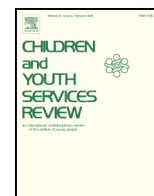


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Independence and effectiveness: Messages from the role of Independent Reviewing Officers in England



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ABSTRACT

This paper draws on research into the role of Independent Reviewing Officers (IROs) in England, exploring the dimensions and challenges of their 'independence'. IROs are specialist social workers whose function is to review the cases of children in public care and ensure that they have appropriate plans and that these plans are being implemented in a timely manner. IROs are 'independent' in the sense that they are not the social worker to whom a child's case is allocated, and do not have line management responsibility for the case, however they are employed by the same local authority. There are detailed regulations and government guidelines on their role, and high expectations, but what does independence mean in this context? The paper draws on a mixed methods study conducted by the authors in 2012–14, which included a survey of 122 files of children in care from four local authorities; interviews with 54 social workers, 54 IROs, 15 parents, and 15 young people; six focus groups; and nationally-distributed questionnaires for IROs (65), social work managers (46) and children's guardians (39). The study found five dimensions of independence: professional, operational, perceived, institutional and effective. The IROs and social workers generally took more nuanced and pragmatic approaches to their inter-professional working than prescribed in the policy guidance or the pronouncements of politicians and judges, seeing this as more likely to be effective. IROs are not, and cannot be, the solution to all the problems that exist in services for children in care, and the other professionals involved should not be seen as necessarily any less capable or committed to the best interests of the children. Rather, the IRO is part of an interactive system of checks and balances which, together, may increase the likelihood that professional judgement will be exercised effectively on the child's behalf.

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1. Introduction

This paper considers the role of Independent Reviewing Officers (IROs), specialist social workers in England and Wales whose function is to review the cases of children in public care and ensure that appropriate plans are in place and being implemented in a timely manner. IROs are 'independent' in the sense that they are not the social worker to whom a child's case is allocated, and do not have line management responsibility for that social worker (a role that typically falls to yet another social worker, the team manager) although they are employed by the same local authorities as these others. This means that there are (at least) three social workers around any given child or young person in care with direct responsibility for, and a reasonable degree of familiarity with, his or her case. The different roles of these professionals, and the overlaps and tensions between them, are therefore of great consequence for the well-being of the children and the effectiveness of the plans made for them.

The paper draws on findings of a research study of care planning and the role of the IRO undertaken in 2012–14 (Dickens, Schofield, Beckett, Philip, & Young, 2015), and focuses on the notion of *independence* in this professional and organisational context. The government guidance for IROs (DCSF, 2010), and indeed the name of the service, makes clear that independence is central to this service's claim to make a distinct contribution. The paper will examine what IROs' independence means in practice.

While the focus of the paper is this one particular administrative arrangement that exists within a single jurisdiction, the issues raised have much wider implications for the ongoing debate in the literature on professionalism about the correct balance to be struck between professional discretion and professional accountability, and the role of quality assurance mechanisms. We observe that the thinking behind the IRO service is a curious hybrid of, on the one hand, the traditional discourse of professionalism (IROs need to be independent of managerial control in order that they may be guided by their professional values and judgement) and, on the other, the managerialist discourse that emphasises the need for quality assurance mechanisms to ensure accountability (social workers' professional values and professional judgement cannot be relied upon, so their decisions need to be scrutinised).

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2. IROs: background and debates about independence

2.1. The role of the IRO

It is a legal requirement in England and Wales that each child in care should have a named IRO, and IROs' duties are set out in primary legislation, regulations and 'statutory guidance' (government guidance that local authorities are required to follow unless there are exceptional circumstances to justify a variation). The guidance to local authorities on their responsibilities for children in care is extensive (at the time of writing, the most recent version is DfE, 2015), and there is a specific handbook for IROs (DCSF, 2010). Their key tasks are to monitor the performance of the local authority in relation to the child's case, including checking that the plan meets the child's needs, that it is viable and that previous decisions have been carried out; to chair the periodic reviews of the child's case; to meet with the child before each review and ensure that his/her wishes and feelings are taken into consideration; to ensure that the parents' wishes and feelings are taken into consideration, and that all those involved in the review meeting(s) are able to make a meaningful contribution; to identify who is responsible for implementing the decisions of each review, with timescales; and to tackle any delays.

The role was created in 2004, largely in response to mistrust from the courts about the compliance of local authorities with court-ordered care plans, and the lack of anyone to challenge local authorities about their planning for the child if his/her parents were no longer involved. These matters had come to a head in 2001, in a Court of Appeal judgement which proposed that 'starred milestones' should be identified in a child's care plan and procedures established for the case to be referred back to court if these were not achieved (*Re W and B; Re W (Care Plan)* [2001] EWCA Civ 757). The judgement was subsequently overturned in the House of Lords, in March 2002, on the basis that it breached the proper division of responsibilities between the courts and local authorities (*Re S (Minors) (Care Order: Implementation of Care Plan); Re W (Minors) (Care Order: Adequacy of Care Plan)* [2002] UKHL 10, [2002]). However, the judgement stressed that the rejection of this step on legal grounds 'must not obscure the pressing need for the government to attend to the serious practical and legal problems identified by the Court of Appeal' (para 106). The role of the IRO was developed as a remedy to this situation.

