



**Dorset Council:  
Quality Assurance & Reviewing  
Officer (QARO)  
Annual Report 2020/2021**

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## 1. Introduction

- 1.0 This annual Quality Assurance Reviewing Officer (QARO) report provides evidence relating to the wider Independent Reviewing Officer (IRO) role within the Quality Assurance Reviewing Officer Service in Dorset Council. It covers the period 1 April 2020 to 31 March 2021, as required by statutory guidance.
- 1.1 The information and data describe a developing and quality service which continues to support good outcomes for children and young people in care in Dorset. Within this report are examples of QARO work with children, as well as detailed charts showing key information.
- 1.2 This collaborative approach to working enables the service to work alongside our Corporate Parenting Board, our Children in Care Council and Dorset's Safeguarding Children's Partnership.
- 1.3 We continue to believe that a person centred, relational approach is more effective in improving the experiences and outcomes for our children in care and that this can be achieved alongside robust escalations and challenge.
- 1.4 The report includes a profile of the service, which continues to see minimal staff changes throughout the year and enables consistency for our children and young people. We have secured permanent appointments for both QARO and QA manager during the year and have had the consistency of an interim manager working alongside the permanent QARO manager for a seamless handover and transition period.
- 1.5 Sickness absence has been a challenge during some periods of the Covid-19 pandemic. Despite this we have managed to maintain a consistent and effective service throughout the unprecedented last 12 months. Average caseloads for QAROs are no higher than 70 for full time and 35 for part-time staff. The report identifies the importance of supervision and peer support, alongside training and reflective practice to maintain the professional development of the team.
- 1.6 This report considers in detail the profile of our children in care, including their age, gender and ethnic background, the length of time in care, legal status, and type of placement.
- 1.7 In the period 1 April 2020 to 31 March 2021, the QARO service completed a total of 1397 child in care reviews with 96.28% completed within timescales. Just over 91% of children aged 4 and over participated fully in their reviews.
- 1.8 The report highlights the development of our escalation process and evidence that this is becoming embedded in practice and having a positive impact on outcomes for our children and young people. The service escalated 208 concerns over the 12-month period. 28% were concluded informally, 52% reached stage 1 (team manager), 16% resolved by stage 2 (service manager) and just 4% required escalation to Stage 3 (Head of Locality). There were no escalations to the Corporate Director or Executive Director within this period. Learning from any themes identified are explored within this report.
- 1.9 The quality of care planning within Dorset is informed by data and service audits. QAROs provide a level of stability and continuity for many children in care and this report provides examples of QAROs supporting children and young people through care planning and the difficulties and uncertainties some of our children are faced with. There is increasing evidence of the "QARO

footprint” and oversight on our children’s records, alongside the audit outcomes which are used to inform and improve QARO practice as well as support wider improvements across Dorset Council Children’s services.

- 1.10 The QARO service, like the rest of the Council and its partners, has needed to adapt quickly to the changing situation linked to the Covid-19 pandemic. This has resulted in a high number of reviews being held remotely via a range of technologies. Where it has been safe and following a clear risk assessment, child in care reviews (CICRs) and visits to children and young people by their QARO have continued throughout the pandemic to maintain “business as usual” for our most vulnerable children and young people.
- 1.11 The report concludes with a summary of achievements & progress made over the last 12 months as well as details of our service intentions for the forthcoming year (2021/22).

## **2. Purpose of Service & Legal Context:**

- 2.1 The QARO service is set within the framework of the IRO Handbook (2010), linked to the Revised Care Planning Regulations and Guidance (April 2011).
- 2.2 The QARO has a key role in relation to the promotion and improvement of Care Planning for Children in Care and for challenging drift and delay in their care and permanence planning. A key task for the QARO is to build relationships with children, young people, family network and professionals to enhance effective decision making and care planning to establish positive outcomes. The Handbook sets out the requirement for the QARO service to produce an annual report and the legal context and the purpose of the service.
- 2.3 The functions and requirements of the IRO function within our QARO service are:
  - All Children in Care should have a named QARO who, as far as possible, remains a consistent figure in the child’s life, during their journey through care.
  - There should be the same QARO for sibling groups where possible.
  - The QARO should chair the child or young person’s Child in Care Reviews
  - Promote, and ensure that due regard is given to the voice of the child in their care plan, permanence plan and care arrangements.
  - Ensure that plans for the child are based on a detailed and informed assessment, which is up to date, effective and provides a real and genuine response to each child’s needs.
  - Meet with the child and consult with him or her, making sure that the child understands what is happening to them, can make a genuine contribution to plans, fully understands the implications of any changes, and understands how an advocate could help, and his/her entitlement to this, and legal advice.
  - Be aware of, and if necessary, take action to prevent any unnecessary delay in care and permanence planning for children in care and the delivery of services to them.
  - Have an overview of the Local Authority as a corporate parent in ensuring that care plans have given proper consideration and weight to the child’s wishes and feelings.
  - To provide challenge and support to social workers and their managers to ensure the best life chances for children and young people.
  - To have an effective means of challenging the Local Authority, including a

Dispute Resolution Procedure, with the ability to convey concerns to CAFCASS and access to independent legal advice

- 2.4 The roles and responsibilities of the IRO are defined by:
- The Local Authority Social Services Act 1970 (ref section 7)
  - The Children Act 1989
  - The Human Rights Act 1998
  - The Adoption and Children Act 2002
  - The Children Act 2004
  - The Children and Young People's Act 2008
  - Care Planning, Placement and Case Review Regulations 2010
  - QARO Handbook 2010 (implemented 1 April 2011)

### **3. Professional Profile of Dorset Quality Assurance Reviewing Officer (QARO) Service**

- 3.1 The QARO Service sits within the Quality Assurance & Partnerships area of Children's Services. It has core responsibility for reviewing care plans for children in care and monitoring and challenging the Local Authority in respect of its corporate parenting and safeguarding responsibilities.
- 3.2 The QAROs are independent but remain managed within Children's Services. They hold no line management responsibility for any children in care. They are qualified experienced social workers with significant children's social work and Team Management experience. Each QARO has links to a locality within Dorset which enables relational practice and consistency for all our staff & partner agencies.
- 3.3 The IRO element of the QARO Service continues to be separate to the Child Protection Conference Service. We are working towards QAROs having a caseload of both child protection and children in care. By having responsibility for the chairing and oversight of child protection alongside children in care, we believe this will enable sustained capacity to strengthen identity, culture, and working practice across the service. This also enhances the independent challenge required and strengthens the skill set of QAROs to provide a service in line with the IRO handbook.
- 3.4 The IRO function of the QARO service has a staffing configuration of 8.6 FTE staff at Team Manager Level (Grade 13) with a QARO Manager (Grade 14), overseen by Head of Service (Grade 17). On 31 March 2021 there were 10 QAROs of mixed gender (3 males, 7 females) and ethnicity. The diversity of the workforce potentially enables a better awareness and understanding of the potential discrimination that children in care may face. The QAROs consider and promote the different needs of children, to ensure that their care plan addresses their specific identity including ethnicity and diversity needs. Since October 2020 the workforce has been stable, with all QAROs being permanent employees of Dorset Council.
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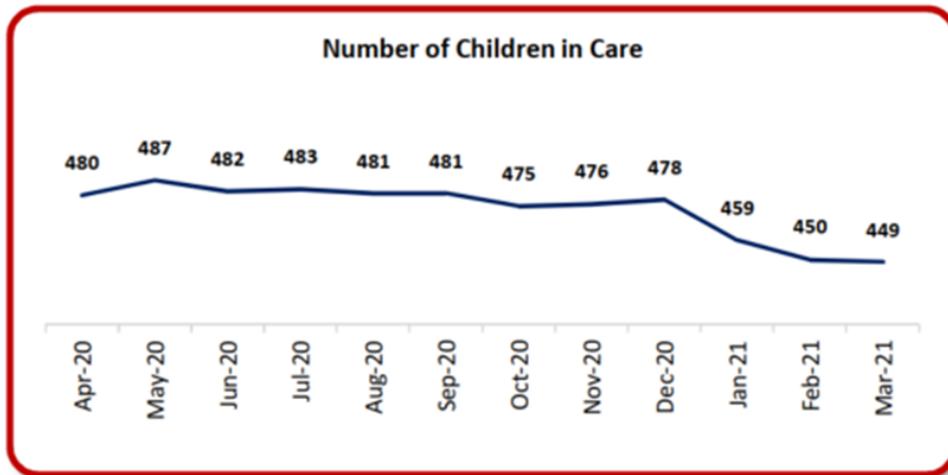
#### **4. National, Regional and Local Links:**

- 4.1 The Quality Assurance manager meets every 3 months with IRO & child protection managers from the South West region. This has been of particular benefit throughout the Covid pandemic where we have maintained reflective and peer support and shared changes to practice and procedures.
- 4.2 The CAF/CASS (Child & Family Court Advisory Services) manager meets monthly with the Heads of Service. Alongside this there is direct communication and liaison between the QARO and CAF/CASS officers for those children where there are care proceedings. Communication between the CAF/CASS and QARO managers is currently informal, with the expectation that there will be increased opportunities for joint working and collaboration over the next 12 months.
- 4.3 The service has sought to maintain direct working relationships and links with the social work services (albeit virtually) over the last 12 months. The Director, Head of Locality and Service Managers regularly attend relevant senior management meetings and events held by the Council. Each QARO has a direct link to the locality teams across Dorset. This has enabled them all to develop professional working relationships & improve communication between the 2 services. The QARO can share performance data, audit outcomes, and offer consultations to a range of professionals working within the localities.
- 4.4 Liaison with our partner agencies in Health and Education continues to be a priority for the service. We have a professional working relationship with the Children in Care virtual schools service and Children In Care nurses. This includes meetings between managers & attendance at team meetings to promote partnership working.
- 4.5 The service has monthly Quality assurance meetings (QPAG) attended by the Corporate Director of Children's services, Heads of Service, Heads of Locality, Service managers and Locality Education Leads, alongside the QA managers. This has enabled a wider awareness and understanding of the QARO role and contributes to the discussions and analysis of the Council's performance and key priorities. QAROs continue to routinely contribute to the Council's practice evaluation and learning processes.

