

**X` Consultation Document on Proposed Amendments to the Safeguarding Board for Northern Ireland (Membership, Procedure, Functions and Committee) Regulations (Northern Ireland) 2012**



# **Safeguarding Board for Northern Ireland (SBNI)**

## **Proposed Amendments to the Safeguarding Board for Northern Ireland (Membership, Procedure, Functions and Committee) Regulations (Northern Ireland) 2012**

### **Consultation Document**

Date of issue: 16 September 2021

Action required: Responses by 11 November 2021

## **Contents Page**

**Ministerial Foreword**

**Section 1 – Introduction and Background**

**Section 2 – Meetings and Procedures**

**Section 3 – Case Management Reviews**

**Section 4 – Staffing and Corporate Hosting**

**Section 5 – Non-Review Issues**

**Section 6 – Assessment of Impact**

**Section 7 – How to respond**

**Section 8 – Following Consultation**

**Annex A – SBNI Review Report Recommendations**

**Annex B – SBNI Review Report Points of Note**

**Annex C – Privacy Notice**

## **FOREWORD FROM ROBIN SWANN MLA**

### **MINISTER OF HEALTH**



This consultation seeks your views on amendments that the Department of Health is proposing to make to the Safeguarding Board for Northern Ireland (Membership, Procedure, Functions and Committee) Regulations (Northern Ireland) 2012 (the 2012 Regulations). The key aim of these amendments is to enable the Safeguarding Board for Northern Ireland (SBNI) to function with even greater efficiency and effectiveness. This consultation paper sets out relevant background information, details of the proposed legislative amendments and seeks public and relevant stakeholder's views on the proposals, the consultation questions are designed to elicit your comments and views on a number of key policy issues.

The proposed changes will give effect to some of the recommendations in the Review Report produced by Professor Alexis Jay OBE, entitled [\*A Review of the Safeguarding Board for Northern Ireland \(SBNI\)\*](#). The Review Report contained a total of 11 recommendations for change and improvement and identified 23 points of note needed to address future effective multi-agency child protection.

Since its publication, work has been ongoing in the Department to implement the recommendations from the Review Report in full, including a revised Safeguarding Board for Northern Ireland (SBNI), Public Health Agency and Department of Health Memorandum of Understanding which incorporates clear organisational and governance arrangements is in place; the SBNI's sharp focus on multi-agency child protection can be found in its annual reports and significant work has been undertaken to assure an effective CMR function.

I encourage those with an interest to respond to this consultation. Your views, opinions and suggestions are important and will contribute to the finalisation of policy relating to the membership, procedure, functions and committees of the SBNI.

**Robin Swann MLA**

**Minister of Health**

## Section 1 – Introduction and background

1.1 This consultation is seeking your views on proposed amendments to the Safeguarding Board for Northern Ireland (Membership, Procedure, Functions and Committee) Regulations (Northern Ireland) 2012 (the 2012 Regulations). These changes are intended to introduce certain recommendations (Annexes A and B) from the review of the Safeguarding Board for Northern Ireland (SBNI, the Board) in February 2016.

### **The Safeguarding Board for Northern Ireland (SBNI)**

1.2 The SBNI was established in 2012 following the enactment of the Safeguarding Board Act (Northern Ireland) 2011 (the Act). The membership, functions and procedure is provided for in the 2012 Regulations, as amended<sup>1</sup>. The SBNI is a partnership made up of key organisations from the statutory, community and voluntary sectors. It is the statutory objective of the SBNI to coordinate and ensure the effectiveness of what is done by each person or body represented on the Board for the purposes of safeguarding and promoting the welfare of children.

1.3 The key statutory functions of the SBNI are to:

- develop policies and procedures for safeguarding and promoting the welfare of children and young people;
- promote an awareness of the need to safeguard children and young people;
- keep under review the effectiveness of what is done by each person or body represented on the Board to safeguard children and young people;

---

<sup>1</sup> [The Safeguarding Board for Northern Ireland \(Membership, Procedure, Functions and Committee\) Regulations \(Northern Ireland\) 2012 \(legislation.gov.uk\)](https://www.legislation.gov.uk/nisr/2012/0001)

- undertake Case Management Reviews (CMRs) in cases where a child has died or been significantly harmed, or where there has been multi-agency involvement, and to learn from them; and
- promote communications between the Board and children and young people.

1.4 One other function which has yet to be commenced (in legislation) and undertaken by the SBNI is the requirement that the SBNI must review such information in relation to deaths of children in Northern Ireland in such circumstances as may be prescribed. The SBNI is currently undertaking work to determine how it will fulfil this statutory function under the Safeguarding Board Act (NI) 2011.

