



Health and
Social Care

STRATEGIC PLANNING AND PERFORMANCE GROUP

**REGIONAL REPORTING TEMPLATE FOR
SOCIAL CARE AND CHILDRENS
DIRECTED STATUTORY FUNCTIONS**

PERFORMANCE MANAGEMENT AND ASSURANCE REPORT

For Year end 31 March 2024

Belfast Health & Social Care Trust

CONTENTS PAGE

SECTION 1 EXECUTIVE SUMMARY		
1.1	Executive Director of Social Work Statement of the Governance arrangements in place for safe and effective social work and social care services across the Trust	3
1.2	Statement of the Executive Director of Social Work’s assessment of the Trust’s performance in effectively and efficiently delivering Directed Statutory Functions during the reporting period	4 – 6
	Mental Health & CAMHS	
2.0	Mental Health & CAMHS Programme of Care	8 – 14
2.6	Mental Health & CAMHS Directed Statutory Functions	15 – 18
	Mental Health & CAMHS Organisational Chart	19 – 20
	Mental Health & CAMHS Data Return	21 – 40
	Adult Community Older People Services	
2.0	Adult Community Older People Services Programme of Care	42 – 47
2.6	Adult Community Older People Services Directed Statutory Functions	48 – 51
	Adult Community Older People Services Organisational Chart	52 - 53
	Adult Community Older People Services Data Return	54 – 71
	Adult Physical Disability	
2.0	Adult Physical Disability Programme of Care	73 – 78
2.6	Adult Physical Disability Directed Statutory Functions	79 – 81
	Adult Physical Disability Organisational Chart	82
	Adult Physical Disability Data Return	83 – 93
	Adult Learning Disability	
2.0	Adult Learning Disability Programme of Care	95 – 101
2.6	Adult Learning Disability Directed Statutory Functions	102 – 105
	Adult Learning Disability Organisational Chart	106
	Adult Learning Disability Data Return	107 – 123
	Children Community Services	
2.0	Children Community Services Programme of Care	125 – 135
2.6	Children Community Services Directed Statutory Functions	136 – 139
	Children Community Services Organisational Chart	140 – 142
	Children Community Services Data Return	143 – 191
	Data 8	
	Assessed Year in Employment	193 – 196
	Data 11	
	Social Services Learning & Development Accountability Report	198 – 214

1 EXECUTIVE SUMMARY

This report provides an overview of the Trust's discharge of Delegated Directed Statutory Functions and Corporate Parenting (CC3/02) in respect of services delivered by the Social Work and Social Care Workforce (hereafter, the Social Care Workforce); for the period covering 1st April 2023 to 31st March 2024. It addresses the assurance arrangements underpinning the delivery of these services, outlines levels of compliance with the standards specified in the Scheme for the Delegation of Statutory Functions (Revised April 2010) and identifies on-going and future challenges in the provision of such services.

1.1 Executive Director of Social Work Statement of the Governance arrangements in place for safe and effective social work and social care services across the Trust

Throughout this reporting period Ms Tracy Reid was in post as the Executive Director for Social Work (EDSW) (Interim). Ms Tracy Reid is a qualified social worker and is registered with the Northern Ireland Social Care Council on Part 1 of the register.

The EDSW is a member of Trust Board and is professionally accountable to the Chief Executive for the discharge of safe and effective Social Work and Social Care services across the Trust. The EDSW oversees the organisational assurance and governance arrangements underpinning the discharge of social care statutory functions. There is an unbroken line of professional accountability from individual practitioner, through the professional line, to the Executive Director of Social Work and on to the Trust Board.

The EDSW is supported in the effective discharge of governance and assurance functions by the Deputy EDSW Ms Eileen McKay. The Deputy EDSW is responsible for ensuring Social Care governance arrangements across the Trust and maintains responsibility for the regulation and development of the workforce and assurance of the provision of Directed Statutory Functions.

Each Directorate with responsibility for the delivery of Social Work and Social Care services have established Collective Leadership Teams, who are accountable for Divisional service delivery, including performance and governance arrangements. Divisional Social Workers are an integral part of the Collective Leadership Team in each Division and are responsible for the implementation of professional Social Work standards and practice, Social Care governance and service delivery functions. The Divisional Social Workers (DSW) assure governance arrangements within their service area and are accountable to the EDSW. Within this reporting period the Trust has recruited permanently to two of the DSW positions and there are no vacancies in the DSW positions.

