Proposed Safeguarding Board

1. What are the essential elements that you would like to see to ensure a fully integrated and coordinated response to safeguarding of children?

There are a number of elements that would strengthen the current arrangements to safeguard children:

- A regional focus, which will ensure that the SBNI will have standing and authority and ensure a consistent approach to safeguarding throughout Northern Ireland.
- A legislative framework which secures authority and cooperation from all agencies.
- Authority to instigate investigations and to ensure learning from these investigations is disseminated regionally.
- The ability to achieve the appropriate balance between prevention and protection.
- Robust communication systems to include, information sharing on issues such as adults who pose a risk to children, good practice and joint working.
- Arrangements that take account of learning from the findings for significant cases both in Northern Ireland and beyond.

2. Are the functions of the SBNI as outlined at Chapter 3 of the Policy Document adequate?

• It is suggested that chapter three could be strengthened with clearer reference to other significant bodies such as the Regulation Quality Improvement Authority. (This relationship is referenced in 9.9 and 14.1)

3. Given that one of the roles of the SBNI is to secure accountability, how can one panel member hold another to account?

- One of the key strengths of the SBNI is that it draws clear lines of accountability from direct delivery of service to the SBNI. The complexity of the membership and the interagency nature of safeguarding work does create a challenge for members in holding each other to account, however the PHA feels this challenge or risk is mitigated by calibre and seniority of staff involved and the multi agency membership.
- The SBNI Partnership agreement will clarify the complex network of relationships and accountability of the key partners

4. How representative is the proposed membership: are all aspects of child protection covered i.e. what about the courts and judiciary? Does the essential wide representation come at the cost of unwieldiness? What level of seniority of staff should be represented?

The PHA would wish to make the following comments:

- The membership of the SBNI is comprehensive and the need for accommodating other groups and agencies is acknowledged and addressed in 21.1 through a Safeguarding Regional Forum and in 22.1 in the Young Persons Safeguarding Forum.
- Consideration should be given to:
 - Limiting the term of the Designated Paediatrician who will chair the Child Death Overview Panels as this is a particularly onerous task.
 - To ensure that the medical and public health aspects of child protection and prevention of child abuse are addressed, we would wish membership to include the Director of Public Health in the PHA/HSCB or their nominee being a full member of the SBNI.
 - \circ $\,$ The courts and justice systems should be represented on the SBNI.
- The seniority as described in the membership section 11 is appropriate as it enables the members to appropriately represent their organisation and to challenge each other.

5. How should the chairperson of the local safeguarding panels be appointed and should these be paid posts?

• Given the importance of the work of the SBNI, the roles and functions outlined in the policy document and the descriptors of the role of the Chairman in 9.4 and 9.5, the PHA considers that the chairperson of the panels should be appointed in line with DHSSPS public appointments procedure and that these posts should be remunerated.

6. How clear is the interaction between the DHSSPS, The Health and Social Care Board and the Trusts and the SBNI regarding who will have primacy on issues/policy areas and who does what?

• The relationship between the parties above and including the role of the Office of the First and Deputy First Minister are described in clear terms. The potential, however, for overlap and duplication remains real particularly during the transition period. The PHA would suggest that there should be a formal review of the structures and processes two years from instigation to ensure they continue to be fit for purpose. In that time the PHA would hope to work with colleagues to maximise the public health contribution to the health and wellbeing of children, in particular targeting a reduction in inequalities.

7. Should there be a legal duty on the relevant agencies to cooperate as well as safeguard?

• The policy document at 7.4 indicates that it is the Departments plans to 'outline a duty to cooperate to improve the wellbeing of children's and safeguard their welfare'. The PHA would support this inclusion.

8. Any opinions that your organisation may have on serious cases reviews and the single database?

• The PHA would support the proposals on serious case reviews and a single database as essential elements in the provision of a comprehensive safeguarding service.

9. Where should the SBNI be based? Is the Public Health Agency appropriate?

• The PHA considers that locating the SBNI in the Agency is appropriate. This approach ensures the SBNI is at arms length from the HSCB and HSC service but maximises opportunities for economies of scale in operational support.

10. How can the potential gaps or slippage between the current Regional Area Child Protection Committee and the newly formed SBNI be avoided?

• The HSCB is already taking the lead in this work with transitional arrangements either in place or being developed.

11. Is the funding for the SCNI clearly defined? The Department have indicated that the £750,000 of funding is supplemented with existing funding? Does this kind of arrangement work?

- The core funding of £750,000 is clearly identified.
- It would be helpful if the resources to the five Safeguarding Panels were more clearly defined at HSC Trust level. This would enable the SBNI to ensure that funds for this vital work are sustained recurrently.

12. Any other issues that you feel may be of interest to the Committee.

• The proposal to review the membership of the SBNI is welcomed and will enable the chair of the SBNI to adjust membership as learning is developed.

- The importance of linking the SBNI to the children's services planning processes cannot be under estimated, particularly the importance of other agencies such as education, housing and employment. The PHA would also encourage the new arrangements to embrace a public health model whereby interventions commissioned are evidence based and reflect the proportionate universalism concept from the Marmot Review on Social Determinants of Health, including intensive support for those who need it most.
- Staff within the SBNI Board and Panels have access to adequate professional and personal support in the discharge of their duties to maintain their own health and wellbeing.