### **Current SBNI Hosting and Staffing Arrangements**

1.5 The Public Health Agency (PHA) acts as corporate host to the SBNI. The PHA is accountable to the Department for its corporate host obligations. The SBNI is independent of the PHA in connection with the discharge of its statutory objectives, functions and duties.

1.6 A Memorandum of Understanding (MoU) was first agreed in 2012 between the SBNI, the PHA and the Department of Health (DoH, the Department). This MoU specifies the roles, responsibilities and obligations of the three parties. The PHA either provides or secures the necessary accommodation, financial management, IT, Human Resources and Legal and Equality services which are necessary to enable the SBNI to function.

1.7 The 2012 Regulations specify the staffing and accommodation arrangements of the SBNI as provided by the PHA.

## **The Review of SBNI**

- 1.8 During the passage of the Act through the Northern Ireland Assembly, the Department gave a commitment to the then Health, Social Services and Public Safety (HPSS) Committee to undertake a review of the SBNI within a year of its establishment. Separately, in December 2013 the SBNI was directed to commission a Thematic Review into twenty two cases of child sexual exploitation (CSE) in Northern Ireland to identify key learning and opportunities for improvement. As a result of this work, it was agreed that the review of the SBNI should be delayed until after the conclusion of the Thematic Review.
- 1.9 In 2015, the Department commissioned Professor Alexis Jay to undertake the SBNI review. Professor Jay was appointed due to her extensive knowledge and experience of child protection arrangements in both England and Scotland. She was responsible for leading the independent inquiry into CSE in Rotherham and was the author of the investigation report “Independent Inquiry into Child Sexual Exploitation in Rotherham”, which was published in August 2014. The role of the Local Safeguarding Children’s Boards (LSCBs) (the English equivalent of the SBNI) was a key element in the investigations and findings of that inquiry.

## **Publication of the Safeguarding Board NI Review Report**

- 1.10 The SBNI Review was completed in February 2016 and the report, [\*A Review of the Safeguarding Board for Northern Ireland \(SBNI\)\*](#), was published in August 2016. The report contains eleven recommendations and twenty three points of note (see Annexes A and B). The then Minister accepted all of the recommendations and points of note. The recommendations concentrate on the key issues which Professor Jay considered should be the highest priority for change and improvement. Many of the recommendations have been or are being addressed through the amendment of policies, procedures and guidance. However, some of the recommendations can only be implemented by way of amending legislation.

- 1.11 The SBNI Review found that some of the difficulties for the Board lay in the interpretation of the 2012 Regulations, which were found to be over-prescriptive and created unnecessary bureaucracy. The SBNI Review supported the need for a review of some provision in the 2012 Regulations, to give effect to some of the recommendations and points of note in the Jay Review.
- 1.12 The Department's overall aim in introducing changes is to reduce unnecessary bureaucracy and to introduce greater flexibility around issues such as corporate hosting, staffing and business processes. Therefore, in addition to seeking views on proposed legislative amendments arising from the recommendations and points of note (please see Annexes A and B) contained in the SBNI Review, the Department is also seeking views on a number of other proposed amendments which it considers will improve the operational and procedural arrangements of the SBNI. These include:
- 3.2 – amendments to Regulation 17 relating to criteria for undertaking CMRs (related to Recommendations 4 and 5, but setting out specific criteria)
  - 4.1.3 – revocation of Regulation 13 and replacement of same with a Memorandum of Understanding (MoU) between the Department, Public Health Agency and SBNI regarding staff appointments (relating to Recommendation 1, but adding specificity of MoU)
  - 4.2.2 – revocation of Regulation 14 and replacement of same with a Memorandum of Understanding (MoU) between the Department, Public Health Agency and SBNI regarding SBNI administration, premises and related issues (relating to Point of Note 1, but adding specificity of MoU)
  - 4.3 – revocation of Regulation 32 (related to Point of Note 1, but specifically revoking the governing regulation)
  - 5.1 – amendment of Regulation 3(2)(h) providing for only one Chief Executive of a district council should be included in the SBNI membership
  - 5.1.3 substitution of Schedule 2 to reflect the reduction of District Council areas from 26 to 11.