Two points about this particular narrative are worth bearing in mind. First, a number of local authorities had already established specialist reviewing systems, so the role was not simply the result of court-led pressure (Grimshaw & Sinclair, 1997); and second, research at the time gave a rather different picture: that on the whole plans were implemented successfully, and while there might sometimes be delay or changes, this was not because of deliberate non-compliance by local authorities, rather because of plans not working out for various reasons, or changing circumstances (Hunt & Macleod, 1999; Harwin, Owen, Locke, & Forrester, 2003).

Nevertheless, there are high expectations of the role, and doubts about the effectiveness of the IRO service were being expressed within a very short period of time (e.g. DfES, 2006). There has been forceful criticism of IROs for being insufficiently challenging and insufficiently 'independent'. A leading example is the judgement in the case of *A and S v Lancashire County Council* [2012] EWHC 1689 (Fam), when the judge awarded damages against the IRO personally for failing to protect the interests of the two boys in the case. Other examples are the thematic inspection by Ofsted (2013), and research by the National Children's Bureau (NCB, 2014). But it is important to look more carefully at the nature of 'independence' in a complex context where other professionals are involved, other individuals, different agencies (including at times, the courts), public money is being spent, activities and processes are highly regulated by national and local policies, and resources are limited.

2.2. Independence and the professions

Eliot Freidson notes that professions traditionally claim an entitlement 'to be independent of those who empower them legally and provide them with their living' (Freidson, 2001, p. 220). This claim is based on their specialist knowledge, but crucially also on their ethical commitment to some 'transcendent value' (2001, p. 122), such as Justice (in the case of the legal profession), Health (the medical professions) or Truth (the academy), which will guide them in the absence of external control.

Such claims are sometimes made on behalf of the profession of social work, although often ruefully. We may see them, for instance, in the large body of writing (collectively referred to by Evans and Harris (2004, p. 874) as 'curtailment literature') which charts the rise of managerialism in social work and the curtailment of professional discretion that has supposedly resulted. Jones (1999, p. 38), for instance, regrets that 'social work has been transformed from a self-regulating professional activity into a managed and externally regulated set of tasks'; and Rogowski (2011, p. 162) complains that rules and procedures 'amount to an "iron cage" which limits practitioner discretion'.

It seems self-evident to advocates of professional autonomy that a profession's knowledge and values entitle it to a degree of freedom from managerial control. However there is an alternative view of professions which is that they are essentially self-interested, that their claim to exclusive expertise exists in order to 'limit entry and so raise professional incomes' (Travers, 2007, p. 44) and that the transcendent values they purport to serve are a means of 'persuading society to grant the special status of autonomy' (Freidson, 1970, p. 135). This view of the professions is taken by critics on the right and left of the political spectrum. On the right, neoliberals perceive human beings as essentially self-interested actors, which results in a suspicion of the claims of professionals and public service workers to a disinterested commitment to the greater good. This in turn leads to the use of market and/or managerial mechanisms to prevent the professions from 'obstructing necessary change or engaging in exclusionary practices' (Travers, 2007, p. 46).

Critics on the left observe that most professionals, including even social workers, are relatively privileged members of society and many, also including social workers, are in a relationship of unequal power with their service users. As Travers observes, '... it is agreed by most liberal commentators that, far from being altruistic, professions seek to increase their own earning power by securing a monopoly on accreditation' (Travers, 2007, p. 43). You do not have to be a neoliberal, in other words, to see that professional power can sometimes be abused, or used in a self-interested way.

In short, there are two distinct discourses about professional independence. One (we might call it the 'knight in shining armour' discourse) is that, in order to be able to serve some 'transcendent value' professionals should be allowed to exercise their own judgement freely. The other (we will call it the 'managerialist' discourse) is that the output of professionals needs to be carefully regulated in order to prevent professional self-interest getting in the way of optimal service delivery. As is the case with most such binary oppositions, there is a great deal of ground between these two extremes. Probably most people would agree that some midway point between complete autonomy and rigid regulation is desirable – but may well not agree exactly where.

The IRO service represents a rather special case in relation to this continuum, as we will discuss shortly, but before doing so, there is one further point that is important to make. If one accepts that, at least to some degree, the 'managerialist' discourse is valid, a new layer of problems present themselves. As Max Travers notes 'since professional work involves the exercise of situated judgement, it is impossible to devise a means of objectively measuring performance' (2007, p. 56) and this leads directly to the paradox that to decide whether or not a professional has come to the correct judgement in a given situation is, of itself, 'a matter of professional judgement' (2007, p. 56, emphasis added).

2.3. The IRO service

The IRO service has a quality control function which is in some ways akin to that of an inspectorate, albeit operating primarily at the detailed 'micro' level of individual cases, and operating within, rather than externally to, the organisations whose activities it monitors. As noted in the introduction, IROs are social workers, employed by the same authorities who are responsible for children in care, whose function is to review the plans made for those children, and the delivery of those plans, by the children's social workers and the local authority in general. They are not the supervisors of those social workers and do not have day-to-day operational responsibility for the young people whose cases they review, or for the services and resources provided to them – and yet, despite those constraints, they have the extensive set of responsibilities outlined earlier. One particularly interesting aspect of the IRO service is that the discourse surrounding their role is a curious kind of hybrid of the 'managerialist' and 'shining armour' positions discussed above. By this we mean, not that it occupies the middle ground between the two, but rather that it draws on elements of discourses from *opposite ends* of the spectrum – something which it has in common with the discourse surrounding the work of independent inspectorates and watchdogs of various kinds such as the Children's Commissioners in the UK. On the one hand, IROs exist to challenge the professional judgement – and therefore, by implication, the traditional claim to professional autonomy – of children's social workers and social work managers. On the other hand, IROs (who are social workers themselves) are specifically enjoined to be as 'independent' as possible of any external pressure, so as to be 'fearless champions' of the best interests of children (Finlayson, cited by Lepper, 2015; see also Jackson, 2014, who was the judge in the *A and S v Lancashire* case). In a sense, what is taken away from one group of social workers is given to another group. And indeed, much of the discourse about the role of IROs places responsibilities upon IROs which one might otherwise have assumed to be the responsibility of those to whom the children's cases were actually allocated.

