

Independent Review Mechanism

(Adoption and Fostering)

**ANNUAL REPORT
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Contents

Introduction	2
Executive summary	4
Section 1	
Learning from IRM cases	5
Advice on practice in adoption	6
Advice on practice in fostering	8
Section 2	
The experience of the IRM for applicants and agencies and providers	18
Section 3	
Themes for policy and practice	21
Themes in adoption	21
Themes in fostering	22
Section 4	
Statistics, tables and analysis	26
Conclusion	39

Introduction

The Independent Review Mechanism for Adoption and Fostering (IRM) is managed by the British Association of Adoption and Fostering on behalf of the Secretary of State for Education. Its remit is to review qualifying determinations (QDs) made by a fostering service provider or adoption agency about a person's suitability to foster or adopt and to make recommendations to the provider or agency. It will also consider applications from people applying to receive information from adoption records (where the adoption agency has made a determination not to accept their application or to disclose or withhold information against the wishes of the person to whom the information relates).

The IRM has now completed its second year providing applicants with an independent review of their suitability to foster. For prospective adopters the service has been in place for seven years. During 2010–11 the IRM heard almost twice as many applications as in 2009–10. In addition to the reviews undertaken by the IRM, the service also responded to enquiries from potential applicants seeking advice about their own situation, and from professionals wanting to make sure they are following correct procedures. Many agencies have stated that they value the principle on which the IRM was set up and have embedded the feedback from the IRM panel into their service. They have done this not just from individual agency experience of the IRM but from learning from the annual reports or from overview presentations on the lessons learned so far.

In the run up to the introduction of the new statutory framework by the Department for Education in the early part of 2011, there was much interest and debate about good practice in assessment and approval of prospective foster carers and adopters; about the operation and membership of fostering and adoption panels; and about how decision makers carry out their role influenced by the important judgment in the Hofstetter case.¹

Becoming (or remaining) an approved adopter or foster carer is a life changing decision for the individuals involved. It is imperative that processes are fair, open and focussed on recruiting and retaining people with the right qualities to nurture and care safely for vulnerable children. Although in some cases applicants to the IRM have felt unfairly treated by their agency or provider and have sought some redress, it has been vital for the IRM to maintain its primary focus on the welfare of any child who may be placed with a family or individual, when making recommendations about their suitability to foster or adopt.

¹ *Hofstetter v London Borough of Barnet and IRM* (2009) EWHC 3282 (Admin)

This report will reflect on the learning from IRM cases; on the experience of the IRM for applicants and agencies; and the overall themes which emerge for policy and practice. The statistics on applications and cases heard are analysed in the final section of the report. Some of the specific numbers have been suppressed for reasons of confidentiality.

Executive summary

- Between 1st April 2010 and 31st March 2011 the IRM accepted 101 cases; an 11% increase on the previous year.
- 17 of the accepted cases were adoption cases from both Local Authorities and Voluntary Adoption Agencies.
- 84 of the accepted cases were fostering cases – 61 from Local Authorities and 23 from Independent Fostering Providers.
- There was an increase in both adoption and fostering cases involving a child known to the applicants.
- In 2010–11 the IRM heard a total of 105 cases – 89 fostering cases and 16 adoption cases. This was almost double that of 2009–10.²
- The number of both fostering and adoption applicants to the IRM from a black, mixed and Asian background was 27%. (Of the total foster carer population, approximately 14% are from these backgrounds; however a note of caution should be taken on any conclusive interpretation of the IRM figure as we do not have similar overview data on the ethnicity of adopters to allow for a full and considered comparison.
- The ability to parent a looked after child, and understanding the challenges, was the most frequent reason for adoption agencies considering the prospective adopters unsuitable to adopt.
- In fostering cases, the predominant reasons for the QD related to risk factors, including allegations of abuse within the foster carer's household. However, the largest single reason was the ability of the foster carer to work with the fostering service.
- The IRM made a positive recommendation in terms of suitability **in 7 (43%) of the 16 adoption cases heard** and the Adoption Agency's decision maker agreed in **5 of the 7** cases.
- The IRM made a positive recommendation in terms of suitability **in 45 (51%) of the 89 fostering cases heard**. The Fostering Service Provider broadly agreed with the IRM's recommendation in **32** of these cases.
- The IRM held two rounds of recruitment to meet the demand for increased panel hearings. Panel members of a high calibre were recruited, with increased representation of people from a black or minority ethnic background and from previously looked after and adopted young people

² Accepted cases take between 3 to 4 months to be completed; therefore some cases accepted towards the end of 2010–11 will not be heard until 2011–12.

Section 1

Learning from IRM cases

Applicants to the IRM come from across England and from a wide range of agencies and providers: large and small, rural and urban, local authority and independent. An important function of the IRM panel³ is to give advice to agencies and providers on their policy and practice as noted within the case papers and at the IRM panel review hearing. Feedback and advice is provided, together with minutes of the IRM panel, in brief written form. It is apparent that there is substantial variation across the country in how agencies and providers interpret and implement regulations and guidance relating to the recruitment and approval of adopters and foster carers. An analysis of the cases heard by the IRM provides an overview of a wide range of practice in adoption (including inter-country adoption) and fostering, from assessment through to review, ongoing development, support and matching. It is of concern that applicants who come forward to adopt or foster may receive a different standard of service depending on where they live and which agency they choose. The IRM plays an important role at a policy level by highlighting these differences, which can help improve practice.

Some agencies and providers demonstrated at the IRM panel that they have re-assessed their policies and practice in the course of reviewing the cases which have brought them to the IRM. The IRM panel was impressed with agencies' and providers' capacity to reflect on their practice, acknowledge areas for improvement and introduce changes. Furthermore, there was consistent demand from service managers and chairs for presentations by the IRM contract manager that focus on the learning to be gained from an overview of trends in practice emerging from cases heard.

It is perhaps not unexpected that similar practice issues have arisen in 2010-11 to those in the first year of the IRM (Adoption and Fostering). An analysis of the practice feedback in the 105 cases heard by the IRM during 2010-11 has been grouped into a number of broad categories, as outlined below. The 16 adoption cases and 89 fostering cases heard in this period are considered separately, although some of the issues are relevant to both groups of cases.

³ The IRM panel comprises 88 independent panel members and advisers drawn from a central list for any individual panel to hear a case.

ADVICE ON PRACTICE IN ADOPTION

Assessment and Review

There is a mixed picture in terms of assessment, with evidence in some cases of thorough and comprehensive assessments, good information sharing between the different professionals involved and Adoption Agencies working well together.

The assessing social worker had a good grasp and knowledge of the family, and a well evidenced report had been produced.

The quality of assessments in other cases, however, lacked depth and analysis, with insufficiently robust exploration of the applicants' strengths and vulnerabilities with respect to their suitability to adopt. The IRM panel was concerned that the tone of reports appeared to be quite judgmental at times. In cases where specific concerns were expressed about areas such as anger management, a lack of attunement or about medical issues these concerns were not fully evidenced by further direct discussion, obtaining an independent assessment by a qualified person in the field or by further reports of interactions with children. Decisions were made on finely balanced 'risks' when more evidence could have been gained to substantiate a decision. Delay between preparation and assessment or in obtaining necessary medical information was acknowledged as a concern in some cases especially when the applicants had made a significant personal commitment to the process before important and decisive information was gathered.

In terms of clarity of process the IRM panel commented that the paperwork should be explicit about the status of a report being presented to the adoption panel (i.e. whether it is a full or brief report). Second opinion visits should be written up and presented as part of the report rather than provided verbally at the panel.

Breach of Regulations and Guidance

Current adoption guidance stresses the importance of a clear decision making process where the appointed decision maker carefully considers all the relevant information, makes a reasoned decision and then communicates this decision to applicants in a timely manner. In most cases heard last year agencies did follow good practice. However the IRM panel identified lack of compliance with regulations in some cases in relation to the proper notification to applicants of the qualifying determination with an inaccurate timescale within which to request a review, a lack of reasons by the decision maker and recommendations from the panel which did not clearly differentiate between the recommendation about suitability to adopt and advice in respect of children. There was concern that applicants were presented to panel without their CRB checks, medicals, financial information, appropriate references having been obtained, and without having been offered preparation and training. Agencies did not always follow correct procedure when intending termination of approval as a prospective adopter or when dealing with cases involving specific children. The IRM panel commented that ensuring that annual reviews took place could have highlighted issues about continued suitability at an earlier stage.