#### **5. Quantitative information - Children in Care Population**

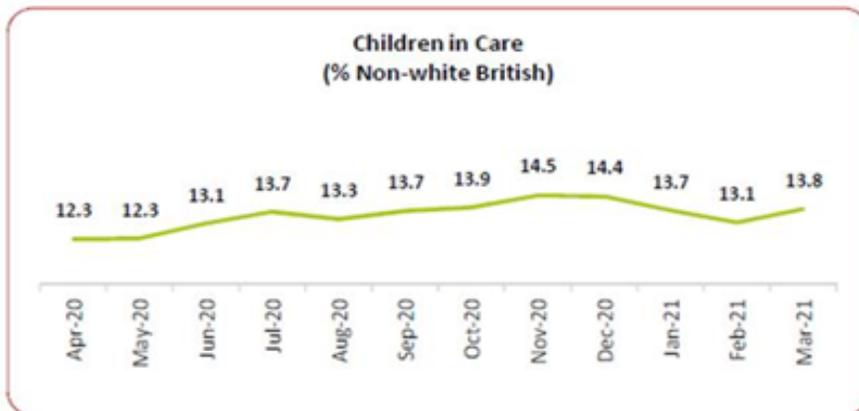
- 5.1 As at 31 March 2021, Dorset Council had corporate parenting responsibility for 449 children and young people. This is a reduction of 31 over the last 12 months. The reduction in children in care numbers can be attributed to preventative work at early intervention to maintain children & young people to remain within their family, a number of our young people have turned 18, some have been reunified with family members or have achieved permanency through adoption or special guardianship orders. We are continuing to work hard to enable children and young people to either remain with or return to their birth families, when it is safe to do so.
- 5.2 On 31 March 2021, 51% of our children in care had a SEN. 34% of these children & young people had an EHCP and 18% received SEN support from their school. 56% of the children in care with a SEN were male and 41% female. 5% of the young people in care were not in Education Employment or Training (NEET).

**Fig 1: Indicates the reduction in Children in Care between April 20 and March 21.**



5.3 14% of the children in care population are from black and minority ethnic groups. We have seen a small increase of 1.5% in the last 12 months and reflects the increase in diversity of Dorset school age population.

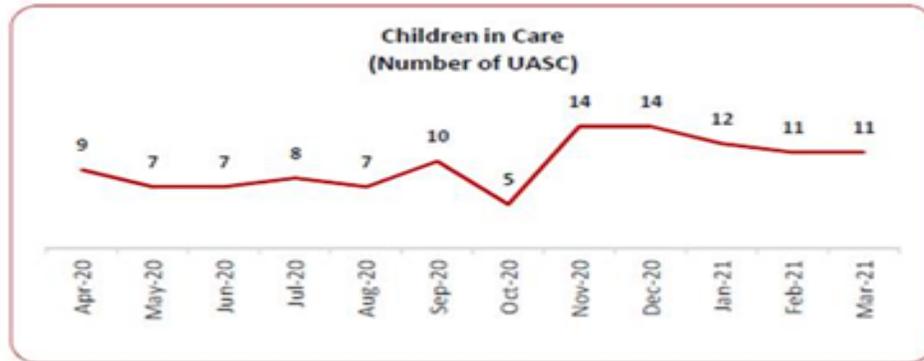
**Fig 2: Shows a graph of % of Children in Care who are white non-British**



5.4 Dorset has a small number of unaccompanied asylum-seeking children which makes up 2% of the Children in Care population. Nationally unaccompanied asylum-seeking children represent around 6% of all Children in Care and are usually male, with absent parenting identified as the main category of need. We are acutely aware that unaccompanied asylum-seeking children may be amongst the most traumatised & vulnerable children our service works with. The QARO provides independent oversight and challenge (where needed) to ensure the children have the right support at the right time to help them to adjust and start to rebuild their lives. This includes the need for any specific psychological or mental health support and giving regard to the young

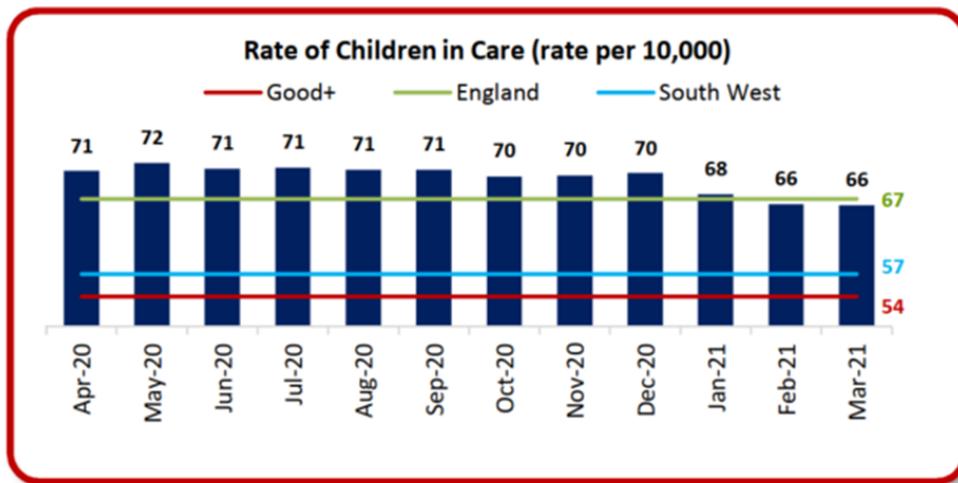
person's age and independent living skills when considering the intensity of support and intervention required.

**Fig 3: Indicates the change in numbers of our unaccompanied asylum-seeking children over the last 12 months.**



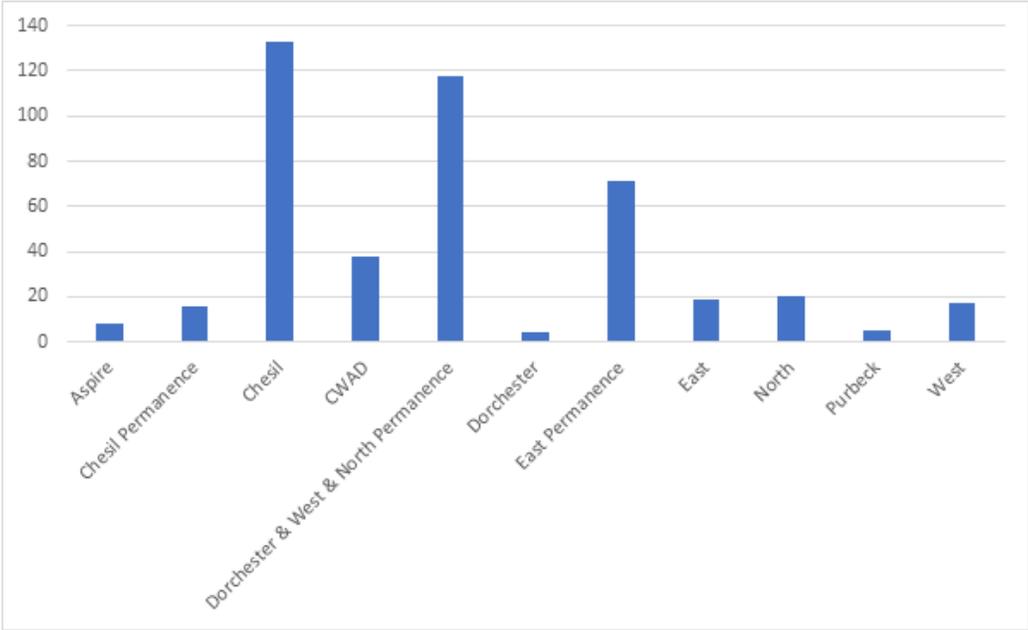
5.5 As of 31 March 2021, the rate of Children in care in Dorset was 66 per 10,000 population. This has reduced from 71 in April 2020 and been relatively consistent for the last quarter (January-March 21). It is positive that this is just below the National average (67 per 10,000) but significantly higher than our statistical neighbours' in the South West, which is a rate of 57 per 10,000.

**Fig 4: Shows the rate of CIC per 10,000 for Dorset and comparison locally and nationally.**



5.6 Noting the comparisons for Dorset Council with national, regional, and statistical neighbour figures, there is also some considerable difference across the Council's locality/areas. Fig 5 highlights the areas with the highest number of children in care.

**Fig 5: Indicates numbers of Children in care per locality area (31.3.21)**



- 5.7 Dorset has a higher number of males (57%) in care, compared to females (43%). Both figures have remained consistent from last year. There is no current data available for those children and young people who are non-binary.
- 5.8 Of the 449 children in care across Dorset the highest proportion of children are within the 16 years+ age range, making up 25% of the overall Children in Care population. 30% of Children in Care are age 0-9 years with 50% of the population being between the ages of 10 to 15.

**Fig 6: Ages & percentage of CIC in Dorset on 31.3.2021**

Age	0-4	5-9	10-12	13-15	16+
Number	71	63	100	104	111
% 2021	16%	14%	22%	23%	25%
% 2020	18%	16%	19%	24%	23%

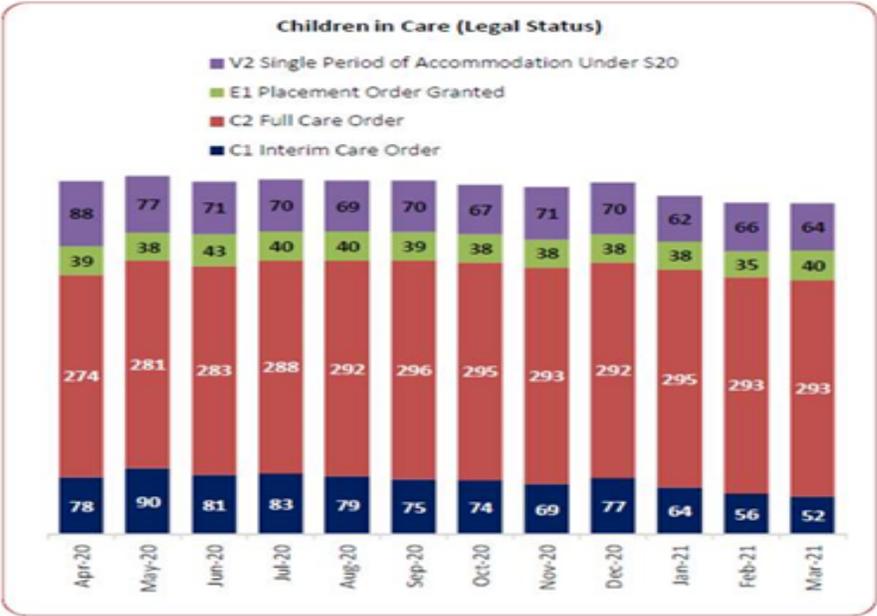
- 5.9 National data as a comparison is only available for the previous year (2020). This child in care data indicates a 2% overall increase in children in care, with the general characteristics for CLA (children looked after) similar to the previous year (2019) 56% are male, 39% age between 10-15 years and 74% were of white ethnic origin. When comparing Dorset against this data we have a reduction in CIC by 6.3%. 57% male, 45% age between 10-15 years and 86% of our CIC population are white ethnic origin.

5.10 The table below and chart (Fig: 7) shows a snapshot of the CIC population on 31 March 2021 by legal status. This shows that most of Dorset’s children and young people are in care subject to a legal order, compared to through a voluntary arrangement (S20) with their parents. There has been a noticeable change in the legal status of CIC in recent years. Both the number and proportion of CIC under care orders have increased, with those in care under voluntary arrangements decreased. This reflects the family court ruling in 2015 with advice and guidance from the judiciary in respect of the use of Section 20, which is now firmly embedded in practice.