The Trust's Assurance Framework outlines the overarching corporate mechanisms and related processes. This provides assurance as to the effectiveness of the systems in place to meet the Trust's objectives and to deliver appropriate outcomes. Integral to the Trust's Assurance Framework is the role of the Social Care Committee, who are authorised by Trust Board to review the annual statutory functions report, the six-monthly corporate parenting reports and miscellaneous other reports pertaining to the discharge of statutory functions, prior to their presentation to Trust Board. The EDSW and the Social Care Committee work in partnership to assure governance arrangements in regard to the discharge of Delegated Statutory Functions in the Trust.

The strengthening of Social Care Governance arrangements has been ongoing throughout this reporting period. The Social Work Senior Leaders Assurance Group, chaired by the EDSW and reporting to the Social Care Committee, provides a bi-monthly forum to assure social care governance arrangements across all service areas and to identify areas for improvement. This is underpinned by the development of an EDSW dashboard to provide an evidence based overview of all professional social work and social care governance arrangements in the Trust.

Additionally, the Trust has co-operated fully with the Regulation and Quality Improvement Authority (RQIA) in the discharge of its functions and addressed any concerns raised. Detail in relation to RQIA inspection is within the body of this report.

1.2 Statement of the Executive Director of Social Work's assessment of the Trust's performance in effectively and efficiently delivering Directed Statutory Functions during the reporting period

There have been significant challenges for the Trust in its delivery of services during this reporting period, as services respond to continued and increased demand and operate in the context of high staff vacancies and ongoing industrial action. The Trust notes there is not consistent compliance across all programmes of care, and this is particularly evidenced by the number of unallocated cases and outstanding reviews, which are detailed within this report.

Staff throughout the Trust have continued to demonstrate steadfast dedication and commitment to service users and consistently delivered services to the most vulnerable with flexibility, adaptability and professionalism in the most challenging of circumstances. Nevertheless persistent challenges remain across all Trust social work and social care services in relation to the delivery of timely, safe and effective care.

1. Timely service provision

The Trust continues to experience a high volume of unallocated cases across service areas and increasing numbers are a particular concern in Older Peoples services and Children's Community services. This is largely a consequence of an escalating demand for social work services in these areas coupled with staff absences and vacancies. Waiting times for initial social work assessment and intervention and subsequent waiting times for services creates a notable quality and safety concern and increases risk of harm to service users. The Trust remains committed to ensuring prompt service delivery and risk management frameworks are in place to monitor and review unallocated cases. Action plans include more effective use of skills mix, delegation and partnerships with other sectors to increase capacity to respond in a timely manner to service user need.

2. Increased Demand and Workforce Capacity

In line with the DOH directive the Trust ceased all use of recruitment agencies for social workers by June 2023 and while this has brought some stability to the workforce it has not brought any additional supply and the workforce capacity challenge remains. The Trust have established a Recruitment Retention Strategic Group with four work streams working to address issues with capacity, and to enhance leadership, culture and staff experience. During this reporting period the Trust has created a band 6 social work bank and invested in initiatives to improve staff well-being and remain engaged in the Regional Recruitment process. The Trust can report reduced turnover of social workers in some service areas however the deficit in supply of social workers regionally means that there are still high levels of vacancies. With no agreed plan to increase places on the social work degree the challenges arising from social work vacancies will continue into the next reporting period.

The preparation for Encompass has been added pressure on the workforce in this reporting period as the Trust prepare for Go Live on 6th June 2023 and this too has had an impact on capacity.

It must also be highlighted that with demand for services surpassing capacity it is evident that addressing vacancies alone will not be sufficient to meet need and that it is becoming critical to review service delivery models to remain viable. The Trust is working closely with regional colleagues to explore how use of the Delegated Framework might reduce demands on social workers in some community teams. This work will continue in the next reporting period.

3. Children's Community Services

Children's community service have remained in business continuity throughout this reporting period and the chronic vacancies coupled with growing demand for services and increased need for placements have continued to make this reporting period an extremely challenging time. In the last quarter in particular there has been substantial engagement with Trade Unions and with regional colleagues to resolve issues however the challenging financial landscape is a barrier as the proposed solutions entail associated costs. These pressures are likely to intensify in the next reporting period with an escalation in industrial action.

The Independent Review of Children's services was published in June 2023. The Trust awaits the outcome of the public consultation in terms of the establishment of a stand-alone Children's Service in Northern Ireland.

4. Statutory Reviews

While there have been some improvements in compliance with timescales for reviews this remains a challenge across service areas. Interim arrangements are identified in the body of the report. The Trust remains committed to ensuring timely review of service provision to ensure effective service delivery that meets the needs of its population. During this reporting period reviews have been undertaken by professional staff only with one exception. All service areas, with the exception of Community Social work in Physical and Sensory Disability Services, are reviewing this position and considering how to make better use of the DOH delegation framework in the next reporting period. Community Social Work in Physical and Sensory Disability Services currently employ 2 social work assistants to support with non-complex domiciliary care review, under the supervision of a senior practitioner.

