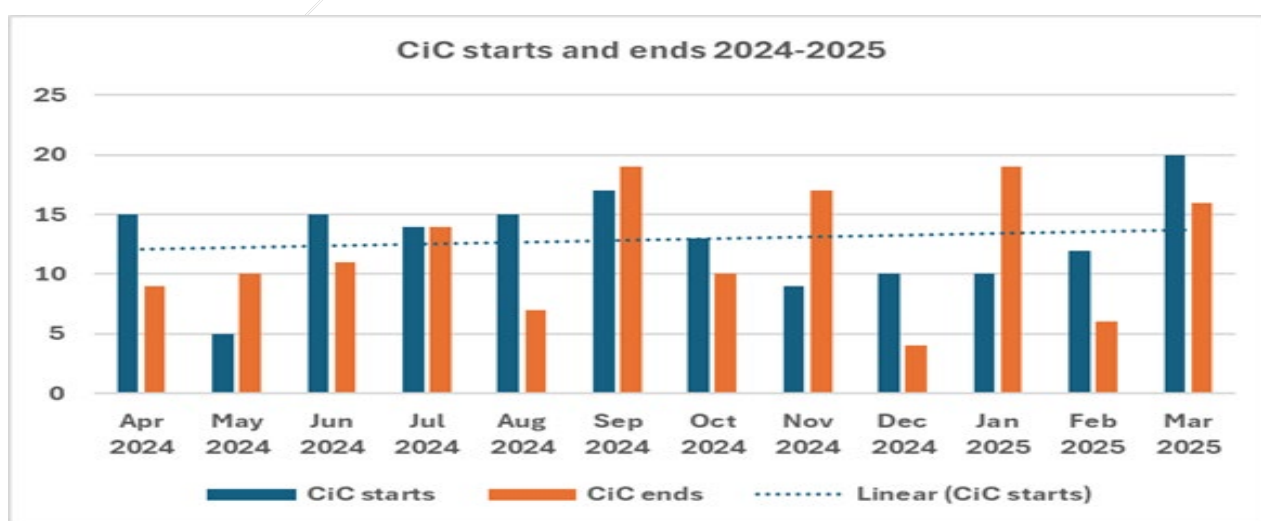
Main trends:

- 298 Care Orders were in place for children at the start of the year and at the end of the year 300, in line with last years rates.
- ICOs stood at 108 at the start of the year and lower at 95 at the end, slightly lower numbers than last year.
- 20 children were subject to Placement Orders (with a plan for adoption) at the start of the year with 28 at the end of the year; 15 children were adopted this year.
- Children accommodated voluntarily, through use of S20s, which included unaccompanied asylum-seeking children, stood at 58 at the start of the year and 65 at the end, an increase from last year in line with more unaccompanied asylum children entering care through the National Transfer Scheme, with capacity for this to increase further next year.
- IRO caseloads remained stable throughout the year with the average caseload sitting at approximately 60 cases and within the recommended levels.
- 163/493 or 33% of children were placed over 20 miles away from Medway having increased from 28% to 31% in the last 2 years. Children being placed further away impacts on IRO's travelling time. This year one Local Child Safeguarding Practice Review (LCSPR) was in relation to a child placed out of the area.
- A greater number of boys were cared for during the year; in April 2024, this equated to 294/486 or 60% of the cohort with 192/486 or 40% being girls. By March 2025, this was 298/493 or of boys and 191/493 of girls, representing the same percentages.

- There was no reporting for children who classify themselves as non-binary.
- By March 2025, the largest age group in care, were those aged 10–15 years 198 (a decrease from last year from 208), 16–17-year-olds sat at 185 and combined these older children represent 406/496 or 81% of the cohort. Children aged 5 to 9 years sat at 83 and children aged 0-4 at 84 (representing a smaller cohort of the under 9s).
- 155 children entered care this year a decrease from last year of 195 children.
- Most children left care by turning 18 years of age or by returning to live with their families at the conclusion of care proceedings (103/141 or 73%).
- There are no disabled children currently in care because of a short break arrangement under S20 arrangements (or reg 48 requirements) or any Children in Care being reviewed under any shared care arrangements.



