

Independent Review Mechanism (Adoption and Fostering)

Annual Report 2009/10

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Executive summary

- The extended Independent Review Mechanism (IRM) Adoption and Fostering was set up by law¹ on 1 April 2009 to provide an independent review on the question of suitability for prospective and existing adopters and foster carers. It is operated by BAAF on behalf of the Department for Education.
- The IRM accepted 91 applications from 1 April 2009 to 31 March 2010. Of these, 14 were adoption cases and 77 were fostering cases. This represented over five times the yearly average of the IRM Adoption, which operated from 2004.
- The adoption cases involved suitability to adopt, including a specific child, brief assessments and withdrawal of approval to adopt.
- The fostering cases included initial approval of suitability, including that of family and friends carers, change of terms of approval and termination of approval to foster.
- The majority of all applications (59) related to a Qualifying Determination (QD) to terminate approval to foster.
- In its first year the IRM heard 56 cases. These comprised 11 adoption cases and 45 fostering cases. Three cases were withdrawn.
- In the fostering cases, the IRM panel recommended suitability to foster in 20 out of the 45 cases; the fostering service provider agreed in 13 of these cases and the foster carers remained approved.
- In the adoption cases, the IRM panel recommended suitability to adopt or completion of the report in six cases, and the adoption agency agreed in four of these cases.
- The main reasons for the QD in adoption cases related to the ability of the applicants to work with the agency and understand the needs of a looked after child, followed by lack of emotional resilience, although medical issues have also been significant.
- In the fostering cases, the predominant reasons given for the QD related to risk factors and allegations of abuse, but also in many cases there was concern about the ability of the applicant to work with the provider.
- There is evidence of excellent practice, but key concerns to emerge from the IRM panels have included lack of evidence to support decision making by agencies and providers; the need for robust risk assessment; and the disruption of placements.

Introduction

The new extended IRM Adoption and Fostering became operational on 1 April 2009 and is operated by BAAF on behalf of the Department for Education. A consistent policy aim on the part of the Secretary of State has been to increase public confidence in the approvals process to encourage more people to come forward to adopt and to foster some of the most vulnerable children in our society. One important method of achieving this policy aim has been the introduction of measures to increase the transparency and sense of fairness surrounding the assessment and approval processes in adoption and fostering.

The remit of the IRM has gradually extended since it began in 2004, when it covered adoption cases only (suitability to adopt), to 2006, when it was extended to deal with cases relating to the disclosure or non-disclosure of protected information from adoption records, to 2009, with the inclusion of suitability to foster.

The option of applying for an independent review of their case is available to:

- prospective adopters whom their adoption agency (agency) considers unsuitable to adopt after a full or brief prospective adopter's report has been prepared and presented to the adoption panel;
- approved prospective adopters where their agency is seeking to withdraw approval;
- prospective foster carers whom their fostering service provider (provider) considers unsuitable to foster after a full report has been prepared and presented to the fostering panel;
- existing foster carers where their provider is proposing to terminate or change the terms of their approval;
- adopted adults (adopted on or after 30 December 2005) or a birth relative of someone adopted on or after 30 December 2005, when an agency has determined that:

it will not proceed with an application for the disclosure of protected information; or

it proposes to disclose or withhold protected information from adoption records contrary to the views expressed by the person the information is about.

An explanation of the IRM process can be found at www.independentreviewmechanism.org.uk.

In summary, the first year of the extended IRM Adoption and Fostering has seen a substantial rise in applications due to the introduction of IRM Fostering. The number of adoption cases has been close to the yearly average for the previous five years but there have been more than five times this number of fostering cases. The IRM has expanded its capacity to respond to the rise in applications.

Scope of the report

This is the report of the first year of the new contract covering adoption and fostering. It covers the period from 1 April 2009 to 31 March 2010. It provides information about:

- 1) Statistical information and analysis of all the applications accepted during 2009/10.
- 2) Outcomes of cases heard during 2009/10.
- 3) Reasons for agencies' and providers' qualifying determinations; and reasons for the IRM's recommendations.
- 4) Advice on practice from the IRM to agencies and providers.
- 5) Feedback on the IRM process from applicants, agencies, providers and panel members.
- 6) Issues raised by stakeholders about the IRM process.
- 7) Emerging themes about practice arising from cases heard by the IRM.

Statistics

APPLICATIONS ACCEPTED

From 1 April 2009 to 31 March 2010, the IRM accepted 91 applications. These comprised 14 adoption applications (15%) and 77 fostering applications (85%). The charts below show the breakdown of the different types of cases. No applications were received relating to intercountry adoption or the disclosure of adoption information.

The IRM received 12 enquiries (including applications which were not accepted) from prospective adopters about a possible review by the IRM. The main reason for the IRM not accepting an application was that the adoption agency had done preparatory work with the prospective adopters but had not accepted an application from them and therefore no qualifying determination had been made. Enquirers were upset about this as they felt that they had not been given sufficient explanation by their agency about why the application would not proceed and how the decisions were made.

In fostering cases, the IRM received 17 enquiries about making an application and 11 applications that were not accepted. In most cases, the reason for the IRM not accepting the application was that the provider had not completed the assessment of initial suitability and presented it to the panel; therefore, as in the adoption cases, no qualifying determination had been made. Prospective foster carers felt on the whole that this was unfair, as they had invested time and emotional effort in their assessment and they should have the opportunity of it being presented to the fostering panel. The second most common reason for applications not being accepted by the IRM was that the application did not meet the appropriate timescales.

TYPES OF FOSTERING CASES

In 13 cases, including those which concerned a relative or friend of a looked after child, the qualifying determination by the provider was that a prospective foster carer was not suitable to foster (F); in 59 cases (76.6%), that the foster carer was no longer suitable to foster (R); and five cases involved a proposal to change the terms of approval (TOA) (see Table 1).