Cultural issues

The IRM panel commented that where an applicant's first language is not English even if they appear competent in English, it is important that assessors have access to appropriate language support in order that they fully understand the nuances of the language and words used. Agencies should obtain more information about the positive aspects of an applicant's diversity which could enrich a child's life and about their responses to the wider needs of the child. In one case the agency seemed focussed on the needs of White British children and the standard of care which they would need.

It could be implied by the approach they took that a child of a different ethnicity would need adoptive parents of a "lesser" standard.

In a number of cases agencies appear to have made assumptions about a cultural match whether between applicant and worker or when placing children if both are of an Asian or Black background when in fact the individuals concerned came from different backgrounds and cultures. The IRM panel also raised concerns about lengthy interviews or meetings being held during Ramadan, which showed some insensitivity to the applicant's needs.

Matching

Despite understanding the pressure to place children the IRM panel commented that the point when applicants are linked to children needs greater consideration. Applicants should be fully assessed and there must be sufficient information about the child in terms of the proposed match before making links and introductions. Making the connection with the applicant's wider support network was inappropriate during the linking process. The speed of introductions in some cases was not good practice. Sufficient time and consideration should be given to the prospective applicant's work situation before introductions.

....Professional and measured responses to the panel which were balanced and detailed...

Presentation at IRM panel

In many of the cases the agency representatives presented well to the IRM panel and were able to engage constructively with the applicants. The appropriate workers attended and knew the case well; the social workers recognised the complexities of the case and were respectful, honest and sensitive.

References

The IRM panel observed a number of problems in relation to the quality of references and how the process was managed. In some cases the standard of references was considered to be poor. The IRM panel advised that it would be useful to obtain references from both families where it was apparent there had been acrimonious separations. It would also be useful to consider asking referees to confirm the write-ups of their interviews. Policies relating to the protection of third party confidentiality resulted in conflict between Agency and Applicants.

In some cases the agency representatives did not provide cogent, robust and detailed explanations of the way in which concerns arising from confidential third party information could have been addressed and verified for example finding alternative sources of information if a family reference could not be obtained.

ADVICE ON PRACTICE IN FOSTERING

Ability to improve

The fostering cases reviewed by the IRM revealed a mixed picture in relation to practice, but with a number of consistent themes. In many cases, providers acknowledged that they needed to improve practice in a number of areas and had changed policy and procedures to address this. Examples are improved communication systems between different departments within and across services; rewriting the foster carer handbook; closer working between the quality assurance team and children's team managers and the fostering teams; and lower caseloads for social workers. Providers also accepted that there were failings in the quality and quantity of supervision; that foster carer reviews must take place annually; and that fostering panels should be independently chaired when hearing cases about suitability (or if, in the absence of the chair, the vice-chair is not independent, must have at least one independent panel member).

Allegations

The IRM identified a range of problems relating to the processes employed by providers for investigating allegations:

- The length of time to complete investigations was unacceptable.
- Steps needed to be taken to ensure that other professionals, such as teachers, are clear about their duty to report safeguarding concerns.
- Providers needed to be more robust in their enquiries when allegations are made, and it is vital that more comprehensive enquiries are made to verify information.
- The different procedural strands of an investigation needed to be better integrated and providers needed to have clearer procedures in place for dealing with allegations made by a foster child placed with foster carers living in another local authority area.
- Providers needed to ensure they were clear what the outcome of an allegation investigation was (i.e. whether or not it was substantiated) before taking it into account in a decision about a foster carer's continued approval. This may require managers to pursue the local authority or police for their conclusions rather than accepting inconclusive outcomes.
- Complaints concerning a young person's dissatisfaction with their care were in some cases being inappropriately referred to as allegations.

It is not good practice to use research as a methodology to assert the probability that allegations are true without corroborating or verifying the information received.

- In some cases, when a current allegation proved unfounded, providers were inappropriately basing decisions to terminate approval on concerns that had been previously investigated and where it had been concluded at the time that the person continued to be suitable to foster.
- A strategy meeting is not the appropriate forum for making recommendations to terminate the approval of a foster carer. The decision about whether a person should continue to be approved to foster lies with the fostering service's decision maker, who has the option of seeking a recommendation on the matter from their fostering panel.
- Allegations must be carefully investigated and assessed on their own facts before decisions are made about their validity.

Risk Assessment and Safeguarding

During the period reported on, the Fostering Services (England) Regulations (FSR) 2002 applied (they have subsequently been replaced by the FSR 2011). The FSR 2002 provided for a relative or friend to have a looked after child placed with them if they had been approved as a foster carer under Part 5 of the FSR (following a full assessment, including a CRB check) or if the child had been placed in an emergency under regulation 38. In the latter case, the placement could not exceed 6 weeks unless the carer had been approved as a foster carer before this period expired.

Although the IRM panel observed good safeguarding practice amongst providers, indeed in one case the panel noted that *..... The support offered to applicants by the provider to safeguard the children was outstanding...*, in other cases unsatisfactory risk assessment and safeguarding practices were a significant feature in the cases heard, particularly in cases where the applicant was a family and friends foster carer.

Some cases concerning the placement of a child with a relative revealed that the systems used by providers were not sufficiently robust to ensure that requirements for timely and appropriate CRB checks on the carer and their household were met. There were instances where the IRM Panel had serious concerns that safeguarding principles were not being followed when children were initially placed with family members. There were cases in which children had been placed without any checks being done and there were substantial risks in the household which had not been assessed.

In some cases, providers had reached a decision to approve a person as suitable to foster based on an earlier incomplete assessment without a CRB check. Providers were obliged to reconsider the position once further information came to light at a later date which gave rise to serious concerns. The IRM advised that fostering panels should not consider applications for approval to foster without a CRB check for both applicants (where a couple are being assessed) and their household members, and without a full assessment having been completed in line with the requirements of the FSR. The IRM panel strongly advised providers and children's teams to consider how they can work together in order to ensure minimum statutory

checks are done prior to any placement of a child with their relative or other person known to them.

Cases were brought to the IRM where negative references had been made about the applicant that had not been taken into account as part of the assessment. The IRM panel advised that any negative references received during the course of an assessment, or after an assessment has been completed, should be fully investigated. This should include interviewing the person making the negative reference and may include re-interviewing previous referees or asking for new references. A risk assessment should then be completed identifying what information has been verified or disproved and the implications for the applicant's suitability to foster or for children who would be placed. The IRM commented that where a previous partner is still in contact with a child in the family and they are known to have significant convictions, a risk assessment should be undertaken of any risks posed by them, which should take account of protective measures that would be used by the potential foster carer.

The IRM panel also found that fostering services were not providing clear guidance and oversight of foster carers' safe caring policies. There was a need to ensure that identified training to support safe caring is provided and alternative means of delivery considered.

Assessments

The IRM panel commented in a number of cases that fostering assessments were superficial, insufficiently analytical and contained little information to evidence the statements made. There was some confusion about the veracity of information within the reports; some carers had been approved without results of CRB checks and others had not been subject to full health assessments, even where issues have been identified by the applicants. Some issues arose concerning the use of Attachment Style Interviews, in terms of how they had been carried out and interpreted and the weight given to the findings within an assessment. The IRM panel advised that where decision-makers are proposing approval for respite placements only, the same standards of care should be required from the applicant as in full time placements. In some cases, the decision to terminate approval stemmed largely from the carer's ability to deal with a specific very challenging placement. In these circumstances, the IRM panel recommended that the decision maker consider whether a reassessment would be appropriate to explore whether the applicant could deal with other types of placement.

Assessment of suitability to foster where there are birth children in a family

The demands made by fostering on all family members should not be underestimated. The IRM panel was concerned that in some cases there was insufficient exploration and analysis of how fostering might impact on children in the family; and some assessment reports indicated little

understanding of how birth children felt when their parents went back to fostering.

In a number of cases, the IRM panel was concerned that the needs of birth children within foster families was not being considered during initial assessments or reviews of foster carers' approval. Where the suitability of a relative to foster was being assessed, the IRM panel felt that some assessments lacked sufficiently detailed information about the prospective carer's own children, including their current circumstances and their views regarding the possible placement of a specific child. When a relative or other connected person is being assessed as suitable to foster, the IRM stressed the importance of contacting all adult children and interviewing them in order that as full a picture as possible is obtained of the family dynamics.