The above table illustrates the overall total of children in care, trending upwards.

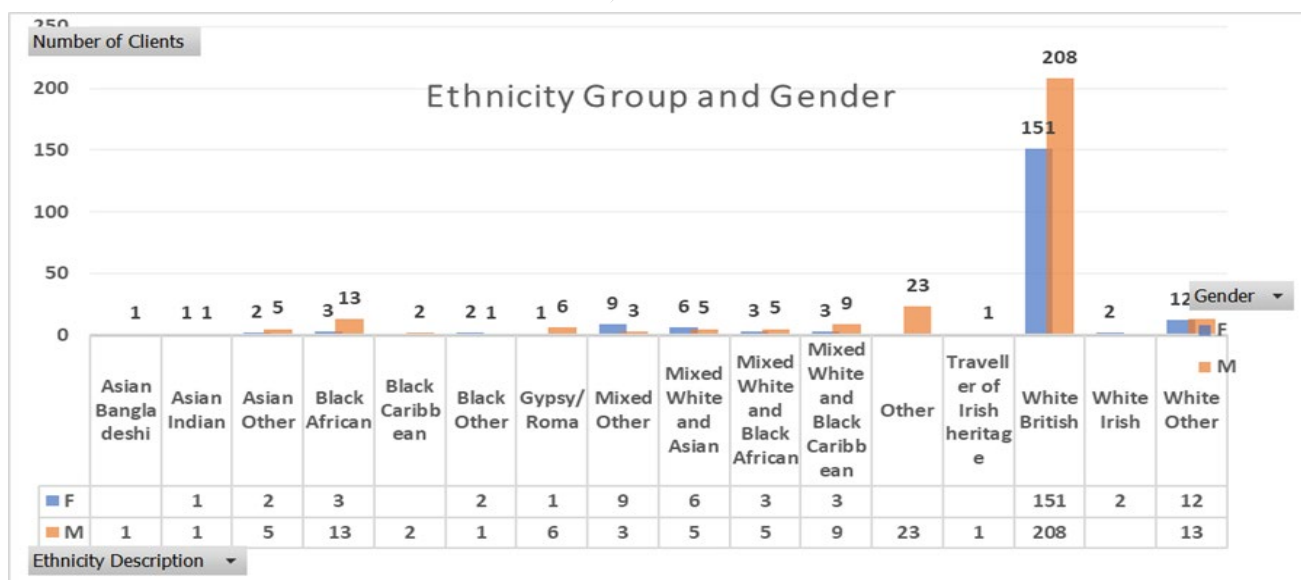




The above 2 tables illustrate the upward trends over the last year of children entering and leaving care, a change from last year's trend of less children entering care than leaving.

In Medway, the rate of children in care in April 2024 was 76% per 10.000 and at the year-end in March 2025 sat at 74.1% per 10.000. Medway remained higher than the national level rates and statistical neighbours (who sat slightly below the national level), like last year.