**CIC legal orders: Number, % and comparison with National average 2020.**

Order detail	Number March 2021	Percentage March 2021	National % March 2020
Interim Care Order	52	12%	N/A
Care order	293	65%	77%
Placement order	40	9%	6%
Voluntary/Section20	64	14%	17%

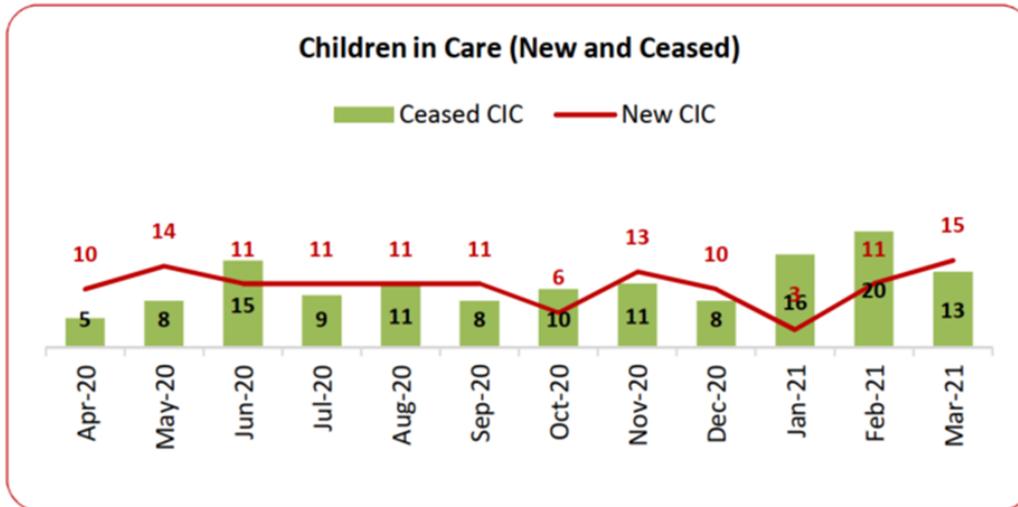
**Fig 7: Snapshot of CIC by legal orders.**



5.11 The total number of new admissions into care between 1 April 2020 to 31 March 2021 was 126. This is 28% of the total CIC population. With a total of 134 ceasing to be in care for the same period. This shows an overall reduction in our CIC numbers. It is significant to note that in the

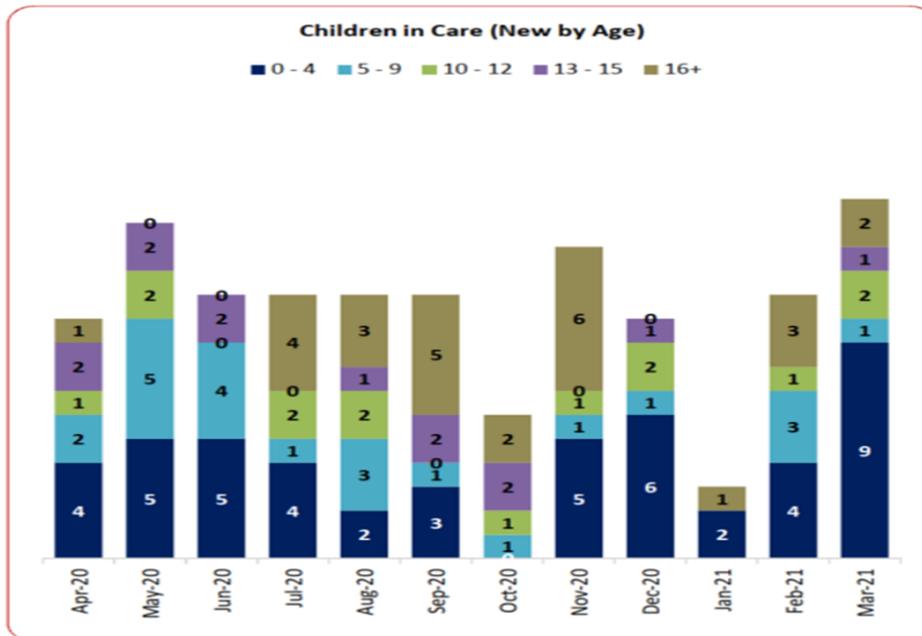
period of national lockdown the numbers of those coming into care remained stable at 11 for a period of 4 months.

**Fig: 8 Shows the number of children entering and leaving care.**



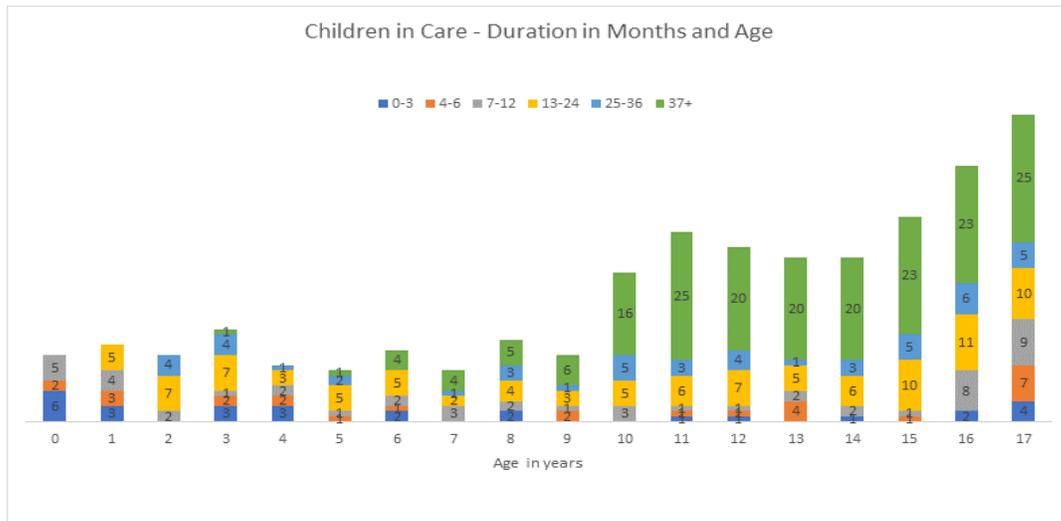
5.12 We have seen an increase in the number of 0-4-year olds coming in to care and a reduction of 5-9-year olds which is a similar pattern to that in 2019/20. When comparing to National statistics of Children in Care in England, the age of those coming into care appear to be more evenly spread with 26% 0-4, 16% 5-9, 27% aged between 10-15 years and 20% aged 16 and over.

**Fig: 9 Indicates new into care by age.**



5.13 Of those in care on 31 March 2021 (Fig 10) and the following chart clearly highlights the high proportion of children remaining in care the longest. 172 children age 10 year+ have remained in care for longer than 37 months. This accounts for 38% of the total CIC population for Dorset. It is important to note that this also represents stability and permanency for several children.

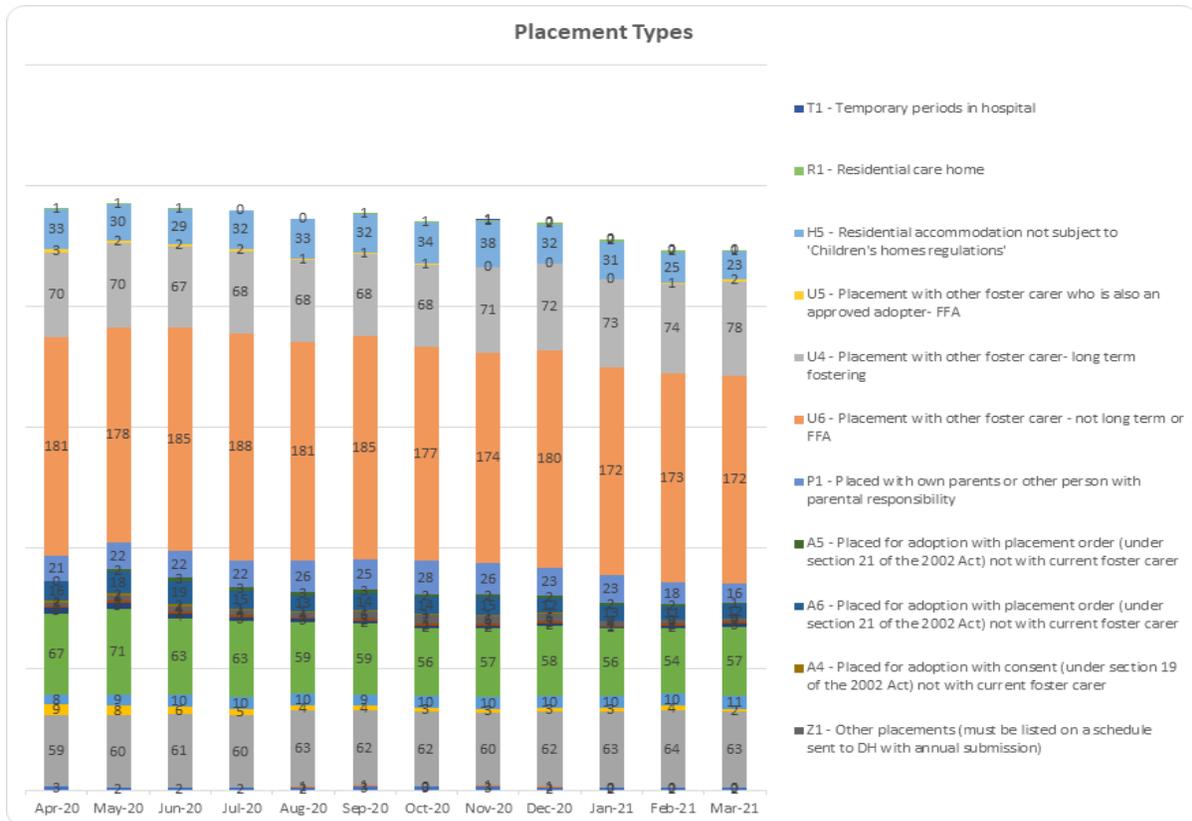
**Fig 10: Records CIC ages and duration.**



		Duration in Months					
		0-3	4-6	7-12	13-24	25-36	37+
Age in years	0	6	2	5			
	1	3	3	4	5		
	2			2	7	4	
	3	3	2	1	7	4	1
	4	3	2	2	3	1	
	5		1	1	5	2	1
	6	2	1	2	5		4
	7			3	2	1	4
	8	2		2	4	3	5
	9		2	1	3	1	6
	10			3	5	5	16
	11	1	1	1	6	3	25
	12	1	1	1	7	4	20
	13		4	2	5	1	20
	14	1		2	6	3	20
	15		1	1	10	5	23
	16	2		8	11	6	23
	17	4	7	9	10	5	25

5.14 On 31 March 2021, the majority (79%) of our children are placed within a family. 57% are placed with foster carers, 15% placed with family/friends who are approved carers, 3% placed for adoption and 4% are placed with their own parents. The remaining 20% of our CIC population covers; 15% of our children who are placed in a residential setting, 1% who are living independently (with support) and the remaining 5% are made up through small numbers in hospital or parent and child placements.

