



To: **Gail Hancock**
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Please ask for: Gail Hancock

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Our Ref: GH/dh

Your Ref:

Date: 19 October 2020

Dear IRIS Colleagues

**Re: Proposals for Intensive Recovery Intervention Service (IRIS)
Response to staff consultation**

I am writing to confirm the outcome of the recent Intensive Recovery Intervention Service (IRIS) staff consultation which has been progressed in accordance with the Council's HR process.

As you are already aware the consultation proposal was to close the IRIS and consolidate IRIS support and intervention within a new Edge of Care Service by further extending the work of the existing Diversion and Placement Support Team (DPST). It was proposed that the new Edge of Care Service will focus on diversion from care, support within care and reunification for children and young people returning home following a period of care.

The IRIS consultation process invited staff to propose what they consider to have been the most important and impactful aspects of the IRIS provision for young people so that this can be considered as part of the future service development being planned for the Edge of Care Service. The new Edge of Care Service is likely to be called something else in the fullness of time as representation has been received from our Ambassadors about having an alternative name, but for now this is being used as a 'working title'. Thank you to those of you who provided consultation feedback on the proposed changes, your contributions are much appreciated.

As you are aware the IRIS staff consultation commenced on Monday 27 July 2020 and was originally scheduled to conclude on 3 September 2020. This date has however been pushed back on three occasions to accommodate staff requests for extensions. The first two extension requests were agreed to allow staff more time to provide written responses to the consultation and the third extension was agreed to accommodate a staff request to set out a counter proposal in a meeting with the relevant Head of Service and HR Business Partner. In addition, the Ofsted Focus Visit notification was received on 22 September 2020 and the three-week process only concluded on Thursday 8 October 2020. As a result, the staff consultation extended well beyond the original 28-day period but has now formally ended and this response has been prepared.

During the course of the consultation period a number of frequently asked questions have been responded to by the leadership team and these have already been shared with all members of staff. I do not intend to reiterate any of those responses here. Consultation responses have been received from individual members of the IRIS and from the IRIS as a whole. This has included an IRIS Day Provision impact document, evidence of practice, evidence of staff/service feedback as well as a counter proposal. I can confirm that all of the feedback received during the consultation period has been carefully considered and I am now able to provide a formal response.

The IRIS model of approach was originally established as a multi-agency intensive support team, providing co-ordinated care for children and young people with complex needs, and their families. The ethos of the IRIS was to promote long term sustainable plans for children and young people, so that they can develop and maintain resilience to become healthy adults. Elements of the original IRIS model have either not been realised or have changed over time. There has never been an identified IRIS residential placement provision established and, in January 2020, the twelve former IRIS Level 4 foster care placements were absorbed into the in-house Fostering Service. The IRIS Health provision was also re-directed in March 2020 and some IRIS staff have already been working with the DPST.

The IRIS Day Provision impact document that was submitted during the consultation period states that whilst the original specification never intended for the IRIS Day Provision to become an alternative education provision this did become the key focus. As such, the IRIS Day Provision has developed the use of a three-step graded intervention programme, moving from early days, to next steps and moving on, as well as an IRIS intensity indicator and a base outcomes tool, to identify issues of concern and map distance travelled over time. Examples of this approach with anonymised young people, with an illustration of how these tools have been used, has been shared and reviewed alongside a summary of (undated) compliments and feedback. It is clear that staff have established a method of approach that they have developed and deployed with evidence of impact over time. The IRIS staff are justifiably very proud of the reported outcomes with individual young people and are confident in their individual and collective skills and abilities.

The IRIS counter proposal put forward by the IRIS staff group includes a recommendation for an Edge of Care Day Provision to provide support to children in care who are not in education, employment or training. The IRIS counter proposal outlines a reliance on a combination of people, purpose and premises. This includes maintaining the existing IRIS staffing to provide 1 to 1 bespoke programmes of activities through assertive outreach to develop authentic relationships with young people using a viable space, like the Tewkesbury Youth Centre. The counter proposal suggests that such a model of Day Provision will support the three Edge of Care priorities by focusing on stabilising young people's education pathways. Further consideration of the IRIS staff team's counter proposal as part of the consultation process concludes that the proposal represents a status quo position.

Having reflected on the Children's Social Care Accelerated Improvement Plan, the on-going improvement activity programme and the very recent Ofsted Focus Visit, it is clear that one of the over-riding priorities for the service is to target available resources to where the demand is greatest so as many children, young people and families can be supported as possible. Whilst the needs of children and young people not in education, training and employment will obviously continue to remain a priority for the service, the following are identified areas of very significant need within the service which need addressing too:

- Support and intervention with children subject to child protection planning and pre-proceedings planning (Public Law Outline) to promote safety so they can remain in the care of their birth parents and with their families
- Support and intervention with children subject to court care proceedings who need help to stabilise their home life or placement and may also need help to secure alternative permanent care in the future
- Support and intervention with children who may be able to achieve permanence back with their birth families after a period of time in care
- Support and intervention with young people who have suffered, or are at risk of suffering, significant harm as a result of exploitation, including child sexual exploitation, criminal exploitation, 'county lines', trafficking, modern day slavery as well as being missing from home or care