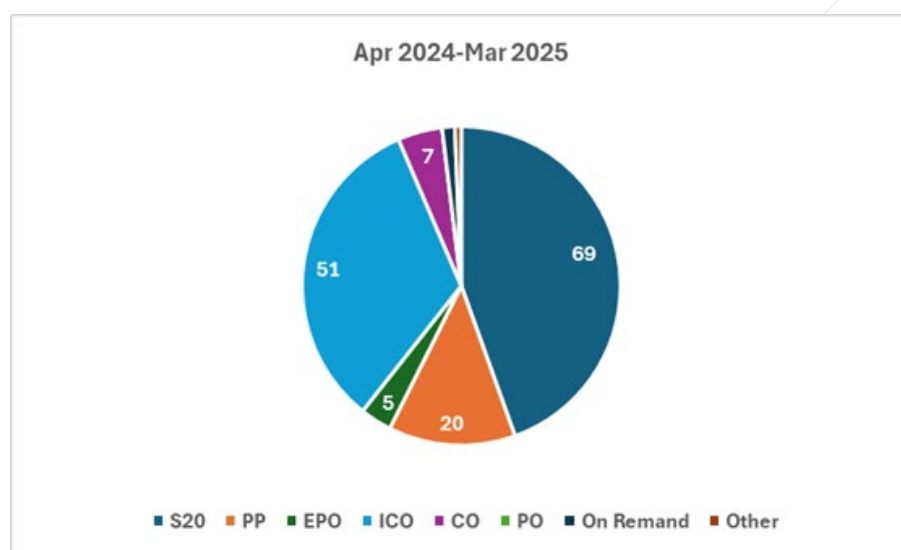
The ethnicity of children in care at the end of the year was



Children of Asian/Chinese/Mixed White and Asian heritage accounted for 21/493 or 4.2% of the Children in Care, a small increase from last year from 3.7%. Children of Black African/Black Caribbean/Mixed White and Black African/Mixed White and Black Caribbean/Black other accounted for 42/493 or 8.5% a decrease from 12.1% last year.

Unaccompanied asylum-seeking children represented 40/493 or 8.1% an increase of 3.7% from the previous year; 23 of these children, were recorded as from 'other ethnic group' seen as 'other' representing their Arab heritage (mainly from Afghanistan). Of the above groups the overall number of children with an ethnicity which was not considered white British, Irish or 'White Other, represented 94/493 or 19% like 20.3%, last year.

Most children legally entered care through either the use of S20, a voluntary accommodation (69/155 or 44%) which, as last year, included unaccompanied asylum-seeking children, and by Interim Care Orders (51/155 or 35% a rise from last year's 19% and back to the year before at the same rate). The largest age group in these cohorts were aged 10-17 years. The use of Police Protection sat at 20/155 or 12.9% (less than last year). A few young people entered care having been criminally remanded into Medway's care, either into the secure criminal estate (e.g., to Youth Offending Institutions or Secure Training Centres) or were remanded to Local Authority Accommodation, after being refused bail, 7 children, representing 2 sibling groups, entered care at the conclusion of care proceedings: a slight rise from last year.



The above table represents the legal basis of children entering care last year.

The main reasons children left care last year were when they turned 18 years of age and when they remained with or **returned to their parents usually after care proceedings concluded**. Given the numbers who remained with parents, it would be useful to undertake a scope to review that the right services and interventions were offered to these children and their families prior to care proceedings, and if greater frontloading of work prior to care proceedings, may have enabled less children to have entered care and avoided interim care orders being made, tying this up with how many children left care with a final supervision order determination at the end of proceedings.



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Last year 60 children left care at the age of 18 years, which included a few unaccompanied asylum-seeking young people age assessed as over the age of 18 who were collected by the home office, a few remained with their parents in line with their plans, a few remained with foster carers under 'Staying Put' arrangements, a few children transferred to adult services in line with their significant care needs. The rest of the 18-year-olds remained in appropriate accommodation with varying levels of support until their housing options were finalised.

18 children left care because of the courts awarding SGOs, (Special Guardianship Orders) to connected persons in their families, and 43 children remained with their parents at the end of care proceedings (usually by agreement, except for 4 children), 13 children left because of being adopted, 5 exited to live with a person with no parental responsibility.

#### 4. PRACTICE IMPROVEMENT- THEMES

Last year there was a significant improvement in Medway's use of **unregistered and unregulated care arrangements** for older children, declining by March 2025, to 5 young people (4 aged 16 or 15 years and 1 aged 17 years), from March 2024 where there were 16 children in such arrangements. This was an achievement by Medway's commissioning teams and provider services, in supporting the social work teams to ensure the best care arrangements for these vulnerable older children. IROs regularly monitor these care arrangements by their weekly oversight, and will next year hold these children's reviews (and children subject to Deprivation of Liberty Orders, herein referred to as DOLs, who may be in such settings), three monthly, in line with emerging practice in the southeast IRO services.