In fact, commentators concerned to see control exercised over the practice of local authorities and their managers, are often keen to give even *more* independence to IROs than they already have, following the logic of the IRO Handbook which states that 'the independence of the IRO is essential to enable him/her to effectively challenge poor practice' (DCSF, 2010, para 2.18). As the National Children's Bureau noted, 'there has been continuing scepticism about whether they [IROs] are making enough difference to the quality of the service and whether their independence is compromised by being under local authority control' (NCB, 2014, p. 6).

So, poor performance by local authority social workers and managers necessitates more vigorous scrutiny and challenge, but poor performance by IROs necessitates more independence! There is an interesting contradiction here. IROs come from the same pool of qualified social workers as do social work managers and practising social workers, and the same individual may at different points in her career play all three roles, and yet they are sometimes assumed to possess different qualities, and to be worthy of a different level of trust. This assumption can be found in a House of Lords committee on the Children and Young Person's Bill in 2008, which included, amongst other things, provisions to extend the role of IROs. In the committee, Lord Adonis observed:

The role of the IRO is central to ensuring that the voice of the child is heard. Therefore, Clause 11 introduces a specific duty on the IRO to ensure that the wishes and feelings of the child are given due consideration in care planning.... The Bill extends the responsibilities of IROs to monitor the performance of the local authority's functions in relation to a child's case, ensuring that they effectively oversee the care planning process so that it is fair and reasonable and gives proper weight to the child's wishes and feelings...., ensuring that there is greater scrutiny of the care plan for each child in care and making sure that children and young people are informed about their rights if they consider that they have been treated unfairly.

(House of Lords, 17 Jan, 2008, column GC581).

Lord Adonis is very confident that this particular group of social workers (IROs) will be able to 'ensure' that children are listened to – the words 'ensure', 'ensuring' and 'make sure' between them appear five times in this quotation. Yet the very existence of IROs is based on a lack of confidence that social workers can be trusted to ensure that children's voices are adequately heard.

These contradictions are not offered here for ridicule. There is a genuine paradox at the core of it, and paradoxes cannot be resolved without contradictions. What is interesting, and what the rest of this paper will explore, is the way that the contradictions inherent in the role have been worked out in practice by IROs and the other social workers involved with looked after children.

3. Methodology

The research study on which this paper is based was funded by the Economic and Social Research Council and used a mixed methods approach (Dickens et al, 2015). In summary, it involved:

- Analysis of case files of 122 looked after children, in four local authorities in England;
- In-depth interviews with 54 social workers, 54 IROs, 15 parents, and 15 young people;
- Two focus groups with young people who were or had been in care;
- A multi-professional focus group in each local authority;
- Nationally-distributed questionnaires for IROs (65 replies), social work managers (46 replies) and children's guardians (39 replies).

The four local authorities were two large county councils, one unitary authority (a small city) and one London borough. There were 30 case studies per authority (32 in the largest), randomly selected but within parameters to ensure a range of legal statuses, ages and lengths of time in care. The study had research ethics approval from the Research Ethics Committee of the School of Social Work at the University of East Anglia.

The social workers and IROs were selected from those involved in these cases, drawing on the file analysis to ensure a balanced range of cases and workers, and to avoid having more than two cases held by any individual worker. The social worker *and* IRO were interviewed on 50 cases. There were a further six cases where *either* the social worker or the IRO was interviewed. These interviews focused on getting further information about the child's circumstances, the evolution of the care plan and the current goals for the child. There were questions about the roles that each professional had played in the care planning and review process for the selected child, and also wider questions about their understanding of the care planning and review process in general, and the role of the IRO.

The interviews with parents and young people focused on their experiences of social work intervention, reviews and the role of the IRO. The child and young person interviewees were nine boys and six girls. The youngest was aged 10, and the eldest 17. The 15 parent interviews were 13 mothers, one mother and father together, and one father.

All interviews were tape-recorded with the consent of the interviewee, and transcribed. They were analysed using a thematic approach (Boyatzis, 1998), looking for comparisons and contrasts between different individuals and the different groups. Analysis was undertaken with the aid of the NVivo computer software.

The composition of the professional focus groups varied from authority to authority, but across all four focus groups a full range of relevant professionals and others was included. Attendees included IROs and IRO managers, specialist health and education workers for children in care, local authority lawyers, children's guardians, residential care staff and foster carers. The groups were asked to discuss their experiences of care planning and review, and the role of the IRO. The focus

groups with young people included young people currently in care and recent care leavers, recruited through the two of the local authorities' young people in care councils. The discussions in the focus groups were recorded and transcribed, and analysed alongside the one-to-one interviews.

The questionnaires were sent out nationally in order to gain a wider range of perspectives, and to see whether the experiences within the four study authorities were consistent with experiences elsewhere in England. They were sent to IROs and to two groups of social workers who were not interviewed, team managers of local authority looked after children teams and children's guardians. Children's guardians are social workers appointed by the court when a child is subject to care proceedings, to make an independent assessment of the case. They are not employed by local authorities but by a separate agency, the Children and Family Court Advisory and Support Service, known as 'Cafcass'.