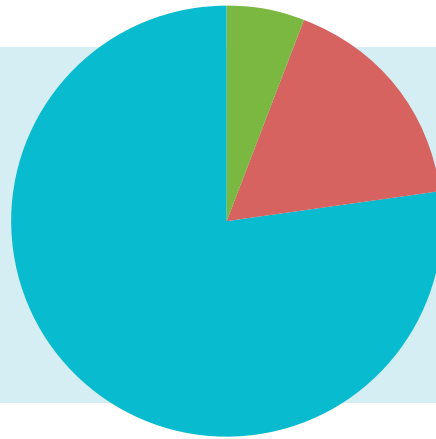
From 1 April 2009 to 31 March 2010, the IRM accepted 77 fostering cases.

TABLE 1

| Code | Description | Total numbers | Percentage |
|------|---|---------------|------------|
| F | Determination not to approve a prospective foster carer | 13 | 17 |
| R | Determination to terminate a foster carer's approval | 59 | 76.6 |
| TOA | Change to a foster carer's terms of approval | 5 | 6.4 |
| | | 77 | 100 |

FIGURE 1
Breakdown of types of cases - fostering

| | |
|------------|-------------------|
| ■ Code R | 59 (76.6%) |
| ■ Code F | 13 (17%) |
| ■ Code TOA | 5 (6.4%) |



TYPES OF ADOPTION CASES

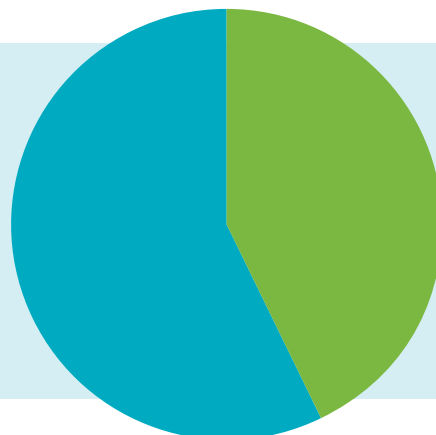
In eight cases a full assessment had been completed (F); and in six cases the adoption agency proposed to stop the assessment part-way through and presented a brief prospective adopter’s report to the adoption panel (B) or proposed to withdraw the approval to adopt (R) (see Table 2). No applications were received concerning intercountry adoption.

TABLE 2

| Code | Description | Total numbers | Percentage |
|-------|---|---------------|------------|
| F | Full prospective adopter’s report | 8 | 57 |
| B & R | Brief prospective adopter’s report and review report on adopter | 6 | 43 |
| | | 14 | 100 |

FIGURE 2
Breakdown of types of cases - adoption

| | |
|---------------|----------------|
| ■ Code F | 8 (57%) |
| ■ Codes B & R | 6 (43%) |



2

Outcomes of cases

Although 14 adoption applications and 77 fostering applications were accepted in the first year up to 31 March 2010, only 56 cases could be heard in this year as the timescale from accepting an application, hearing the case and sending out the recommendation and minutes is three to four months. The remainder of the cases accepted in 2009/10 will be heard in the first few months of 2010/11.

ADOPTION CASES

In six of the cases heard by the IRM, the recommendation was positive for the applicants, and in four of these cases the agency agreed. Thus, of the 11 cases heard, 36 per cent of applicants had a positive outcome from their agency.

- The IRM heard 11 adoption applications from 1 April 2009 to 31 March 2010.
- In six cases, the IRM panel recommendation was that the applicants were suitable to adopt or the adoption agency should complete the assessment; and in five cases, that the applicants were not suitable to adopt.
- The adoption agency agreed that the applicant was suitable to adopt or that the report should be completed in four of these cases.
- In the remainder of the cases, the adoption agency decided that the applicants were not suitable to adopt.

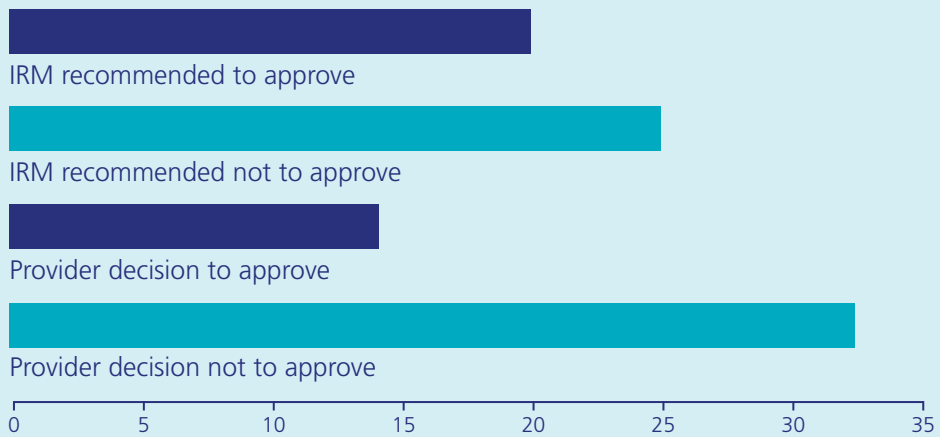
FOSTERING CASES

In the first year 45 fostering cases were heard; of these, in 20 cases (44%) the IRM panel recommended that the applicants were suitable to foster or that the terms of approval should remain the same or be extended. In 25 cases (56%) the IRM panel recommended that the applicants were not suitable to foster.

In 13 (29%) of the 20 cases with a positive recommendation from the IRM, the provider made the final decision to approve the applicants as suitable or agreed with the recommendation about terms of approval. In a further seven cases, the recommendation from the IRM panel was that the applicants were suitable to foster, but the provider did not agree.