Medway's registered children's home Eden House, opened in October 2024, for up to 5 children, (with a plan for 6 children in time). In the medium term, Medway plans to open another, in the next 18 months plus, for learning disabled and neurodiverse children. This follows a national trend by Local Authorities.

Last year Medway's fostering service implemented a fostering modernisation plan which focused on recruitment and retention of foster carers and included the roll out of the evidence based '**Mockingbird**' model to improve foster care retention. IROs have seen this model in action and its benefits for foster carers; one IRO supported the Mockingbird's model being embedded in Medway and overall IROs remain positive about its impact and support for carers and children we care for. The fostering service's vision of embedding a culture of therapeutic and trauma informed parenting, is to strengthen the capacity and quality of care of in-house carers.

At the end of this year **the percentage of children in long term foster care**, defined as 'the percentage of children with long-term fostering as a plan, where the child is in a long-term fostering placement' stood below the target of 70% at 51%, was lower than last year's 54%, and the year before 63%, showing a downward trend, suggestive of the need to consider a response to this across the system. Local and national barriers include the lack of sufficiency of care placements (fostering and residential) and may include the strengthening of social



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work teams understanding of initial matching work. There should be a greater emphasis on searching for care arrangements which are better equipped to meet children's-medium- and long-term needs. As of last year, some children's care arrangements broke down because of carers not recognising or understanding a range of complex needs well enough, a lack of a trauma informed approaches being taken by carers and the network, and when school exclusions occurred, these also weakened foster carers abilities to manage, on a day-to-day basis.

The number of children under 16 years who have been with the same carers for 2.5 years or more has reduced to 61% from last year's 63%, (and the year before from 67%) and is lower than the stretch target of 75%. It is lower than statistical neighbours (at 67%) and national rates (at 68%) like last year. Children with three or more care arrangements sat at 14%, higher than statistical neighbours at 11% and national rates of 10%.

This year the Corporate Parenting Service recruited a **permanence lead worker**, with the support of an Interim Service Manager, to focus on all areas of permanence and tracking of children's outcomes, where permanence needed to be achieved. This included matching work at the time of placing, best identification of long-term matches by social work teams, supporting the professional network to understand and best respond to their short, medium, and long-term needs, supporting foster carers understand best responses to childhood trauma and neglect. Initial and review permanence meetings are now held regularly and involve the wider stakeholders and partner agencies, which will lead to better planning and realistic plans, being owned by the network. The impact of this post and the strengthening of permanence work from early permanence through to older children being cared for, remains an improvement area, particularly in the early consideration and recognition of children's needs, when they enter care and as they emerge. Next year IROs will alert the permanent lead worker to reviews where children have had 2 placement moves so some thought and plans can be considered to reduce the risk of further placement breakdowns.

From September 2024 children who had **enjoyed a relationship with the same social worker for 12 months**, had dropped to below 30% ending the year at 23%, showing the considerable challenges in retaining social work frontline staff and impact for offering children in care longer lasting social work relationships. This adds, for some children, delay in progression of their care plans and them having to re-establish relationships and tell their stories over again, something which some report as off putting. This is not unique to Medway and replicates some similar trends across the southeast and nationally.

IROs continued to ask about the main relationships children have formed in care, and how to best use these in care planning, in line with the policy position of 'Stable Homes Built on Love'

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(2023) which aspires to ensure children leaving care will have 2 enduring lifetime relationships when they leave care.<sup>1</sup>

By the end of the year, **national adoption rates of those coming forward to be assessed as adopters had fallen**, with national research being undertaken to consider main factors. The adoption fund has been cut for adopters next year by £2,000.00 per annum. This remains a significant challenge nationally as to whether all plans for all children with a placement order and a plan for adoption will ultimately be able to be implemented; such plans will need regular timely review and analysis to avoid drift for these children.