There were also concerns that in some cases assumptions were being made about suitability to foster based on an applicant's previous involvement in fostering. The new situation was not always fully explored, including support networks, the impact of any cultural issues within a new relationship, how a new child in the family understands the role of fostering and the impact on them. The panel felt that a thorough reassessment should be undertaken of significant changes in circumstances, including direct work with the children of the family.

Breach of the statutory framework

The issues considered within this heading, and which arose regularly within the cases heard, concerned annual reviews of foster carers; procedures for making a QD; failure to carry out statutory checks and enquiries before presenting a completed assessment to the fostering panel; and the right to a fair hearing. The concerns identified by the IRM panel are set out below, although there were also examples of good practice where providers properly met the statutory requirements and worked openly and sensitively with foster carers. The regulations referred to in this section are the Fostering Services Regulations 2002.

They responded positively and fairly to the applicants' request to defer panel date to enable the carers to present a response.

- It was often the case that reviews of foster carers were not carried out each year as required by the Fostering Services Regulations. This meant that in some fostering households there was no up to date assessment of the level of care provided; the needs of the foster carers for support and training were not identified; and concerns were not addressed in a comprehensive and structured manner.
- In many cases, the IRM panel identified that providers were not correctly complying with the requirement to notify a person subject to a QD of their right to seek a review of this by the IRM. This was a particular issue in cases where it was proposed to change terms of approval, where some providers simply issued a notice of change, with no reasons given and no options for review. In other cases where a provider wished to terminate approval, no letter confirming the qualifying determination was submitted to the IRM

and no evidence was provided that one had been sent to the foster carer. Where a letter had been issued, the IRM panel heard cases where no clear reasons were provided for the QD; a copy of the panel recommendation was not provided to the foster carer; and timescales within which to request a review were inaccurate. A further issue in some change of terms cases was a lack of clarity in the QD letter about whether the change to terms was intended to result in a termination of approval once the current placement had ended, which left foster carers puzzled by the intentions of the fostering service.

- Further issues identified by the IRM panel were: QD letters to the applicant that were sent from the fostering manager not the agency decision maker and which in a few cases were signed by the chair of the fostering panel rather than by the decision maker; QD letters advising the applicant that they would be 'de-registered' from the date of that qualifying determination letter, when in fact a final decision cannot be made until 28 days has elapsed or, if representations to the provider or an application to the IRM is made within this period, until a recommendation is received from the fostering panel or IRM.
- There were also difficulties in letters being received by foster carers in a timely manner, so that they had the full 28 day period to consider further representations – the IRM panel advised that all letters regarding serious issues, such as termination of approval, should either be sent recorded delivery or followed up by the provider to ensure they have reached the recipient.
- As indicated above, some providers failed to undertake a CRB check prior to approval and did not provide written reports of interviews with two referees as part of the assessment.
- In many cases, foster carers were denied access to a fair hearing by providers. Where a proposal to terminate a foster carer's approval is being considered by the fostering panel (though it is not a statutory requirement to seek a fostering panel recommendation), the IRM panel advised that it is good practice for providers to invite foster carers to the panel meeting. Indeed, the National Minimum Standards for Fostering Services, which came into force in April 2011, now state that foster carers and prospective foster carers should be given the opportunity to attend and be heard at all panel meetings in which their approval is being discussed, and to bring a supporter if they wish. It was apparent that this had not happened in a number of cases.
- It is also good practice to give foster carers a reasonable amount of time to consider the information which will be presented at the panel, to enable them to respond appropriately. Before providers propose termination of approval they should hold a review (required by regulation 29 of the Fostering Services Regulations 2002; and now by regulation 28 of the 2011 Regulations) and allow the carer, children placed and any local authority who has placed a child with the carer within the preceding year, to express their views before

The role of the "sub Panel" was not clear and information sent to it was not shared with the carer.

taking it to the panel. The IRM panel advised that all relevant reports should be shared with the carer. The panel had concerns about when fostering practices of some carers, which had arisen at different stages of their fostering career, had not been raised with them by their provider until the qualifying determination was made that their approval should be terminated. This left carers without the opportunity to address the issues. Some carers were not informed about the IRM process and found out about it through other agencies or their own research. The handling of complaints against foster carers also gave rise to a sense of unfairness in some cases, when foster carers were not interviewed about a complaint before it was upheld or other actions were taken. The IRM panel advised that this was wrong and clearly contrary to procedures laid down for investigating a complaint.

Diversity issues

The IRM panel noted that some providers failed to fully take into account cross-cultural issues when working with foster carers and making placement decisions. The IRM also noted a failure by some providers to ensure that when placing children with specific conditions, e.g. autism, workers and carers have sufficient understanding of and training on managing those conditions. The use of disability living allowance (DLA) for a child was also an issue, and source of contention, in some cases. The IRM panel advised that providers should have in place clear guidance on applying for and spending DLA.

Matching

The importance of careful matching cannot be underestimated in terms of safeguarding the welfare of looked after children. Over the year in question, the IRM panel made many recommendations to providers about their decision making in relation to placing children with foster carers, and noted a number of concerns.

- Placement teams should be mindful of decisions made by the fostering service's decision maker about appropriate terms of approval and those decisions must be shared with carers. The IRM panel was concerned that some foster carers had experienced inappropriate placements which exceeded their terms of approval. There were a number of cases where fostering services had changed the terms of approval to suit the needs of the fostering service, rather than to reflect an actual change in the capacity and skills of the foster carer.
- There were several cases where carers were expected to take numbers of children that exceeded their terms of approval, over an unacceptably long period, with a lack of appropriate support. Applicants were overloaded, in some cases with up to 7 children placed and with matching agreements intended to protect the carer's family being disregarded. In some cases, children with complex needs from different families had been placed with applicants who were only approved for one child because they had children of their own.

- There was an apparent lack of placement planning and matching in some cases. There were examples of pre-placement assessments, including risk assessments, which did not seem to address the needs of individual children in terms of the suitability of the placement. In other cases, the IRM felt that providers' processes for determining whether a placement made in an emergency remains suitable were insufficient. In emergency situations, matching still needs to be done as carefully as possible and there should be rigour in determining at the outset of a placement the level of support the carer needs to sustain the placement and meet the child's needs. Where respite carers are used for emergency placements, there needs to be a clear protocol on this which is followed by the Emergency Duty Team. Placements need to be monitored and supported, with particular attention paid to the cultural issues involved and the support needed to address the child's cultural needs.

Placement decisions

Two common threads ran through the advice given by the IRM panel: the need for careful, child-centred decisions about making and supporting placements; and the need to pay careful attention to the ending of a placement regardless of the reason for moving the child. The IRM panel expressed many concerns about decision-making during placements, and about the way placements were ended, including the lack of disruption meetings in some instances.

- There were a number of cases indicating a lack of care planning, for example, children's placements that had been changed from short term or respite care to a long term arrangement without formal long term planning or assessment. The IRM panel was concerned about the unnecessary anxiety caused to children in placement by proposals to terminate the approval of foster carers in situations where there was no immediate risk of harm posed to them within that placement. The IRM panel felt that the provider could have made more efforts to evidence the information given to them in order to assess and manage the possible risks.
- The IRM panel were concerned at the lack of support and supervision given to some carers, for example, when a decision had been made to remove a child, sometimes suddenly. There were also examples of relatively inexperienced carers being provided with practical support only when problems arose and not from the start of a placement. Specialist support to placements needs to be given to carers in a timely manner and there should be clear procedures for supporting a placement when children are placed out of authority. The children's social worker and the provider need to take joint responsibility for supporting a placement and work effectively together – the IRM panel observed good, as well as less good, practise in this respect.
- There was concern about the timing and duration of meetings about the ending of placements. In some cases, the IRM panel felt insufficient opportunity had been given for a full and considered discussion, including

...Good level of communication between fostering team and the childcare agency...

the chance for carers to air their feelings. There were instances where no goodbye meeting had been convened and there was no facilitation of contact between the carer and the child who had moved on, despite the longevity of the placement and the attachments which had developed in some cases. Although placement decisions are the responsibility of the local authority which placed the child, providers should understand the reason for a disruption and be consulted on that decision. Care should be taken about managing disruption in a planned way and this should be done through the Looked After Children's Review process.