The questionnaires were sent out to senior officers in IRO services, local authorities and Cafcass, with a request to forward them to relevant staff. There were questions about their work experience, caseloads, experiences of care planning and working with the other professional groups, their role understandings and their perceptions of successes and difficulties. A number of reminders were sent to the relevant agencies over the period that the questionnaire was open. The authors do not know how many staff received these messages and is therefore not possible to calculate a response rate. However, there was at least one response from 61 different authorities, 40% of the LAs in England. These came from all regions of the country, and different types of authority (county councils, inner and outer London authorities, metropolitan boroughs, smaller and larger unitary authorities). The authors cannot claim that the sample was representative in a statistical sense, but it is large and varied enough to include a diverse range of views and perspectives from across the country. The responses to the different questions were analysed in NVivo or SPSS as appropriate. Sections 4, 5 and 6 below present findings from the study.

4. Characteristics of IROs

The questionnaire data showed the IRO service to be an experienced workforce, consistent with the findings of other research (NCB, 2014). Forty of the IROs responding to the questionnaire (62%) had more than twenty years post-qualifying experience in total (previous posts and current post combined). Forty had been IROs for five years or more. Three-quarters of the IROs had experience of being a team manager (or other managerial post) prior to becoming an IRO. Just over two-thirds of IROs (69%, 45 respondents) indicated that they had worked in their current local authority in another post prior to taking up their current post as an IRO. In the interviews, many IROs portrayed this depth of experience and knowledge of an authority's systems and personnel as an advantage, that they knew how things worked and how to get things done; but, as will be discussed below, other interviewees and questionnaire respondents, notably the children's guardians, regarded this 'insider' status with suspicion, as being likely to weaken the commitment to strong challenge.

One of the major obstacles to IROs' effectiveness, identified in previous research (Ofsted, 2013; NCB, 2014) and in the *A and S v Lancashire* case judgement, is excessive workloads. From our questionnaire data, the mean case load for full-time IROs working solely as an IRO was 75, which was just above the range recommended in the IRO Handbook (50–70; DCSF, 2010, para. 7.15). However, this figure disguises considerable variation. The range was from 43 to 119. There was some evidence that the problem of heavy workloads was being addressed. Nearly four in ten said that their caseload was lower than the year before (39%, 25 of those responding; seven were new employees so the question was not relevant). Almost 30% (19) said that it was about the same; but a fifth of the respondents, (20%, 13) said that their caseload was higher than it had been a year before.

5. Independence

'Independence' is clearly key to the distinctiveness of the role of IROs. As we have seen 'independence' is especially enjoined in the guidance under which IROs operate, while debates around the functioning of IROs often centre on whether they are independent enough. But 'independence' can mean many different things, and the analysis of interview, focus group and questionnaire material revealed five distinct ways in which the word, or the idea, was used by participants in the present study.

5.1. Professional independence

This is the independence traditionally claimed by professionals, to come to their own professional judgements on the basis of their professional expertise and of the 'transcendent value' which they serve. In the case of IROs, the 'transcendent value' frequently referred to was the best interests of the child, or sometimes 'the voice of the child'. On one of the questionnaires an IRO said that he/she wanted to 'meet up with children more frequently... to get to know them better so they can feel that their IRO is a "champion" for them'.

One would assume that championing the best interests of the child would also be a principle that would guide the work of all the professional social workers involved in work with children, and indeed an allocated social worker described his/her responsibility in precisely these terms – 'I feel that... the majority of my role as a social worker is to definitely make sure that we can be the voice of the child' (Social worker interview). However the existence of the IRO role is based on a recognition that there are 'other drivers' (as one IRO put it) which can sometimes get in the way of professional independence. The most frequently mentioned such drivers were budgets, procedures and workloads, the implication being that managers and social workers may sometimes be so preoccupied with pressures on them to stay within budget, manage workloads or meet targets, that their focus is in danger of shifting towards the needs of the organisation, or even their own needs, and away from the needs of individual children:

I think the difference for us is, you're not the caseworker, so you aren't involved in all those tensions.... You're sort of up a bit, looking down, you know, on all what's happening. So you're seeing all of it, rather than just the bit that the social worker's got to deal with or the teacher's got to deal with... and you actually can see how it's either linking together, or it's not, with the child in the middle. (IRO interview).

5.2. Operational independence

We use the term 'operational independence' to refer to separation from direct involvement in operational functions. This is the kind independence referred to when the IRO Handbook notes that the regulations 'do not prescribe the position of the IRO within the local authority but do prescribe minimum levels of independence' (DCSF, 2010, para 2.18). Regulation 46 specifies that the IRO must not have day to day responsibility for the young person (visits, making plans) and must not be involved in the allocation of resources.

'Operational independence' is quite different from professional independence, and it is possible to imagine someone who has either one of them without the other. Professional independence is about being trusted to pursue the best interests of the service user, while operational independence is to do with not being directly involved in operational decisions. However there is an implicit assumption in the regulations about the relationship between the two: namely, that professional independence may be compromised by operational engagement. A number of IROs echoed this view: 'I... can focus on the child's needs and not what resources are available or other pressures,' said one IRO. And in

fact, both IROs themselves and allocated social workers referred to the ability of IROs, with their relatively detached position in the organisation, to take a 'helicopter view' and 'see the wood for the trees' (both expressions that were used several times in this study, by IROs and by others). As one social worker observed, IROs 'do have sort of an outside picture or sense of what is going on, so really they have a different view, an overview'.