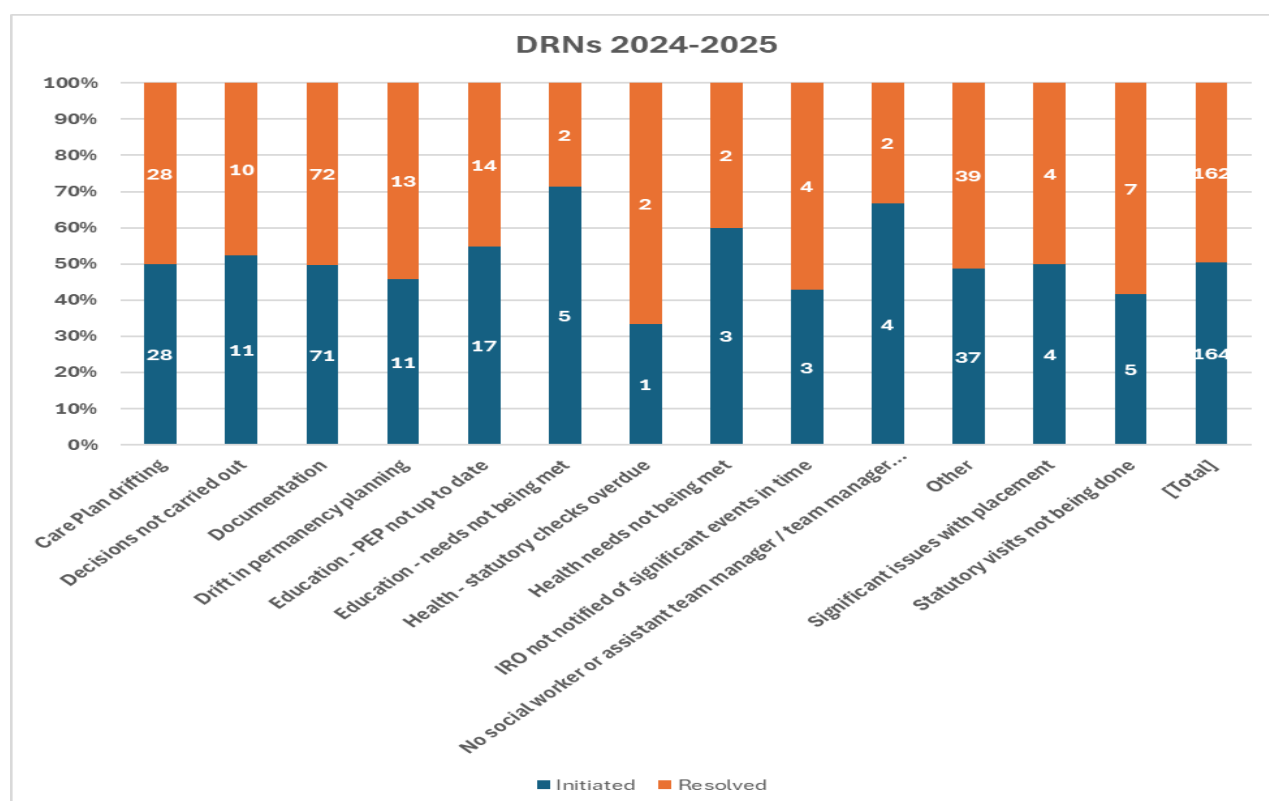
IROs continued to ask for the progression of **life story work and work to help children understand why they have experienced moves in care**, by written explanations and in words and pictures. Life letters for children in care have been a focus this year from the services, with deeper level life story work (explanations and children being helped to understand these explanations alongside information being shared with them) needing further development for some children. IRO's have raised the timing and quality of life story work for children, and this will be an increased focus of IRO service planning for the year ahead.

