

1. Identify the need for a DPIA - outline the purpose for processing the data

i) Explain broadly what the project aims to achieve and what type of processing it involves.

The SBNI is a partnership of key organisations from the statutory, community and voluntary sectors with statutory responsibility for coordinating and ensuring the effectiveness of work undertaken by those represented on the SBNI for the purposes of safeguarding and promoting the welfare of children. Its functions include developing policies and procedures, promoting communications and awareness of the need to safeguard children and young people and undertaking Case Management Reviews (CMRs).

In 2016, the then Health Minister accepted the outcome of an [independent review of the SBNI](#). Some recommendations from that review can be implemented by amending [the Safeguarding Board for Northern Ireland \(Membership, Procedure, Functions and Committee\) Regulations \(Northern Ireland\) 2012](#) (the 'SBNI 2012 Regulations'). The amendments intend to revoke some prescriptive direction around the SBNI's corporate hosting, staffing and business processing functions. The amendments further intend to strengthen the Case Management Review (CMR) function to require the SBNI to undertake CMRs in instances where a child has either died or been seriously harmed and abuse is a factor/suspected factor (see draft SR to amend Regulations – HE1/21/172387).

CMRs are a statutory function according to [Section 3\(4\) of the Safeguarding Board for Northern Ireland 2011 Act](#). Regulation 17 of the SBNI 2012 Regulations establishes the criteria for undertaking CMRs and directs on disseminating regional learning from CMR decisions. However, while each CMR contains information relating to an individual child, the CMR function involves examining the organisational systems and processes attached to a case rather than reviewing the individual case itself. The CMR function is designed to disseminate learning from practice so therefore anonymised pseudonymised CMR reports/executive summaries are shared with those agencies involved in the individual child's case, the SBNI's Safeguarding panels and the Department (see further information on this in the section below). The proposed amendments to the SBNI 2012 Regulations will not alter the current position in respect of information disclosure.

The Department sets the policy and legal framework for the SBNI. It is not responsible for processing individual children's information or CMR case data. All of the recorded identifiable children's cases data which are fed in to be used then considered for CMR purposes are already available and processed by the various medical and professional teams involved in each case, from various parts of the HSC, (eg HSCB, HSC Sector/Trusts, GPs, Coroners). These organisations are already responsible, as data controllers, for ensuring that they process all personal data in line with UK GDPR and DPA. They are also responsible for ensuring that privacy notices and data sharing protocols are already in place with those organisations (eg HSCB, HSC Sector/Trusts, GPs, Coroners) to ensure that personal data is stored confidentially and in compliance with the Data Protection Act 2018 and UK GDPR.

The Public Health Agency (PHA) is the SBNI's corporate host and the SBNI is therefore bound by the PHA's privacy notice and data sharing protocols to ensure that personal data (including individual children's data) is appropriately held and processed. The PHA is responsible for providing relevant Data Protection and Information Governance advice to the SBNI. The SBNI have a [Privacy Notice](#) and a [Children and Young People's Privacy Notice](#) in place. PHA's privacy notice is available on its website: [PHA's privacy notice](#). In addition, the SBNI is required to maintain a risk register. That register includes mitigating against the risk of mis-managing data. The SBNI accounts to the Department (as its sponsor body), as with all HSC organisations, in exercising its statutory functions and Data Information Management is evaluated as part of the Department's requirement for organisations to provide an annual assurance, in line with the Information Management Controls Assurance Standard. The proposed amendments to the SBNI 2012 Regulations will not alter the current position in respect of information disclosure.

Given the above, it is determined that the amended SBNI provisions will not have any negative impact on data and how it is currently processed, collated, used, stored or deleted. Is there a potential positive impact that can be brought about by the amended SBNI provisions? The lack of clarity in the current SBNI 2012 Regulations wording in relation to undertaking CMRs has led to cases which do not come into the scope of the CMR process also being notified to the SBNI. The proposed new wording at Regulation 17 is intended to reduce the number of cases being submitted to the SBNI for consideration incorrectly and reduce the likelihood of SBNI processing data it doesn't require. This in turn will impact positively on the risk of inadvertently transmitting personal data.

ii) Outline the scope and purpose of the processing.