Presentation to the IRM panel

In many cases the provider's representatives knew the case well and came prepared to answer questions to the IRM panel. They were able to give a balanced view of work that had gone on previously and the social worker's reports were helpful in that they linked competencies with the expressed concerns. Representatives were considerate and respectful to the applicants in their responses. The IRM panel found it particularly helpful when representatives brought files to the panel so that they could answer detailed questions accurately.

References

In addition to issues raised above in the section on safeguarding, the IRM panel felt significant concerns regarding the quality of some original assessments with respect to references, including a lack of references from employers and previous partners. The IRM panel advised that it is good practice to visit all ex-partners, particularly when it is material to the decision. Providers should have clear policies for contacting ex-partners and arrangements for verifying information. Family references should be obtained and both members of a couple seeking to foster should have references. Referees should always be visited and where proposed referees are limited in their knowledge of applicants as a couple or in their present circumstances, further references should be sought. It is good practice to ensure a thorough assessment is made of other significant adults in the household.

The way the initial fostering assessment was supervised and managed it was clear that fostering provider policy and procedure was not adhered to, i.e. ex-partner references.

Support and development of foster carers

Good quality support for foster carers was noted by the IRM panel in a number of cases, including where social workers had supported applicants well after the ending of a placement.

Other examples of good practice included a psychologist who was very helpful and supportive to the applicants; a provider who found alternative employment which used a carer's strengths and skills in a positive way during the process of re-assessing the carer's approval pending a final decision about suitability; a provider who had acknowledged a carer's difficult placement and provided a good level of varied support; and a

The FSP supervising social worker had formed a positive professional working relationship with the applicant which was both challenging and enabling, such that the applicant recognised that the recent changes in her life are not conducive to her continuing to foster.

fostering service who had provided CAMHS support for birth children to help them understand and deal with the behaviour of the foster children.

However, the IRM panel also identified substantial concerns about the quality of support, the level of monitoring and review and the training opportunities offered to carers in a number of cases.

- Fostering Service Providers should offer a more robust support service to carers, with support packages being responsive to specific needs, in particular when foster carers have experienced a traumatic event such as bereavement. Foster carer supervision needs to be relevant and timely and reflect the level of need of the carers. A great deal was expected of single carers with regard to the number of difficult and complex children placed with them. The support and supervision systems for applicants were greatly lacking following the breakdown of the relationship with the supervising social worker. The Fostering Service Provider should be clear about the support that is provided to carers and birth children where there are allegations concerning carers or members of their birth family.
- In some cases, carer's logs were not reviewed at any time and little evidence was given in case papers of an appropriate level of support and supervision. Supervision of carers should be written up and shared with the carers. A more systematic procedure is needed for ensuring that action points in foster carer reviews are followed up. Allocating student social workers to supervise relatively inexperienced carers, with challenging placements, was not to be encouraged.
- There was a lack of relevant, accessible training opportunities for some foster carers; and in some cases, more consideration needed to be given to flexible methods of training. Providers should maintain training records and monitor training needs. Sending carers on courses with practice implications, but with no follow up through supervision is not helpful. Providers should make training available for foster carers who are looking after very challenging children, to provide them with the skills to manage these demands.

Working together

In some cases, the IRM panel identified a lack of evidence of partnership working across the child care and fostering teams, or a blurring of the roles and responsibilities of the children's social worker and the Fostering Service Provider. There was also evidence in some cases that fostering services were not working effectively with foster carers to ensure they have the information they need to care effectively for the foster child. The IRM panel emphasised that providers have a duty to provide foster carers with full information pertaining to young people prior to and during placement. This continues to apply in the case of young people moving to independence and includes, for example, the need to share pathway plans with a young person's foster carer. The IRM panel raised specific concerns about leaving care teams' knowledge and understanding of the fostering task and

regulations. The IRM panel felt that all social workers need to understand roles and responsibilities relating to looked after children and young people, particularly in the context of fostering regulations, standards, statutory and practice guidance.

Section 2

The experience of the IRM for applicants and agencies and providers

Please pass on my thanks to all those at the IRM and BAAF for their consideration of my case in such a calm and helpful way. Even if the outcome from the IRMhad been negative at this stage, I would still feel the same.....

The comments in this section apply to both fostering and adoption cases. Becoming an approved adopter or foster carer is a highly significant event for the individuals concerned and for the children who may be placed with those families. Being refused approval or losing existing approval will have a major impact on their lives. Applying to the IRM represents an independent and often final opportunity for proposals about suitability to be reviewed, and for many applicants it is the process itself, as well as the outcome, which is important for their self esteem and sense of fairness. The IRM regularly receives feedback from applicants who say being heard and treated with respect has been very helpful for them regardless of the outcome of the panel.

For agencies and providers their practise in a case is open to scrutiny and this can be a challenge as well as a learning opportunity. The experience of this process is something the IRM seeks views about from both applicants and agencies. Both are asked to complete questionnaires covering areas such as the information received about the role and process of the IRM panel; the profiles of the members of the IRM panel; how agencies and providers assisted applicants to prepare for the IRM panel; practical arrangements; and how they were received by IRM panel members. This information helps the IRM to improve the service. Changes which have been made or are planned are set out at the end of this section.

Responses from applicants

The IRM received 56 responses from applicants out of a possible 105. In 54 cases the respondents were satisfied with their contact with the IRM office. Many made positive comments about the office staff, e.g. that they were... *very friendly and helpful and particularly non-judgemental*. In most cases applicants were satisfied with the information they received about the role and process of the IRM panel but some felt... *it should have been laid out point by point*. Applicants found the profiles of the panel members helpful and some would have preferred to receive these in advance of the panel. – *Very helpful and informative and found photos made the experience less daunting’...*

In terms of preparation for their panel, respondents in 46 cases said that the IRM did help them but only 7 said that they were helped by their agency or provider. Some applicants commented.... *better explanation of the role of the IRM would have helped us to be better prepared on the day*. Some applicants would have liked notice of the questions to be asked at the IRM panel others wanted advice about what evidence they should present.

With regard to practical arrangements at the IRM panel venue, 32 out of 40 comments were positive in relation to suitability and accessibility and about the provision of a separate waiting room for the agency/provider's representatives. Most respondents felt they were well received and treated with respect and understanding by IRM panel members. Applicants reported being... *made to feel at ease...treated in a fair manner... we felt blown away by the list of positive strengths read out at the beginning...* A small number felt there was not enough time to provide further information to support their case on the day. Only 2 respondents felt that their support worker should have been able to speak.

Responses from Agencies and Providers

Agencies and providers gave feedback in 71 of the 105 cases heard. A substantial majority answered positively to the questions about the role and process of the IRM panel, although the additional comments given revealed concerns as well as satisfaction with their experience of the IRM. A number said it would have been useful to have more information about the process of the panel day, and some respondents did not feel that they received information within reasonable timescales or conveniently. Some commented that it would be useful to receive the panel questions prior to panel in order to prepare and would have preferred more 'free discussion' at the panel. *It would be easier to have simple questions, rather than multiple, compound questions at one go.* On the whole respondents felt they were received and treated with respect and understanding by IRM panel members and were mostly satisfied with the venues. A small number of respondents were unhappy with non-verbal signals they received from panel members, including body language and reactions to answers during the panel. Other concerns related to the practical arrangements at the panel venues and the cost of the process. One respondent felt the panel was insufficiently diverse.

Improvements to the IRM

The following improvements were made to the IRM in response to the comments received from applicants and agencies/providers:

- The constitution of a panel is now more closely matched to the needs of the particular case;
- The information given to applicants and agencies attending the IRM panel has been improved;
- New venues that more appropriately meet the needs of the service;
- Panel members profiles, provided to applicants, are more regularly updated;
- Training is now provided for IRM panel members addressing key areas raised within evaluation and feedback;
- Aspects of the legal framework surrounding the work of the IRM have been clarified.

Complaints to the IRM

The IRM received a total of 7 complaints in 2010–11 from applicants and providers. The complaints from applicants related to unhappiness with the recommendation of the IRM panel; the diversity of the IRM panel membership in terms of ethnicity or other background; and the time available to present their case. Those from providers concerned the recommendation of IRM panel; how the provider's representatives felt they were treated at the IRM panel; a suggested conflict of interest in relation to the choice of supporter by an applicant; and whether the IRM had jurisdiction to accept the cases. A response was provided by the contract manager in all cases and changes made to IRM practice where appropriate, as indicated above.