- Seven of the cases heard involved initial suitability to foster.
- In two of these cases, the recommendation was that the applicant was suitable to foster.
- In five of the cases, the recommendation was that the applicant was not suitable to foster.
- A total of 32 of the cases involved termination of approval.
- In 14 of these, the recommendation was that the applicant was suitable to foster.
- Six of the cases heard involved a change to the terms of approval and approval of family and friends foster carers.
- In half of these cases, the recommendation was positive for the applicant.

FIGURE 3
Outcomes of cases - fostering



STATUS OF APPLICANTS

Of the 14 adoption applications, nine (64%) were from married couples, and five (36%) were from single women. Of the 77 accepted fostering applications, 40 (52%) were from couples including married, unmarried or same-sex couples, and 37 (48%) were from single men and women including heterosexual or lesbian applicants.

In 10 cases we were informed about a disability or impairment in relation to applicants and agency representatives. We ask about any particular needs and have made specific arrangements for applicants, agency representatives and panel members in relation to access to the venue where the panel hearing takes place and for the provision of a hearing loop.

FIGURE 4
Status of adoption applicants

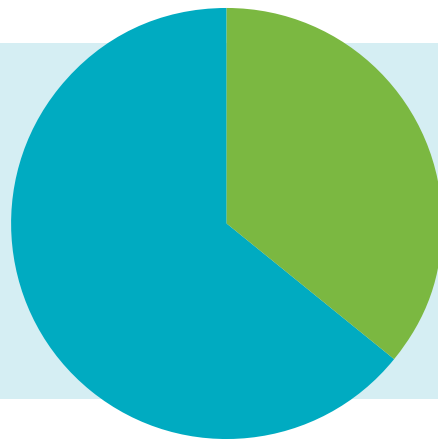
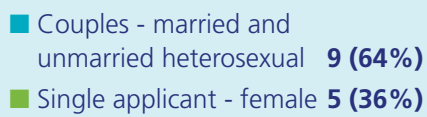
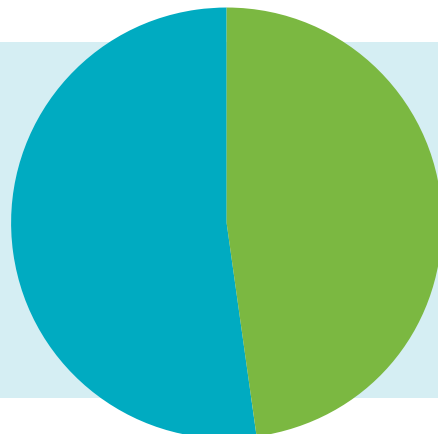
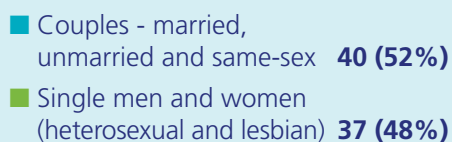


FIGURE 5
Status of fostering applicants



ETHNICITY OF APPLICANTS

The figure of 91 accepted applications to the IRM in the first year (from couples or single applicants) represented a total of 146 individual applicants. The IRM collects information about the ethnicity of applicants from the documents supplied by the agencies. However, this is not a full picture and we do not know the ethnicity of 18 applicants. It can be seen from the information available (see Table 3) that 24% of applicants are of a black, Asian or mixed white and black African background. The percentage of applicants to the IRM in the black ethnic group is 16% compared with 8.7% of all approved foster carers in the recent Ofsted survey of fostering services in England, and the Asian ethnic group is 6% compared with 3.8%.² It does appear that the number of applicants to the IRM from a black or Asian background is disproportionate to the wider population of foster carers; this area may repay further study to understand the reasons behind this.

TABLE 3

| Ethnic group | Ethnicity | Total numbers | Percentage* |
|-------------------------|-----------------------------------|---------------|-------------|
| White | White British | 81 | 55 |
| | White English | 4 | 3 |
| | White Irish | 2 | 1 |
| | White European | 3 | 2 |
| | White other | 3 | 2 |
| | | 93 | 64 |
| Black | Black Caribbean | 13 | 9 |
| | Black African | 4 | 3 |
| | Black British | 5 | 3 |
| | Black other | 1 | 1 |
| | | 23 | 16 |
| Mixed – white and black | Mixed – white and black African | 2 | 1 |
| | Mixed – white and black Caribbean | 1 | 1 |
| | | 3 | 2 |
| Asian | Asian Pakistani | 4 | 3 |
| | Asian Indian | 3 | 2 |
| | Asian other | 2 | 1 |
| | | 9 | 6 |
| Unknown | Unknown | 18 | 12 |
| | | 146 | 100% |

* The figures in this column are rounded up

GEOGRAPHICAL SPREAD OF APPLICATIONS

England has been broken down into seven areas: Central, East, London, North East, North West, South East and South West. The spread of applications in terms of the home address of the applicant(s) is seen below. A third of the cases are from London and the South East.

- **Central:** 22 cases
- **East:** 5 cases
- **London:** 15 cases
- **North East:** 12 cases
- **North West:** 15 cases
- **South East:** 16 cases
- **South West:** 6 cases

FIGURE 6
Geographical spread
of applicants

| | |
|--------------|-----------------------|
| ■ Central | 22 cases (25%) |
| ■ East | 5 cases (5%) |
| ■ London | 15 cases (16%) |
| ■ North East | 12 cases (13%) |
| ■ North West | 15 cases (16%) |
| ■ South East | 16 cases (18%) |
| ■ South West | 6 cases (7%) |