Operational independence in a pure form is, however, a difficult and even self-contradictory concept. The study found that IROs in practice not infrequently took on roles which overlapped with those of the allocated social worker (e.g., chasing up resources, or liaising with parents), or the team manager (e.g., giving social workers advice on practice). There was also a very wide range of views as to whether or not IROs were involved in plan-making. Two social workers within the same authority, for instance, expressed completely opposite views on this: one seeing the review meetings chaired by IROs as the primary plan-making forum for children in care, the other saying that plans were always made elsewhere, but were reviewed in the meetings. (In fact, even the IRO Handbook is ambiguous on this point, with paragraph 2.18 stating that the IRO should not be 'a person involved in preparing the child's care plan or the management of the child's case' but paragraphs 3.70 and 3.71 talking about 'decisions made at reviews', and that these are binding if not challenged by a senior manager within five days.)

In a sense, an effective IRO is *inevitably* involved in plan-making. If IROs challenge plans and insist on changes to them, the result is a new plan in which the IRO has at least some stake. So IROs are not wholly detached from operational matters such as the making of plans, and in a way they cannot be, if they are to be effective at all. Nevertheless, generally speaking, IROs in the present study were seen by themselves and others as possessing a sufficient level of detachment to be able to take a distinctive view of their own. And, though there were some complaints about IROs overturning delicate plans or carefully worked out arrangements, this distinctive 'outsider' perspective was widely valued. Operational independence may be a complex and slightly contradictory notion in relation to IROs, given that they are not inspectors coming in occasionally to assess the overall quality of a service but have an ongoing relationship with the specific children on their caseload, and an ongoing input into the plans that are made for them, but it is not a meaningless one.

5.3. Perceived independence

The extent to which IROs are *perceived* to be capable of acting independently of the other social workers in the triangle is not the same thing as whether they are independent in fact, but is nevertheless important to the establishment of a relationship of trust with all participants. An IRO who was in fact completely capable of coming to independent conclusions from the rest of the local authority might still seem to parents to be allied with the local authority, if he or she was based in the same office, was clearly on amicable terms with the other social workers, and (as one would expect, given their similar training and background) quite frequently agreed with them.

This was a concern expressed by several IROs and social workers, as well as by some parents. One mother, for instance, said in an interview:

She [IRO] sides with Social Services... they are all very cliquy cliquy... They are all like sitting there laughing and joking as you walk in, and things like that.... [They] know each other well, they all work in the same building... on the same floor.

This mother was unhappy that (as she saw it) the IRO failed to do what she said she would, and linked this to her perception that the IRO and the other social workers saw each other as colleagues and friends. This is understandable, though the fact that an IRO in a given case takes the same view as the other social workers is not in itself evidence that IROs are not genuinely independent, and a number of

parents did recognise this. Asked her whether she thought the IRO agreed with social services, another mother answered, 'I think he did, yeah, I think he did probably agree with social services... but it was what was best for [the child].' Another parent said she thought the IRO was 'on everyone's side; he was a little bit for us and a little bit for the social worker, a big part for [the child] of course. I think he is trying to do the best for [the child], yeah.'

5.4. Institutional independence

This would involve the complete separation of IROs from local authorities and their employment by a separate organisation. This was a live issue at the time the study was being carried out because the Children and Young Persons Act 2008 made it possible for the Secretary of State to impose such a separation on IROs by order made at any date up to 13 November 2015. Since this deadline has now passed, the following discussion will not rehearse the debate about the desirability or otherwise of institutional independence, but it is discussed in some detail by [Dickens et al \(2015\)](#).

5.5. Effective independence

The four kinds of independence mentioned thus far can be summed up as, first, the degree to which IROs are free to exercise their own professional judgement (professional independence); second, the degree to which IROs are freed from responsibility for operational decisions (operational independence); third, the extent to which they are seen by others as being independent of the local authority (perceived independence); and fourth, the idea of IROs being part of a separate organisation to the local authority (institutional independence), which currently does not apply. The study also found a fifth aspect, 'effective independence', without which other kinds of independence would be of little value. This could be described as the ability to influence events. It could be called 'agency', 'effectiveness' or 'power', and its relationship to the other kinds of independence is complex. We shall discuss this further in [Sections 6.2 and 6.3](#), but first say more about the inter-professional context within which IROs operate.

6. Inter-professional relationships and effectiveness

6.1. The social work triangle

As noted in the introduction, the existence of IROs means that each child is at the centre of a triangle of social workers, each of whom has particular responsibilities for them. The first member of the triangle is the child's allocated social worker, who in normal circumstances would have the most contact with the child, and is responsible for implementing the child's care plan, and responding on a day to day basis to problems and queries. The second is the social worker's line manager, to whom the social worker is accountable for his or her work with the child, and with whom the social worker will typically discuss the child's case and develop plans. The line manager is likely to be responsible for large number of cases, and must ensure that each child receives an appropriate share of the limited resources of the agency. The third is the IRO. If the case is subject to care proceedings, there will also be a fourth social worker, the children's guardian, whose task is to ensure that the child's best interests, and his/her wishes and feelings, are adequately represented in the court arena. There may also be other social workers involved, such as residential social workers, or fostering social workers. However, assuming that posts are filled and cases can be properly allocated, the core triangle is the basic arrangement for all children in care.