5. Domiciliary care provision

The Trust continues to experience delays in the provision of timely domiciliary care and the impact of this is evident in high levels of community unmet need and hospital discharges. Service delivery is impacted by Social Care Workforce vacancies, both within Trust and in the community sector. The Trust continues to engage with providers and explore Direct Payments as an alternative option of support. It is of note that numbers of people choosing to use Direct Payments for support has remained reasonably static across all service areas in this reporting period. The Trust will continue to promote Direct Payments as a flexible alternative to domiciliary care and consider how to improve messaging within the next reporting period.

The Trust continues to support the Regional Adult Social Care Collaborative with strategic development and has engaged with the DOH consultation on a strategy for social care. The Trust has established a social care workforce steering group with associated work streams to improve recruitment and retention of social care staff.

6. Carers assessment

The Trust remains committed to supporting the needs of carers. Within this reporting period The Trust launched the draft strategy for consultation 'Caring Together in Belfast 2023 Onwards'. Work on the implementation of the strategy across social work Divisions is overseen by the Carers Strategy Committee; with social work representation from all service areas.

The Trust has seen a slight increase in the completion of carers assessment (1.65%) in this reporting period and recognises the commitment of social workers who continue to support carer needs within reduced workforce capacity and resource pressures. The Trust is committed to embedding the Carers Conversation Wheel as an alternative assessment tool for supporting and enabling carers in their role.

7. Safeguarding

In this reporting period the Trust has made significant progress in relation to Adult Safeguarding data in that the Trust now has an overview of all Adult Safeguarding activity across all Hospital sites. Every Division will, on an annual basis, provide an overview presentation to the EDSW at Adult Safeguarding Committee in relation to data, themes, and actions to address recurrent themes, governance arrangements and training compliance. In addition there has been good progress in relation to the Trust Adult Safeguarding action plan and monitoring of actions against BSO Adult Safeguarding audit continues with an update being provided to BSO in March 2024. Risks associated with Adult Safeguarding are captured on the Trust Board Assurance Framework and recorded within the Trust's Annual Position Report.

The Trust awaits the implementation of the Adult Protection Bill and is participating in various work streams reporting to the IAPB. However, the Trust is already significantly challenged in relation to limited funded resource for Adult Safeguarding and will not be able to implement the Bill without a significant funding stream being available.

As the Trust prepare to Go Live with Encompass cognisance is taken of learning from SEHSCT where data quality has been raised as a concern and all efforts will be made to retain assurance in relation to robust adult safeguarding data.

8. Regional bed pressures and ASW service

During this reporting period there has been significant engagement with senior leaders across the Trusts, the DOH and the SPPG and some progress has been made in relation to this issue. However the regional shortage of acute inpatient beds for patients requiring an admission for assessment under the Mental Health (NI) Order 1986 continues to impact on service delivery. This is evidenced in waiting times for inpatient services and consequently the ASW has had to remain with patients, who are deemed to be at risk, for protracted periods of time. This is both in the community and general Emergency Departments. These delays create significant risk to the service user, the ASW and the public. This continues to adversely affect timely service provision for service users requiring hospital admission and the Trusts capacity to efficiently deliver directed statutory functions in relation to assessments under the Mental Health (NI) Order 1986 (MHO).

9. Muckamore Abbey Hospital resettlement

Throughout this reporting period there has been a continued focus on supporting safe staffing levels at the Muckamore Abbey Hospital, Adult Safeguarding and resettlement of patients in preparation for closure of the hospital. This process has been challenging in the context of the limited availability of commissioned specialist placements for people with complex needs. The Trust would welcome regional policy guidance in relation to the management of behaviour that challenges within a community social care setting.

Conclusion

Despite the challenges set out in this report, the Trust has continued to prioritise the safe discharge of its statutory functions and has achieved partial compliance with the requirements specified in the Scheme for Delegation, within the context of decreased workforce capacity, increased demand for services and the resources available. The body of the report and the summary of concerns provides detailed commentary on the levels of compliance and areas of difficulty, in relation to the delivery of statutory services.

The Trust is committed to ensuring its social care workforce is supported in the discharge of its statutory functions and ensures arrangements for the professional development and well-being of staff. The Trust is compliant with the Northern Ireland Social Care Council (NISCC) Standards of Conduct for Employers and has arrangements in place to monitor and assure compliance with registration requirements.

