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BELFAST CITY HOSPITAL TRUST

LISBURN ROAD, BELFAST, BT9 7AB



TELEPHONE (028) 9032 9241  
FAX (028) 9032 6614

7<sup>th</sup> February 2007

Linda Boomer  
Child Care Policy Directorate  
Room D1.4  
Castle Buildings  
Stormont  
BELFAST  
BT4 3SQ

Dear Linda

**Re: Consultation on the establishment of a regional Safeguarding Board for Northern Ireland**

Thank you for the opportunity to respond to the consultation document on the above.

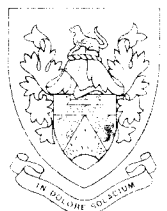
We have considered the document carefully and the Child Protection Nurse Specialist, in consultation with key stakeholders within the organisation.

If you have any queries, please do not hesitate to contact me.

Yours sincerely

**ELEANOR HAYES (MRS)**  
**Director of Nursing**

Encl.





**Boomer, Linda**

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**From:** Brannigan, Margaret [Margaret.Brannigan@bch.n-i.nhs.uk]  
**Sent:** 08 February 2007 11:54  
**To:** Boomer, Linda  
**Subject:** Consultation on the establishment of a regional Safeguarding Board for NI  
**Attachments:** CONSULTATION DOCUMENT response.doc

Dear Linda

Please see attached response from the Belfast City Hospital Trust.

Thank you.

Margaret

**Margaret Brannigan**  
**Secretary**  
**Directorate of Nursing**  
**Belfast City Hospital Trust**  
**Tel No: 028 9026 3576**

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ICT Department  
Belfast City Hospital Trust

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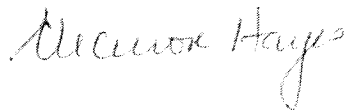
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for Northern Ireland**

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**Director of Nursing**

Encl.

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**CONSULTATION DOCUMENT**

**THE ESTABLISHMENT OF A  
REGIONAL SAFEGUARDING BOARD  
FOR NORTHERN IRELAND**

**QUESTIONNAIRE JANUARY 2007**

The Department of Health, Social Services and Public Safety invites you to respond to this consultation document on the Establishment of a Regional Safeguarding Board for Northern Ireland.

Responses should be sent by letter or email to:

Linda Boomer  
Department of Health, Social Services & Public Safety  
Child Care Policy Directorate  
Room D1.4  
Castle Buildings  
Stormont  
Belfast  
BT4 3SQ

Email: [linda.boomer@dhsspsni.gov.uk](mailto:linda.boomer@dhsspsni.gov.uk)

**Your response must be received by 9th February 2007.**

**(Please tick box)**

I am responding:  as an individual  on behalf  
of an organisation.

Name:     Mrs Eleanor Hayes    

Job Title:     Director of Nursing    

Organisation:     Belfast City Hospital Trust    

Address:     51 Lisburn Road, Belfast BT9 7AB    

Tel: 028 9026 3576

Fax: 028 9032 6614

Email: [eleanor.hayes@bch.n-i.nhs.uk](mailto:eleanor.hayes@bch.n-i.nhs.uk)

**Before completing your response, please see Appendix 1 about the effect of the Freedom of Information Act 2000 on the confidentiality**

Questions to answer. Please write clearly.

**PROPOSED ROLE AND SCOPE OF THE SAFEGUARDING BOARD FOR NORTHERN IRELAND (SBNI)**

**Q1: Do you agree that there should be one region wide Safeguarding Board for Northern Ireland (SBNI)? If not, what alternative model would you suggest?**

Agree. A single Safeguarding Board for Northern Ireland will ensure that there is a region wide approach to protecting and safeguarding children and vulnerable young people.

**Q2: Are there any other broad elements or interfaces which you think should be included in the scope of the SBNI's role in safeguarding and promoting the welfare of children?**

The scope of the SBNI's role is clearly defined, however other elements that may need to be developed include Children's Services planning and the interface with Primary Care.

**Q3: Do you agree that a single database should be created for at risk children? If not, what alternative would you suggest?**

Agree. This creates a central access point and improves the tracking of children and young people in and out of Trust areas.