## Section 2 – Meetings and Proceedings

### **Meetings and Proceedings of the SBNI, the Safeguarding Panels and the Case Management Review Panel – proposed changes to the 2012 Regulations, amendment of regulation 10, 28 and 36 and revocation of Schedules 1, 3 and 5 (Jay Points of Note 22 and 23)**

- 2.1 Regulation 10 of the 2012 Regulations provides that the meetings and proceedings of the SBNI shall be conducted in accordance with the provisions set out in Schedule 1. Regulation 28 and Schedule 3 make similar provision in respect of the Safeguarding Panels and Regulation 36 and Schedule 5 apply to the meetings and procedures of the Case Management Review Panel.
- 2.2 From the outset, the SBNI has experienced quoracy difficulties (i.e, the required number of members to commence meetings and make decisions was not met). When the 2012 Regulations came into operation, paragraph 8(1) of Schedule 1 provided that no business shall be transacted at a meeting unless at least two-thirds (rounded up to a whole number) of the members, including the Chair or deputy Chair, are present. In 2014, in order to ensure that meetings of the SBNI remained quorate and, at the same time, conflicts of interest were properly managed, paragraph 8 was amended to provide that, in exceptional circumstances, where more than one third of the total membership declares an interest, the quorum requirement will be satisfied if two thirds (rounded up to a whole number) of the remaining members are present. Paragraph 7(1) of Schedule 3 (meetings and proceedings of the Safeguarding Panels) and paragraph 7(1) of Schedule 5 (meetings and proceedings of the CMR Panel) were similarly amended.
- 2.3 The Review determined that achieving quoracy is still an issue. During the course of the Review, several meetings of the SBNI were inquorate when the meeting was due to commence and meetings had to be delayed to await the arrival of additional members. The Review concluded that this was not conducive to getting business done efficiently and recommended that the



quorum requirements should be reduced to either one third or one half to allow meetings to take place as scheduled and start on time.

- 2.4 The review also suggested that it would be helpful if SBNI procedures were set out in Standing Orders rather than being prescribed in detail in Regulations.
- 2.5 The Department agrees with the findings of the review on the issue of quoracy and proposes to amend Regulations 10, 28 and 36 to provide that the SBNI must introduce Standing Orders for the meetings and proceedings of the SBNI, Safeguarding Panels and Case Management Review Panel. Issues such as quoracy can then be set out in Standing Orders.

#### **Consensual Decision-making (Pages 23, 24 and 31 of the Jay Review Report) (Recommendation 5)**

- 2.6 The Review report stated that majority voting had the effect of obscuring accountability and should be ended, as it is not an appropriate way to make decisions about the deaths of children or significant harm to them. The Review considers that consensual decision making would be a more appropriate way to take such decisions.
- 2.7 Schedules 1, 3 and 5 of the 2012 Regulations stipulate that decisions must be made by majority voting, in relation to meetings and proceedings of the SBNI, meetings and proceedings of Safeguarding Panels, and meetings and proceedings of the CMR Panel respectively. It is therefore proposed to revoke Schedules 1, 3 and 5.
- 2.8 Procedures will be introduced in Standing Orders to set out process for decision making by SBNI, Safeguarding Panels and CMR Panels. It will state that such decisions should be consensual, rather than being determined on a majority basis. The Standing Orders will also specify that minutes should contain a clear record of the reasons for decisions, including dissent.

**1. Do you agree that Regulations 10, 28 and 36 of the 2012 Regulations should be amended, and Schedules 1, 3 and 5 revoked, to provide that the SBNI must set out the meetings and procedures of the SBNI, Safeguarding Panels and Case Management Review Panel in Standing Orders?**

## Section 3 – Case Management Reviews (CMRs)

### 3.1 Case Management Review (CMR) function of the SBNI– proposed amendment to Regulation 17 (Jay Recommendations 4 and 5)

3.1.1 Section 3(4) of the 2011 Act states that “*The Safeguarding Board must undertake such case management reviews as may be prescribed in such circumstances as may be prescribed.*”.

3.1.2 Regulation 17 of the 2012 Regulations prescribes that the SBNI must undertake a CMR where:

- 17 (a) *a child has died or been significantly harmed;*
- (b) *any of the following apply:*
  - (i) *abuse or neglect of the child is known or suspected;*
  - (ii) *the child or a sibling of the child is or has been placed on the register maintained by a HSC trust which lists each child resident in the area of the trust who, following an investigation by that trust under Article 66 of the Children (Northern Ireland) Order 1995, is subject to a plan to safeguard that child from further harm and promote his health and development; or*
  - (iii) *the child or a sibling of the child is or has been looked after by an authority within the meaning of Article 25 of the Children (Northern Ireland) Order 1995 (Interpretation);*
- (c) *the Safeguarding Board has concerns about the effectiveness in safeguarding and promoting the welfare of children of any of the persons or bodies represented on the Safeguarding Board by virtue of section 1(2)(b) and (4) of the Act; and*
- (d) *the Safeguarding Board determines that there is significant learning to be gained from the case*

*management review which, if applied effectively, will lead to substantial improvements in practice in safeguarding and promoting the welfare of children in Northern Ireland.*

- 3.1.3 The Review noted that the CMR Panel was working well but that the CMR function was let down by the systems and processes underpinning its work. The Review concluded that most of the improvements identified could be brought about by the SBNI, although a small number of changes required review of the Regulations and/or Departmental Guidance.