Signature



Date 10th May 2024

MENTAL HEALTH & CAMHS SERVICES

2. PROGRAMME OF CARE SUMMARY

Mental Health and CAMHS

2.1	<p>Named Officer responsible for professional Social Work</p> <p>During this reporting period, Mr John Hand was the Divisional Social Worker (Interim) and the named officer for professional social work in mental health services and CAMHS.</p> <p>Accountability Arrangements - Please provide a copy of your Organisational Structure from Assistant Director to Band 7 Staff and highlight any changes from last year (2023/24).</p> <p>The Director of Mental Health Services, (Peter Sloan), supported by the Collective Leadership Team, has the responsibility and accountability for the operational delivery of statutory functions by the Directorate. Each collective leadership team consists of a Co-Director, Chair of Division, Divisional Social Worker and Divisional Nurse.</p> <p>There remains an unbroken line of professional accountability for social work, from the individual social work practitioner to the Divisional Social Worker and through to the EDSW of Social Work, who reports to the Chief Executive and to the Trust Board.</p> <p>Within this reporting period the Trust has created 5 new band 7 social work posts in Mental Health services; 1 Think Family Practitioner; 2 full time Approved Social Workers; 1 Senior Practitioner in Perinatal Services and 1 Senior Practitioner in Eating Disorders.</p> <p>Please see organisational structure on page 19 – 20.</p> <p>Highlight any vacancies and the action taken to recruit against these.</p> <p>There are 3 Band 7 (SW) vacancies. This relates to 1 Think Family Practitioner and 2 Social Work Development Leads. Recruitment process has commenced.</p>
2.2	<p>Please highlight key Social Work Workforce planning issues, including recruitment, retention and professional roles.</p> <p>Designated Adult Protection Officer (DAPO)</p> <p>Provision of the DAPO role continues to be a challenge as this is an additional role to Social Workers who are in substantive band 7 posts and is not separately funded. Senior social work practitioner posts and band 7 social work/generic posts now include DAPO role as standard for social work trained staff. This is built into the staff members work plan.</p> <p>Approved Social Work (ASW)</p> <p>Assessments under the Mental Health (NI) Order (1986) are undertaken by ASW's employed in substantive posts who participate in a Trust wide rota. A separate Mental Capacity Act (MCA) team provide short term detentions,</p>

ASW Trust panel membership and Trust panel extensions under the Mental Capacity Act (NI) (2016) (MCA).

ASW numbers have increased during the period by 9 staff (23%) due to increased ASW's being trained each year and the addition of 2 full time ASW's (commencing post April 2024) and 3 bank staff providing 10-13 shifts per month.

8 ASW candidate placements were funded during the reporting period for ASW daytime services with 2 deferrals.

Breakdown by programme of care represented on daytime ASW rota;

	2023/2024
ACOPS	3
CAMHS	1
LD	3
MH	28
Bank	3
Total	38 (includes 8A-B managers)

Whilst this figure represents a 23% increase in ASW on the rota this does not correlate to 23% increased available resource. The Trust notes that due to passage of time many of the current ASW are no longer required to be on rota as frequently or may opt to maintain their 'practicing' status undertaking ASW specific MCA activities.

Challenges impacting on ASW working times;

- Delay due to bed availability : 39%
- ASWs working past 5pm : 35%
- Police interface: (includes total MHO assessments/conveyances impacted by PSNI delay/removal): $21/68 = 31\%$).

In addition NIPSA Action Short of Strike (ASOS) commenced on 3rd July 2023 and continues currently (endorsed also by UNISON) which includes;

1. ASW Trade Union members have been instructed not to participate on the daytime rota more than twice a month by the Union.
2. Due to workload pressures reported by members, ASW reports will be produced within 5 days of assessment instead of the normal 3 days that some managers require.

Provide a summary regarding the detail and level of vacancies and any vacancy control systems in place.

There are 8 Band 5/6 social work (SW) vacancies within the Division being progressed through the regional social work recruitment programme.