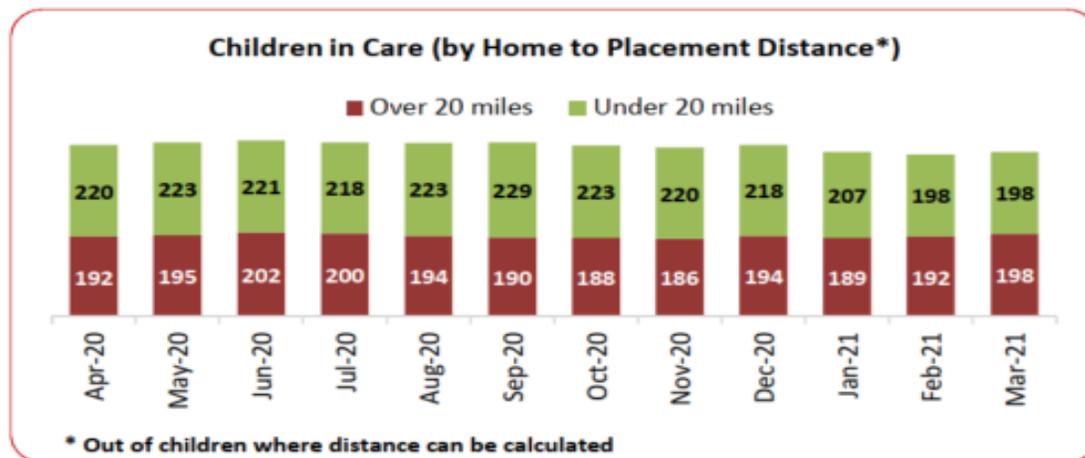
**Fig 11: Placement profile for CIC**



5.15 On 31 March 2021, 50% of children in care in Dorset were living in accommodation within 20 miles of their home address. This has been identified as an area of priority and efforts are being made through our permanency tracking and line of sight meetings to enable our children and young people to return to the local area. Whilst arrangements were in place for several young people, plans have been postponed due to the impact of Covid and the need for some of our young people to complete their education, which would be otherwise disrupted. We are confident that this figure will increase over the coming months.

**Fig 12: Details of placements in/out of Dorset.**

5.16



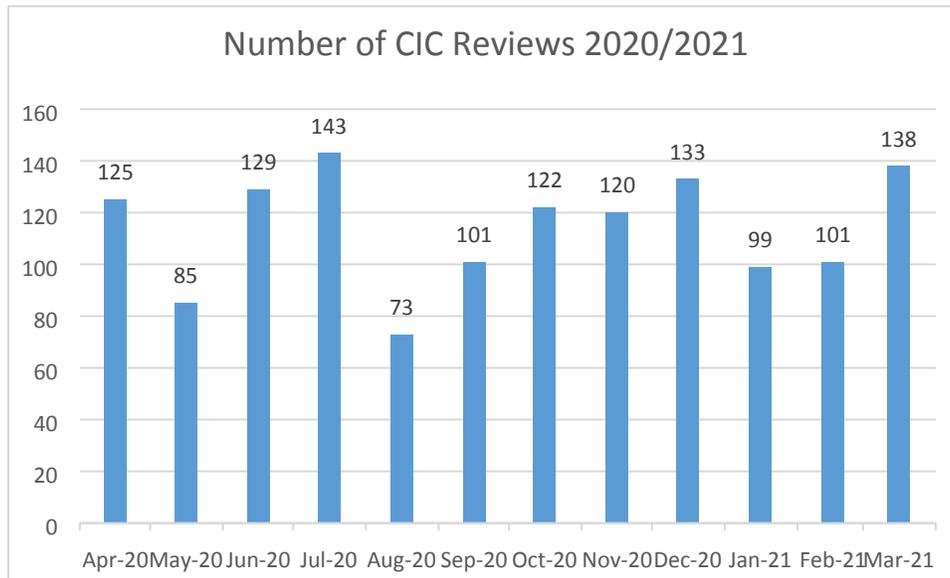
On 31.3.21, 27 young people were placed in an unregulated placement. This is reduction of 25% (total of 9 young people) over the last 12 months. These young people are over the age of 16 requiring support to live independently rather than needing full time care. For those young people in an unregulated provision (such as supported housing) there is a high visiting frequency by the allocated social worker and enhanced monitoring, contact and oversight by the QARO. This is in recognition of the additional needs and vulnerabilities for these young people and a clear commitment that no further young people will be placed in any unregulated provision by Dorset. 2 of the young people had previously been placed in an unregistered provision (arrangements are in place to register this provision). These young people in an unregistered provision have high level of visits from the allocated social worker and QARO, as well as team and senior management oversight. There are currently no children aged under 16 living in unregistered provision.

## 6. Quantitative information- The QARO Service

- 6.1 Between 1 April 2020 and 31 March 2021 the QARO service completed a total of 1,369 reviews. This is an increase of 128 reviews compared to the performance data of 2019/20. This figure seems linked to an increase in reviews associated with early care planning, reunification back to birth family and unplanned placement changes for some of our young people. QAROs have continued to seek to address matters of concern through direct communication with social workers and team managers, alongside utilising the escalation process. It is important that the frequency of reviews reflects the need to review and/or change the child or young person's care plan, as opposed to using it as an opportunity for case or care planning meetings. The QAROs are aware of the need to not blur boundaries between case management and oversight and independent review.
- 6.2 On average there are about 114 reviews a month (28-29 a week) with peaks of 143 in July and 138 in March 2021, with less busy months being May and August 2020 with 85 and 73 being held respectively. This variation is largely due to the availability of children, young people, carers, professionals, and family members in holiday periods.

**Fig 13: Detailing number of reviews held**

6.3



QAROs are required to hold a child’s first review within 28 days from the date they came into care, then no later than 3 monthly and 6 monthly thereafter. An important performance measure is for children to have their reviews held within the statutory timescales.

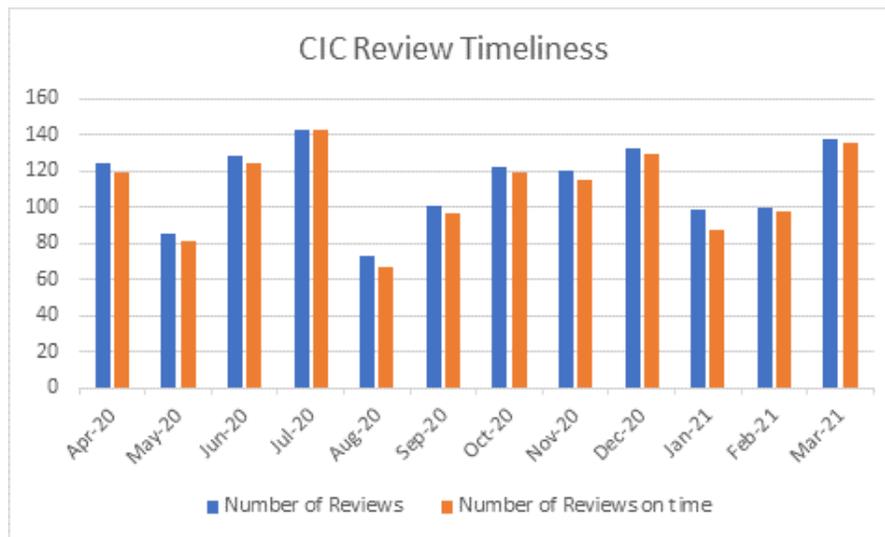
6.4

Over the last 12 months the QAROs have completed on average 96% of reviews on time. Given the level of restrictions in place since April 2020 due to Covid and the impact the pandemic has had on the health and wellbeing of our children, carers, and professionals, as a service we feel this reflects the dedication and hard work of the team.

Details	Number	%
CIC reviews that took place in period	1389	
CIC reviews that took place within timescales	1337	96.26
CIC reviews with completed recommendations	1385	99.71
CIC reviews with completed recommendations within 5 working days of review	944	67.96
CIC reviews that took place in period for children aged 4 and over	1152	82.93
CIC reviews that took place in period for children aged 4 and over who participated	1062	92.19
CIC reviews with full review minutes completed	1325	95.39

CIC reviews with full review minutes completed within 20 working days of review		563	40.53
Month	Number of Reviews	Number on time	%
Apr-20	125	119	95.20%
May-20	85	81	95.29%
Jun-20	129	124	96.12%
Jul-20	143	143	100%
Aug-20	73	67	91.78%
Sep-20	101	97	96.04%
Oct-20	122	119	97.54%
Nov-20	120	115	95.83%
Dec-20	133	130	97.74%
Jan-21	99	87	87.88%
Feb-21	100	98	98%
Mar-21	138	136	98.55%

**Fig 14: Indicates timeliness of Reviews**

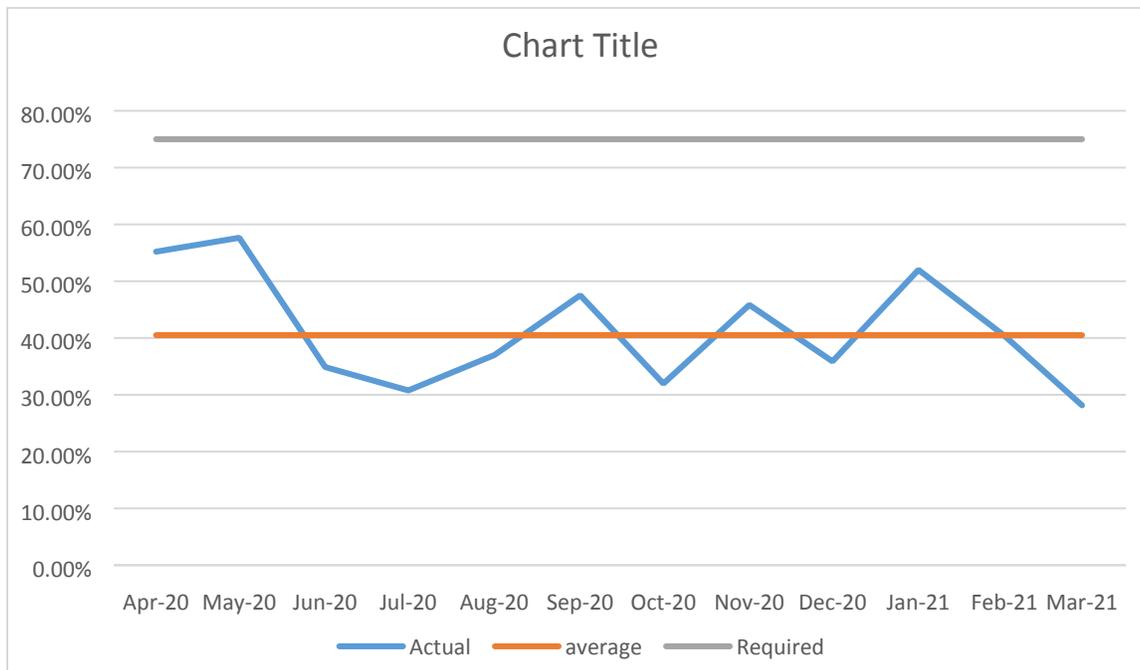


- 6.5 The reviews that have been out of timescale are few (3.74%). There are several reasons for late reviews which include changes of workers, the impact of Covid (health of carers and children/young people), technical difficulties (due to internet and IT for virtual reviews) and parents not being able to attend. This remains a focus for the team and a priority action for the coming year. January 2021 was particularly difficult for completion of reviews on time and correlates to the 3<sup>rd</sup> lockdown and the decision for schools to remain closed.
- 6.6 The QARO service is notified by the business support central team of children who are likely to or have come into care. This system works well, and children are allocated to a QARO within 5

working days of the notification (usually the same day). The QARO will then liaise with the social worker to arrange a date and time for the review, to ensure it is held within the 28-day statutory requirement. If there are delays in the service receiving the notification, then this will impact on the timescales for allocating to a QARO and arranging the review within timescales.