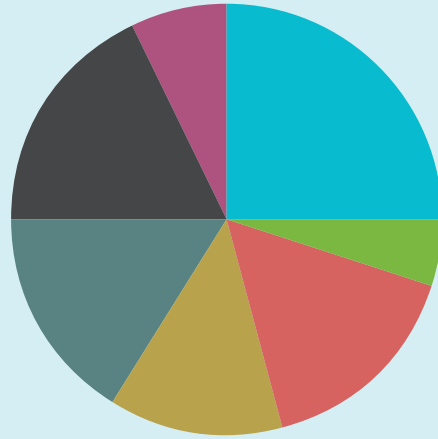
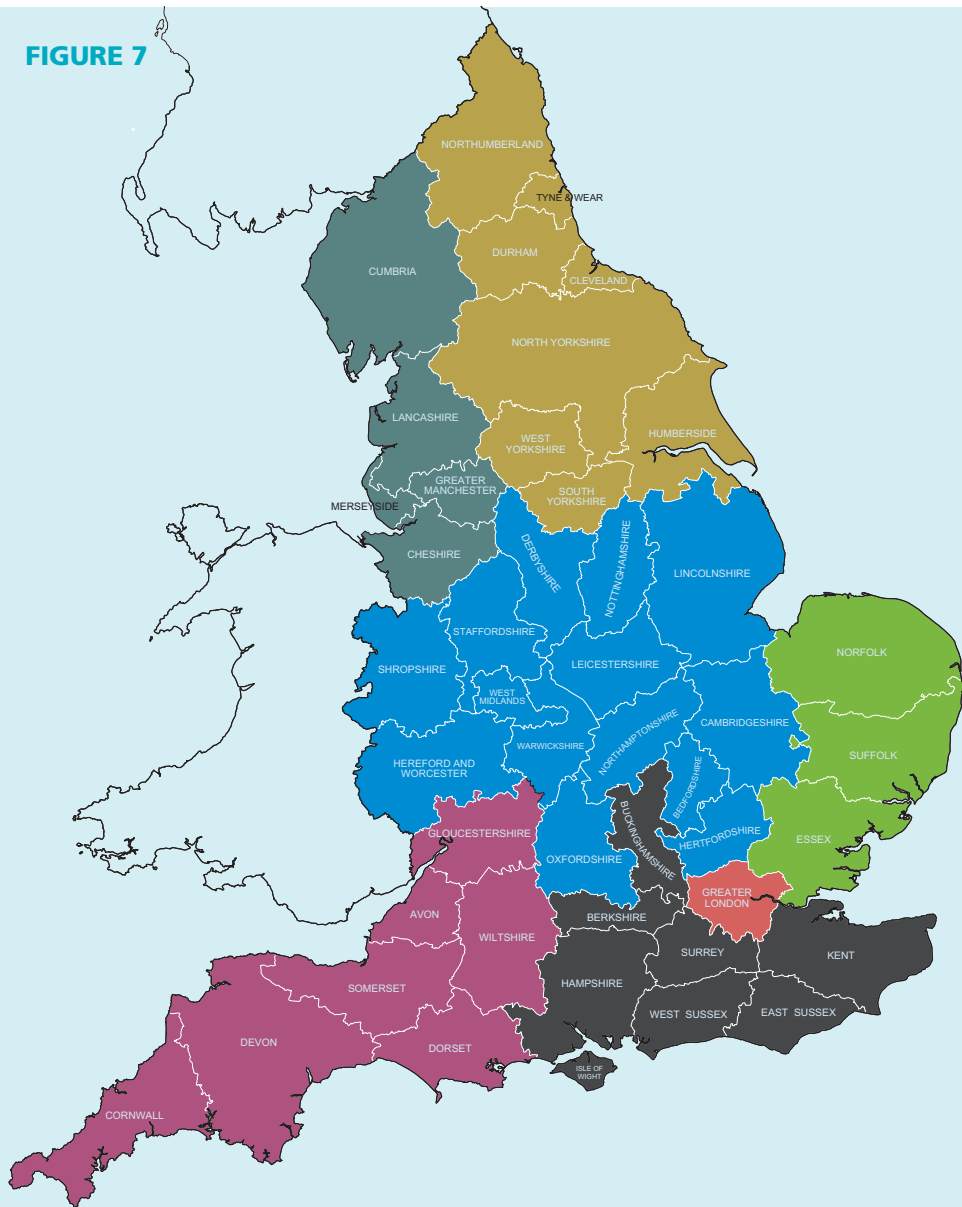


FIGURE 7



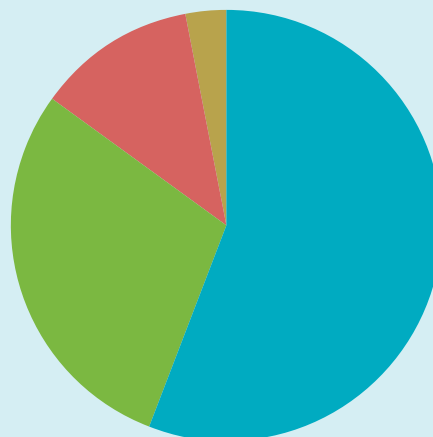
AGENCIES AND PROVIDERS

As might be expected, a sizeable majority of cases (68%) originated from local authority departments and 32% from independent or voluntary agencies. The applications to the IRM came from applicants who had been assessed by four types of agencies/providers. There were 51 applications from a local authority fostering service provider; 26 from an independent fostering service provider; 11 from a local authority adoption agency; and 3 from voluntary adoption agencies.

However, these figures need to be treated with caution as a reflection of demand at this early stage of the IRM Fostering. Guidance about the IRM to providers was introduced by the then Department for Children, Schools and Families in February 2009 prior to the introduction of the new provisions on 1 April 2009. During 2009/10, enquiries from foster carers, foster carer support services and a range of other professionals, and correspondence in accepted cases, revealed that a number of providers had not updated their standard qualifying determination letters in line with the new regulations. They were not advising foster carers of the option of applying to the IRM as an alternative to making representations to their provider; some advised foster carers that they needed to use the provider's own procedures first before applying to the IRM; and some were providing incorrect information about applying to the IRM, using the wrong address and giving an incorrect timescale. In the majority of the adoption applications this was not the case. On the other hand, there were many examples of excellent practice by providers which acted without delay, gave full reasons for the proposed decision and advised foster carers of their rights. This created a sense of fairness and openness.