As stated in part (i) above, the proposed amendments to SBNI 2012 Regulations are intended to revoke some existing direction around the SBNI partnership's hosting arrangements, staffing and business processes and to strengthen regulation around the CMR function. The privacy risks for processing this information reside with the SBNI, the PHA and those organisations to which the professionals involved in individual child protection cases belong. These organisations are the data controllers for the personal information processed for these purposes. These organisations are already responsible for having policies in place to manage records and share information, which must be compliant with UK GDPR and children's data protection rights. In addition the SBNI has developed a Members Agreement with its stakeholder organisations and that Agreement includes establishing Information Sharing Agreements (ISAs) with some of its member organisations. Regarding any potential increased risk around the transmission of CMR case data specifically, the SBNI mitigates against the risk of compromising sensitive/personal data by pseudonymising the CMR notification using a pseudonym known only to the SBNI team members who take receipt of the case papers. As stated in (i) above, the CMR function is designed to disseminate learning from practice so pseudonymised CMR reports/ executive summaries are shared with those agencies involved in the individual child's case, the SBNI's Safeguarding panels and the Department of Health. The pseudonymised CMR data is password protected when transmitted electronically and the password shared on a need-to-know basis by secure email and telephone discussion with those taking receipt of the CMR reports.

In addition a secure email address is used to exchange information with the membership of the Criminal Justice system (PSNI, Youth Justice Agency, Probation). The SBNI on average processes approximately 21 notifications per year relating to specific children. The SBNI complete an average of 3 CMRs per year. The data exchanged in respect of Notifications and CMRs is confidential and sensitive. It generally does not contain 'health' data per se in respect of a child; rather, it contains data in respect of the child's social circumstances. Occasionally this will include details of physical injuries sustained as a consequence of abuse or neglect. Both relate to the exchange of Special Category Health Data and are therefore subject to the additional requirements identified in GDPR (Article 6 and Article 9 of UK GDPR).

In amending the current Regulations, the SBNI will be directed in these matters via the SBNI, DoH, PHA tri-lateral Memorandum of Understanding (MoU). The current MoU offers clear direction in respect of information management – requiring the SBNI to establish an Information Asset Owner (IAO) with responsibility for ensuring that information is managed appropriately and providing assurances to the SBNI via the SBNI Chair and the PHA. The MoU explicitly requires the IAO to participate in the PHA's Information Governance Steering Group and also requires that the SBNI's Central Support Team complies with all of the PHA's Information Governance policies and procedures.

When the amended Regulations come into force, there will be a requirement on the SBNI to develop new Standing Orders to take account of the revocation of some of the prescriptive business arrangements stipulated in the current Regulations. Consideration can be given at that time on the need to review the Standing Orders to provide for data collation and processing to ensure it fully complies with all elements of children and young people's data protection rights.

In addition, each of the organisations with whom the pseudonymised CMR reports are shared (the Department and relevant HSC organisations) have a duty to process data in accordance with retention and disposal schedules as set out in Good Management Good Records (GMGR).

2. Consult with relevant stakeholders

Consider how to consult with relevant stakeholders.

It is intended to publically consult on the draft amended Safeguarding Board for Northern Ireland (Membership, Procedure, Functions and Committee) (Northern Ireland) 2012 Regulations. The Department has already undertaken a targeted consultation with the SBNI on the draft amended Regulations and no issues were raised in respect of processing data or sharing information.

The SBNI has provided the necessary assurances on the treatment of all sensitive case material which appears in cases which are subsequently considered under the CMR function. As outlined in parts (i) and (ii) above, privacy notices and data sharing protocols are already in place which require stakeholders to comply with all aspects of the Data Protection Act 2018 and UK GDPR. In addition, the Department has sponsorship responsibility for the SBNI – within the established assurance and accountability framework, the SBNI must maintain its own internal Risk Register and must inform the Department of any risks identified during the exercise of its statutory functions – one of the risks monitored in the risk register is the processing of children and young people's personal data to ensure full compliance with all aspects of the Data Protection Act.

This DPIA will be shared with the Department's DPO and ADSO.]

3. Assess compliance and proportionality

[Describe compliance and proportionality measures.

As stated in parts (i) and (ii) above, the Department is responsible for setting the policy and legal framework for the SBNI and not responsible for collating or processing data on individual children/ young people, including CMR case data. The privacy risks for information reside with the SBNI, the PHA and those organisations to which the professionals involved in individual child protection cases belong. These organisations should already have policies in place to manage records and share information which must be compliant with UK GDPR and children's data protection rights. They must also have privacy notices in place, which advise individuals what happens to their data and how they can exercise their data protection rights.

The SBNI has a statutory obligation to safeguard and promote the welfare of children and young people in Northern Ireland to protect them as far as possible from all forms of abuse and neglect. Its objectives and functions are established in the Safeguarding Board Act (Northern Ireland) 2011 which is available at: [SBNI Act 2011](#). Further prescription on the membership and operational arrangements of the partnership body can be found in the Safeguarding Board for Northern Ireland (membership, procedure, functions and committee) 2012 Regulations: [SBNI 2012 Regulations](#). (After this section add in the SBNI's lawful basis for processing under Articles 6 and 9 of GDPR).