Section 3

Themes for policy and practice

Themes in adoption

As well as arising through the cases heard by the IRM panel, the themes in adoption have emerged through enquiries to the IRM from a range of individuals who have not reached the stage where a qualifying determination has been made about their application to adopt so they are not able to apply to the IRM for a review of any decision by the adoption agency.

- In some cases individuals have come forward to adopt and the agency has carried out some preliminary enquiries but has not accepted an application. In other cases part of the assessment has been done but no brief report has been presented to the adoption panel. The enquirers are for the most part bewildered and confused about the process they have been through and do not appear to have been clearly informed about how the approval process for prospective adopters works and what stage of the process they are at. There is a sense from some callers that they feel that the 'goalposts' have been shifted in that what were not initially regarded as problems then become obstacles to their approval. Some applicants who were not invited by an adoption agency to complete an application form to start the assessment process felt that there was a loophole in the law and this decision should allow recourse to the IRM.

In particular some agencies do not appear to advise applicants of their duty to present a brief report to the Adoption panel once an application is accepted regardless of the reasons why they would not wish to complete the assessment. Agencies have different approaches to this, some place the expectation on the applicants to formally request that a brief report is presented to the panel and applicants feel under pressure to withdraw their application.

- Medical and health issues were a key factor in a number of the enquiries and cases heard. There was a sense that the agencies may be adopting a risk averse approach to these issues without considering them in context of an assessment of other strengths. Such an approach has also been evident in relation to a history of offences on the part of an individual regardless of the positive aspects of the application.
- Finding a suitable match and disrupted placements have been factors in some cases and have led to a proposal to withdraw approval. Lessons can be learned about the level of advance planning and preparation needed before placing a child to avoid the placement breaking down and a subsequent recommendation to withdraw approval from the prospective

adopter. Equally it is vital to understand the reasons why some approved adopters are waiting a very long time before finding a match and why in some cases this appears to be linked to a breakdown in the relationship between the agency and the prospective adopters.

- The question of how to weigh up the various strengths and concerns within an application to adopt was a repeated theme within the cases with particular reference to the information shared with the agency by the applicants. The important Hofstetter judgment (see above) about the suitability of prospective adoption applicants was published in 2010 in which the judge commented that the need to be open and honest 'should not be applied as a mantra'. There is a sense that agencies can regard this issue as 'non-negotiable' without fully setting it in the overall context of the applicants circumstances and understanding of the adoption process.

Themes in Fostering

A number of the themes which emerged from a consideration of the IRM cases in 2010–11 are similar to those which were evident in the previous year. How allegations of maltreatment in foster care are managed; the quality of risk assessment; how professionals work together; the support for foster carers; and the impact of these factors on placement stability, were all critical issues about which there was significant concern. Some of the issues are dealt with in Section 1 above. The detailed focus in this section is on the issues for children, legal developments and fair treatment of foster carers.

Issues for children

Value of relationships

In a number of cases concerning the termination of a foster carer's approval, children had been moved from a placement with a family with whom they have lived sometimes for several years. Over this period of time relationships and attachments had been established which were disrupted when the child moved, with no clear plans for any ongoing contact. The child loses their primary relationship with the foster carers, but also the experience of being part of the foster carers' extended family. It is of concern that in some cases considered by the IRM, the importance of these enduring relationships was often not acknowledged for the looked after child or for the foster carers' children, who had developed a bond with the child who had become part of their family. In some of the cases the IRM considered, there was little evidence that the child's wishes and feelings had been carefully considered when decisions about changing a placement were made.

The ending of placements

It is well known that children and young people often experience a number of placement moves whilst being looked after and that this adversely affects their ability to make and sustain relationships. It emerged through the IRM

cases heard in 2010–11 that some decisions to move children had been taken without consultation with the foster carer and without the opportunity for proper goodbyes. For example a placement which was ended by text; children going to school and not returning home to their foster carer at the end of the day; or children being removed from a placement by social workers they had never met. The importance of consulting the foster carer about key decisions concerning the child was highlighted by the judge in the case of *R (on application of Bewry) v Norfolk County Council* [2010] All ER (D) 53 (Oct). In his judgment, Holman J held that the local authority had erred in law in holding a meeting and removing some young men from a foster parent (by not returning them to him after respite care), without consulting him. He should have been informed of the meeting to be held and of the fact that removing the children would be on the agenda, and he should have been given the chance to express his wishes and feelings on the issue of removal. The judge stated that, “In all the circumstances, no reasonable authority would have considered the claimant’s wishes and feelings were anything other than relevant...”

Sometimes children are left in placements following allegations, but are then moved suddenly, without proper preparation, following a strategy meeting. In such cases, it was often not apparent within the paperwork whether the child’s wishes and feelings had been carefully consulted during the process.

When placements ended following allegations by a looked after child and the case came to the IRM, the papers indicated that professionals had not considered whether ongoing contact between the child and the foster carer might be appropriate. If it appeared that challenging behaviour had reduced in the next placement, this was often put forward by implication as evidence of previous poor care. Whilst the care may not have been good enough this does not acknowledge the importance of the emotional investment the child may have made to the carers and the family. It is of concern that the issues relating to the ending of a placement may remain unresolved and the young person may then be left with a sense of fault or blame.

When permanent placements had ended, there was evidence of good practice in the holding of disruption meetings which carefully examined the lessons to be learned and informed future plans for the child. Disruption meetings are also important for foster carers to have closure, as they can help the carer deal with their loss. However, it is of concern that disruption meetings were sometimes not held or were inadequate to the purpose.

Children in placement

In some cases applications are made to the IRM when children are still living with the foster carers. This is mostly the case when the children are living with family members, but also in cases where a carer’s approval is being terminated or its terms amended. In most of these cases, the children’s services had decided that the children’s needs were being met in their current placement, there were no plans to move them and the children

wished to stay, but the foster carer did not meet the standards required by the fostering service. This clearly poses a dilemma in making best interests decisions for children. On a similar theme, there were instances of providers proposing changes to a carer's terms of approval so that the carer would only be approved for a specific child, with the clear intention of not placing any further children in the household when that young person moves on. This raises the question of the standards of care which should be expected for all children. If the provider does not have confidence in the standard of care provided by the foster carer is it then appropriate for any child to be placed with the carer? As indicated in section 1 of this report there were also frequent examples of placements made outside the foster carer's terms of approval or without taking account of the needs of individual children and the circumstances of the carer. These decisions contribute greatly to stress and pressure on the carers and to instability for the children concerned.

Legal Issues

During the course of 2010–11, in the run up to the implementation of new regulations, standards and statutory guidance, many questions arose from providers, individual applicants and other organisations about the assessment and status of foster carers and about changes in a foster carer's terms of approval in relation to recourse to the IRM.

- Some providers have taken the view that if a foster carer is approved for a specific named child, then if that child leaves the placement the carer is no longer approved. This is not the case, the regulations regarding termination of a foster carer's approval apply in the same way to foster carers approved for a specific child as to other foster carers. If a carer's named child moves on, there should be a formal review of the carer's approval and if a QD is made, the carer should be informed of their right to make representations to the provider or to seek a review by the IRM. Of course, there is no requirement for the carer to take up this right, and for some carers approved for a specific child who has moved on, they may not wish to do so.
- When the Fostering Services Regulations 2011 came into force the requirement was clarified that providers must complete a full assessment once it has commenced, present it to the fostering panel for a recommendation and then to the decision maker for a decision or qualifying determination. If an applicant withdraws their application then this is not required.
- A number of providers believe that by seeking an 'exemption' under Schedule 7 of the Children Act 1989, they can change a foster carer's terms of approval on a temporary basis. However such an exemption can only be granted by the local authority in whose area the foster carer lives and simply allows the foster carer to exceed the usual fostering limit without being regarded as operating a children's home. Any change in the foster carer's terms of approval must follow due process under the Fostering Services Regulations 2011. With the implementation of s.23 of

the Care Planning, Placement and Case Review Regulations 2010, a child may be placed with a foster carer in an emergency 'even if the terms of that approval are not consistent with the placement, provided that the placement is for no longer than six working days.' If the responsible authority wishes to place the child for a longer period of time it must amend the foster carer's terms of approval. A proposed change in terms of approval is always a QD (even if the foster carer agrees with the change in terms). A frequently asked questions guide on this subject is now available on the DfE website⁴.

- The Department has clarified that if a foster carer applies for an independent review of a QD to change their terms of approval, and the IRM considers that the applicant would not be suitable to foster under any terms of approval, the IRM can recommend to the provider that the carer's approval be terminated.