**Q4: Are there any other objectives which you think should fall to the SBNI?**

The prime objectives for safeguarding children are to be commended. There may be more emphasis required on preventative work early years interventions and the role of others involved in health and well being such as CAMHS teams and school nursing.

**Q5: Do you agree that statutory powers should be created to enable the Minister to require the setting up of similar databases as outlined in the Children's Act 2004? If not, what alternative would you suggest?**

Agree.

## **APPOINTMENT AND ROLE OF CHAIRMAN AND LAY MEMBERS OF THE SBNI**

**Q6: Do you agree that the chairman and lay members should be public appointments? If not, what alternative would you suggest?**

Agree. An Independent Chair would be welcome.

**Q7: Do you agree that chairpersons and lay people should not serve for more than 2 terms, with each term lasting no more than 4 years? If not, what alternative would you suggest?**

Agree. There should be a rolling program to ensure that the knowledge skill and expertise of these individuals is not lost at one time so to preserve the effectiveness of the Board.

**Q8: What kind of experience, knowledge and qualifications do you consider is important for the independent chairman to have?**

It is essential that the Elected Chair has a clear understanding of the roles and responsibilities of the safeguarding Board. They will require highly developed facilitation and influencing skills as well as the ability to assimilate complex information challenge and probe and hold others to account. An independent voice and scrutiny enhances the quality of services and partnership.

**Q9: What kind of experience, knowledge and qualifications, if any, do you consider is important for lay members to have?**

It is important that lay members have maturity and life experience, be non judgmental and have the ability to balance views with common sense. It is also important to have a fair understanding of child protection issues as well as process and systems already in place.

**Q10: Do you agree that the SBNI should have its own secretariat and budget? If not, what alternative would you suggest?**

Agree. This would be essential to the effective working of the group.

#### **HOW THE SBNI WILL OPERATE**

**Q11: Do you agree that membership of the SBNI should be drawn from the statutory, voluntary and community sectors? If not, what alternative would you suggest?**

Agree.

**Q12: Do you agree that membership of the SBNI should be a statutory obligation? If not, what alternative would you suggest?**

Agree.

**Q13: Do you agree that membership of the SBNI should be drawn from senior members of relevant agencies? If not, what alternative would you suggest?**

Agree that membership should be drawn from senior members within relevant agencies. Membership should be representative of all agencies involved in safeguarding children. The number of Lay members may need to be increased to similar levels of representation to that of voluntary agencies. As well as a Director of Nursing it is important that a senior nurse at the level of Nurse Consultant or Nursing officer with a remit for Child Protection be included and representation from NICCY would be welcome as they can bring children's voice to the group.

**Q14: Do you agree with the level of seniority of the posts which are being proposed to comprise the SBNI? If not, what alternative would you suggest?**

Agree.

**Q15: Do you agree that individual Agencies should be held accountable for ensuring co-operation and promotion of the welfare of the child? If not, what alternative would you suggest?**

Agree. Accountability is essential.

**Q16: Do you agree with the range of Agencies/Interests proposed to comprise the core membership of the SBNI? If not, what alternative would you suggest?**

One of the objectives detailed in paragraph 1.6 of the proposal sets out to provide a more balanced structure and there is a clear message that all agencies must share the responsibility. Membership needs to be all inclusive and suggested inclusions to membership are detailed in Q. 13 above.

**Q17: Do you agree with the proposal for rolling membership of the SBNI? If not, what alternative would you suggest?**

Agree.

**Q18: Do you agree that rolling membership of the SBNI should be reviewed no later than every 4 years? If not, what alternative would you suggest?**

Agree. It is vital that knowledge, skills and expertise are not lost from the membership at one time, therefore ongoing review is essential.

**Q19: What other expertise do you consider appropriate for the SBNI to utilise in order to discharge its functions effectively?**

It is important to utilize expertise from outside the Board to include education mental health primary care and children services planning. It may also be beneficial to engage P.R. and the media to promote the role of the safeguarding Board.

#### **YOUNG PERSON'S REFERENCE GROUP**

**Q20: Do you think that a Young Person's Reference Group should be established? If not, what alternative would you suggest?**

Agree.