	<p>There are no vacancy controls in place. The Trust have an active Recruitment Retention Group for Social Work and a Social Care Workforce Steering Group – both of which have a number of associated work streams. The Workforce, Learning, Development and Improvement Team have implemented a workforce recruitment and retention strategy which includes</p> <ol style="list-style-type: none"> 1. June 2023 completed recruitment and matching of agency social work staff into temporary/permanent Trust employment following cessation of agency social work posts in line with the DOH directive to cease agency use for social workers. 2. Working with the regional recruitment framework to ensure consistent and efficient recruitment processes. 3. Social work retention programme, working with the Trust’s social work specific recruitment and retention officer, ‘valuing social work’ 4. Showcase Event - Employer of Choice for Social Work providing a platform to encourage social work applications to the Trust. 5. Social Work bank for band 6 staff has been established. 6. Trust Band 6 Transfer policy is out for consultation.
2.3	<p>Supervision arrangements for social workers</p> <p>Please confirm that the Trust is fully compliant with the Regional Supervision Framework</p> <p>YES</p> <p>The Trust reports an annual supervision compliance rate of 83.5% for Mental Health services and CAMHs.</p> <p>Recorded reasons for missed supervision relate to work pressures or no supervisor available due to annual leave or sick leave.</p>

2.4	<p>Please provide an update on the robustness of the data provided in this report and any data assurance processes in relation to it. (This may include reference to electronic or manual data sources and any data gaps and work with Encompass).</p> <p>The Trust provides assurance that all data contained in this report is accurate and subject to scrutiny through three lines of assurance within the Trusts Integrated Governance and Assurance Framework. Data is interrogated through bi- monthly Social Work Senior Leaders Assurance Group, monthly Divisional Governance meetings and the Social Care Steering Group.</p> <p>The delegated statutory functions (DSF) data returns for the SPPG are achieved through a monthly collation tool to provide improved accuracy and assurance. Work has also commenced with Encompass developers to ensure the build will provide accurate reporting on the activity regarding key delegated statutory functions following go live on the 6th June 2024. As a contingency measure to assure data quality, the current collation tool will continue until Epic has been tested for quality assurance.</p> <p>ASW data collation</p> <p>ASW data is collated daily on a database. This will continue for a period following Encompass implementation to give assurance regarding data quality.</p> <p>Carers Assessment</p> <p>A monthly tracker system has improved collation of carer assessment stats. Staff have been supported in data collation through bespoke information sessions on completing assessments and logging onto Paris and the provision of a guidance document and resource pack on how to complete referrals. In addition within Mental Health services there has been progress made with:</p> <ul style="list-style-type: none"> - 6 month pilot carer assessment clinic (ending May 24). - Carer assessment audit action plan (see 2.5)
-----	--

2.5 Programme of Care to advise of numbers of any significant judgements and/or decisions derived from Serious Adverse Incidents, Case Management Reviews, Mental Health Review Tribunals, Judicial Reviews, Audits or RQIA Inspection and/or Review activity *completed* during the reporting period, that directly relates to the Trusts discharge of their statutory functions (please complete table below).

	Number
<i>Serious Adverse Incidents</i>	0
<i>Domestic Homicide Reviews</i>	0
<i>Case Management Reviews</i>	0
<i>Mental Health Review Tribunals</i>	2
<i>Judicial Reviews</i>	0
<i>Audits</i>	4
<i>RQIA Inspections</i>	0
<i>RQIA Enforcement notices – Failure To Comply Notices</i>	0

**Mental Capacity Act Team
Case One**

05/04/23 DOL was revoked by Review Tribunal based on the decision they were not satisfied there was appropriate care and treatment available for P in the place of the DOL. Trust made an application for a Declaratory Order (DO) pending application for Judicial Review to ensure service user needs met and staff were protected from liability. Application for Emergency DO same day. Full Decision received 19/04/23 - application made for Judicial Review of decision.

Actions following Learning;

- a) Process in future is to make an application for an Emergency Judicial Review (D.O. application not required).
- b) Judicial Review pending, currently adjourned at the request of DLS pending outcome of Judicial Review application regarding a revoked DOL in another trust.

Case Two

08/02/24 The Review Tribunal revoked a DOL based on the decision P was not at risk of serious physical harm. The Tribunal had based their decision on the risk criteria for the MHO and not MCA. Trust made an emergency application for Judicial Review with the understanding the decision was unlawful. Decision received 11/02/24 with application for Emergency Judicial Review made. The legal representative accepted the wrong legal criteria had been applied and decision over-turned 21/02/24.

Actions following Learning;

- a) Importance of scrutinising the written decisions from Tribunal.
- b) Seek advice where Tribunal decision may be believed to be the contrary to application of legal criteria.

Carer Assessment Audit (Mental Health and CAMHS)

An audit of carers assessments was undertaken by the Division in September 2023 directed by the Carers Strategy Committee. The action plan focused on;

- 1. Identifying carers and improving access to services, focusing on young carers (training sessions, resource pack, carer assessment

clinic, QI project CAMHS, focus on young carers through young carers steering group).