Fair treatment for foster carers

Substantial concerns have been raised by a range of professionals who work with the IRM that evidence of unfair treatment of foster carers by providers has gathered pace since 2009 when the IRM started to hear fostering cases. These concerns include foster carers being denied the right to a fair hearing within the approval and review process; over burdening of foster carers; lack of support; punitive approaches when problems occur; lack of evidence to support decisions; lack of appropriate information sharing; failure to hold annual reviews of foster carers' approval; and lack of consultation and joint working with foster carers. It is important to note that many providers do work fairly and openly with their foster carers, but this daunting list with regard to some providers can only serve to damage confidence in fostering as a vocation and discourage people from coming forward to undertake this vital role.

4 <http://media.education.gov.uk/assets/files/pdf/f/faqs%20n%20changing%20terms%20of%20approval.pdf>

Section 4

Statistics, tables and analysis

1 CASES ACCEPTED

Accepted cases are those cases where a QD was made by the agency or provider and the applicant has applied for an independent review to the IRM within the appropriate timescales. There were 101 cases accepted by the IRM between 1st April 2010 and 31st March 2011; 17 of the accepted cases were Adoption and 84 of the accepted cases were Fostering

There were 12 enquiries and applications which could not be accepted from prospective adopters. In a number of cases enquirers reported that some work had been done on preparing their report but it had not been presented to panel and there was no QD, others involved enquiries about adopting specific children.

The IRM also received 30 enquiries or applications from existing or prospective foster carers who were not able to apply to the IRM or which could not be accepted for a range of reasons. In some cases the assessment had not been completed by the provider and presented to the panel (sometimes because of information arising through CRB checks). In others, the applicant was attempting to change provider and thought that the previous provider had given a negative reference about them which meant that their application had not been accepted, although they did not know what had been written. Some of these enquirers presented with an air of bewilderment about what was happening to them and what their 'rights' were in terms of the process and information sharing.

The breakdown of accepted cases is given in the tables below (numbers under 5 have been suppressed).

In eight of the adoption cases a full assessment had been completed, including for inter country adoption. In nine cases the adoption agency proposed to stop the assessment part way through and presented a brief prospective adopter's report to the Adoption panel or proposed to withdraw the approval to adopt. A number of cases were applications to be approved to adopt a specific child known to the prospective adopters.

Table 1 **Accepted adoption cases 2010-11**

Description	Total numbers	Percentage
Full prospective adopter's report including inter-country adoption	8	47%
Brief prospective adopter's report and Review report on adopter	9	53%
Total	17	100%

In the 84 accepted fostering cases, the number involving family or connected carers was slightly higher than last year, as was the number involving changing terms of approval. Applications involving the termination of approval are again the highest proportion of cases by far.

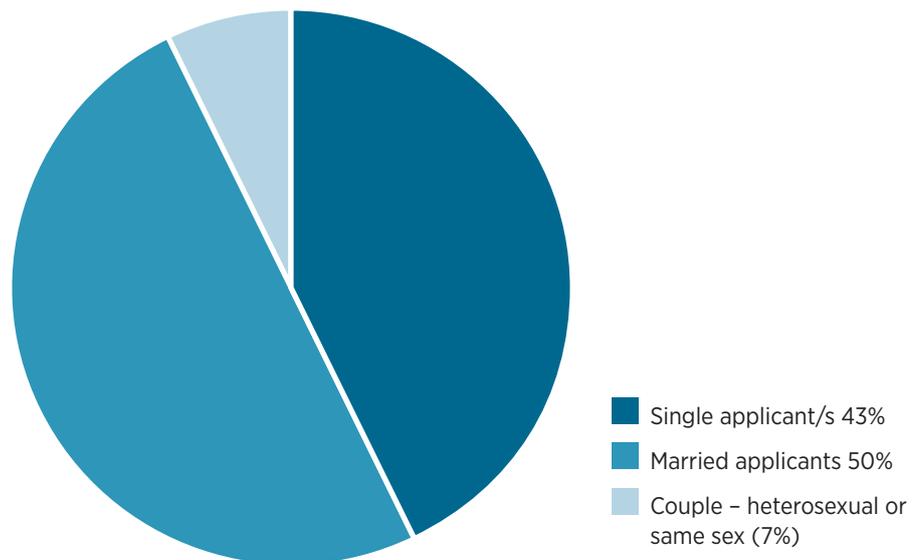
Table 2 **Accepted fostering cases 2010-11**

Description	Total numbers	Percentage
Determination not to approve a prospective foster carer including kinship carer	14	17%
Determination to terminate a foster carer's approval	63	75%
Change to a foster carer's terms of approval	7	8%
Total	84	100%

2 STATUS OF APPLICANTS

Within the 84 fostering cases, 36 applications were from single women or men, 42 applications were from married couples and 6 applications were from unmarried couples, including same sex couples. The majority of the adoption cases accepted was from couples.

Figure 1 **Status of applicants**



3 ETHNICITY

The ethnicity of all applicants to the IRM whose cases were accepted between 1st April 2010 and 31st March 2011 is set out in the table below. The information was derived from the assessment report in most cases and in a small number of cases it is not known.

The number of fostering and adoption applicants to the IRM from a black, mixed or Asian background is 27%. This is compared with approximately 14% of the population of foster carers as a whole⁵. A note of caution should be taken on any conclusive interpretation of the IRM figure as we do not have similar overview data on the ethnicity of adopters to allow for a full and considered comparison. This would require further study to understand the reasons behind it.

5 Ofsted carried out a survey of fostering households and fostering services covering the period 11 April 2009 to 31 March 2010. The response rate was 73%. The survey estimated that 85.3% of foster carers were White, 1.5% were mixed race, 4.1% were Asian/Asian British, 8.4% were Black/Black British and less than 1% (0.8%) were from other ethnic groups.

Table 3 Ethnicity of applicants

Ethnic Group	Ethnicity	Total Number	Group Total	Percentage
White	White British	109		
	White English	5		
	White European, White Greek, White Irish and White Other	9		
			123	72%
Black	Black African	7		
	Black African Caribbean, Black British and Black Other	8		
	Black Caribbean	12	27	16%
Mixed – due to the small number of cases no similar breakdown can be provided	W/B African	–		
	W/B Caribbean	–		
	W/B Other	–		
Asian	Asian Bangladeshi, Asian British, Asian Indian, Asian Pakistani and Chinese	10		
	Asian Other	6	16	9%
Unknown due to the small number of cases no similar breakdown can be provided	Unknown	–		
Total		171	171	100%

The figure of 171 represents the individual's ethnicity not per case (i.e. including where a couple do not share the same ethnicity)

4 OUTCOMES OF CASES HEARD

The IRM heard a total of 105 cases between 1st April 2010 and 31st March 2011. These were 89 fostering cases and 16 adoption cases. Where the agency's or provider's decision maker made the final decision to approve, this means that those applicants could foster or continue to foster on suitable terms, have their adoption assessment completed or proceed to have a child matched with them with a view to adoption. Apart from the importance of this decision for the individuals concerned, the wider implications are those of retaining good placements for looked after children and maintaining confidence in the approvals system as a result of the independent scrutiny of decision making. If the final outcome is not to approve, those applicants have had a full opportunity for the concerns in their case to be carefully examined.

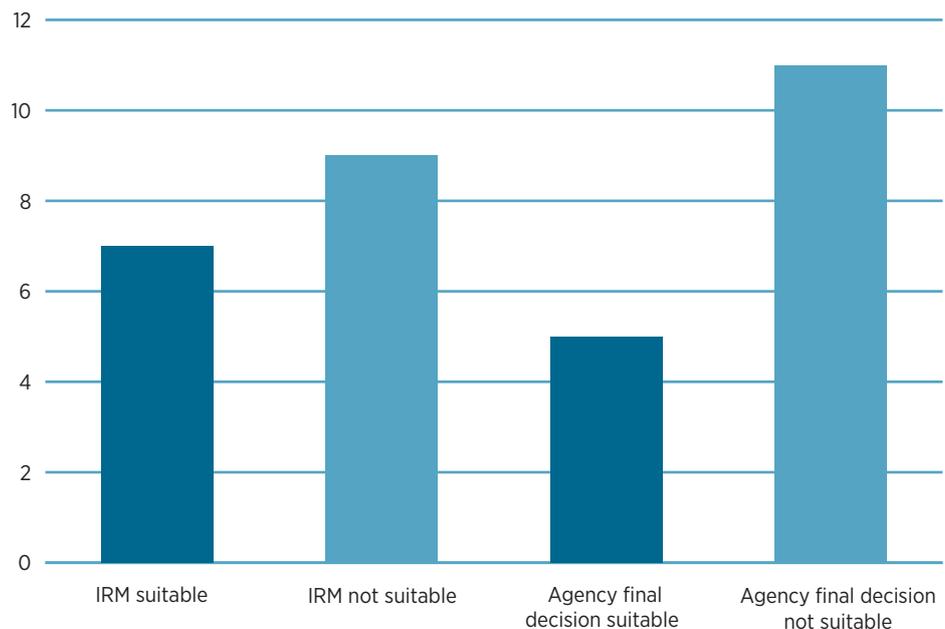
Adoption cases

Of the adoption cases heard by the IRM approximately a third have been finally approved by their agency.