**Q21: Do you agree that the Young Person's Reference Group should be available to the SBNI through the chairman? If not, what alternative would you suggest?**

Agree. This would need to be supported by NICCY or a children's advocate with direct contact to the chair.

**Q22: What age group should the Young Person's Reference Group be drawn from?**

There is a need to identify how young people will be engaged in the group rather than setting age limits or inclusion through life experiences. Thereafter membership of the Young Person's reference Group should be drawn from the most appropriate individuals.

**Q23: How many members of the Young Person's Reference Group should there be?**

This needs to be decided through consultation with young people. Let them decide and take ownership of the makeup of the group.

**Q24: How do you think that membership of the Young Person's Reference Group should be selected?**

With the involvement of a Children and young person's advocate, the group should be selected through consultation with young people.

**Q25: How often do you think membership of the Young Person's Reference Group should be reviewed?**

The group should be kept continually under review by the Chair as part of his remit.

## **SAFEGUARDING PANELS**

**Q26: Do you agree that there should be a Safeguarding Panel in each of the 5 new Trust areas? If not, what alternative would you suggest?**

Agree. There needs to be a well developed sub-structure to the Safeguarding Board to support the board in the dissemination of information and identification of regional issues. This also enhances effective communication between the Trusts and the Safeguarding Board.

**Q27: What interests/disciplines/agencies/providers do you think should comprise membership of the Safeguarding Panels?**

Membership of safeguarding panels should be reflective of the main Safeguarding Board. They should also include specialist support practitioners from both nursing and social work and may be part of the role of the Named Nurse for child protection.

**Q28: What interests/disciplines/agencies/providers do you think should comprise membership of the sub-groups which will support the Safeguarding Panels?**

Membership of the sub groups should be flexible depending on their function.

**Q29: What do you think the functions of the sub-groups should include?**

**Function of the subgroups may include:**

- **Development of local multi-agency policy, procedures and standards.**
- **Induction and supervision of staff.**
- **Training.**
- **Communication.**
- **Research and practice development.**
- **Audit and monitoring.**

## **SERIOUS CASE REVIEWS**

**Q30: What do you consider the criteria to initiate a Serious Case Review should be?**

The criteria considered for initiating a Serious Case Management Review should be similar to that stated in Co-operating to Safeguard Children 10.5-10.8.

**Q31: What do you consider to be a reasonable time frame for the completion of a Serious Case Review to be?**

There should be an initial response submitted to the Safeguarding Board and the development of an action plan within 2 months and the review completed within 6 months.

## **TIMESCALE**

**Q32: Is the timescale proposed reasonable? If not, what alternative would you suggest?**

The timescale proposed is reasonable.

**Q33: Where, or with which host organisation, do you think the SBNI should be located?**

The Safeguarding Board should be located in a neutral venue to prevent perceived prejudice that one particular Trust area has a lead role.

#### **TRANSFER OF FUNCTIONS**

**Q34: What difficulties, if any, do you foresee in the transfer of functions from ACPCs to the SBNI? What actions are needed to resolve these difficulties?**

**Q35: Is the time frame for transfer proposed reasonable? If not, what alternative would you suggest?**

Yes. It is essential to maintain momentum.

## COMMUNICATING AND RAISING AWARENESS

**Q36: What do you consider to be the most effective ways to engage the range of stakeholders, including the wider community who can contribute to the effective safeguarding and promotion of the welfare of children?**

A communication sub group needs to be established to engage with all stakeholders and the wider community. There should also be partnerships developed with PR and media to raise the profile of the Board.

## EQUALITY SCREENING

**Q37: Is there any indication or evidence of higher or lower participation or uptake by different groups?**

Group	Yes	No	Not Known
Religious belief			
Political opinion			
Racial group			
Age			
Marital status			
Sexual orientation			
Gender			
Disability			
Dependency			
<b>Comments</b>			
There may be lower participation of those with learning disabilities the very young or ethnic minority groups.			

**Q38: Do different groups have different needs, experiences, issues and priorities in relation to this policy issue?**

<b>Group</b>	<b>Yes</b>	<b>No</b>	<b>Not Known</b>
<b>Religious belief</b>			
<b>Political opinion</b>			
<b>Racial group</b>			
<b>Age</b>			
<b>Marital status</b>			
<b>Sexual orientation</b>			
<b>Gender</b>			
<b>Disability</b>			
<b>Dependency</b>			
<b>Comments</b>			
Travellers and Black and ethnic minority groups may have differing needs.			