Unfortunately, the counter proposal recommended by IRIS staff does not address the full nature and extent of assessed needs within the system. Maintaining the existing IRIS staff to focus on an Edge of Care Day Provision for young people not in education, employment or training is not sufficiently aligned with the above priorities, direction of travel or utilisation of staff resources and does not represent value for money. Preliminary discussions have however been held with senior education leaders to explore the issues and approach outlined by the IRIS Day Provision in relation to supporting young people not in education, employment and training. It is possible that an approach can be developed as part of the Edge of Care Service in conjunction with Education colleagues but not in the manner described in the counter proposal. One of the related education concerns that was also raised during the IRIS consultation was about the impact of CV19 on vulnerable learners in need of support, protection and care not returning to school. This

was raised as an issue to support the IRIS counter proposal. The issue of attendance has been a top priority for Education, Schools and Children's Social Care throughout the CV19 pandemic and has been the subject of ongoing weekly scrutiny from the DfE and Ofsted. Whilst this will continue to be an area of continuing focus, Gloucestershire's attendance performance is reported to be better than comparators and the national average.

From reviewing the 2020/21 quarterly performance management report submitted by the IRIS in September 2020, the demand for the service has been low with 7 young people being open to the service. Whilst there will inevitably have been some impact from the CV19 pandemic for many services over the past few months, the IRIS has provided a limited service and has a surplus of staff capacity which has not been fully utilised.

Whilst all operational social work teams have continued to undertake face to face visits with children in need of support, protection, care and care leaving support throughout the CV19 pandemic, this level of activity is not reflected by the IRIS. The most recent data which has been reviewed to explore transitional planning arrangements for children and young people currently known to IRIS revealed three young people open to the service. Of these, one is due for a planned closure at the end of October 2020 and one other requires a monthly 'keeping in touch' visit pending a proposed transition from a tier 4 mental health provision into a community-based placement. It is anticipated that the needs of all three young people will be managed with minimum / no disruption. Any changes in allocation arrangements that may have been made since the submission of the original information are unlikely to present any significant difficulties in respect of continuity of service which is reassuring in terms of meeting the needs of individual young people known to IRIS staff.

Having taken all available information into consideration a decision has been taken to proceed with the closure of the IRIS and consolidate the GCC IRIS staff with the DPST to develop a new and re-branded Edge of Care Service which seeks to broaden the scale, focus and capacity of available staff resources to meet identified priority needs and demands in the system.

From week beginning 19th October 2020, GCC staff will be offered a one to one meeting with John-Paul Russell, Head of Service, to confirm individual arrangements previously discussed at start of the consultation process. Roles have already been confirmed for GCC IRIS Business and Administrative staff. In summary, the majority of GCC IRIS operational staff will consolidate with DPST staff to pursue the Edge of Care Service development, although it is our intention that two staff will be made redundant. Both members of staff will be placed on the redeployment register and alternative roles will continue to be explored during the notice period.

An area of challenge from Prospects that has been confirmed during the consultation period concerns the issue of Transfer of Undertakings (Protection of Employment), or TUPE as it is commonly referred to. Following legal advice, it has been confirmed that TUPE does not apply. Prospects staff will now cease their secondments with GCC and return to their substantive roles within Prospects, or continue in alternative roles within the existing contract commissioned by GCC from Prospects. All Prospects staff will also be offered a one to one interview with Kat Aukett, the Prospects Operations Director, to determine appropriate staffing arrangements on an individual basis.

From the week beginning 2nd November 2020 transitional arrangements will commence for any children and young people remaining open to the IRIS. Transitional arrangements for individual staff will also take place with GCC and Prospects staff from the week beginning 2nd November 2020.

The IRIS will formally close no later than 23rd January 2021.

This decision has been taken in consultation with the Children's Service's senior leadership team and the HR Business Partner and has been endorsed by Chris Spencer, Director of Children's Services.

I anticipate that you may well be very disappointed that the counter proposal put forward by the IRIS has not been agreed. I hope you are however, able to appreciate the rationale for why the proposed changes are required and will be able to support the new direction of travel moving forward.

For GCC staff moving into the new Edge of Care Service there will be further opportunities to contribute to the co-design, development and delivery of the new offer and staff input will be encouraged and

appreciated. We intend to engage our Young Ambassadors and care experienced young people in the development process to ascertain their view, wishes and feelings about what works from their perspective, including the new name for what is being referred to as the Edge of Care Service. Moving forward the plan is to work with staff and young people, take learning from research and exploring similar models of delivery and best practice from elsewhere to co-produce a new model of approach.

For the GCC staff whose roles are being made redundant, we would like to wish you all the very best moving forward and offer sincere thanks for the contribution you have made to the IRIS to date. For Prospects staff who will cease to be seconded, we are extremely grateful for the contribution that you have made to the IRIS. The senior leadership team would like to extend our thanks and best wishes to you all.

If you have any queries or concerns in the meantime, please speak to John-Paul Russell or Jo Wright, in GCC's HR Service, or Kat Aukett in the first instance.

Yours sincerely

A handwritten signature in black ink that reads "G Hancock". The signature is written in a cursive, slightly slanted style.

Gail Hancock
Interim Director Children's Safeguarding and Care

CC: John-Paul Russell - GCC Head of Service
Jo Wright - GCC HR Business Partner
Kat Aukett - Prospects Operations Director
Wendy Williams - Assistant Director for Integrated Children and Families Commissioning