- 6.7 The performance data for the timeliness of sending out review recommendations and minutes (within 5 and 20 days of the review taking place) is an identified area for improvement. The data recorded does not always reflect actual practice as review dates can be changed but remain within timescales leading to the system not being up to date. This then impacts directly on the data reports for the timeliness of reviews taking place and also the distribution of recommendations and minutes, all within timescales. We are working with our colleagues in business support and data to address this issue so we can be confident in the Corius reporting in this specific area.
- 6.8 It is clear from the diagram below that this performance is inconsistent and is a priority action for the service. We are confident that the impact of the recruitment of a permanent QA manager (in March 2021), weekly highlight reports, QA management oversight and regular tracking, alongside supporting the QAROs through formal supervision will lead to improved performance in this area over the next 6 to 12 months. This will be monitored through the weekly, monthly and data performance reports with regular oversight by the Quality Assurance manager.

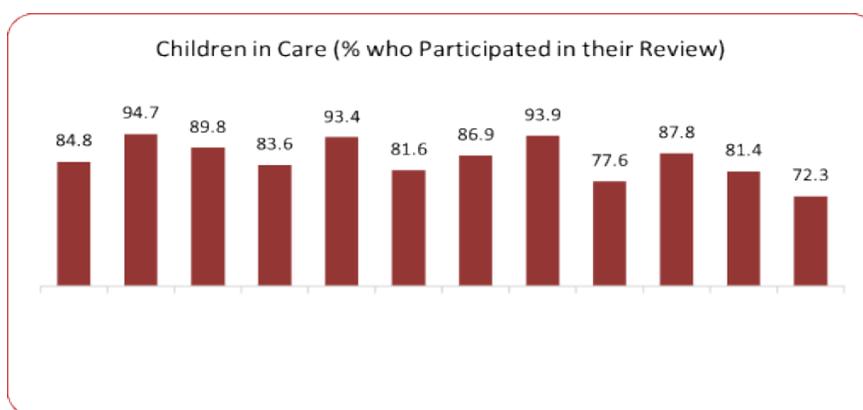
**Fig 14: Highlights performance of timeliness of minutes for CIC reviews completed within 20 working days.**



## 7. Children and young people participation

- 7.1 A primary objective of the service is to ensure children are central to decisions about them and that their voice is evident in their care plans. A key element in delivering this objective is the measure of the young person's participation in the Statutory Review of their care plan and care arrangements.
- 7.2 Across the year from April 2020-March 2021, there is no stability in number of children attending their reviews. The data shows that between 72% & 94% of children, & young people (age 4 years +) had attended and participated fully in their review. The 28% who have no apparent voice is a real concern and it should be expected that the QARO is addressing this through their visits to children and young people as well as formally through the escalation process.

**Fig 15: Percentage of those participating in reviews.**



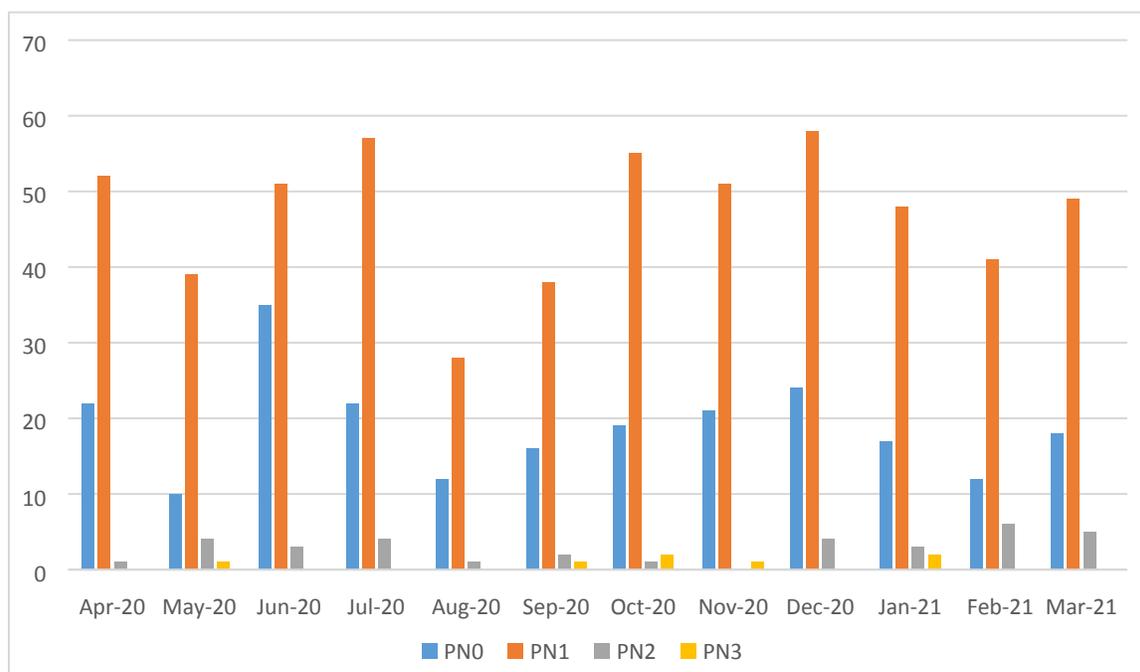
- 7.3 The overall figure considers the full range of acceptable methods of participation agreed by the DfE (**Fig 15**). All methods of participation add value to the review process and for some young people it can take considerable effort from them and those working with them to achieve it. The move to virtual reviews for some children and young people has enabled full participation in their reviews, when in the past they have chosen not to engage. These forced changes through Covid are areas of practice where we need to consider ways to maintain the level of engagement and improve for others.

**Fig 15: Details of DfE participation**

Detail	Actions
Child under 4 at time of review	Observations of behaviour, interactions
Child physically attends and speaks for him/herself	Attendance
Child physically attends but advocate speaks for them.	Views represented by advocate or QARO
Child attends and conveys views non-verbally	Symbols, behaviour
Child attends but does not speak, does not convey views and does not ask an advocate to speak on their behalf	Attendance without contribution
Child does not attend but briefs an advocate to speak for them.	Through advocate or QARO Text, phone, audio, video format and written format
Child does not attend but conveys his/her feelings to the review by a facilitative medium	Text, phone, audio, video format and written format with QARO

**Fig 16: Indicating review participation April 20 to March 21.**

PN0: child under 4 at time of review  
 PN1: child attends & speaks for themselves  
 PN2: Child attends & advocate speaks for them  
 PN3: Child attends and views conveyed non-verbally



- 7.4 When looking further into the ways that children and young people have taken part in their review (Fig16) tells us that 80% of children aged 4 and over either physically attended or participated in their review meeting. It should be noted that Dorset’s attendance figures compare favourably with other local authorities in the region.
- 7.5 There is no identified single reason why young people are not motivated to participate in their reviews. We have identified the need to look at ways we can adapt the meetings to become person centred. The QAROs have worked in partnership with young people, social workers, education, and health colleagues to formalise the process for person centred reviews to ensure there is consistency across the service. We will continue to support all of our young people to engage in their review and a key priority remains for their views, thoughts and wishes to be central to any review meeting.
- 7.6 The service continues to provide a robust approach to improving the quality of our records through quality assurance oversight. During the past year, the QAROs continue to develop the quality of their outcomes and recommendations ensuring these are SMART and based on the child’s individual needs. The minutes of the meetings continue to be written direct to the child or young person as a letter. This assists in making it person centred, relevant and more accessible to our children & young people now and in the future. This will continue to be implemented to ensure we have a consistent response to our children and young people who are in care.

- 7.7 We recognise the need to improve participation and that further work is required. Linked to understanding the role of the QARO and reviews, as well as reflection with QAROs as to how we are doing and what evidence there is to show how we are all supporting participation and prioritising the voice of the child. The service will need to consider the continuation of the creative use of technologies to enable direct involvement. This has been highlighted through how we have conducted reviews and included children and young people in reviews during the response to the Covid 19 pandemic.
- 7.8 QAROs aspire to conduct reviews at times and venues that will be child focused and maximise children & young people’s attendance. They are mindful for the review impact on the child’s education or leisure activities. This is not always possible and has proved to be a significant challenge, as this involves the availability of others (including carers) for reviews outside of school hours, as well as being aware of after school time with their families, friends and engaging in out of school activities. The work being undertaken to develop a more relational and person-centred approach to reviews is expected to result in reviews that are more suited to the child or young person (such as venue, times and who to include).
- 7.9 In addition to formal reviews, the service continues to embed progress updates between reviews. We are working towards extending the current informal discussion between social workers and QAROs to include children & young people so that it is the child or young person that guides the direction of the QARO challenge.
- 7.10 Feedback from children and young people is important and needs to be a further focus for the service. We have not been able to establish a specific method for feedback following reviews and we are in the process of developing feedback arrangements for 2021-22.
- 7.11 The use of advocates for children in care needs to increase; the number of referrals made for children over the age of 8, compared to the number of reviews that take place are disproportionate. The data shows that out of 1,368 reviews that have taken place there have been 242 (18%) with an advocate. (Fig 17). A new service provider will be taking over the provision of the advocacy service from June 2021. The service will work closely with them to ensure the access to and take up of advocacy is well embedded.

**Fig 17: Number of advocacy referrals and reviews.**



- 7.12 Dorset's children in care council has been limited in its activity during the Covid pandemic. The QA managers will attend future meetings (by request) to receive feedback and respond to questions about the role of the QARO and the review process. There will be a clear process of ensuring that feedback from these meetings is shared within the QARO service and any learning/agreed actions are taken forward.