IROs continued to use the **Dispute Resolution Notifications (DRNs)** which for next year have been re-named Learning and Accountability Notifications (LANs, in line with Medway's Quality Assurance Framework). A key role of the IRO is to raise issues affecting a child's care with the social work service where, for example, performance issues, care planning and resources are affecting the child or young person's plans progressing, and their needs being met. There is an established Dispute Resolution process available in Medway's procedures and practice, which was updated this year by the IRO service manager. IROs seek resolutions informally through collaborative dialogue, with the social worker and team manager, before and at each stage of the procedure, but if no resolution is achieved the dispute is escalated to the attention of senior managers.

There were more DRNs raised and resolved by IROs during this year, with 164 initiated, (from last year's 117) and 162 resolved (from last year's 114), driving improved practice, and accountability in the practice system; resolved DRNs accounting for previously initiated DRNs. The majority of DRNs were raised at stage 1, with Team Managers, and resolved quickly, with some, for more serious issues, raised at stage 2 with Service Managers; one group of 3 siblings was raised a stage 3 with the Head of Service regarding drift in their care planning. As in previous years the main category raised was for absent or late social work reports, (documentation) with these not being shared with IROs, children and young people, before their reviews, and for the 'other' category, representative of several aspects of practice which needed to be addressed or more complex issues. Drifts in care plans and permanence planning together represented a theme needing to improve for several children.

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<sup>1</sup> Dfe (2023) Children's Social Care: Stable Homes Built on Love



**Quarterly reporting of DRNs**, and second review dip samples' main findings are included in the Practice Development Service quarterly report which is scrutinised by the children's services management team (CSMT) and shared with children's services via Quality Assurance, Performance Improvement Board (QAPIB). With any themes arising from DRN's considered as part of the thematic audit plan for the following year.

At the end of the year, and in quarterly reporting, IROs noted a **variation in the written quality of the care plans**, seen in social work reports for review meetings and a lack of team management and assistant team manager quality assurance, (as opposed to pathway plans for those aged 16 years plus). In Medway, children's **care plans are not recorded as a separate document**, which can be shared with partners and children and sometimes there was evidence that care plans and actions to improve them were better recorded in the IRO letters to children. This has added to the difficulties in streamlining care plans for children and young people with other plans, ensuring one cohesive plan, where all their aims translate to desired outcomes with time scaled actions, to achieve them.

**IROs continued to track** their midway reviews, IRO visits to children, IRO pre-discussions for reviews with children's social workers, Dispute Resolution Notifications (DRNs), and 'signs of success' they noticed in social work teams' practice. IROs continued to peer review their letters to children, finding this helpful in their own learning and development IRO 'footprint' on children's files is evident, and being maintained, like last year. This year the service continued to embed midway reviews, setting these at reviews, and usually involving a visit to

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the child as a way of monitoring the performance of social work teams in progressing children's care plans. Monitoring forms post reviews are used, to help IROs monitor the performance of the authority. The use of these in Medway will be reviewed, noting that some authorities have started to move away from using them in the southeast area, and in line with overall practice system improvement and increased IRO midway monitoring activity.

IROs actively support participation events with children and sit on the participation corporate parenting group. They encourage, and take children to such events, and encourage them to participate in Medway Children and Young People's Council groups. They help children cared for by Medway to use the 'Mind of my Own' app and use it themselves to stay in touch with children, as well as using 'Whats App' messaging, texts, video, phone calls, e-mails, and visits to see children between reviews.

The established systems to support children and young people to be fully consulted and lead on the location, attendance, and timing of their review meetings, continues as in other years. Work to support children and young people to chair their review meetings will need further emphasis next year, along with establishing IRO Profiles and making these accessible to their children and young people.

## **5. IRO IMPACT**

Quality assurance activity takes place within the IRO service. All second statutory reviews are dip sampled quarterly. Second reviews are where permanence options for children should be in place and any gaps in planning are identified. IRO's will hold conversations with teams to ensure practice standards and learning are in place, with any remedial actions agreed and monitored. The use of the IRO dip sampling has also provided clarity on permanence planning, and support for practitioners.