FIGURE 8
Type of agency

| | |
|---------------------------------|-----------------|
| ■ Local authorities (fostering) | 51 (56%) |
| ■ Voluntary fostering agencies | 26 (29%) |
| ■ Local authorities (adoption) | 11 (12%) |
| ■ Voluntary adoption agencies | 3 (3%) |



3

Reasons for concerns

The tables below give all of the reasons for the Qualifying Determinations (QD) made by adoption agencies and fostering service providers and the reasons for concerns by the IRM panel in the 11 adoption cases and 45 fostering cases heard in 2009/10.

In many cases, there was more than one reason given for the QD. In three of the fostering cases, no reasons were given for the QD. In other cases, the reasons were given in summary form or by reference to panel recommendations. Therefore, the information given below does not reflect the full extent of the concerns which led the agency or provider to make the QD.

ADOPTION CASES

The predominant reasons given for non-approval as suitable to adopt in the cases heard in 2009/10 related to the ability of the applicants to work with the agency and understand the needs of a looked after child. This was followed by lack of emotional resilience, although it was also apparent from the papers that a high level of caution was exercised by agencies in relation to medical issues in all the adoption applications received in 2009/10.

TABLE 4

| Reasons for QD/IRM concern in adoption cases | QD in cases not approved by IRM | IRM concern | QD in cases approved by IRM |
|---|---------------------------------|-------------|-----------------------------|
| Ability to manage stress | 1 | 1 | 2 |
| Ability to work with the agency | 2 | 3 | 2 |
| Accommodation issues | 1 | 0 | 1 |
| Ability to parent a looked after child | 1 | 2 | 2 |
| Impact on existing children/family | 1 | 0 | 2 |
| Inability to understand needs of looked after child | 1 | 3 | 1 |
| Problems about infertility | 0 | 0 | 1 |
| Lack of childcare experience | 1 | 0 | 1 |
| Lack of emotional resilience | 1 | 2 | 1 |
| Lifestyle issues – drinking, smoking, etc | 0 | 0 | 0 |
| Medical issues of applicant/s | 1 | 0 | 1 |
| Motivation to adopt | 0 | 1 | 0 |
| Stability/permanence of relationship | 1 | 1 | 1 |
| Support networks | 2 | 1 | 1 |
| Withholding or refusal to discuss information | 3 | 1 | 1 |
| Work commitments | 0 | 0 | 1 |

FOSTERING CASES

As in the adoption cases, the reasons for concern provided in the QD letters do not convey the full extent of the concerns. In the fostering cases, the predominant reasons given for concerns related to risk factors and allegations of abuse. However, in many instances (21 cases) the provider was concerned about the ability of the applicant to work with the agency. The IRM shared this concern in only six of the cases heard, and thought that the working relationships between the foster carers and the providers could be improved, so this was not in itself indicative of lack of suitability to foster. There may be scope here for a greater role for mediation to resolve issues of communication and working relationships.

TABLE 5

| Reasons for QD/IRM concern in fostering cases | QD in cases not approved by IRM | IRM concern | QD in cases approved by IRM |
|--|---------------------------------|-------------|-----------------------------|
| Ability to work with the provider | 10 | 6 | 11 |
| Accommodation issues | 2 | 2 | 0 |
| Allegation of abuse against applicant/s or applicant/s family ³ | 8 | 7 | 5 |
| Ability to parent a looked after child | 3 | 2 | 3 |
| Financial concerns | 0 | 1 | 1 |
| Impact on existing children/family | 2 | 6 | 1 |
| Inability to change | 3 | 3 | 4 |
| Inability to understand the needs of a looked after child | 5 | 8 | 4 |
| Lack of emotional resilience | 0 | 2 | 0 |
| Lifestyle issues – drinking, smoking, etc | 3 | 0 | 1 |
| Medical issues of applicant/s | 2 | 2 | 2 |
| Motivation to foster | 0 | 1 | 1 |
| Potential risk factors, including inability to provide safe caring | 11 | 11 | 7 |
| References | 2 | 0 | 1 |
| Stability/permanence of relationship | 1 | 0 | 0 |
| Standard of care issues | 4 | 1 | 4 |
| Support networks | 0 | 2 | 0 |
| Inability to prioritise children's needs above one's own | 2 | 1 | 1 |
| Unwillingness to train | 1 | 1 | 2 |
| Use of corporal punishment/restraint/discipline issues | 1 | 0 | 2 |
| Withholding, or refusal to discuss, information | 2 | 2 | 0 |
| Work commitments | 3 | 2 | 0 |

3. Allegations of abuse refers to statements made by or about a young person that they have suffered abuse or are at risk of abuse by the foster carer or a member of the foster carer's family or friends. Abuse includes physical, sexual or emotional abuse and neglect.

4

Advice on practice to agencies

Part of the task of the IRM panel is to consider issues arising about the policies and practice of agencies and providers which become evident from the paperwork and during the process of hearing the cases. Feedback and advice on such issues, whether about good practice or practice that is not advisable, is included with the final minutes, recommendations and reasons sent to the agency or provider. Practice feedback has been considered from a representative sample of the fostering cases (23) and all the adoption cases heard in 2009/10, totalling 34 cases in all. Many of the practice issues apply across all of the cases heard. Practice to be avoided or improved, as well as good practice, can be grouped under a number of broad headings.