Out of the total of 16 cases the IRM made a positive recommendation in terms of suitability **in 7 or 43% of cases** and did not recommend the applicants as suitable in 9 or 57 % of cases.

The Adoption Agency decision maker agreed that the applicants were suitable to adopt in 5 of the 7 cases and made his/her final decision accordingly. The detailed breakdown is below showing the IRM recommendation and the agency decision. Nine of the cases involved a proposal not to complete the adoption assessment following the preparation of a brief report or to withdraw approval to adopt for existing prospective adopters.

Figure 2 **IRM recommendations and agency final decisions**



- In a small number of cases, the IRM recommended that the applicant was suitable or the report should be completed.
- In the remaining 7 cases, a full assessment had been carried out, including for inter country adoption.
- The IRM recommended that the applicants were suitable to adopt in 5 of these 7 cases.

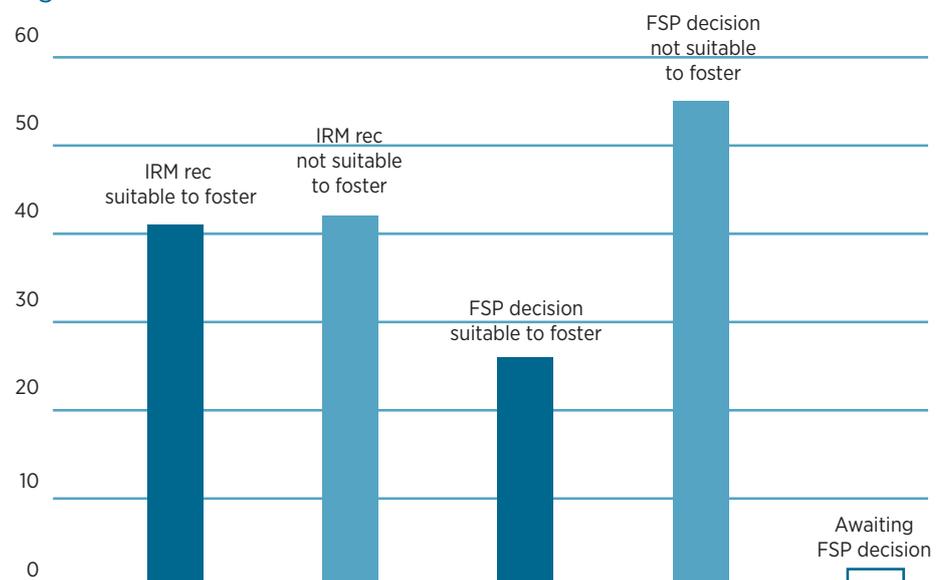
Fostering cases

Of the total of 89 fostering cases heard, the IRM made a positive recommendation in terms of suitability **in 45 or 51% of the cases.**

The fostering service provider agreed that the applicants were suitable to foster, or broadly with the recommended terms of approval, in 32 of these cases. The detailed breakdown is below (see Figure 3, which does not include the terms of approval cases)

- 5 cases involved initial assessment of suitability to foster
- 9 cases involved initial assessment of suitability to foster of family or friends in relation to a specific child
- The IRM recommended that the applicants were suitable to foster in 8 of these 14 cases
- In 5 of these cases, the fostering service provider agreed with the IRM recommendation that the applicant/s were suitable to foster
- 69 of the cases involved a proposal to terminate the foster carer's approval
- The IRM recommended that the applicants were suitable to continue to foster in 33 of these cases
- In 21 cases, the fostering service provider agreed with the IRM recommendation that the applicant/s were suitable to foster
- In a small number of cases where the IRM made a positive recommendation the providers have not yet made their final decision.
- 6 cases involved a proposal to change the terms of the foster carer's approval
- The IRM recommended less restrictive terms of approval in 4 of these cases
- The provider agreed broadly with the IRM in 4 cases.

Figure 3 IRM recommendations and FSP final decisions



5 REASONS FOR CONCERNS

Adoption cases

The quality and detail of the reasons given by decision makers for their qualifying determination varied between agencies. In some cases the decision maker clearly showed evidence of having considered the panel recommendation, other information and of having reached an independent decision. In others this process was less clear. For adoption agencies the issues of concern which occurred most frequently in the cases heard by the IRM related to parenting a looked after child and understanding the challenges of being an adoptive parent. Although medical reasons did feature, there were no cases where prospective adopters were not approved because of lifestyle issues such as weight or smoking. The question of openness in the working relationship with the agency was also a significant factor for agencies, but only accepted as a concern in half of these cases by the IRM.

Table 4

Reasons for QD/IRM concern in adoption cases	QD in cases not approved by IRM	IRM concern	Agency QD in cases with a positive recommendation by IRM
Ability to manage stress	0	0	1
Ability to work with the agency	4	2	0
Accommodation issues	0	0	0
Ability to parent a looked after child	5	4	4
Impact on existing children/family	0	1	1
Inability to understand needs of looked after child	2	5	2
Problems about infertility	0	1	0
Lack of childcare experience	1	0	0
Lack of emotional resilience	0	1	3
Lifestyle issues – drinking, smoking etc	0	0	0
Medical issues of applicant/s	2	2	2
Motivation to adopt	1	2	1
References	1	0	0
Stability/permanence of relationship	0	1	0
Support networks	0	1	0
Understanding of role of Adoption	3	2	2
Withholding or refusal to discuss information	3	3	3
Work commitments	0	0	0

Fostering cases

The Fostering Services Regulations require a fostering service decision maker to give his/her reasons for their QD and to provide a copy of the fostering panel's recommendation to the applicants (unless the QD relates to a second or subsequent review of approval and a recommendation from the fostering panel was not sought). In many cases considered by the IRM, the decision maker's letter simply talked of 'ratifying' the 'decision' or recommendation of the panel, or gave no reasons for the QD. The fostering panel recommendation was often not included. Some of these letters had been signed by panel chairs or someone not designated as decision maker for the agency. This causes difficulties for applicants who do not know clearly the basis for this critical decision about their existing or future fostering career. It is hoped that the Statutory Guidance for Fostering Services issued in April 2011, which gives advice to decision makers about the process of making decisions, will assist.

The predominant reasons for the QD in fostering cases, related to risk factors, including allegations of abuse within foster carers' households. However, the largest single category of reasons was the ability of the foster carer to work with the fostering service. This category includes questions of trust and openness; keeping the fostering service fully informed about the child or the fostering household; working in partnership with the fostering service; and communication and relationship difficulties with the fostering service. In a number of cases where the concern was about a breakdown in the relationship between the foster carers and the fostering service, the IRM's view was that this was not in itself indicative of a lack of suitability to foster.

Table 5

Reasons for QD and for IRM concerns in fostering cases	Reasons in cases where IRM agreed with QD	IRM concerns	Reasons for QD in cases with positive recommendation by IRM
Ability to work with the FSP	33	22	22
Accommodation issues	2	1	3
Allegation of abuse against applicant/s or applicant/s family	17	5	14
Ability to parent a looked after child	28	13	13
Financial concerns	1	1	3
Impact on existing children/family	6	5	0
Inability to change	9	15	11
Inability to understand the needs of a looked after child	2	11	3
Lack of emotional resilience	0	15	3
Lifestyle issues – drinking, smoking etc	3	4	3
Medical issues of applicant/s	3	2	3
Motivation to foster	1	5	3
Potential risk factors, including inability to provide safe caring	19	9	12
References	0	1	0
Stability/permanence of relationship	1	3	3
Standard of care issues	13	5	11
Support networks	2	6	0
Inability to prioritise children's needs above one's own	2	5	4
Unwillingness to train	10	6	4
Understand role of foster carer	11	24	4
Use of corporal punishment/restraint/discipline issues	7	0	0
Withholding, or refusal to discuss, information	10	7	12
Work commitments	0	0	1

6 GEOGRAPHICAL SPREAD

This report refers to the whole of England, which is divided into region. The distribution of cases is analysed in terms of where the applicants live and also where the agencies or providers are based.

