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Boomer, Linda

From: Edgar, Dorina [Dorina.Edgar@deni.gov.uk]
Sent: 19 February 2007 17:18
To: Boomer, Linda
Subject: FW: DE RESPONSE TO THE SAFEGUARDING BOARD FOR NI CONSULTATION
Attachments: DE response to Safeguarding Board NI.doc

Linda

DE response as agreed.

Best wishes

Dorina

From: Howell, Rose
Sent: 19 February 2007 17:15
To: 'fergal.bradley@dhsspsni.gov.uk'
Cc: Godfrey, Katrina; Stewart, Chris; Warde Hunter, Louise; Robinson, Betty; Cassells, Joan; Potter, Mary; Edgar, Dorina; Stephenson, Julie; Murdock, Anne; Field, Dawn; Tyler, Sue
Subject: DE RESPONSE TO THE SAFEGUARDING BOARD FOR NI CONSULTATION

Please see attached letter from Dorothy Angus.

Many thanks

Rose

Rose Howell

PS/Dorothy Angus

Equality, Inclusion & Pupil Support Division

Department of Education

02891 279325

<<DE response to Safeguarding Board NI.doc>>

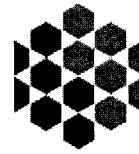
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21/02/2007

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**Head of Equality, Inclusion & Pupil Support Division
Dorothy Angus**



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Mr Fergal Bradley
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19 February 2007

Dear Fergal

**DEPARTMENT OF EDUCATION RESPONSE TO THE
SAFEGUARDING BOARD FOR NORTHERN IRELAND
CONSULTATION**

The Department of Education welcomes the opportunity to respond to the consultation document and notes the very short consultation period. We welcome the broad thrust of the document but have concerns about a number of the proposals, particularly in regard to the make up and reporting mechanisms of the Safeguarding Board.

What follows is a collation of comments from across DE and this accounts for a somewhat disjointed presentation.

Introductory Comments

These developments offer the scope to adopt new and innovative ways of working in cooperation, investigation and prevention. However, the model proposed for the new SBNI is not dissimilar to the existing ACPCs. From experience the current

arrangements did not work well for education partners and we would want to ensure that the new proposals address that weakness.

The RPA presents an opportunity to align the boundaries of different agencies and remove potential barriers to better co-ordination and integration of the full range of services to children and young people. Yet the SBNI proposals do not appear to take into account this new context, particularly the principle of coterminosity and the implications of the enhanced role for the seven new councils in relation to community planning.

We have noticed some omissions from the list of consultees. Neither CCMS, which is a major supplier in the education sector, nor the Education and Training Inspectorate have been consulted. Given that one of the key objectives of the SBNI is to ensure effectiveness of what is done by each person or agency, we are surprised to note that neither DETI, nor the Health & Safety Executive or DARD have been consulted and that the Children's Commissioner does not appear to be included in the list of consultees.

Accountability

The paper suggests that members must be able to commit to policy and procedural matters. The Education and Skills Authority (ESA) will not be a policy organisation, policy on education issues will lie with the Department. Furthermore, the suggestion is that individual agencies will be held accountable, ultimately through the DHSSPS Minister.

The apparent suggestion that the Education representative would be accountable to the Minister for Health creates a tension similar to that faced by DOE in the development of the policy on community planning and community planning partnerships. In both cases ESA is likely to have a statutory duty to participate or co-operate in partnership arrangements. In both cases the lead organisation (local councils or the SBNI/HSSA) will want to hold member organisations to account. Member organisations can only be asked to account for their actions against commitments made in the context of the remit of the partnership – in this case the safeguarding strategy. However, if the strategic priorities or budgetary flexibility of the ESA changes it may have to revisit commitments made and there is little the SBNI, HSSA or Minister of Health could do about this – other than through the Minister of Education.