2. Improve quality of carers assessments and contact with carers (carer information leaflet, carer promotional hub areas, scope of staff training needs, included in staff induction, unmet needs process).
3. Yearly carers assessment audit and option of using carer conversation wheel or NIAST.
4. Improve carer participation and representation within carer support services

To support the implementation of the Carer Strategy action plan ('Caring Together in Belfast 2023 Onwards'), carer feedback is being collated through carer assessment clinic and Wellness Recovery Action Plans (WRAP) for carers are facilitated via the Recovery College. In addition the Trust is exploring carer representation on future audits and carer champions established across Mental Health service. All actions are kept under review.

Adult Safeguarding Threshold Audit October 2024

The Trust completed an audit focusing on a thematic review across programmes. The purpose of the audit was to obtain assurances of application of protection threshold and decision-making processes to provide assurance of consistency, e.g. regarding screened out referrals and alternative responses.

Actions from the audit include;

1. Standardised guidance to be implemented to ensure consideration of the level of harm, wider safeguarding concerns, e.g. public interest, is there a potential for others at risk, if staff are the alleged perpetrator, clear rationale for the decision-making and recording of same including who is responsible for taking action.
2. 4 ASG audits per year. This will ensure that standards met in relation to robust decision-making e.g. recording in section 2/3 of the APP1, recording specifically in the ASG section on Paris/Epic.
3. Learning workshops to ensure consistent application of guidance.
4. Dissemination of ASG learning from audits, SAI's, CMR's and DHR's at IO/DAPO forums quarterly.

Assurance of Approved Social Work qualification for ASW practitioners - February 2024

The audit has been designed to provide assurance that all staff employed in the Approved Social Work role in the Trust met the following standards;

- Qualified as ASW's
- Have provided evidence of their qualification
- Have undertaken re-approval training (if qualified over 3 years) and are authorised to continue practicing by the Executive Director of Social Work and provided evidence of re-approval
- Staff undertaking the DoH Direction No1 Mental Health (NI) Order (1986) role have been authorised to do so by the

Executive Director of Social Work and provided evidence of this authorisation

While all standards were met there was one recommendation:

1. **Standard 2: There is evidence available that all employees are qualified as Approved Social Workers.**

Recommendation: The office of the Executive Director for Social Work to have sight of qualification for practice when an ASW moves from a different Trust area - for assurance with regard to authorisation to practice.

Social Work and Social Care Induction Audit

Trust audit in December 2023 for 2nd line assurance in relation to the induction of social work and social care staff. This audit was conducted by the Office of the Executive Director of Social Work. Recommendations identified that impact on statutory functions

- All service areas will ensure that NISCC registration information and standards of conduct and practice are included in induction.
- All new employees will be signposted to the NISCC portal
- Development of a framework for service users/carers to become involved in the planning and delivery of the induction for new staff across all service areas.

Action plan is developed and remains under review across all service areas. Re-audit scheduled for December 2024.