BREACHES OF REGULATIONS AND GUIDANCE

In around half of the cases, there were breaches of regulations or guidance. These included non-compliance with regulations in respect of the issuing of the QD letter; breaches of the fostering regulations relating to placing of children outside the terms of approval or without the appropriate exemptions; lack of independent support to foster carers undergoing the investigation of allegations of abuse; and compromising the right of the applicants to a fair hearing. The quote below is an example of comments received.

The panel felt grave concern at the lack of overall responsibility within the FSP for placing children through the Emergency Duty Team, especially when exemptions were needed and where this was contrary to the direction given by the fostering team.

In one adoption case, the agency's policy of not referring the applicant to the Adoption Register until six months after their approval was outside guidance⁴ which requires that prospective approved adopters' names are placed on the Adoption Register within three months of approval.

In another case, it appeared to have been assumed that by commissioning an independent social worker to assess the suitability of a prospective adopter and prepare the prospective adopter's report, it would be inappropriate for the agency to supervise the social worker. This agency failed to meet the requirements set out in the Restriction on the Preparation of Adoption Reports Regulations 2005. In a further case, the panel commented that the agency needed to amend its practice to ensure that second opinion visits are not carried out by a person who has responsibility for supervising or managing the case.⁵

TRAINING

How training for foster carers is provided featured significantly in the advice and feedback to providers. The panel noted that in one case training was clearly available and attended, and in another, applicants were offered training as soon as they contacted the provider. However, the panel suggested in several cases that the provider should consider more creative and flexible ways of enabling foster carers to engage with training and identify alternative ways in which carers can extend and evidence their learning (e.g. training in a workplace could be transferable).

4. See www.adoptionregister.org.uk.

5. Guidance to the Adoption and Children Act 2002, Chapter 3.48

The panel expressed concern that there appears to be no core preparation and skills training provided as standard for family and friends carers by some providers.

A common theme emerging for foster carers who have fostered for many years and who are regarded as having contributed a great deal to fostering services is that as fostering standards and expectations have changed and increased, some carers have found it difficult to adapt their practice to the new task and have not always received the necessary support and training.

SUPPORT TO APPLICANTS

In a number of cases, there is evidence of good support for foster carers. This is a crucial element to the success of the placement. However, a lack of support for foster carers is also a common concern and includes both the absence of a supervising social worker, infrequent visits and lack of support in relation to specific issues. Inadequate support has frequently been a contributory factor in the difficulties which have ultimately led to a proposal to terminate approval.

REPRESENTATION OF AGENCIES AND PROVIDERS AT THE IRM PANEL

In most cases, the comments about the representatives were positive. They knew the case well; came prepared; took responsibility for the actions of the agency; the appropriate people attended and brought relevant paperwork; the social worker presented as confident and knowledgeable in the role of the assessing social worker; and they were respectful towards the applicants. In other cases, comments were less positive and the panel was concerned that the representatives were not familiar with the case or that the agency did not send appropriate representatives who knew the case and were therefore unable to answer many of the panel's questions adequately. Agencies and providers are strongly advised to ensure that the assessing or supervising social worker (as appropriate) should be made available to attend the IRM panel.

EVIDENCE

There is a mixed picture about the evidence underpinning the decisions by agencies and providers. There were examples of inaccuracies and also insufficient evidence to support the conclusions which had been drawn, mostly within the fostering cases, as well as some good practice within the cases heard. In one case, the panel commented that the agency representatives were verbally able to clearly evidence the concerns and demonstrated reflective practice in taking time to consider information gathered; and in another that the report was thorough and the assessment referred to a useful independent report from a family centre. Examples of concerns by the IRM panel are indicated below.

The medical information was unclear and misleading and should have been updated by the medical adviser.

The FSP failed to notice an inaccuracy in the Form F regarding the applicant being described as 'non smoking'.

There was a gap in chronology regarding Ms D's employment history.

Did not evidence in-depth discussion with applicants' children.

The paperwork contained little evidence of any poor practice on behalf of the applicant.

The panel were concerned that a serious, unsubstantiated and unrecorded allegation was made during panel which had not been raised elsewhere and was based, panel were told, on hearsay.

REFERENCES

The IRM panel expressed concern about practice concerning the taking up of references in several cases. References were not taken up from previous partners; it would have been safer to only proceed to panel once references had been received from previous providers; and the panel strongly suggested in one case that the agency revise their policy on choice and verification of referees and their interviews. In another case, the panel recommended that further references should be taken up following significant changes in the family and that references be sought from schools.

Good practice was also noted.

The assessing social worker provided a complete assessment report and care was taken to provide balanced referees, all of whom have been visited and signed their reference.

ASSESSMENT

The quality of assessment throughout the cases heard was variable, with some examples of good practice, especially in the adoption cases.

The agency was decisive and undertook appropriate investigations.

The adoption agency has given the couple every opportunity to explore emotive issues that might need to be addressed with a child.

The agency had taken appropriate steps to seek input from appropriate professionals to assist with areas of concern arising in the assessment of the applicant.

The panel had concerns about the quality of some assessments generally and in particular about inadequate risk assessment and assessment of the impact of change on the children of the family.

The agency should consider reviewing their work with the children of prospective adopters, with particular emphasis on building rapport and observing the child in a variety of environments to ensure they can fully evidence their conclusion.

In some cases, poor risk assessment led to children who had been in long-term placements being moved quickly and with little planning and preparation. It is not known what the long-term consequences have been for these children and young people.

There was a lack of full assessment of the needs of the foster carers' children and how these would be met alongside those of children with such complex needs.

Advice to providers included more robust investigation at an earlier stage in the assessment of the applicant's views and attitudes and an analysis of these; ensuring that an updated assessment of the applicant is undertaken following significant changes in the household; and carrying out appropriate risk assessments when an incident occurs and before presenting the matter to the fostering panel.