Ultimately ESA can only be held accountable by the Minister of Education for the discharge of its responsibilities, including child protection and welfare, and the way in which it delivers on the range of statutory duties placed upon it. The Minister of Education will be held responsible by the Assembly or Parliament for the way in which ESA delivers its services and meets its full range of responsibilities. The Minister of Education cannot be held accountable to the Minister of Health. If ESA fails in its duties only the Minister of Education and DE has the power to take remedial action.

The Minister of Health could of course bring any problems to their colleague's attention and ask them to take appropriate action – this should be done through the Ministerial sub-committee. What if there would be difference of opinion or emphasis between education and health? The Minister of Education sets the strategic priorities and budget for the ESA, and the ESA representative would therefore have to operate within the framework agreed with DE and the Education Minister.

The whole issue of lines of accountability needs to be revisited and further clarified, and DOE may be able to help in this respect.

Representation/Membership of Board

We note that the safeguarding of the welfare of children and young people is to be expanded to “incorporate all preventable harm that impacts on the lives of children...it includes the accidental as well as the non-accidental injury to children”. This is a wide remit, which should be reflected in the representation at Board level, but the current proposals are skewed towards the health and social services and justice sectors. While an unwieldy Board is to be avoided, consideration should be given to expanding its representativeness.

A single education representative does not reflect the centrality of the education sector in the issue of child protection. ESA will be a very large employing authority, probably the biggest employing authority for staff who interact with children and the schools represent the environment in which children spend a high proportion of their time. The incumbent of the director of children's services post within ESA should be given more prominence in membership of the Board and subject to the views of the Chief Executive Designate of ESA it may be appropriate for other senior staff from ESA to join the Board. We would recommend that DHSSPS meet the Chief Executive of the ESA as a matter of urgency, if this has not already occurred, to discuss the proposals in the consultation.

Reference is made to local government's role in safeguarding and we have highlighted above the importance of community planning, yet only 2 places on the Board have been reserved from 7 councils.

Duty to Safeguard

Will the duty, as set out in Paragraph 2.1, focus on the inter-agency dimension? It would be helpful if the proposed “duty to co-operate” mentioned in paragraph 6.3 was highlighted here as “concentrated common purpose...” does not adequately convey the statutory requirement for organisations to work together to safeguard the welfare of children and young people. What will be the statutory responsibility of other Agencies represented on the Board? More clarity on roles is needed as is the Board's duty and how it can place a duty on other organisations, through members of the Board. It is important to clarify this point to determine whether we need to place a separate but complementary duty on ESA.

Operating context

As noted in the opening paragraphs it is unclear how the SBNI will link to the planning, commissioning and delivery of children's services (see also note on paragraph 11.1 below). How will the Safeguarding Board relate to other agencies and strategies? The role of the Children's Commissioner is to ensure that systems are working to achieve outcomes. Will the Children's Commissioner reserve the right to check accountability and input to the Board? Where does the Minister for Children and the children's strategy fit in?

Single database

More clarity is needed on how DE will access any database set up and its effectiveness. Who will be responsible for its funding, updating and maintenance? Have costs been cleared with DFP? Will it be a shared database with access across all agencies?

Safeguarding Panels

We suggest that the safeguarding panels should not be organised within the 5 Trust model. These Panels are designed to provide the local co-ordinating and operational focus, yet the proposals completely ignore one of the key principles of the RPA, namely coterminosity. All of the other key partners (education, police, justice and the local commissioning groups within the HSSA) are to be arranged around the areas for the seven new councils.

Paragraph 1.4 of the consultation document outlines the background to the current proposals, highlighting that we must learn from past mistakes, and one of the key recommendations of the Laming Inquiry is to improve co-ordination between those with responsibilities for children at national, regional and local levels. Paragraph 1.6 acknowledges that safeguarding children is everyone's concern and that means we should ensure that organisational boundaries... "do not act as barriers to meeting the safeguarding needs of children..." The RPA Team collated evidence from across the UK and beyond that powerfully demonstrated that lack of coterminosity between the geographical boundaries of key agencies does act as just such a barrier, and that the most effective arrangements are where agencies operate within the same boundaries. Based on this evidence Ministers accepted coterminosity as one of the key principles flowing from the RPA and it is an issue that has also been supported by the Transitional Assembly's Programme for Government Committee.