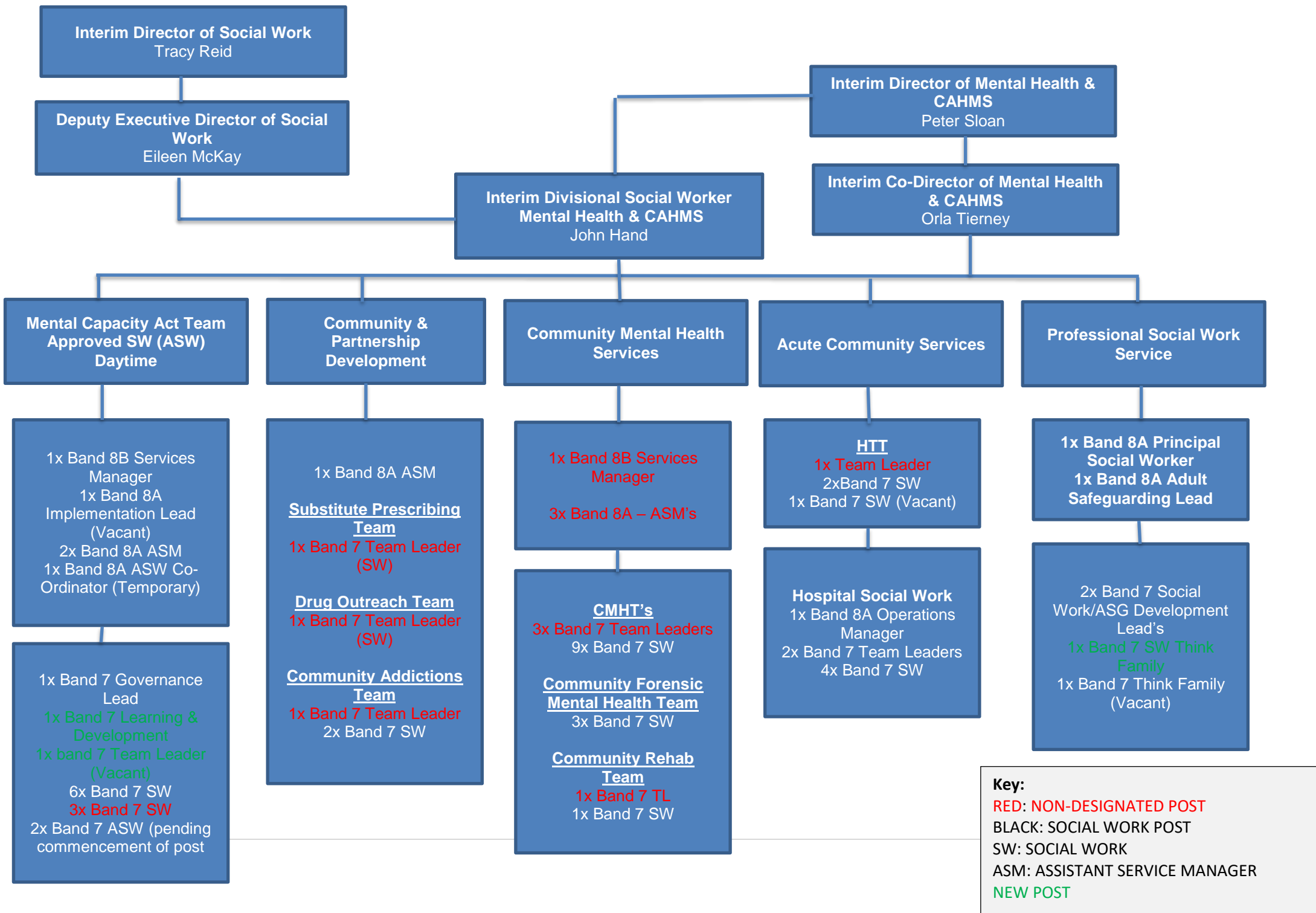
2.6 Discharge of Directed Statutory Functions

Summary of areas where the Trust has not adequately discharged their Directed Statutory Functions for this Programme of Care. Please outline remedial action taken to address this situation and any proposed future action.