Of the 101 cases accepted between 1st April 2010 and 31st March 2011 the geographical breakdown is as follows:

Applicants

Central - 29

North West - 14

East and the South West - 7

South East - 18

London - 16

North East - 17

Agencies and Providers

Central - 28

North West - 13

East and the South West - 8

South East - 17

London - 16

North East - 19

Figure 4 Applicants by Region

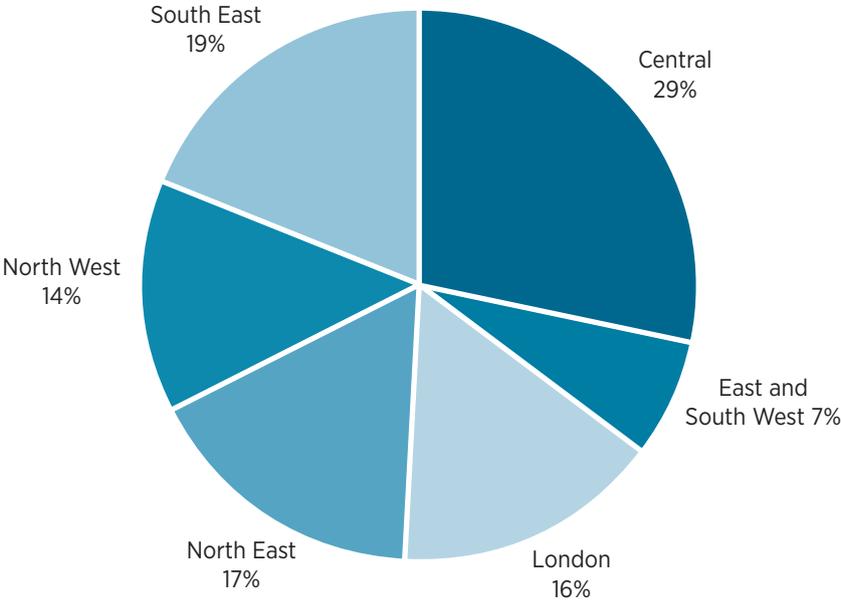
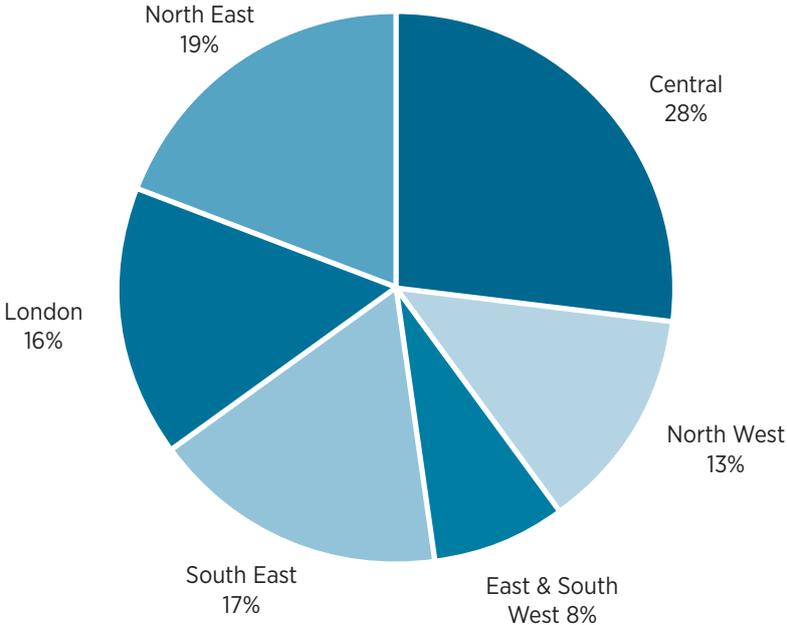


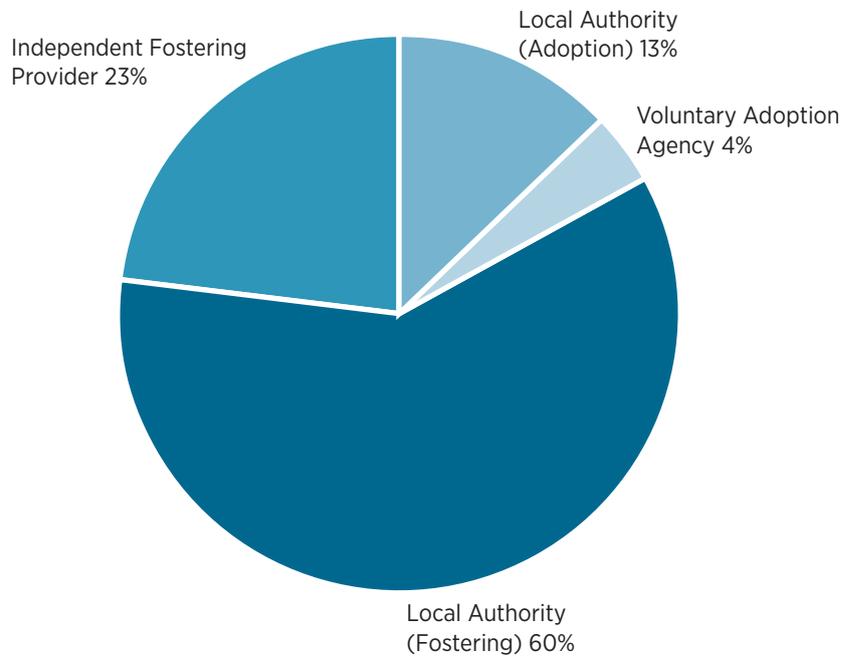
Figure 5 Agency/FSP by Region



7 TYPE OF AGENCY

The vast majority of the applications were from local authorities in adoption cases with a small number from voluntary adoption agencies. 61 of the 84 cases accepted were received from local authorities and the remaining 23 fostering were from independent fostering providers. The scope of this report does not allow us to analyse whether there are the same areas and levels of concern in both adoption and fostering.

Figure 6 **Types of Agency/FSP**



8 PANEL LOCATIONS

IRM panels were initially held monthly in Leeds, Birmingham and twice monthly in London. High demand during the first 2 years of the new IRM has led to the scheduling of a regular panel now additionally sitting monthly in Manchester and occasional additional panels in other locations.

Applicants are offered a hearing in the panel which is nearest to their home although this does involve substantial travel for some applicants. In 2010-11 the cases were heard as set out in the table below.

Table 6

Birmingham	23 cases	(22 Fostering 1 Adoption)
Leeds	23 cases	(20 Fostering 3 Adoption)
London	48 cases	(38 Fostering 10 Adoption)
Manchester	11 cases	(9 Fostering 2 Adoption)

Conclusion

I felt the personnel and process were very fair and considered, given the complexity of the details presented.... the IRM showed great professionalism and humanity to somebody in my position.'

The existence of the IRM is based on the principles of fairness, openness and independent external scrutiny. These principles form the key to all good social work practice, and the IRM offers a valuable addition to ensuring that safe and suitable placements are offered to looked after children. The existence of the IRM offers some public confidence in the process of approving applicants as suitable to foster or adopt and a reassurance to applicants and to agencies in relation to the quality of placements. The IRM is funded by the Department for Education, although all agencies and providers whose QD is reviewed by the IRM make a contribution towards the cost of the review. At a time of financial stringency, some agencies and providers have questioned the necessity of the IRM. Although others, as well as prospective adopters and foster carers, value the existence of an independent and external review in those cases where difficult decisions need to be made. Time and again applicants for an independent review contact the IRM to stress the importance of the opportunity to have their say and be heard, whether or not the outcome is what they hoped for.

Contact details

Details of the IRM service and team are below.

The IRM Contract Manager undertakes a number of presentations at key stakeholder events during the year to discuss issues related to practice and learning from the IRM.

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