## **3.2 Criteria for undertaking CMRs**

3.2.1 CMRs are undertaken to examine the organisational systems and processes that assist or allow individuals to make decisions or to act in certain ways. They are not a mechanism to find fault with individual practice. The focus of CMRs is intended to be on learning:

- from what has worked well and then building upon it; and
- from what has not worked well and determining how this should be prevented in the future.

3.2.2 The Department considers that, currently, a lack of clarity around the statutory criteria means that potential cases are either not notified to the SBNI when they should be, cases are notified to the SBNI which do not meet the criteria, or that cases are required to be notified which we consider should not come within scope of the CMR process. We are proposing to amend Regulation 17 to provide clarity around the cases which should be notified and to emphasise that the purpose of a CMR is not to apportion blame but to focus on learning to improve future practice.

3.2.3 It is proposed to amend Regulation 17 to place an explicit requirement on SBNI members to notify the chair of the SBNI if they are aware that a child has died or been subject to serious harm, and abuse or neglect is a factor. The term 'significant harm' has been replaced with 'serious harm'. The existing Regulation 17 requires every case where a child has been subject to significant harm to be notified to the SBNI. We are proposing to add a new definition for 'serious harm' to Regulation 17 (see 3.3.3 below).

3.2.4 The proposed amendment to the criteria is not intended to dilute the requirement to undertake CMRs. Rather, this proposal aims to strengthen CMR arrangements, while at the same time enabling the SBNI to establish its own business procedures to support this function.

### **3.3. Accountability for CMR decisions (page 23, 24 and 31 of the Review Report) (Recommendation 4)**

- 3.3.1 Once a notification of a possible CMR is received, the task of the CMR Panel is to consider whether the case meets the criteria prescribed in Regulation 17. A recommendation then goes to the SBNI Board, which takes the final decision as to whether to proceed with a CMR. The Review found that this process introduced delays into the system and that significant knowledge and expertise of child protection was needed in CMR decision-making. The Review considered that accountability for CMR recommendations/decisions should rest with a named individual, either the Chair of the CMR Panel or the Chair of the SBNI.
- 3.3.2 The Review recommended that if delegation of decision-making can be agreed, the respective roles of the CMR Panel Chair and the Chair of the SBNI should be more clearly defined. The Review affirmed that an independent CMR Panel Chair was a strength in the current system and recommended that clarity could be achieved if the Chair of the CMR Panel held delegated authority to make recommendations (in light of Panel discussions) and the Chair of the SBNI had delegated authority to approve recommendations without recourse to the full SBNI. The Department agrees with this approach and proposes to amend Regulation 17 to provide that the Chair of the SBNI is responsible for making the decision to proceed to CMR and will seek the SBNI Board's endorsement in instances where he/she has decided **not** to proceed to CMR. The role of the CMR Panel Chair will be addressed by way of amendment to the Department's guidance to the SBNI.
- 3.3.3 To reflect the proposals outlined in paragraphs 3.3.2 above (as well as those at 3.2.2 and 3.2.3, above), the Department proposes to replace Regulation 17 as follows:

## **17.— Case Management Review function**

- (1) *Where any of the persons or bodies represented on the Safeguarding Board by virtue of section 1(2)(b) and (4) of the Act is aware that a child has—*
- (a) *died and abuse or neglect is known or suspected to be a factor in the child's death; or*
  - (b) *been subject to serious harm and abuse or neglect is known or suspected to be a factor in the child's harm,*
- that person or body must notify the Chair of the Safeguarding Board.*
- (2) *Where the Chair of the Safeguarding Board determines that—*
- (a) *there may be significant learning from a case notified under paragraph (1) which, if applied effectively, will lead to substantial improvements in practice in safeguarding and promoting the welfare of children in Northern Ireland; or*
  - (b) *a case demonstrates that any of the persons or bodies represented on the Safeguarding Board by virtue of section 1(2)(b) and (4) of the Act, have worked effectively (individually or in partnership) and that there is outstanding positive learning to be gained from the case which will lead to substantial improvements in practice in safeguarding and promoting the welfare of children across Northern Ireland,*
- the Safeguarding Board, in exercising its function under section 3(4) of the Act (case management reviews), must undertake a case management review.*
- (3) *Where the Chair of the Safeguarding Board determines that a case notified under paragraph (1) does not satisfy the criteria at paragraph (2), a decision not to undertake a case management review shall be subject to approval by the Safeguarding Board.*

- (4) *For the purpose of paragraph (1)(b), “serious harm” includes a potentially life threatening injury or serious and/or long-term impairment of physical or mental health or physical, intellectual, emotional, social or behavioural development.*