With the ongoing implementation of the RPA there is a unique opportunity to ensure that Northern Ireland maximises the benefits of coterminosity through ensuring that as far as possible all our public service structures are based around the administrative

footprint of the new council areas. It is disappointing that DHSSPS seems to be prepared to let this opportunity pass.

Ministers accepted the five Trust model for Health on the basis that it was the geographical areas for commissioning services that were important. The case was made that Trusts are service deliverers, and not necessarily bound to deliver services within a set geographical area. Locating the safeguarding panels within the five Trusts changes this, is incompatible with the principles of the RPA and should be brought to the attention of Ministers in this context before going any further. Also, have you considered the implications of community planning for the work of the SBNI? Both ESA and the HSSA will be obliged to participate in community planning arrangements that will involve similar partners to the SBNI and the safeguarding panels. Community planning partnerships will also be obliged to develop ways of engaging local people in the decision-making process. In the case of Education that will mean engaging children and young people. It would make sense to explore ways of making use of some of these arrangements for multiple purposes rather than every organisation setting up its own regional and local partnership arrangements, reference groups, citizen panels etc. that basically comprise the same sets of people.

Organising safeguarding panels around the seven council areas would allow the SBNI to tap into arrangements in place to co-ordinate a range of other issues at a local level and maximise the benefits of coterminosity. The membership proposal at paragraph 9.3 is very general and responsibilities and accountability should be defined.

Expected Results and Outcomes 16.1

The expected results and outcomes on paragraph 16.1 are not SMART and therefore not measurable. Within the sample indicators, for example, a 'decline' is a perverse indicator - initially an increase in referrals might be expected as confidence in systems builds. What are the measures of effectiveness?

All of the sample indicators relate to DHSSPS issues rather than "joined up" outcomes. The indicators should allow for assessment of the effectiveness of the Board and co-operation and co-ordination with other organisations. Evaluation of the policy is also very important and should be included.

Pooling of Funding

Paragraph 6.2 refers to proposals that statutory member organisations will pool funding for service delivery – has DFP been consulted regarding affordability considerations?

General comments

Further general comments are set out in the Appendix.

I hope this is helpful. We are happy, of course, to discuss.

Yours sincerely

A handwritten signature in cursive script that reads "Dorothy Angus".

DOROTHY ANGUS

**cc Katrina Godfrey
Chris Stewart
Louise Warde Hunter
Betty Robinson
Joan Cassells
Mary Potter
Dorina Edgar
Julie Stevenson**

Appendix

General Comments

1.4 Bullet point 2: “by articulating common purpose powerful statements of across sectors.” What does this mean?

1.4 Bullet point 5: Is “cross training” the same as joint training?

1.8: “All of these systems and processes need to be knit together under a common umbrella of strong common purpose with measurable indicators. What does this mean?”

2.1: How can you make the general public accountable?

2.2: Does the Consultation document really take account of the high level outcomes of the OFMDFM Children and Young People strategy etc?

4.1: bullet point 3: re database - will this be a statutory requirement?

4.1 bullet point 4: what does “...ensure effectiveness of what is done...” mean?

4.3: The database is not mentioned in this section.

5.1: Who will interview and performance assess the Chair?

5.1: How will the role of the independent Chair differ from NICC&YP re holding agencies to account?

5.1: What will be the limits on action within budget? Is there a grade for the Chair?

6.1: Re: subgroups: Who will be represented on the subgroups? Will agencies be **required** to provide personnel and what are the resource implications? What does “common purpose mean? Re: “produce a safeguarding strategy...” does DHSSPS not already have a child protection strategy?

6.2: Will HSSA manage the appointments process?

6.3: Will HSSA direct where the pooled funds go? Which Minister decides on priorities – Is it the DHSSPS minister, if so, why?