The nature of the SBNI's work will mean that it will be aware of, have access to and come in to contact with a range of sensitive data relating to children and young people in Northern Ireland. The hosting arrangements in place for the SBNI require the partnership to operate in accordance with the PHA's Information Governance policies. In turn, the SBNI is accountable to the Department in exercising its statutory functions and that accountability includes compliance with all aspects of Data Protection.

Personal information used for CMR purposes is pseudonymised, in line with data protection data minimisation requirements, to ensure that data shared is proportionate to the purposes, which as stated above, are not focussed on any individual, but rather on organisational systems and processes.

The SBNI has robust data quality processes in place at all levels within the CMR process, from point of notification through to full report completion.

Data is not presently shared internationally. However, should this need to happen, it would be by way of anonymised learning notes and not actual CMRs.

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4. Identify and assess risks

The risk matrix below will help you to assess the level of risk associated with processing the data.

Severity of impact	Serious harm	Low risk	High risk	High risk
	Some impact	Low risk	Medium risk	High risk
	Minimal impact	Low risk	Low risk	Low risk
		Remote	Reasonable possibility	More likely than not
		Likelihood of harm		

Describe source of risk and nature of potential impact on individuals. <i>Include associated compliance and corporate risks as necessary.</i>	Likelihood of harm	Severity of harm	Overall risk
<p>As stated in parts (i) and (ii) above, the Department is responsible for setting the policy and legal framework for the SBNI. It is not responsible for collating or processing data on individual children, including CMR case data. The privacy risks for information reside with the SBNI, the PHA and those organisations to which the professionals involved in individual child protection cases belong.</p>	<i>Remote, possible or probable</i>	<i>Minimal, significant or severe</i>	<i>Low, medium or high</i>
<p>However, in considering the nature of the SBNI's work any potentially compromised data may relate to information about children and young people. Therefore, the following has been assessed:</p>	Remote	Minimal	Low Risk
<p>Inappropriate access of records by SBNI partnership staff. Potential impact - minimal. All staff are required to operate in accordance with the SBNI's Records Management Policy (should this be ref to PHA IG policies, or does SBNI have their own RM policy)? The SBNI has confirmed that the SBNI partnership, its Independent Chairs and Central Support Team are required to complete and comply with mandatory Information Governance and IT security training provided via the PHA.</p>	Remote	Some impact	Low Risk
<p>Loss of sensitive / confidential data (including CMR case data) as a result of inappropriate record management from a member of the SBNI staff and/or partnership organisation. Information sharing and privacy protocols in place with organisations and SBNI records management policy in place (as above query). As above. In addition the SBNI provides specific Data Protection training for CMR Team Chairs.</p>	Remote	Serious Harm	Low Risk
<p>Case sensitive data transmitted by email to incorrect email address. Potential impact – negative impact on individuals / families, reputational damage to the SBNI, the</p>			

PHA and the Department. In addition, regarding the transmission of CMR case data, this data is pseudonymised and the pseudonym is known only by the SBNI team members taking receipt of the case papers. The CMR data is further password protected when transmitted electronically. The password is shared on a need to know basis by secure email with those taking receipt of the CMR reports.

5. Identify measures to reduce risk

Identify additional measures you could take to reduce or eliminate risks identified as medium or high risk at 4.				
Risk	Options to reduce or eliminate risk	Effect on risk	Residual risk	Measure approved
None identified		<i>Eliminated reduced accepted</i>	<i>Low medium high</i>	<i>Yes/no</i>

6. Information Asset Owner (IAO) sign off and outcomes

	Name & date	Notes
Measures approved by (IAO):		<i>Integrate actions back into project plan, with date and responsibility for completion</i>
Residual risks approved by:		<i>*If accepting any residual high risk, consult the ICO before going ahead*</i>
DPO advice provided:	DPO advice provided on first draft DPIA 16/04/2019. Further comments provided on second draft 01/05/2019. Further comments provided on third draft 15/07/2019. Comments provided on fourth draft 24/05/2021. Draft accepted 25/08/2021.	<i>DPO should advise on compliance, measures to reduce risk and whether processing can proceed</i>
DPO advice accepted or overruled by:		<i>If overruled, you must explain your reasons</i>
Comments: Comments accepted and implemented in full.		
Consultation responses reviewed by:		<i>If your decision goes against individuals' views, you must explain your reasons</i>
Comments:		
This DPIA will kept under review by:		<i>The DPO should also review ongoing compliance with DPIA</i>