**2. Are you content with the proposed revised wording of Regulation 17 of the 2012 Regulations? If not, please explain why you do not agree.**

**3. Are there any further amendments that you would like to suggest? If so, please provide details and justification for such suggested amendments]**



**3.4 Dissemination and learning (page 28 and 30 of the Review Report)  
(Recommendation 4)**

3.4.1 Learning from CMRs is one of the SBNI's core functions. Regulation 38(b) of the 2012 Regulations provides that the CMR Panel's functions include establishing arrangements for sharing the findings of CMRs and Regulation 31(d) provides that the Safeguarding Panels' functions include implementing those arrangements. However, the Review considered that learning should be disseminated more quickly and the CMR Panel was best placed to lead on the dissemination of learning, working closely with the Safeguarding Panels.

3.4.2 The Department intends to amend Regulation 38 of the 2012 Regulations to include, in the functions of the CMR Panel, lead responsibility, working in conjunction with the Safeguarding Panels, for disseminating regional learning and monitoring implementation.

**4. Do you agree with the Department's proposal that Regulation 38 of the 2012 Regulations should be amended to include, in the functions of the CMR Panel, lead responsibility, working in conjunction with the Safeguarding Panels, for disseminating regional learning and monitoring implementation?**

## **Section 4 – Staffing and Corporate Hosting**

### **4.1 Staff – Regulation 13 (Recommendation 1)**

- 4.1.1 The Review concluded that the SBNI support team would benefit from improved leadership and more consistent support to staff. Recommendation 1 suggested that a review of senior staff roles should be undertaken quickly and the role of Safeguarding Board Director of Operations, whose appointment is prescribed in the 2012 Regulations, should be refocused to one of Business Support Manager. Further to the recommendation, the Department commissioned a review of senior staff roles and grades in the SBNI support team which was completed by the HSC Leadership Centre.
- 4.1.2 Regulation 13(1)(a) of the 2012 Regulations refers to the appointment of a person to act as Safeguarding Board Director of Operations. Regulation 13(1)(b) requires the PHA, with the prior consent of the Safeguarding Board, to appoint such other staff as the Safeguarding Board considers necessary. Regulation 13(2) provides that persons appointed in accordance with regulation 13(1) shall be employed by the PHA and their services made available to the Safeguarding Board for the period of the appointment.
- 4.1.3 The Department considers that the appointment of staff to the SBNI should be dealt with by way of a Memorandum of Understanding (MoU) between the Department, the PHA and the SBNI, rather than being prescribed in legislation. It is therefore proposing to revoke Regulation 13 in its entirety. This will create the flexibility to address staffing challenges or bring about improvements in staffing support arrangements for the SBNI more responsively if required.

**5. Do you agree that Regulation 13 of the 2012 regulations should be revoked and that the appointment of staff should be dealt with by way of an MoU?**

## **4.2 Premises - Regulation 14 (Point of Note 1)**

4.2.1 The PHA acts as corporate host to the SBNI. Regulation 14 of the 2012 Regulations provides that the PHA shall secure or provide the SBNI with such office and other accommodation, with the approval of the Department, as considered necessary to perform its functions and ensure arrangements are made for the administration, maintenance, cleaning and other services for such accommodation.

4.2.2 The Department considers that matters such as accommodation and related issues should be dealt with by way of the MoU between the PHA, the Department and the SBNI. The Department therefore proposes to revoke Regulation 14 (Premises) of the 2012 Regulations.

**6. Do you agree that Regulation 14 of the 2012 Regulations should be revoked and that the provision of accommodation and related issues should be dealt with by way of a Memorandum of Understanding between the PHA, the Department and the SBNI?**

**4.3 Staff and Premises of Safeguarding Panels – Regulation 32  
(Point of Note 1)**

4.3.1 Regulation 32 requires the relevant trust to appoint a person to act as a Safeguarding Panel administrator. It also places a duty on the relevant trust, if requested by the SBNI, to provide the Safeguarding Panel for its area with such accommodation that the trust, with the approval of the SBNI, considers necessary.

4.3.2 The Department considers that staff and premises are not matters which should be prescribed in Regulations and are seeking views on whether to remove these provisions. This would enable a more flexible approach to be adopted and would enable the SBNI to consider alternative hosting and support arrangements for its Safeguarding Panels, for example, by other member organisations.