6.3: “individual agencies will be held accountable by the SBNI through the chair, and ultimately the Minister, DHSSPS, for the discharge of these responsibilities” Disagree – ESA will be accountable to the Minister of Education who in turn will be accountable to the Assembly/Parliament for the performance of ESA. There are constitutional difficulties with one Minister being accountable to another, but it would be possible for the lead Minister (in the case of child protection the Minister of Health) challenging another Minister to take action in relation to the activities of an organisation for which

the second Minister is responsible. This should be done through the Ministerial sub-committee for Children and Young People.

6.3: What will be the arrangements for co-ordinating formulation of different policies that are the responsibility of different departments but that impact on child protection and welfare? This should be done through the Ministerial sub-committee for Children and Young People as set out in the 10 Year Strategy.

6.4: Membership: CiNI or Barnardos should be considered for inclusion, also the Housing Executive. ETI should also be included.

7.1: Is it ethical to include those who have received safeguarding services in the membership Reference Group? What consideration has been given to using the range of networks and mechanisms being set up under the children's strategy, youth service proposals and community planning proposals for engaging children and young people?

8.1: You may need to specify that the policy remit for child protection in education/schools remains with DE, ditto DEL and DCAL.

10.1:"... or where, in such cases, services appear to have failed to respond appropriately to the needs of children". Is this creating a dilemma for the Chair - who, if a Public appointment - is required to act in the best interest of the organisation? [DN disagree – the Chair will be required to act in the best interest of children and in the case of a failure within the HSSA or a Trust it will be for the Chair to raise this with the organisation, but also if necessary go to the Minister of Health who can hold the organisations to account]. If the failure is with the HSSA or one of the Trusts what does he do?

10.1: CMRs are currently a drain on resources at local level - alternatives mentioned are welcome. The question of resources (across participating agencies) should be flagged up.

11.1: Comments on the safeguarding panels apply here – the Children and Young People's planning process cannot be located in the 5 Trusts – at a sub-regional level this process must be organised to be coterminous with the new council boundaries and all other organisations are being structured around these boundaries. The integration of services to children in local areas is likely to be a key feature of the community planning process and so would benefit from being organised around the new council areas. Education is a key partner in the planning of services for children and young people, and in policy terms Ministers have accepted that there should be two Directors of Children's Services – one in ESA and one in the HSSA – these two directors will be required to work together to better integrate services to children – that includes the planning and commissioning of those services. The seven local commissioning groups within the HSSA are designed to deliver on the RPA commitment to coterminosity – locating the planning and commissioning of children's services in 5 Trusts breaks that commitment and weakens the ability of the public

service a whole to deliver on the expected benefits of the RPA in terms of better co-ordination and integration of services. It also goes against the commitment in the Children's Strategy that states that planning of children's services will take account of the new arrangements flowing from the RPA – those new arrangements are the 7-council model and the principle of coterminosity in relation to planning and commissioning services. If this proposal were to go ahead it would need Ministers and the Secretary of State to agree to a departure from RPA policy.

Also, DE is considering a submission received as part of the consultation on the proposals for implementing the Education aspects of the RPA. The paper from the four Northern Ireland Children and Young People's Committees proposes a regional structure for planning services for children with local planning linked to community planning. This would certainly fit with current DE thinking, as well as being wholly compatible with RPA principles, and perhaps you should consider how this might be factored into your proposals. It is a response to the DE policy paper on the Director of Children's Services. Joan Cassells in DE's RPA Policy Team (ext 59867) can provide you with more information and a copy of the proposal.

14.1: The reference to employers, are these employers of children?

The following comments related to specific questions posed in the document have also been raised:

Question 5: what are the other databases?

Question 34: difficulties will arise from the length of time the legislation will take.

Question 3: Earlier text identifies 3 groups, are these to be covered by "at risk" children i.e. children in need, vulnerable children, at risk of /suffering significant harm?