## 8. Case Studies: participation

### Case study- virtual meetings

*I have a young person who in the 5 years I have known him has chosen not to attend a review. For his last review we agreed it would be held virtually. Through text messages with the young person (and carer) we agreed who would be invited. This was on the understanding that the young person and the carer would be at home and everyone else would be on the computer. For the first time the young person attended the whole of his review. He decided to turn off the camera but was able to speak and made sure everyone else had their camera on! I am hoping that post Covid we can continue to hold his reviews in this way.*

### Case study- To encourage child participation,

*I always discussed child coming to the review and making sure that they felt comfortable; for 1 boy this meant agreeing that he would chair the meeting and that we would hold a themed review – for him it was Manchester U as he was a devoted fan – I put together a quiz on the knowledge of Man U & agree we were all going to wear a red t-shirt/ something relating to Man U – I had an old Man U T shirt and a small ball which was on display during the online review. He won the quiz hands down and loved it! I do hope that he comes to the next review and co-chairs or chairs it again. For another YP (P) the review was themed around equine/ horse knowledge as that's her passion and college course/ future plan and, again, I prepared a quiz to use during the review to show P's amazing knowledge and skills and celebrate outstanding achievements.*

### Case study- understanding reviews and listening to young people

*The young person had recently come into care and I met with him the day before his first review. I talked about my role as the QARO and gave him my 1-page profile and we went on to think about what his review would be like. He wasn't sure he wanted to come as he didn't want to see or be seen by his Mum. We talked through different ways I could help him manage this and we agreed the meeting would be held virtually. We agreed together that he could sit off camera and the foster carers could mute when he wanted to talk to them, and they would say what he thought. He would also write some things down and send them to me, so I knew what he was thinking. I sent him over the agenda, and he managed the review really well and was able to speak to everyone directly and hear what was being discussed and agreed. He was even able to feedback to me how it wasn't as bad as he thought it was going to be!*

### Case study- Engagement

*I have a dedicated big notebook and pack of coloured gel pens when going to speak with children about their views and wishes – this provides more robust evidence to discuss in the meeting and refer to during the discussion in the meeting.*

*Using scaling questions – I use it frequently when speaking with children and have also used it in visual form when talking about home life, school and contact on a scale of 0 (don't go there) to 5 (couldn't be better) with children with some autistic features – I kept them for the subsequent visit and it did help to check how things have changed or stayed the same with the scaled responses comparison.*

**Case study: One- page profile.**

*I (reluctantly) sent out my 1-page profile to a young person who I had not been able to meet with for several months. I hoped this would encourage & enable them to attend a virtual review. I was surprised by the feedback and how receiving the profile led to the young person asking me some questions & also helped them to know (& remember) what I looked like! I believe this simple tool enabled participation in both the review and sharing their thoughts directly with me prior to the review meeting which was a significant change given the young person's history.*

**Case study- participation**

*One of the things I do for all my reviews is have notebooks and pens (colourful or appropriate for the child or young person) that I give to the child. This is for them to keep and enables them to have space to write down anything they want or even use it to doodle. I often find it helps them feel included and the same as the others who often have paper and pen to make notes.*

**Case study: Voice of the child/young person**

*The QARO has known E for the last 8 years. She has a high level of needs and requires additional support from her carers. E chooses not to meet with the QARO, and communication has been through letters and cards. She has shared her thoughts through the consultation papers and chooses also not to attend her review meetings. In preparation for the last review the QARO sent a card and a letter explaining the review was coming up and suggested ways she could contribute to the meeting. The QARO was surprised to receive a video from E telling them all about the things she likes doing and what she thinks should be discussed in the meeting. This has highlighted the importance of QARO stability and persistence in getting to know the child or young person as well as being creative in how we encourage and support participation. What we think is the right way to communicate and engage them may not always work! It's important not to give up.*

**Case study: maintaining contact**

*For all of my children & young people the way I have developed a relationship with them over the years has been to maintain contact. I will write or send a card when anything significant happens for them and also before their reviews, letting them know I am thinking about them and will be visiting soon. Sometimes this can be a simple "hello I was wondering how you are doing and can't wait to hear all about it when we meet" or for some of my young people "I know things are pretty tough at the moment but I'm really proud of how you have managed, I will be coming to see you soon". It depends on the child, young person and their individual circumstances. I think for some this shows that someone actually really cares and does think about them, which is important.*

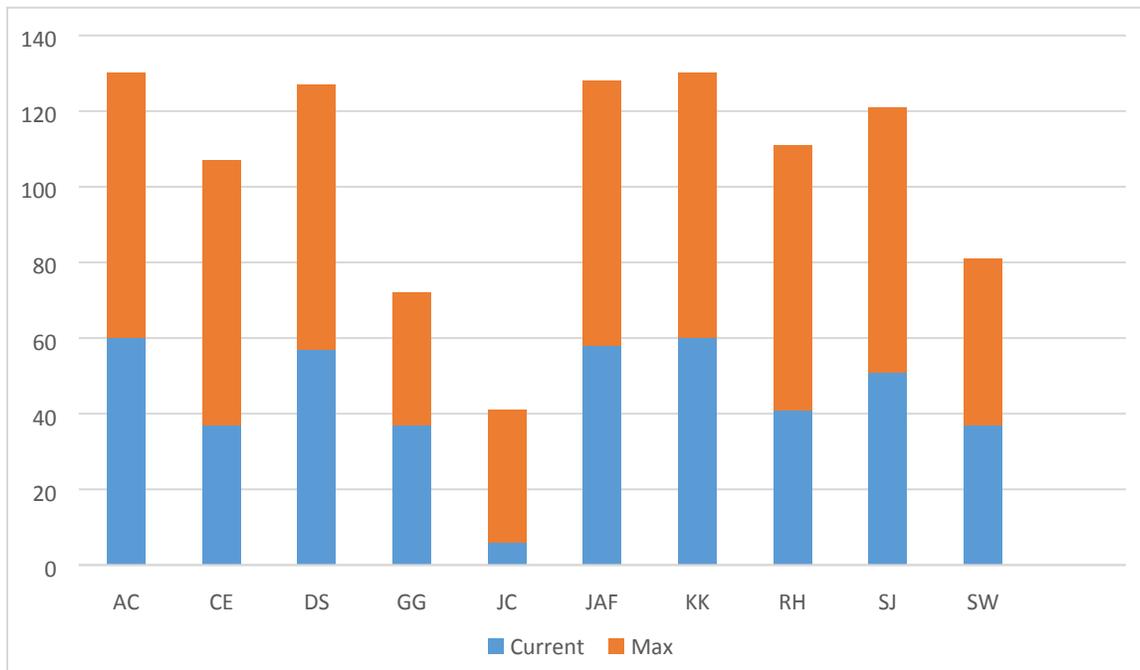
**Case study- voice of the child**

*I am an QARO for a young person who is 10 and needed to move placements. He was told about this and in 1 week he was moved without any preparation. I ensured that for his first review in his new placement he had an advocate and we discussed what he was unhappy about, what he wanted people who made decisions to know and how his advocate could help him with this. In doing this I had supported his participation in the review, enabled him to have a voice and as the QARO supported his views and acknowledge his feelings.*

## 9. Caseloads

- 9.1 It is recommended in the IRO (QARO) Handbook that a caseload of 50 to 70 looked after children (full time equivalent QARO), would represent good practice in the delivery of a quality service and facilitate the full range of functions as set out in the handbook.
- 9.2 The average caseload for a Dorset QARO ranges between 54 and 62. For those that have additional responsibilities (such as the Reg 44 visits) this is significantly lower (around 46). By having a central allocation process this facilitates and maintains a degree of equity in caseloads across the service. We allocate in terms of needs of the child, QARO capacity and worker skills mix, rather than solely on geography.

**Fig 18: QARO caseload 31.3.21**



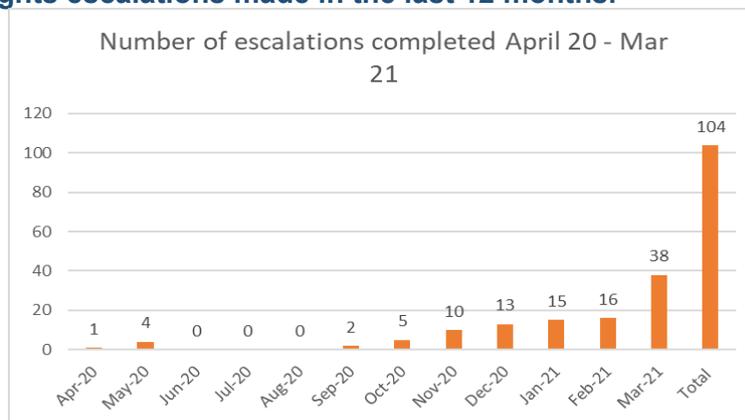
- 9.3 National data (taken from NAIRO benchmarking research) indicates that 16% of QAROs have between 50-60, 42% 60-70, 16% between 70-80 and 11% between 80-90.
- 9.4 Dorset has a commitment to keeping QARO caseloads at 60 or below. This will enable the QARO to have the capacity to meet with their children and young people as and when required, depending upon the individual circumstances. It is important for the QARO to have contact with their children & young people at mid-way points and prior to reviews, working towards progression of review decisions, developing relationships, gaining feedback and overall participation in the process.
- 9.5 Other tasks that QAROs complete include enhanced monitoring visits and contact with young people in unregistered and/or unregulated housing provision, maintaining links with locality

teams, contributing to foster carer reviews as well as auditing and moderating as part of the wider service quality assurance framework.

## 10. Escalation and dispute resolution

- 10.1 One of the pivotal roles of the QARO is to raise issues affecting a child’s care with the social work service where, for example, performance issues, care planning, education and resources are having a negative impact on the child, or that permanence plans are not progressing at pace.
- 10.2 This is an area identified as a key priority and over the last 12 months, work has taken place to establish an escalation and dispute resolution process within Dorset. Fig 18 clearly shows the impact of a review of the process, training, and development of systems to track and record informal and formal escalations. Prior to November 2020, little or no escalations were formally recorded.