5

Feedback on the IRM

FROM APPLICANTS AND AGENCIES

Applicants and agencies are asked to complete questionnaires which explore their experience of contact with the IRM office and at the panel. Responses have been considered from a sample of questionnaires within all the different case types, covering just over half of the cases which were heard in 2009/10.

Almost all of the applicants were positive about their experience of the IRM office. They reported receiving all the necessary paperwork on time and felt that the IRM office helped them to prepare for the panel.

I was given very detailed information from the beginning to end of the process.

One applicant was concerned about the tight timescale between receiving the papers and the panel date (two–three weeks) and thought communication with the IRM office should have been better. Most of the applicants said that their agency did not help them prepare for the panel.

Agencies/providers were also mostly positive about their contact with the IRM office.

The administrative staff I spoke to were professional and helpful.

Some difficulties about receiving the paperwork prior to the panel were identified by a few agencies when the representatives attending panel did not include the nominated agency liaison officer for the IRM and the latter had not forwarded the papers to their representatives.

Both applicants and agencies/providers were satisfied with the venue and the reception arrangements. However, one agency commented that the cost implications of travelling to the venue were inappropriate and another felt that the IRM should look at financially supporting carers to attend.

Applicants found the availability of panel member profiles before the hearing helped them to feel less nervous and they appreciated members' range of experience.

Yes, unbiased panel from a wide range of backgrounds.

Agencies/providers agreed that the panel members' profiles were useful, although one would have liked to see the profiles in advance. A number of agencies/providers wanted more information about the process on the day.

I was not aware that we would be invited into panel at same time as applicants...this could be uncomfortable and intimidating for applicants.

A few agencies/providers would have liked to know the questions asked by the panel in advance.

Applicants felt welcome and put at their ease by the panel and that they were listened to.

They asked all the right questions and had a real genuine interest in what I had to say.

Agencies/providers mostly agreed with this, although one agency commented that the panel was rather too formal.

Both applicants and agencies/providers were asked if they felt that they were able to present the information they wanted to support their cases. Most of the applicants felt that this did happen although nerves sometimes got in the way, and one commented:

We would have benefited from some guidance on what was suitable material to send.

The response from agencies/providers was more mixed. Some representatives felt unprepared for the questions, either because they were not familiar with the case or had not known which areas the panel would ask questions about.

There was an overall sense from the feedback and from comments sent to the IRM after the panel that applicants felt there had been a fair hearing of their case, regardless of the outcome.

Thank you for our "clean slate" when we entered the room.

FROM IRM PANEL MEMBERS

For every panel, the members are asked to comment on the panel process and decision making, the quality of the paperwork and the venue, as well as how they worked together as a team. The IRM collates the feedback and makes changes as appropriate. Feedback from a representative sample of 39 of the cases heard is summarised below.

Panel members commented on the complexity of the issues and the substantial volume of paperwork provided by agencies and providers, particularly in those cases involving termination of approval in fostering and adoption, and made suggestions about what would be helpful from their perspective. For example, panel members expressed the view that it would be generally helpful to see the original assessment and additional foster carers' reviews in the fostering termination or change of approval cases, and these are now regularly requested. Other papers are not included if they are repetitive and do not add to the understanding of the issues in the case, including extensive testimonials from applicants. Panel members would find it helpful if agencies and providers made available a chronology of key events in the case and a list of key participants and their role as a standard part of the paperwork provided to the IRM.

The panel were mostly satisfied with the advice received from the legal, medical and professional advisers to the IRM and felt able to comment if there was, for example, a lack of clarity in the advice or if they would have liked some additional specialised information.

The new IRM contract introduced a significant change in the hearing process, in that the applicants and the agency or provider are heard in the panel together (apart from discussion of confidential third party information). The majority view is that this change is an improvement.

It works well in that both parties hear what the other has to say and it makes the process more transparent. I also believe applicants – even if not recommended for approval/continued approval – feel justice has been done

by hearing the agency having to answer potentially probing questions on their practice, etc.

Feelings can run high in the panel hearing but the Chair has successfully managed this situation in every case.

COMPLAINTS AND COMPLIMENTS

During the course of the year, two complaints were received by the IRM, both from providers. One of the complainants referred to bias by the IRM in advance of the panel and the other expressed concern about being asked for information at a late date and about the costs of the IRM. In the first case, the provider accepted the response from the IRM that there was no evidence of bias and the second complaint was resolved by agreement and not pursued.

Some agencies/providers and applicants were unhappy with the panels' recommendations and the reasons given for them. These issues are not dealt with within the IRM complaints procedure as it is for the agencies/providers to make the final decision.

A number of applicants contacted the IRM to express satisfaction at the way in which they had been responded to by the IRM office, and listened to by the panel, regardless of the outcome of the review hearing.

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Issues raised by stakeholders

FOSTERING ASSESSMENTS

There is no provision for a “brief assessment” or report in fostering regulations as there is in the adoption agencies regulations. The IRM has received many enquiries from a range of organisations about whether an application can be made to the IRM if an incomplete assessment is considered by the fostering panel and a decision taken by the provider not to complete the assessment. The IRM has also received a number of applications and enquiries from prospective foster carers who find their assessment has been stopped late in the process. This has given rise to a sense of unfairness with applicants feeling they have invested a great deal of time and effort into the process and have not had their chance to be heard at the fostering panel. The reasons for this have mostly related to issues arising in references or through statutory checks. The comparison has been made with adoption applicants where once an application is accepted, a prospective adopter’s report must be prepared, albeit not completed (called a brief report), and presented to the panel, thus allowing recourse to the IRM or to make representations to the agency if the prospective adopter is found not to be suitable.