**[7. Do you agree with the Department’s proposal that staff and premises are not matters which should be prescribed in Regulations?]**

## Section 5 – Non – SBNI review Issues

### 5.1 Membership - Regulation 3

5.1.1 Section 1(2) and (3) of the Act set out the persons and bodies which must be included in the SBNI. Section 1(3) states that the persons or bodies are -

- the Regional Health and Social Care Board;
- the Regional Agency for Public Health and Social Wellbeing;
- Health and Social Care Trusts;
- the Police Service of Northern Ireland;
- the Probation Board for Northern Ireland;
- the Youth Justice Agency;
- the Education Authority;
- district councils;
- the National Society for the Prevention of Cruelty to Children;
- such other relevant persons or bodies as may be prescribed.

5.1.2 Regulation 3 of the 2012 Regulations specifies the level of representation from each of these organisations that should be on the Board. The member bodies of the Board are represented in most cases at the most senior level, meaning that, at this level, many are far removed from front line operations. Regulation 3 of the 2012 Regulations was amended in 2014 to allow for deputisation, although it was intended that this would only be by exception.

5.1.3 The Department proposes to amend the number of representatives of district councils. When the 2012 Regulations were originally drafted there were twenty six District Council areas and it was considered appropriate that at least two Chief Executives from the District Councils were represented on the Board. Regulation 3(2)(h) therefore specifies that two Chief Executives of district councils should be included in the membership of the Board. Now that the twenty six District Councils have been reduced to eleven council areas, the Department considers that only one Chief Executive should be required to

represent all eleven council areas on the Board. The Department is proposing to amend regulation 3(2)(h) accordingly.

5.1.4 The Department also proposes to replace Schedule 2 which sets out local government districts for Safeguarding Panels to reflect that the number of District Councils has been reduced from 26 to 11 council areas.

**8. Do you agree that Regulation 3(2)(h) should be amended to provide that only one Chief Executive of a council area should be included in the membership of the Board?**

**9. Are you content for Schedule 2 to be updated to reflect local government changes?**

## Section 6 – Assessment of Impact

### **Equality Impact Assessment and Human Rights**

- 6.1 The department carried out a preliminary screening of the policy proposals and, as part of the screening process, concluded that an Equality Impact Assessment was not necessary. The department is content that there will be no adverse impact on any of the groups listed under section 75 of the Northern Ireland Act 1998.

### **Regulatory Impact, Rural Proofing and Privacy Impact Assessments**

- 6.2 Regulatory and Rural Proofing Impact Assessments were undertaken and preliminary screening demonstrates the Regulations will have no adverse impact on business, charities or voluntary bodies. In addition, following consideration, it is considered that this policy will not impact on the rural needs of the people in Northern Ireland. Finally, in line with new General Data Protection Regulations, consideration has been given as to whether these proposed changes will uphold the protection of personal data for the citizens of Northern Ireland.

The initial screening documents are included with this consultation.



## Section 7 – How to Respond

7.1 This consultation has been launched using Citizen Space. Citizen Space is the Northern Ireland Civil Service (NICS) recommended online Consultation tool and preferred surveying tool.

7.2 You can also share your views on this consultation in a number of other ways. In addition a separate questionnaire is available to help you record your comments and views. This can be completed and submitted in the following ways:

- Download and email us at: [fcpdadmin@health-ni.gov.uk](mailto:fcpdadmin@health-ni.gov.uk)
- Download, print and post to:

Family and Children's Policy Directorate  
Child Protection Unit - SBNI Consultation  
Department of Health  
Room A3.5A, Castle Buildings  
BELFAST  
BT4 3SQ

**Or**

- By email to: [fcpdadmin@health-ni.gov.uk](mailto:fcpdadmin@health-ni.gov.uk)

7.3 The Department will consider requests to produce this document in other languages or in alternative formats. Please contact the Department, at the address above or email, to make your request.

7.4 The consultation closes at midnight on 11 November 2021.

## Section 8 – Following Consultation

### Privacy, Confidentiality and Access to Consultation Responses

- 8.1 For this consultation, we may publish all responses except for those where the respondent indicates that they are an individual acting in a private capacity (e.g. a member of the public). All responses from organisations and individuals responding in a professional capacity will be published. We will remove email addresses and telephone numbers from these responses; but apart from this, we will publish them in full. For more information about what we do with personal data please see our consultation privacy notice at Annex C.
- 8.2 Your response, and all other responses to this consultation, may also be disclosed on request in accordance with the Freedom of Information Act 2000 (FOIA) and the Environmental Information Regulations 2004 (EIR); however all disclosures will be in line with the requirements of the Data Protection Act 2018 (DPA) and the UK General Data Protection Regulation (UK GDPR) (EU) 2016/679.
- 8.3 If you want the information that you provide to be treated as confidential it would be helpful if you could explain to us why you regard the information you have provided as confidential, so that this may be considered if the Department should receive a request for the information under the FOIA or EIR.

See Privacy Notice at attached **Annex C**.