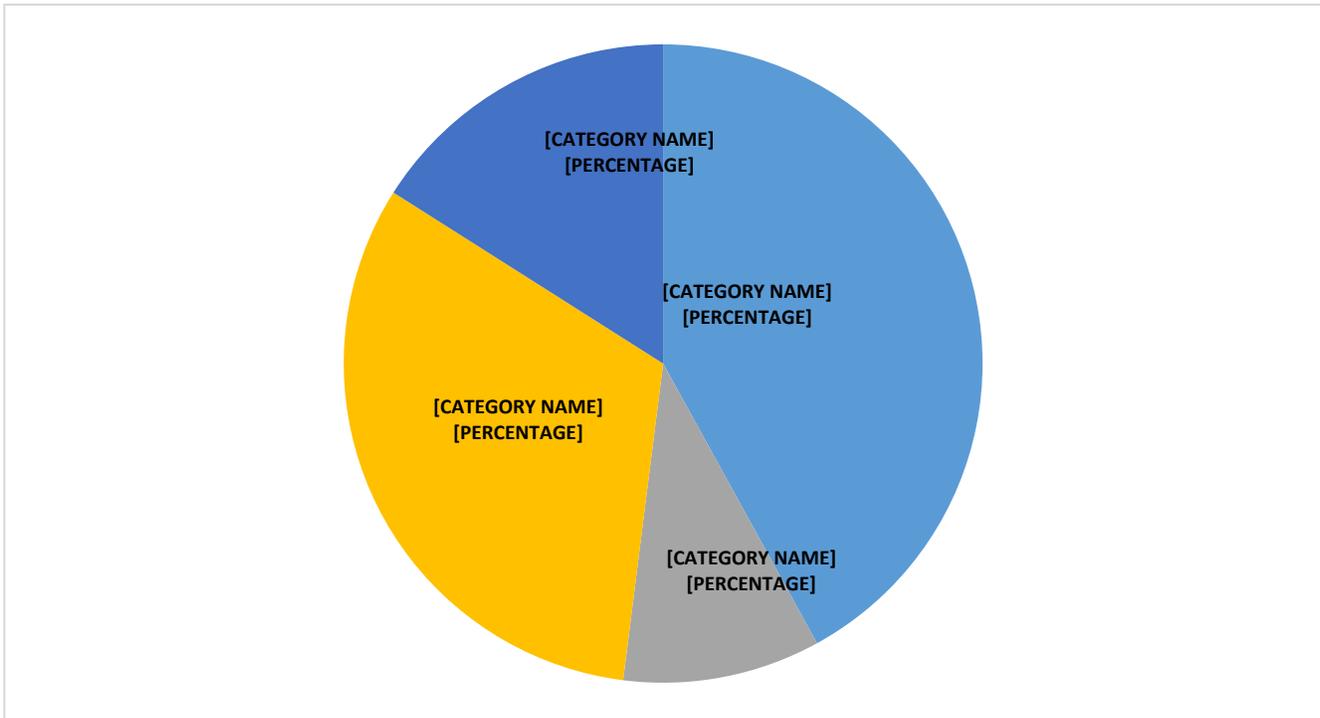
**Fig 19: Highlights escalations made in the last 12 months.**



- 10.3 There is now an established Dispute Resolution and Escalation process in place. QAROs continue to seek resolutions to issues through dialogue with the social worker or their manager before and at each stage of the procedure, but if no resolution is achieved the problem can and should be escalated to the attention of senior managers and ultimately the Executive Director and/or Cafcass.
- 10.4 Audits of escalations have identified continuing positive outcomes for children from interventions by their named QARO and the use of the escalation process to raise issues of delay or concern. Escalations have been grouped around 4 areas:
- **Permanency:** These made up the highest number of escalations and generally relate to lack of a permanency plan, insufficient permanency planning meetings and delays in children achieving permanency.
  - **Care planning:** These concerns centre around lack of up to date care plans in place, insufficient transition plans & lack of progress in accessing suitable education.
  - **Practice concerns:** Involved the impact of changes or lack of social workers, lack of evidence of supervision and/or sufficient management oversight on the cases between reviews and statutory visiting patterns. This was also highlighted in audits and a supervision tracker is now in place. A further audit of supervision and management oversight completed in April 2021 has shown significant improvements in this area.

- **Drift and delay:** The escalations for this area focuses primarily on delay in applications to court to revoke care and placement orders. Although this is often outside of the control of the Local Authority it is important to continue to raise so that there is evidence when discussing themes and areas of practice with legal services and the local courts.

**Fig 21: Percentage of escalations**



**Case study: escalation education provision**

*I escalated the issue of lack of suitable education provision for a young person as they had been without a school place for nearly a year. The young person had a diagnosis of high functioning autism but could not cope within a mainstream education setting. In response to the escalation a place was secured within a suitable education provision where he continues to attend with a good chance of now going onto higher education. The escalation has been effective, and the young person is now able to achieve within education which is fantastic.*

- 10.5 Oversight of the escalations indicates that all have resulted in the locality teams implementing the advice or recommendations of the QARO. QAROs initially raised a concern about the lack of response to their escalation by team managers. This has been addressed and a system is now in place to ensure that escalations are responded within the timescales or escalated further. This will avoid any further drift or delay for the children and will improve outcomes for our children and young people in care.
- 10.6 The QA manager reviews the escalations on a weekly basis and provides detail of those remaining outstanding to locality team and service managers. Although time consuming, this process is helping to ensure the timeliness of conclusion to formal escalations.

- 10.7 There are some concerns that whilst most escalations are resolved informally or at stage 1, there are some that take considerable time to resolve fully. Often the reasons for this are outside of the control of the locality teams and sometimes even the Local authority. An example of this is with respect to the need to make applications to court to revoke care orders. Through Covid the courts have had restricted sittings, and these have been prioritised for children at risk of immediate harm. Therefore, those children who no longer need to remain in care, or require a change of formal legal status have not been progressed. These situations have the potential to undermine the effectiveness of the process.

**Case study: escalation re contact**

*I escalated issues regarding lack of clear arrangements for the young person to see their family, especially over the Christmas period. This escalation led to further consideration of the changes in the family circumstances and the young person spending time with his Mum at her house over Christmas (although not overnight as requested by the child). There is now a focus on assessing how these arrangements can gradually increase to hopefully overnight and weekend time with his family. Without this escalation I am sure this would not have happened, or at least as quickly!*

- 10.8 In addition to the formal Dispute and Escalation Process and in keeping with the service's aim Of developing a high challenge, high support ethos, QAROs are encouraged to add value to planning for children by developing relationships with key partners within the localities. The aspiration is not to formally escalate disputes unnecessarily but to achieve the desired outcomes for children by positively influencing social work practice through dialogue, negotiation, and resolution meetings. Usually this will make resolutions timelier for the child.
- 10.9 Management audits, oversight and Practice Evaluation suggest that recording of the QARO footprint on the child's record is continuing to improve and becoming more consistent. There is still variation on the types of activity QAROs choose to record relating to their involvement between reviews. We are able to identify these issues with individual QAROs to improve practice and development.

## **11. Qualitative information- The QARO service review and summary of priorities and actions**

- 11.1 **Summary of progress from identified actions 2019/20 report:** All but 1 action has been achieved over the last 12 months.
- ❖ **Securing long term permanence for child at an appropriate time** – A Permanence Panel is now established to prevent drift and delay, with senior management oversight. There are clear terms of reference and a focus on all new children in care and those who have been in care for 4 months or longer without a clear plan for permanency.
  - ❖ **IRO practice standards will be introduced-** these are now in place and available on Tri.X (procedures and policies online)
  - ❖ **Identify the QARO for each child & young person-** One-page profiles are routinely sent out to all new children in care prior to the first review.
  - ❖ **Review the Escalation Policy-** There is now a clear process in place. This is supported through the introduction of an escalation form to enable clarity of the key issues, required outcome and timeliness. This enables us to capture and learn from themes and trends identified where we can strengthen quality of practice.

- ❖ **Identify good practice and learn what we need to strengthen-** This is continuous and part of the QA manager completing themed audits and dip samples as part of the wider service quality assurance framework.
  - ❖ **Family Group Conferences to be considered earlier in the child's journey-** These continue to take place and are discussed at line of sight meetings and permanence panel to ensure they are considered for every young person.
  - ❖ **Practice Framework will be delivered-** Training and workstreams alongside monthly reflective practice events enable us to work with our families in a restorative strength-based way. This supports person centred approaches to children in care reviews.
  - ❖ **To include children from the children in care council as part of the interview process-** This remains outstanding, there has been a review of the children in care council, alongside the impact of Covid-19. It is anticipated that this action will be achieved and integrated into the recruitment process of QAROs from June 2021.
- 11.2 The QARO Service is continuing to make steady and purposeful improvement on many of its key activities. We have embedded previous improvements and demonstrated that the service can sustain these. Children and young people are being provided with a QARO within three working days of coming into care or within 2 days of notification to the service. There have been few changes in QARO allocations and where unavoidable, these have been kept to a minimum.
- 11.3 Most reviews (96%) are being held within timescale and children are being provided with opportunities to contribute to these reviews. A significant number of review records are completed within timescales, with social work managers being advised of recommendations and decisions within the statutory timescale. Despite the further lockdown restrictions throughout 2020 and into the new year of 2021, most children have continued to be seen (face to face) by their QARO, with 72% attending their review meetings.
- 11.4 Dorset Council continues to be challenged through formal and informal escalations, whenever there are concerns about children's care plans not being effective or delays in plans being pursued. In addition to this, the QARO footprint on children's files is now visible. The escalation process is now routinely used, with the team focus being on maintaining this and acting upon disputes effectively and within realistic timescales
- 11.5 QAROs continue to have a specific impact for individual children and young people in supporting them with plans and issues that arise for them. QAROs continue to work collaboratively with those with responsibilities for caring for and working with children and young people in care to improve outcomes.
- 11.6 There is now team stability with a permanent QA manager (in post since March 2021), with no current team vacancies. Staff supervision is regular and provides management oversight and support, observations of practice take place across the service alongside monthly audits and identifying professional development and training needs.
- 11.7 We have also developed an effective virtual response to ensuring statutory reviews have continue following Covid 19 pandemic restrictions as well as maintaining some face to face visits and reviews. Each decision has been based on a clear Covid risk assessment and individual circumstances of the child or young person.

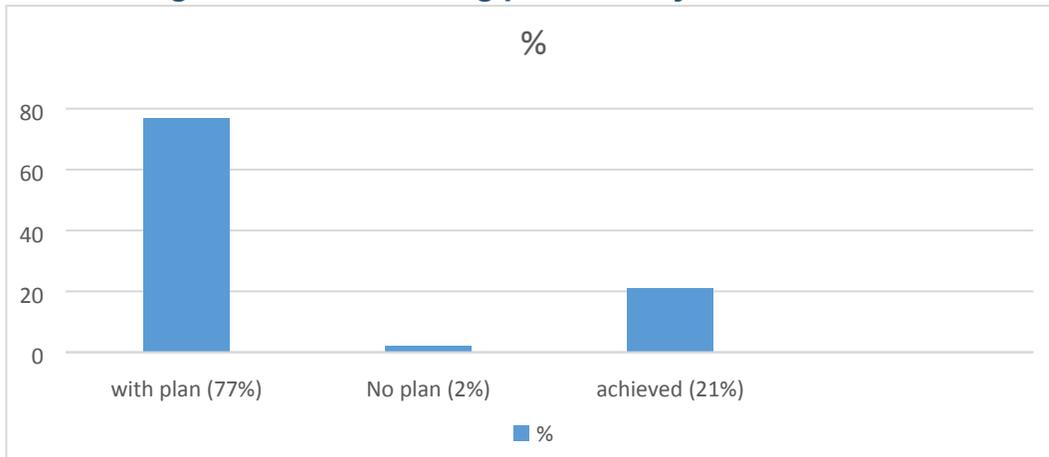
## 12. Quality of Care Plan & Permanence Planning

- 12.1 QAROs play a significant role in monitoring permanence planning at an early stage of a child's time in care and considering all options for young people by their 2<sup>nd</sup> review, scrutinising the timeliness of family finding and preparing children for permanent placements.
- 12.2 Achieving permanence for all our children in care remains a priority for the QAROs and Dorset Council. To avoid drift and delay in securing permanence, regular permanency planning meetings are held along with a senior management permanence panel for all new children coming into care and/or those who have not achieved permanence after 12 months.
- 12.3 The figures show that on 31.3.21 the number of children who had a permanency plan was 97%. A total of 12 children or young people who did not have a permanency plan had only recently come into care. (Fig 22)
- 12.4 An analysis of resolution and escalation found that delays occurred mostly around permanence in arranging matching of a permanent foster placement for children with a care plan of long-term fostering, delays in progressing assessments of connected persons carer and delays in moving forward with necessary care applications to the court to support the child's agreed permanence plan.