COMPLAINTS AGAINST AGENCIES/PROVIDERS

In both adoption and fostering cases, there has been some confusion about the role of the IRM with regard to complaints against agencies/providers. Some agencies/providers thought that an applicant needed to use their internal complaints procedure first before applying to the IRM; some individuals applied to the IRM to deal with complaints against the provider; and in one case the same fostering panel dealt with complaints against the provider as well as “complaints” against the foster carer. Some applicants to the IRM who had a complaint being processed by their agency/provider wanted the IRM panel adjourned pending the outcome of the complaint. It has been important to emphasise in these instances that the remit of the IRM is to consider the suitability of the applicant to adopt or foster and not to adjudicate on a complaint against an agency.

ROLE OF SUPPORTERS

Applicants have received support and advice during the course of their application to the IRM and at the hearing from a range of sources. A number of applicants have been provided with specialist fostering support workers by their provider; a small number of applicants have instructed a solicitor to act for them during the preparation of their case (but not at the panel hearing); and some have been assisted by family members or friends. The IRM arrangements allow a supporter to accompany an applicant to the hearing to provide moral support and sit with them in the panel. This option has been taken up in the majority of cases. There is no scope for advocacy or representation for either the applicant or the agency during the panel hearing because the panel meeting is non-adversarial. On the whole, this has worked well. Some applicants were not assisted with the provision of support by their provider and one support organisation has pressed for a stronger role for the support worker.

COSTS OF THE IRM REVIEW

Providers and agencies are required to pay a contribution towards the cost of the IRM panel review, which was £2,227 for cases accepted in 2009/10. There is no provision for expenses for applicants and supporters who attend panel.

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Emerging themes

The IRM panels have reviewed applications from all areas of England. A number of common themes relating to foster care have emerged through the cases heard this year and the key themes are considered below.

ALLEGATIONS OF ABUSE IN FOSTER CARE

An examination of the reasons for the Qualifying Determination in the 45 fostering cases heard in 2009/10 reveals that in 13 cases there was an allegation of harm caused by the foster carer or a member of the foster carer's family; in 18 cases there were identified potential risk factors including inability to provide safe caring; and some cases involved the use of corporal punishment or restraint or discipline issues. The papers in the case also reveal a history of alleged abuse even if this is not given as a reason for the QD, so the actual figures for the incidence of the above factors might be higher.

The allegations include physical abuse, sexual abuse, emotional abuse and neglect. Potential risk includes domestic violence in the household, the presence in the household of someone deemed to pose a risk and leaving young people with unsuitable carers. There was a wide difference in the way agencies responded to allegations in terms of the extent and nature of the investigation, the timescales involved and the subsequent risk assessment. In some cases the investigation stretched over many months and the foster carers did not know the case against them. Some agencies commissioned social workers (sometimes independent professionals) to investigate the case and prepare a chronology. These reports revealed a number of allegations in the past which had not been investigated or which appeared to have been inadequately investigated.

It was not possible to identify any standard method used for carrying out investigations or subsequent analysis of the information gathered. A clear assessment of the level of risk to a young person in the placement was not apparent in a number of cases but decisions to move children, often from long-term placements, appeared to be taken without the benefit of a full risk assessment for the child concerned which balanced the level of risk with the adverse consequences of a disrupted placement. The Care Planning, Placement and Case Review (England) Regulations 2010 make clear the need for a review of the care plan, overseen by the Independent Reviewing Officer, if a child is to be removed from a stable placement.

CHANGING STANDARDS IN FOSTER CARE

The past few years have seen a drive towards the professionalisation of foster care, with increased expectations of foster carers in relation to training, recording and joint working. This process has been accelerated by the introduction of the CWDC Induction Standards.⁶ Foster carers generally recognise the importance of this change. However, there is evidence that some long-standing foster carers who have facilitated good outcomes for children and young people over many years have not been given the time and space to "catch up" because of the demands on them by the provider to take placements, and they have then been found not suitable to continue fostering. It appears that in some cases the requirement of attending training and foster carer support groups has been inflexibly applied, to the detriment of the fostering service.

DISRUPTED PLACEMENTS

There is evidence in a number of cases considered by the IRM that children and young people who have lived with their foster carers on a long-term basis have been moved out of their placement at short notice and without this move being carefully planned and managed. These placement moves have not been in situations where it has been identified that the child or young person is at immediate risk of harm. It has been acknowledged by providers in some cases that there has not been an opportunity for the young people to say goodbye properly to their foster carer. In several cases, the foster carer has been found suitable to foster by the IRM panel and the provider has accepted this recommendation and reinstated the foster carer. Once again, the Care Planning, Placement and Case Review (England) Regulations 2010 and statutory guidance address the proper practice in this area.

OVERBURDENING OF FOSTER CARERS

It continues to emerge as a concern through the cases heard by the IRM that foster carers are asked and agree to take placements not only beyond their capacity to care safely, but also in breach of regulations. Placements are made which exceed the foster carers' terms of approval without the provider changing the terms of approval, and the use of exemptions is misapplied by providers. Matching decisions are made which are unrealistic in terms of a fostering task, for example, placing three challenging teenagers or three mothers and babies together in one placement.

CONCLUSION

It is encouraging that providers are making foster carers aware of the IRM, that adoption agencies are continuing to do so and that the advice and support agencies are helping applicants to understand their options when they are experiencing difficulties and distress. The review of applications by family and friends to foster children involved in court proceedings is an important area of development for the IRM.

There is much to be learned from the independent review of the cases which come to the IRM and it is hoped that the next few years will see this learning translated into positive changes.

The IRM Contract Manager, Debra Pearlman, will be visiting interested groups to give presentations based on this report. Please contact the IRM office on 0845 450 3956 or email irm@baaf.org.uk if you would like her to visit your group. The IRM welcomes enquiries from prospective adopters and prospective or existing foster carers, agencies and providers who want to find out more about how the IRM works.

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