The researchers wondered if there would be evidence of conflicts between the three groups as to who is the true custodian of the child's best interests, for, as Freidson observes, such tussles are not uncommon in professional life: 'Part of the struggle that can occur between

occupations (and between specialities within occupations) can be over which one my legitimately claim custody of a traditional value' (2001, p. 122).

IROs did sometimes present themselves as uniquely well-placed to represent the voice of the child, particularly in situations where there was a rapid turnover of social workers and IROs were a source of continuity. Many IROs referred to the fact that, due to frequent changes of social workers they were often 'the one constant figure in [a child's] life' (IRO questionnaire), although there were counter-instances where a single social worker had dealt with a succession of IROs. There was some evidence of conflicts and disagreements between the different groups in the triangle – for example, one team manager wrote on the questionnaire: 'On occasion I have had concerns that the IRO is too involved in formulating plans inappropriately, and I have been clear that this is not their role as they are not the worker's team manager'. However, such comments were unusual, and on the whole allocated social workers and team managers seemed to value the input of IROs, and the perspective they brought to the case as a result of their semi-detached status. As one social worker observed:

IROs seem to be far more visible outside reviews [than they used to be], far more questioning, wanting far more updated information... which is fine for me, you know.... In fact, I often have meetings with them... just to talk things over really, because they obviously know the situation and the child... it's always good to have discussions with the people not so involved, involved but not in the day-to-day stuff....

IROs in turn were generally respectful of the unique position of the allocated social worker:

Most young people know that if they raise things with me I will follow them through and challenge others if necessary. However, they also know that it is still important for them to engage with their social worker and address issues with them first. Some social workers also have an excellent relationship with the children they work with and are very proactive, but some don't. (IRO questionnaire).

6.2. Evidence of effectiveness

There is no simple measure that can be used to answer the question as to whether or not IROs are effective, whether they 'make a difference'. If the test was whether or not IROs had been able to prevent every delay, or immediately resolve every problem in planning or service delivery, then the answer would be no, because the case file survey showed examples of delays and unresolved problems, sometimes stretching over many reviews. However this would not be a reasonable test. There is no reason to believe that an IRO should always be able to resolve difficulties in a case which the current allocated social worker and team manager have been unable to resolve, particularly when one bears in mind that IROs are specifically excluded by the guidance from control over resources. Managers were sometimes characterised by IROs as being pre-occupied with managing resources, but, as noted above, a manager, like the local authority as a whole, has responsibility for the well-being not just of one child but of many, and resources allocated to one child are inevitably resources taken away from others. This is presumably the reason that the IRO Handbook acknowledges that 'that the review cannot tie the hands of a local authority in relation to some issues, particularly where there are resource implications' (DCSF, 2010, para 3.70).

A more realistic and appropriate test is to ask whether the input of IROs can be seen to be providing added value, resulting in better outcomes than might otherwise have been the case. The finding of the present study is that the answer to this question is a qualified yes. Not every interviewee or respondent would have agreed with this, and questions were certainly raised by some participants, including social workers,

team managers and parents, about the degree to which IROs were really able to influence events. Children's guardians, in particular, were likely to express concerns about IROs failing to challenge local authorities sufficiently. As a Cafcass manager (i.e. manager of children's guardians), complained in one of the focus groups:

There are examples that you could find that, where, you know – years and years and years of not complying with a care plan – a local authority care plan has just gone unchallenged....

However, against this, other views expressed in the interview and questionnaire material showed social workers, managers, parents and young people all acknowledging that IROs can and do intervene in ways that helped to move things forward in a constructive direction (see Dickens et al, 2015 for examples). The examination of the case files did uncover delays, but also instances where IROs could be seen interrogating plans and setting deadlines in reviews. (Though of course we cannot know for certain what would have happened in the absence of IROs, and whether or not others would have stepped into the breach.)

Another factor in assessing effectiveness is individual variation. One social worker, asked in the interview whether IROs had 'clout within your local authority... power to get things to change, to get team managers to act?', responded that she thought most of them did, and identified a key factor in the effectiveness or otherwise of IROs – a factor that had also been apparent to the researchers – as being the readiness and ability to follow things up between reviews, rather than leave them until the next one:

... some of them [IROs] actually keep a tab on the important decisions that's been made, and so they actually either contact the social worker or the manager to find out... some of them follow up on the time-scales to see, if this action hasn't been done, why hasn't it been done?

Some interviewees and questionnaire respondents suggested that different authorities afforded IROs different levels of influence, but the evidence on this was not conclusive. The point being made here is that there were clearly differences *within* authorities. Just as teachers, social workers, and other professionals vary considerably in skill, commitment and overall quality of work, so, not surprisingly, do IROs. 'The personalities of the IROs sometimes make a difference to how effective the IROs are perceived,' one team manager observed. But it is important to note also that IROs inevitably have 'other drivers' too, and that the degree to which IROs can pursue issues arising from their cases will depend in part, just as it does for social workers and managers, on the size of their workload, the quality of supervision they receive and their own understanding of their role.

6.3. How IROs influence events

Insofar as IROs did have a positive impact on many children's cases, the question arises as to *how* IROs achieve sufficient authority to be able to influence events. The data suggest that IROs adopt not just one but a number of different strategies. The most obvious of these is *formal challenge*, although if this happens it is usually after (and part of) a process of discussion and negotiation. Various formal mechanisms are available to IROs who wish to challenge the plans being made for children, and they had been used by most IROs responding to the questionnaire. Over three-quarters, 76%, reported using their local dispute resolution procedures at least once in the previous 12 months. The median number of times they said they had done so was three. Over a third, 36%, had taken independent legal advice at least once, and 19% had used a help line run by Cafcass. These figures have to be seen in the context of the IROs' caseloads. As noted, the average caseload was 75, so it is clear that formal challenge is relatively infrequent.