IROs make sure that the right legal status of the child remains appropriate, for their care plan. IROs must review children's plans for court to see all evidence the local authority relies on when forming their plans and will record their views or 'footprint' in social work statements and final care plans. This year there has been a few occasions where final care plans in court were filed without IRO oversight and appropriate challenge, and some challenge from social workers and services about this legitimacy. IROs speak regularly to children's Guardian's (appointed to represent children in their care proceedings) and can be called on in family proceedings to give their views. IROs must have direct access to Independent legal advice to enable them to effectively challenge; this has continued to be in place for IROs this year. IROs can, if all disputes are exhausted, refer to CAFCASS directly; this did not happen last year. Quarterly meetings with local Cafcass service leads have continued, although these weakened with changes in Cafcass leadership, with plans to strengthen this next year.

This year IROs started to scrutinise adoption support plans, and considered national adoption messages, and a move to greater open adoption, in children's plans. IROs have emphasised the need for social work teams to be more rigorous in understanding family relationships, and

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messages from adopted children that they may need to maintain a level of contact with older birth relatives during their childhood. This will remain a focus next year.

Regular quarterly meetings with the Looked After Children designated nursing team managers, takes place with the IRO service manager. At the end of last year purposeful discussions and challenge about the practice of initial health assessments not being undertaken when children are in hospital took place, leading to a change in practice from the designated nursing team. Community and hospital paediatricians, now collaborate to ensure these are undertaken in the hospital, if necessary.

IROs continued to offer mapping work, part of Medway's 'Signs of Safety' preferred practice model, to teams, particularly in relation to complex work, and IRO's remain linked to specific service areas assisting managers and social workers with all things related to care planning for children in care. IROs worked with the Child Protection Chairs service and the Practice Development service, to support staff and plan any joint work to promote practice improvement.

The IRO Service Manager continued to attend the national and southeast regions IRO Managers group (NIROMP and SEIROM) to share local and national successes, challenges and learning in IRO services. In relation to practice, some parts of the southeast region have started to develop a defined non statutory IRO, consent based offer to care leavers, for at least 6 months post their 18<sup>th</sup> birthdays, something the IROs in Medway support; scoping and initial conversations are planned next year to take this forward and see if this is something which may benefit Medway's care leavers and be welcomed by the services.

The IRO Service Manager sits on key panels, in Medway, and is regularly invited to service specific panels tracking and advising on planned outcomes for children. They are also responsible for chairing all secure accommodation reviews (SAR) for any child placed into secure accommodation, on welfare grounds, through the family courts, and a time limited Secure Order. The lack of good nationally available care arrangements (children's homes) which can respond well to children with complex needs, utilising a trauma informed approach and an understanding of their psychiatric conditions remains a national problem, regarding insufficiency, despite plans from the care review <sup>2</sup>(2022) and national fostering reforms to ensure these are developed.

Individual examples of IROs making a difference for children included the following:

- **Reunification work-** several IROs ensured that parents, who had made necessary changes, and other family members (grandparents, aunts, and uncles) were considered to care for their children when frequent moves and disruptions to children's care arrangements had taken place.

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<sup>2</sup> MacAlister J (2022) Independent Review of children's social care final report (Dfe)