**Q39: Have consultations with relevant groups, organisations or individuals indicated that policies of this type create problems that are specific to them?**

<b>Group</b>	<b>Yes</b>	<b>No</b>	<b>Not Known</b>
<b>Religious belief</b>			
<b>Political opinion</b>			
<b>Racial group</b>			
<b>Age</b>			
<b>Marital status</b>			
<b>Sexual orientation</b>			
<b>Gender</b>			
<b>Disability</b>			
<b>Dependency</b>			
<b>Comments</b>			
No comments.			

**Q40: In relation to implementing this policy, is there an opportunity to better promote equality of opportunity or good relations by altering the policy or by working with others in Government or in the larger community?**

Yes.

**Please elaborate:**

Sub groups need to have strong representation from disability services, mental health, acute and ethnic minority groups.

**Q41: With reference to Questions set out please summarise how you believe the policy may impact on organisations' obligation to have due regard to the need to promote equality of opportunity.**

No comments.

**Q42: Are there any relevant groups which you believe should be consulted at this time?**

**Please specify**

Yes. Mental Health Services and the Royal College of Nursing.

**Q43: What data do you think will be required to ensure effective monitoring of the policy following implementation?**

No comments.

**Q44: Any other comments on the policy and/or screening exercise?**

No comments.

**Q45: On the basis of answers to Questions above (and in particular positive answers), do you recommend that the policy should be subjected to a full impact assessment?<sup>1</sup>**

**Yes**

**No**

**Please elaborate**

<sup>1</sup>Screening guidance states that considerations and decisions need to be formally recorded. The Equality Commission for Northern Ireland may wish to examine the screening exercise at a later date. Please be aware that screening decisions and supporting documentation must be robust as under Freedom of Information this documentation can be released on request.

**Please advise if you are content to have your response published should the Department receive such a request (see Appendix 1 on Freedom of Information Act). If you are not content to have your response published, please indicate your reasons to assist the Department in reaching decisions using the guidance attached at Appendix 1.**

***Please tick the relevant box***

**(i) Content**

**(ii) Not content**

**Please give reasons if not content:**

## FREEDOM OF INFORMATION ACT 2000 – CONFIDENTIALITY OF CONSULTATION

The Department will consider all responses following completion of the consultation process. Your response, and all other responses to the consultation, may be disclosed on request. The Department can only refuse to disclose information in exceptional circumstances. **Before** you submit your response, please read the paragraphs below on the confidentiality of consultations which will give you guidance on the legal position about any information given by you in response to this consultation.

The Freedom of Information Act gives the public a right of access to any information held by a public authority, namely, the Department in this case. This right of access to information includes information provided in response to a consultation. The Department cannot automatically consider as confidential information supplied to it in response to a consultation. However, it does have the responsibility to decide whether any information provided by you in response to this consultation, including information about your identity should be made public or be treated as confidential.

This means that information provided by you in response to the consultation is unlikely to be treated as confidential, except in very particular circumstances. The Lord Chancellor's Code of Practice on the Freedom of Information Act provides that:

- the DHSSPS should only accept information from third parties in confidence if it is necessary to obtain that information in connection with the exercise of any of the Department's functions and it would not otherwise be provided;
- the DHSSPS should not agree to hold information received from third parties "in confidence" which is not confidential in nature; and
- the acceptance by the DHSSPS of confidentiality provisions must be for good reasons, capable of being justified to the Information Commissioner.

For further information about confidentiality of responses please contact the Information Commissioner's Office (or see web site at: <http://www.informationcommissioner.gov.uk/>).

For further information about this particular consultation please contact the consulting branch at:

Department of Health, Social Services and Public Safety  
Child Care Policy Directorate Room D1.4  
Castle Buildings  
Stormont  
Belfast  
BT4 3SQ

Email: [Linda.boomer@dhsspsni.gov.uk](mailto:Linda.boomer@dhsspsni.gov.uk)