Challenge does not have to be formal to be effective, however. In French and Raven's taxonomy of power (French & Raven, 1959; Raven, 1993) coercive power (the power to compel), is only one of a

number of forms of power, which also include legitimate power, reward power, expert power and referent power, the latter being derived from the respect of others, and the IRO Handbook says that formal challenge should only be used as a last resort (DCSF, 2010, paras 3.5, 3.71, 5.8, 6.1, 6.10). Effective IROs were typically able to influence practice without resorting to formal processes. One IRO's description of his preferred way of working shows how he relied a great deal on his own personal authority:

There were three different children that I had concerns about, so I nipped upstairs to where the social workers are sitting, and had a word with the team manager about one of them. I had a word with another team manager about another one. Now, I know those conversations are going to make a difference, because these people are going to get back to me today, and if they don't, I'll be chasing them again. (IRO interview).

The less confrontational approaches included setting timeframes for tasks and following up on them, raising concerns informally with social workers and team managers, and then, if necessary, going into the various systems of lower-level warnings known as 'practice alerts', or 'case alerts' in different local authorities. In the interviews, many social workers spoke of IROs as powerful and authoritative figures whose views could not be disregarded, whether or not they used formal or informal approaches. Social workers might find this uncomfortable, but in general they acknowledged its utility. As one social worker put it:

Even though they are working for the local authority, they still come down on you like a ton of bricks if certain things haven't been done. And also, because they are part of the organisation, they are aware of the issues... they are easily accessible to us, you know.

This last point is significant because, although the thinking underlying the IRO guidelines seems generally to be based on the assumption that operational independence is essential, many IROs seemed in practice to gain authority and influence, not by adopting a position of detachment from operational matters, but, on the contrary, by getting involved, albeit in a selective and perhaps tactical way. As previously noted, IROs sometimes became quite actively involved in resolving problems in ways that one would normally associate with allocated social workers, and often IROs' interventions took the form, not of overt challenge, but of something more akin to helpful advice. As one IRO observed about the working relationship with team managers: '... it is about using your whole skill base to engage that team manager and try to help them understand that actually you are being helpful and not trying to be difficult'.

As this last remark illustrates, the business of gaining influence was often about relationship building, which might well include IROs demonstrating that they understand the difficulties that the people they are trying to influence are up against. So, just as authoritative social work practice does not preclude empathy or supportiveness, effective oversight by IROs did not, in practice, preclude positive working relationships and direct engagement with operational staff. Some IROs worried that they were too sympathetic to the problems of operational staff, but given that many delays are the result of resource shortfalls and organisational problems over which IROs have no direct control (and indeed, as we have noted, are explicitly *excluded* from controlling by the Handbook), and which may be beyond the power of the social workers and their managers to rectify (except, perhaps, to the cost of other, equally needy children), IROs must walk a difficult line. On the one hand, they need to be careful not to simply accept every explanation for shortcomings at face value. On the other hand, by showing willingness to recognise the realities with which operational staff struggle, IROs may be able maintain relationships of trust and respect, thereby providing leverage that they might lose with an overly confrontational approach.

Further evidence of the negotiated approach generally adopted by IROs is the low number of formal referrals to Cafcass made by IROs (just ten up to February 2015), this being the mechanism of last resort for IROs unable to reach agreement with the rest of the local authority about the way forward on a case. While this could in some instances be seen as failure to exercise authority appropriately, it could also be seen as a measure of success. An analogy would be with going to court (see for instance Hawkins, 2002). The fact that lawyers tend to avoid taking cases to court wherever possible is actually an important part of how the law works, bringing about change through negotiation and mediation under the threat of legal action. In the same way, the possibility of a referral may be all that is needed for IROs to open up negotiations and get an agreement that actually averts the necessity for referral itself. As one IRO observed:

Before an IRO gets to challenge at Cafcass level, there's a lot of hoops to be jumped through. So initially you go to the social worker and try, just on that level, to iron out any problems; team manager; then you'd be involving my manager, then you'd be getting involved with, probably, service managers, potentially assistant directors.

7. Discussion: professional independence and effectiveness

The importance of effective care planning, and timely implementation of plans, for children in care has long been recognised (e.g., see Grimshaw & Sinclair, 1997). The statutory role of IROs was created in order to address the courts' misgivings about local authority shortcomings in this area and lack of a legal remedy. In fact, research then and now shows generally positive outcomes for children in care (see Forrester, Goodman, Cocker, Binnie, & Jensch, 2009; Children's Commissioner for England, 2015), but there is no doubt that some cases do not go well. There may be multiple and complex reasons for poor outcomes, but implicit in the rationale for the creation of IROs was a diagnosis that poor performance by local authorities in implementing care plans was down to allocated social workers and their managers not being sufficiently focused on the needs of the children, not strong enough champions, too easily distracted by organisational matters such as budgets, procedures and workloads. The response was the creation of a new group of social workers, who would stand to one side of the organisational hierarchy, and oversee the judgements and decisions made by allocated social workers and managers.