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- **Recommendations for adoption of older children-** IROs recommended adoption plans for several children last year, including disabled and older children, which were achieved.
  - **Life story work.** IROs continued to ask for this to be completed for children, and to include reasons for changes of care arrangements. They have supported these being compassionately explained to them and in a non-blaming manner. This has, at times, been resisted by some foster carers, so IROs have helped them to understand its importance. This has included helping children process significant bereavements, their parent's complex histories, reasons why they came into care, and why siblings were separated in care.
  - **Cultural needs being met.** IROs have supported children placed trans racially to settle and to help carers meet children's basic needs (skincare and haircare).
  - **ASD/ADHD assessments being progressed,** by IROs supporting the teams to apply for these, through using the 'right to choose' health pathways, which this year, has been more successful.
  - **Promoting children remained connected.** IROs promote sibling relationships, sometimes taking older adult siblings to visit younger ones in care, when visiting themselves, ensuring their continuity of relationship, and continued support from Medway. IROs have ensured parent's circumstances have been re-assessed, leading to increased family time with their parents as children mature.
  - **Increasing safety and recognising danger.** IROs continued to ask that teams apply to the Court of Protection for disabled children.
  - **Challenging drift and delay in care planning.** IROs helped social workers model good practice, in care proceedings, so that parents had full written information about the local authorities plans, to avoid drift and delay. At times this involved going out with social workers and helping them collate information to hand to parents and evidencing their attempts to see parents.
  - **Advocacy.** IROs supported family members use children's preferred names noticing relationships improved once these changes took place.
  - **Safeguarding.** IROs continued to challenge worrying family time arrangements made by the social work teams, for unassessed family members, resulting in the proposals ending and changing to safer assessed ones.
  - **Challenge to assessments and plans in care proceedings.** IROs successfully challenged reunification planning proposed in care proceedings, in their views to court, and in discussion with the Children's Guardians, leading to shorter plans and more timely decision making for children. IROs continued to note gaps in some specialist assessments before the courts and made sure these were addressed, leading to increased safety in assessment outcomes and decision making.
  - **Direct work.** IROs have helped young people understand their statements and concerns about their foster carers care, contributed to their scrutiny and decisions about their fostering regulation. Offering them legitimacy, noting some children were then able to re-form trusting relationship with other foster carers. IROs have helped children to write down questions for their reviews, holding participants to account.



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## 6. IRO SERVICE DEVELOPMENT FOR 2025- 2026

This Annual Report identifies several service priorities that will be taken forward in the year 2024/25.

- Collaborate with teams to develop and improve children's life story work.
- Review children subject to DOLs and in unregulated care arrangements three monthly.
- Children's care Plans- implement quality assurance activities to help service improvement, to include the streamlining of other plans such as EHCP plans, through quarterly activity, during Q2-Q4 (July 2025 – March 2026). Support work to develop care plans for children in care, aged under 16 years and under.
- Scope an IRO post 18-year offer and to discuss with senior managers by September 2025
- Consider publishing a child friendly version of this plan, co-produced with children, by September 2025.
- Continue to scrutinise Adoption Support Plans, supporting greater open adoption.
- The timing and quality of life story work for children, will be an increased focus of IRO service planning for next year.
- Refresh how IROs help young people to chair or steer their review meetings.
- Further develop IRO profiles, making these accessible to their children and young people.

## 7. CONCLUSIONS

There are several strengths noted in how Medway is meeting its duties to children they care for. Permanence planning panels and review meetings are embedded in services and are timelier; there has been a continued drive for all ages of children to have permanent options planned by the local authority. The permanence lead role in the corporate parenting service will strengthen this work in ensuring these plans are owned by partners and stakeholders. Older children in 'unregulated' care settings, receive a robust offer until appropriate care settings are identified which IROs help to monitor.

IROs consider that the 'Mockingbird' model has been a positive support for children we care for and their carers and welcome its planned extension.

Statutory reviews have continued to be timely; children subject to DOL orders and placed in unregulated care arrangements, will be reviewed three monthly next year.

Care plans for children under the age of 16 are less developed in recording, and remain an area to improve, ideally moving to a standalone care plan, which can be shared and recorded in family and child friendly language, able to be shared with other local authorities and partner agencies, and will integrate the main aims of other plans (education, remand)



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Further work should consider whether an increased frontloading of assessments in PLO, and earlier interventions, may help families maintain children at home and reduce the need for care proceedings.

Signed: Amanda Harris                      Date: 31<sup>st</sup> May 2025  
(Service Manager IRO Service)

Signed: ..... Date: .....  
(Director, Children's Services)

Signed: ..... Date: .....  
(Portfolio Holder for Children's Services - Lead Member)