## Annex A – SBNI Review Report Recommendations

**Recommendation 1** A review of senior staff roles and grades should be undertaken quickly. The role of the Director of Operations, whose appointment is prescribed in the Regulations, should be refocused to one of Business Manager, and the number and grades of Professional Officers and the Business Manager (CDOP) should be revisited. The establishment and grading of posts should require the approval of the Board or one of its Committees. (Page 11)

**Recommendation 2** In the longer term, consideration should be given to rationalising the various regional bodies concerned with safeguarding, child well-being and child protection, including the creation of a statutory Child Protection Partnership, with an Independent Chair. The wider safeguarding agenda could sit within the revised Children and Young People’s Strategic Partnership. (Page 13)

**Recommendation 3** All agencies must make sure that the SBNI is notified of all deaths and significant harm to looked after children and those on the child protection register, so that these cases can be dealt with through statutory CMR procedures. (Page 23)

**Recommendation 4** The SBNI, working through the CMR Panel, should act to streamline the CMR process, and introduce some other review options. Reviews must be proportionate and able to be completed within the timescale of about 9 months or less. Learning must be disseminated more quickly. This should be tasked to the CMR Panel, acting in conjunction with the five Safeguarding Panels. (Page 30)

**Recommendation 5** The SBNI and the Department should discuss possible changes to the Regulations and Guidance, in order to strengthen arrangements for CMR chairing and report authoring, and to delegate authority for CMR decisions. (Page 31)

**Recommendation 6** Legislation on the Child Death Overview Panel should be commenced, but the arrangements should be phased in, with the emphasis on Themed Reviews in the first instance. (Page 39)

**Recommendation 7** Regardless of the future structure of the Board, arrangements should be made for Committee oversight of finance, audit and performance as well as governance. (Page 43)

**Recommendation 8** At a minimum, representatives of the SBNI should convene annual meetings of the most senior operational officers responsible for the Police, Education, Health and Social Services, and Youth Justice for the sole purpose of securing sufficient focus on protecting children in Northern Ireland on a multi-agency basis. Each agency should be required to provide a report on what it had done to improve multi-agency working on child protection. Following scrutiny, the findings should be formally reported to the full Board and should be included in the Annual Report. (Page 45)

**Recommendation 9** All of the Board's members should view the SBNI as a multi-agency partnership, led by an Independent Chair, rather than as an independent, representative group of people. This would need a shift in attitudes and a willingness to move on from the divisions of the past. (Page 46)

**Recommendation 10** Child protection must be clearly prioritised in the work of the SBNI. (Page 49)

**Recommendation 11** There needs to be a Board statement about criteria for selection of additional members, applied to all of its Panels and Committees, as well as any recommendation made about the appointment of new members to the Board itself. (Page 51)

## Annex B – SBNI Review Report Points of Note

**Point of Note 1** - Para 2.19 – The level of support to be provided to the SBNI through the hosting arrangement should be clarified at an early stage, to assist the smooth operational running of the SBNI.

**Point of Note 2** - Para 3.16 – Improved accountability for procurement decisions was needed, with a clear trail of approval linked to the level of proposed spend.

**Point of Note 3** - Para 3.33 – The Board should clarify responsibility for developing and implementing its performance framework.

**Point of Note 4** - Para 3.35 – The SBNI should develop effective multi-agency mechanisms for measuring, monitoring and reporting the scale of child sexual exploitation in Northern Ireland, and not rely on verbal reports on this.

**Point of Note 5** - Para 4.18 - Health and Social Care Board (HSCB) procedures must include the statutory duty to notify SBNI of all child deaths and other cases that meet the notification criteria set out in the Regulations.

**Point of Note 6** - Para 4.34 - CMR chairs should be given additional support to minute CMR team meetings.

**Point of Note 7** - Para 4.42 – The process of commenting on draft CMRs should be improved.

**Point of Note 8** - Para 4.54 – The CMR process could be improved if Chairs were assisted by separate report authors.

**Point of Note 9** - Para 4.66 - The Public Protection Arrangements NI (PPANI) system of disseminating learning quickly through web-based practice notes should be introduced by SBNI.

**Point of Note 10** - Para 4.72 - The SBNI should give priority to reaching a formal agreement with the PSNI and the Public Prosecution Service covering cases that are subject to a CMR.

**Point of Note 11** - Para 4.73 – Liaison between the SBNI and Regulation and Quality Improvement Authority (RQIA) on Case Management Reviews should be strengthened.

**Point to Note 12** - Para 5.8 - There would be merit in the Guidance making explicit the requirement for Safeguarding Panels to produce an annual report.

**Point of Note 13** - Para 5.25 – The authority of the Panels would be enhanced if the Independent Chairs were members of the SBNI rather than merely in attendance.