In practice, the idea that one must be removed from operational matters to be able to work in the best interests of children or ensure that children's voice is heard, is fraught with difficulties. As discussed above, an IRO who is effective – who makes a difference to the lives of children – is inevitably operationally engaged (hence the confusion that is apparent, both in the guidance and in the comments made by professionals in the present study, as to whether or not IROs *make* plans). What is more, in order to be effective, an IRO must win the respect of those whose job it is to put plans into practice, and this, as we have seen, may involve IROs in engaging to some extent in tasks that would strictly fall outside their brief, or in recognising the practical constraints faced by the other social workers in the triangle and accepting compromises.

While to some this may seem a dilution of the independence of the IRO, this study has shown that independence is a multi-dimensional concept, and it does not follow in a straightforward way that a professional who possesses 'independence' in one sense of the word will necessarily be able, or want, to exercise independence in other senses. Some sacrifice of operational independence might be necessary in the interests of increasing effective independence. And it is important too that professional independence and professional judgement should not be seen as the exclusive possession of any one group of social workers. The values which social work traditionally claims to uphold

have, at their core, the notion of championing the interests of oppressed or marginalised groups (in this case, children). If any one group were to claim exclusive ownership of this role, this would amount, in effect, to an implicit message to the others that championing the child was not something that they were expected to do. Travers (2007, p. 13) observes that the advocates of Total Quality Management, an idea which lies behind much of current quality assurance practice, were opposed, for this reason, to the quality assurance function being separated from the rest of an organisation. It would be in no one's interests, for instance, if allocated social workers were to conclude that hearing and representing the voice of the child was someone else's job.

We noted earlier that the discourse underpinning the IRO role is a strange hybrid in that it simultaneously rejects and endorses the traditional notion of the autonomous professional, but it is not really tenable to believe simultaneously that one group of social workers can be fearless and impartial champions whose independence should be guaranteed, while another group are so compromised by their operational role as to require their autonomy to be curtailed by close oversight and challenge. In fact to hold two beliefs simultaneously would be reminiscent of psychological 'splitting' in the sense that the term is used in psychodynamic psychology (see, for instance, Hinshelwood, 2002, pp. 204ff). Melanie Klein postulated that infants find the idea unbearable that their mother, on whom they are so utterly reliant, is not perfectly responsive to all their wants and needs, even though, in reality, she of course is not, and so they deal with this by effectively splitting her into two, the 'good mother' and the 'bad mother' (Klein, 1975 [1952], p. 49). Some of the hopes that are projected onto IROs reflect a similar kind of splitting between the 'good social worker' (the unfettered 'fearless champion' of the child) and the 'bad social worker' (preoccupied only with following procedures, managing workloads and keeping within budget). The present researchers did occasionally encounter dichotomous thinking of this kind, but it was not the view that was generally presented by any participant group in this study, including parents and young people; rather, it seems to be an expectation more likely held by outside observers, such as politicians and judges. The interactions described to the researchers by IROs, social workers, social work managers, children, young people and parents, were much more complex and nuanced. In particular, while the three corners of the core social work triangle – allocated social workers, managers and IROs – were certainly not uncritical of one another, they did not (on the whole) make exclusive claims to the moral high ground. Rather they usually saw themselves, and were seen by parents and children, as having distinct but complementary roles. The IROs' more specific focus on ensuring plans were in place and properly implemented was generally valued by social workers as helpful, rather than as a challenge to their own professionalism. This may be considered an achievement on the part of the IROs, although the fact that some were perceived as being more effective than others is a reminder that professional effectiveness is not something that can be simply guaranteed by one's position in the organisation. Rather, it is to some degree always going to be contingent on the skills, energy and commitment of the individual professional.

8. Conclusion

The findings of this study provide an intriguing example of the way that professional 'independence' actually works itself out when the idealised world of policy encounters the messy and contradictory world of everyday practice. IROs were in some ways more interventionist than envisaged in the guidance, although less likely to use formal procedures to challenge plans or delays than some commentators had envisaged. It was evident that they were intervening in many cases to ensure that plans were made and implemented, and that children's wishes were properly attended to, but the level of intervention varied. It did sometimes appear that more forceful involvement was required, but changes were not always necessary, and discussion and advice

was usually able to help achieve those that were. The IROs' 'helicopter view' was, on the whole, valued and respected, as was the personal authority of many IROs, but respect was won as much by engagement and willingness to help, as by preserving a stance of strict 'independence'. IROs took different views of their role but most of them used the discretion available to them to negotiate their own pragmatic approach, striking a balance between challenge and supportive engagement that enabled them on the whole to perform a useful role, alongside their other social work colleagues. This process of translating legislation and policy into something that is workable in practice is very much in the tradition of 'street level bureaucrats' (Lipsky, 1980; Evans, 2010).

What has emerged in practice may not be quite what was envisaged when the role was proposed, but despite that may be considered a positive outcome for the child care planning system, in that the IRO is not an aloof figure looking in from outside, but rather is part of a team around the child which, by and large, sees itself as working together towards the same goal. Greater recognition of this grounded reality may be the key to ensuring the greater effectiveness of the IRO service. IROs are not, and cannot be, the solution to all the problems that exist in the service for children in care, and the other social workers involved should not be seen as necessarily any less capable or committed to the best interests of the children. The triangle around the child of social worker, manager and IRO cannot guarantee that child a worker who is truly an independent professional (whatever the institutional arrangements, all are bound to be members of complex organisations, with multiple accountabilities), but the interactive system of checks and balances which it entails may increase the likelihood that professional judgement will be exercised effectively on the child's behalf.

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