### **Case study: permanence panel**

*Adam is 8 years old. The plan was for him to have specialist therapeutic intervention through a residential home for up to 12-18 months. The QARO was concerned that after 14 months there were no clear plans for a transition into a family or significant progress made with therapeutic intervention an escalation was raised. The QARO fed back to permanency panel that the social worker was being thorough in exploring what is happening for Adam and if the placement is meeting his needs. The QARO has evidenced how their involvement and escalation of the concerns has resulted in high level of social work visits (unannounced), links with commissioning and the Reg 44 visitor (as placement is out of County) as well as team and senior managers aware of the placement concerns. The permanency panel is now aware that the plans and timescales for achieving permanency through a family placement in the next 4 months is unlikely given the current concerns and can provide oversight to prevent further drift and delay for Adam.*

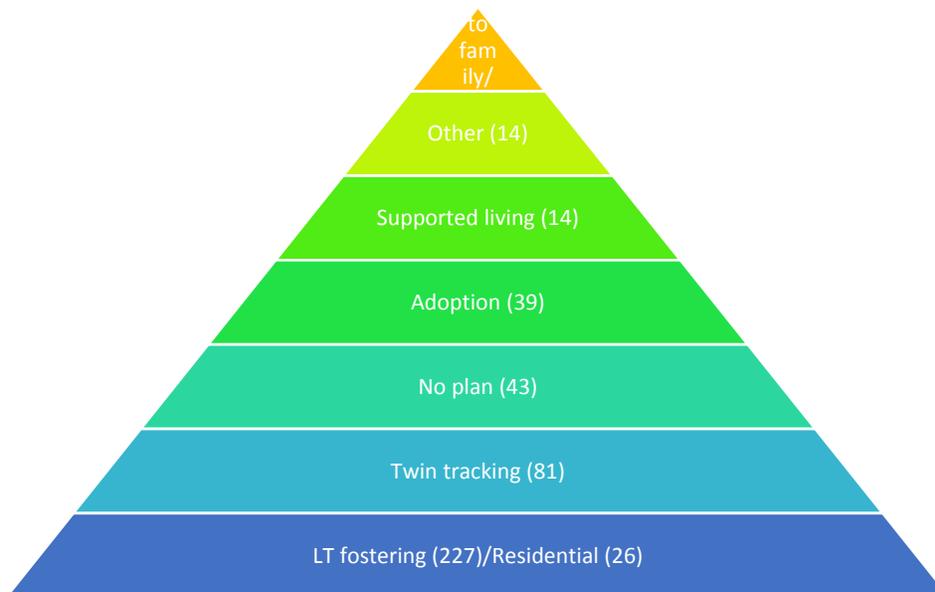
**Fig 22: Percentage of those achieving permanency.**



12.5 The high proportion of children in care fall within the age 10 years + categories which is why we expect to see that permanence through long term fostering is the highest at 51%. Permanence through long term residential provision accounts for 6% of the overall children in care population with adoption and SGO making up only 10% of permanence arrangements for our children in care.

12.6 Dorset continues to work with colleagues from the regional adoption agency (Aspire) to increase the number of SGO carers with financial and practical support being maintained. Fig 23 (below) provides a further breakdown of the permanence plans for our children & young people in care.

**Fig 23: Details of Permanency planning:**



- 12.7 The service continues to develop and maintain positive links with the Virtual School Service with QAROs encouraging the attainment, achievement, and progress of each child by ensuring PEP meetings are taking place and their impact is evidenced through progress in education. QAROs remain active in recognising the educational achievement of children by celebrating their successes within reviews however small these may be.
- 12.8 QAROs have independent oversight in all reviews that the legal status of the child remains appropriate to the care plan. There is a particular focus on the use of section 20, the timely revocation of Placement Orders (when adoption is no longer the plan for the child) and seeking revocation of Care Orders when children have remained safely at home in parents care.
- 12.9 Covid-19 has had an impact on some applications for adoption orders, discharge of placement orders and revocation of care orders. This has been attributed to the reduced staff at court and the limited number of hearings the courts were able to conduct. It is positive that this has been recognised by the Court and arrangements were put in place to work through the number of waiting applications.
- 12.10 QAROs also have a significant role in reviewing plans for court to ensure that they meet children's needs and that undue drift and delay is avoided. QAROs have access to Independent Legal Advice to enable them to effectively challenge plans. The QARO service footprint is more visible in care plans to court and in communication with Guardians. There are references to their recommendations in social work statements. QAROs also have access to court documents, either through access on the electronic recording system (Mosaic) or directly from legal services. Their view on final care plans is also required and evidences the QARO scrutiny and independent oversight of the Local Authority proposed permanency plans for the child or young person.

**Case study: Permanency challenge**

*K is now a 22-month-old boy, who was placed with foster carers since birth. An early plan of adoption was arrived at due to birth mother's history and longstanding substance misuse and poor mental health. The foster carers put themselves forward as adopters early in the care proceedings, feeling they had developed a bond with him and felt able to manage with the level of uncertainties regarding his future health and development. The QARO felt the placement may be suitable and was concerned that looking for alternative adopters in this instance could be detrimental to his wellbeing, so supported an assessment of the current carers with continued searching for approved prospective adopters. There was positive representation for the welfare and need to provide independent view regarding permanency for him. The assessment progressed and resulted in him remaining with his carers and adopted, having developed a secure attachment to his care givers with no placement moves and resulting in permanency. The QARO was able to provide influence and consideration and acted as a further "sounding board" for the decision making that his permanence planning required.*

## **13. Quality Assurance of the QARO service.**

- 13.1 There is now less of a reliance on manual trackers and spreadsheets, with performance data collated electronically through Mosaic (children's data base) and Corius reporting system. The service works closely with our colleagues in business support to ensure the data collation and collection is correct and highlights early exceptions, potential risks, and concerns to colleagues within Children's Services.
- 13.2 The service undertakes regular audits of reviews, care planning and monitoring of plans following each Child in care Review. The outcome of these audits are shared with the worker and manager and where necessary escalations are made to avoid any further drift or delay.
- 13.3 In addition to the audits following the reviews, the service contributes to the quality assurance framework within Children's Services. The team work alongside social workers and managers as auditors or moderators which also includes formal observations of social work practice and identifying areas of outstanding and good practice with agreed actions on areas where improvement is needed.
- 13.4 Some of the overall findings that have been identified as good practice include:
- Reviews undertaken within timescales.
  - QARO stability and relationship with the child or young person.
  - Most children had a permanency plan.
  - High number of children had been visited face to face by their QARO during the last 12 months and where this was not possible, there was evidence of communication and representation of the child's voice within the minutes and recommendations of reviews.
  - Escalation process being used effectively by the QARO to promote best outcomes and prevent drift and delay for children and young people.
- 13.5 The areas we have identified through the Quality Assurance framework to improve practice and outcomes for children and young people are:
- Clarity as to the use of "informal" escalations and what would constitute as highlighting an issue and a QARO enquiry alongside monitoring and formal resolution of escalation issues.
  - The need for improved communication between social workers and QAROs so that they are informed in a timely way of significant events and are able to respond appropriately.
  - Consistent and effective use of escalation processes especially in cases where there is the potential for drift and delay in progressing permanence.
  - To continue to be imaginative and creative in the way we support and encourage participation in the review process and evidence the impact this has on the child/young person.

## **14. Supervision & Training**

- 14.1 Supervision is an essential activity for providing support and development to individual QAROs and to work toward creating consistency across the service in terms of practice

and process. The team's supervision and appraisal arrangements have been conducted in accordance with Dorset's supervision policy. Each QARO has around 10 to 12 formal supervisions a year, as well as an annual appraisal.

- 14.2 Supervision covers personal matters, professional development, performance observations of practice and feedback as well as discussing the QARO standards, providing evidence of practice and discussing the high risk or need to know children and young people. Supervision is reflective and booked 12 months in advance and throughout the pandemic has taken place virtually. It is likely that this arrangement will continue.
  - 14.3 Due to the long- term sickness of one of the QA managers there was a period (of around 3 months) where QAROs did not have formal supervision. Informal supervision was available through the Head of Service whilst interim arrangements were put in place.
  - 14.4 QAROs have access to a range of training within Dorset Council Children's Services workforce development programme. This consists of formal and informal events as well as a "Thinking Thursday" and "Weekly Word out" which will focus on themes highlighted through the monthly audits (such as completing chronologies, and the importance of permanence planning).
  - 14.5 In addition to accessing training, the QAROs also support the principle Social Worker with training and webinars sharing their skills and experience across the workforce. The feedback from these from social workers in the localities has been positive and have included things such as, social work reports for reviews, care planning and ways to improve participation of children and young people.
  - 14.6 The development of person-centred reviews and the supporting documents have been completed in collaboration with social workers and partners within health and education along with consultation from children and young people, their carers and birth families. QAROs have presented workshops to help other understand the changes and the impact these will have on the child and young person.
  - 14.7 The QAROs will be able to access bespoke training to develop their understanding, knowledge, and practice around restorative practice from April 2021.
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## **15. Areas for Development 2021-22:**

- 15.1 The focus of work to continuously improve in our performance will include:
  - High-level service commitment to Learning and Development opportunities for QAROs, including development of relational practice and trauma informed practice to consolidate a child focused methodology and support a focus on strengths based social work practice.
  - Refresh and implement practice developments in respect of tools and arrangements for improving engagement, and a strengths-based, person centred focused approach to Child in Care Reviews.

- Continue to develop mechanisms/tools which facilitate the meaningful involvement of Children in Care in their Reviews, particularly those who are currently reluctant, and consideration of children and young people chairing their reviews.
- We need to improve our current performance on the timeliness of distributing the recommendations and minutes of all our child in care reviews.
- Develop a consistent monitoring of cases between reviews to ensure timely progress of the child's plan and continuing QARO footprint.
- Increase quality assurance of the QARO impact for the child and young person and increase in observation of practice.
- Development of the QARO role within child exploitation and contextual safeguarding meetings.
- Working with Dorset Council in respect of key strategic priorities including permanence for children & considering alternative exits from care.
- Ensuring that young people are better prepared for leaving care by robust review and challenge around pathway assessment and transition planning.
- Develop relationship and communication between the QARO Service and CAFCASS.

Jane MacLennan, Quality Assurance Manager

April 2021