**Point of Note 14** - Para 6.10 – The need for a regional multi-agency Sudden Unexplained Death in Infancy (SUDI) protocol should be addressed.

**Point of Note 15** - Para 6.20 – There may be merit in considering the location of child death reviews in the Public Health Agency, in line with arrangements in Wales.

**Point of Note 16** - Para 6.24 – An initial priority for introducing individual child death reviews should be the deaths of children and young people who are looked after, but do not meet the criteria for a CMR.

**Point of Note 17** - Para 7.23 – The SBNI's website should be improved and should include information about the work of its Committees.

**Point of Note 18** - Para 8.9 – The SBNI should regularly disseminate an assessment of safeguarding arrangements in Northern Ireland, including gaps, weaknesses and emerging trends.

**Point of Note 19** - Para 8.29 – For as long as the Board continues in its current form, it should introduce formal structures to progress its core role in protecting

children, and consider setting up child protection sub-groups in the Safeguarding Panels. The frequency of SBNI meetings should be reviewed.

***Point of Note 20*** - Para 8.37 – The specification for Lay Members should include willingness to act as Vice-Chair of the SBNI.

***Point of Note 21*** - Para 8.41 – The Department should review whether there is sufficient operational experience of child protection within the prescribed membership of the SBNI.

***Point of Note 22*** - Para 8.51 - The quorum for meetings of the SBNI and the CMR Panel should be reduced to make sure meetings take place as scheduled, and start on time.

***Point of Note 23*** - Para 8.52 - It would be helpful if SBNI procedures were set out in Standing Orders rather than being prescribed in detail in the Regulations.

## Annex C – Privacy Notice – Consultations (DoH)

Data Controller Name: Department of Health (DoH)  
Address: Castle Buildings, Stormont, BELFAST, BT4 3SG

Data Protection Officer Name: Charlene McQuillan  
Telephone: 028 9052 2353  
Email: [DPO@health-ni.gov.uk](mailto:DPO@health-ni.gov.uk)

Being transparent and providing accessible information to individuals about how we may use personal data is a key element of the [Data Protection Act \(DPA\)](#) and the [UK General Data Protection Regulation](#) (UK GDPR). The Department of Health (DoH) is committed to building trust and confidence in our ability to process your personal information and protect your privacy.

### **Purpose for processing**

We will process personal data provided in response to consultations for the purpose of informing the development of our policy, guidance, or other regulatory work in the subject area of the request for views. We will publish a summary of the consultation responses and, in some cases, the responses themselves but these will not contain any personal data. We will not publish the names or contact details of respondents, but will include the names of organisations responding.

If you have indicated that you would be interested in contributing to further Department work on the subject matter covered by the consultation, then we might process your contact details to get in touch with you.

### **Lawful basis for processing**

The lawful basis we are relying on to process your personal data is Article 6(1)(e) of the UK GDPR, which allows us to process personal data when this is necessary for the performance of our public tasks in our capacity as a Government Department.

We will only process any special category personal data you provide, which reveals racial or ethnic origin, political opinions, religious belief, health or sexual life/orientation when it is necessary for reasons of substantial public interest under Article 9(2)(g) of the UK GDPR, in the exercise of the function of the department, and to monitor equality.

### **How will your information be used and shared**

We process the information internally for the above stated purpose. We don't intend to share your personal data with any third party. Any specific requests from a third party for us to share your personal data with them will be dealt with in accordance the provisions of the data protection laws.



## How long will we keep your information

We will retain consultation response information until our work on the subject matter of the consultation is complete, and in line with the Department's approved Retention and Disposal Schedule [Good Management, Good Records](#) (GMGR).

## What are your rights?

- You have the right to obtain confirmation that your data is being [processed, and access to your personal data](#)
- You are entitled to have personal data [rectified if it is inaccurate or incomplete](#)
- You have a right to have personal data [erased and to prevent processing](#), in specific circumstances
- You have the right [to 'block' or suppress processing](#) of personal data, in specific circumstances
- You have the right to [data portability](#), in specific circumstances
- **You have the right to [object to the processing](#)**, in specific circumstances
- **You have rights in relation to [automated decision making and profiling](#).**

## How to complain if you are not happy with how we process your personal information

If you wish to request access, object or raise a complaint about how we have handled your data, you can contact our Data Protection Officer using the details above.

If you are not satisfied with our response or believe we are not processing your personal data in accordance with the law, you can complain to the Information Commissioner at:

Information Commissioner's Office  
Wycliffe House  
Water Lane  
Wilmslow  
Cheshire  
SK9 5AF  
[casework@ico.org.uk](mailto:casework@ico.org.uk)