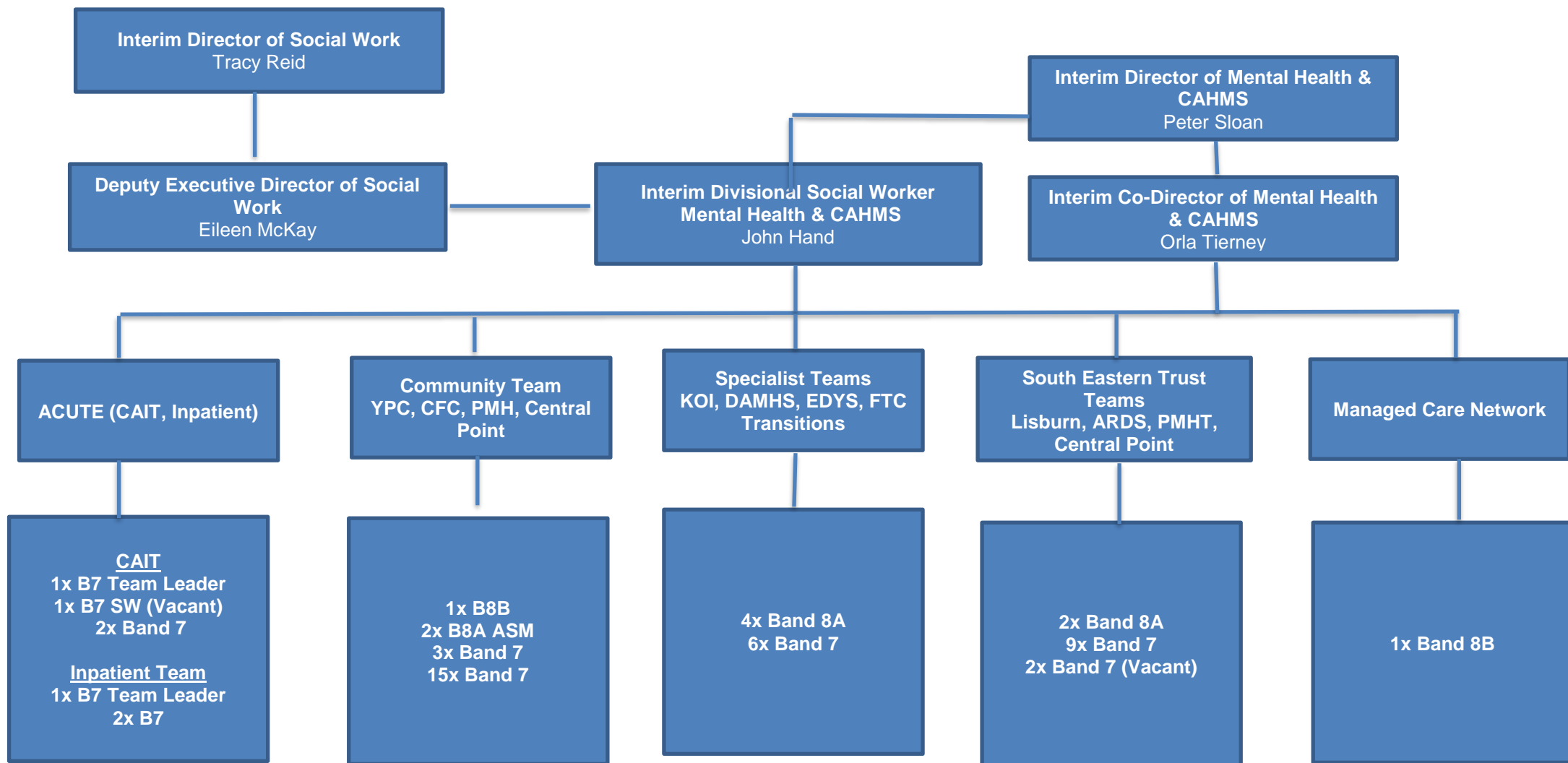
2.6	Summary of areas where the Trust has not adequately discharged their Directed Statutory Functions for this Programme of Care.	Please outline remedial action taken to address this situation and any proposed future action.
	Mental Health Issues	
1.	Regional bed pressures	This issue is to be reviewed under SPPG Service Delivery Plan process and therefore is not included in the summary of areas where the Trust has not adequately discharged their Directed Statutory Functions.
2.	<p>Risks to ASW's due to unplanned extended working during protracted waits for beds for patients assessed under the MHO and requiring admission. Reasons include;</p> <p>Delay due to bed availability : 39%</p> <ul style="list-style-type: none"> - ASWs working past 5pm : 35% - Police interface: (includes total MHO assessments/conveyances impacted by PSNI delay/removal): 21/68 = 31%). <p>In addition NIPSA Action Short of Strike (ASOS) commenced on 3rd July 2023 and continues currently (endorsed also by UNISON).</p>	<p>ASW Waits have reduced by 57% in compared to the same period last year (Feb 23 compared to Feb 24).</p> <p>Actions taken to date to reduce unplanned ASW working times;</p> <ol style="list-style-type: none"> 1. Recruitment of 2 full time ASW's (1st April 2024) for the ASW daytime service will bolster the rota by providing 24 slots per month (approx 40% of current rota over a 4 week period (exl leave). This will reduce number of times ASW's are on the rota each month. 2. There has been an increase during the reporting period in the number of Mental Health Order (form B) report (MHOB) reports that have not been completed in the 5 working day standard due to the impact of ASOS. 28 reports were not completed within the 5 day standard due to ASOS impact (see Data Returns 9.3a). <p>Actions to address;</p> <ol style="list-style-type: none"> a) Recruitment of 2 full time ASW's to increase rota cover will reduce reliance on managers to undertake unplanned MHO assessments resulting on increased workload and late reports. b) Fulltime/Bank ASW's will be given adequate time to complete reports with on the rota on consecutive days to reduce incidence of a backlog of reports to complete.

		<p>c) ASW's will not be on the rota the day before taking annual leave. d) Weekly monitoring of outstanding reports and action taken to address with individual ASW's and managers.</p> <p>3. See Action point 1.</p> <p>4. Currently in place under ASOS. All referrers are redirected to RESWS service for referrals after 4pm.</p> <p>5. This can impact on the number of ASW's available on the rota but is also supported by ASW candidates and interim ASW's.</p> <p>6. a) Full time ASW's recently recruited will work until 9pm on referrals received before 4pm.</p> <p>b) DoH Direction No1 Mental Health (NI) Order (1986) providing guidance on the provision of Interim ASW's within legislative framework to provide relief to ASW's who have worked past their working hours. This supports handover both in daytime and out of Hours ASW services in BHSCT. The Trust has trained 9 staff members to undertake this function which will be in place until December 2024.</p> <p>c) Current facilitation of handover from RESWS to daytime services at 6am to facilitate relief to RESWS ASW's working protracted hours throughout the night within BHSCT. RESWS will also accept handover from daytime services after 5pm where resources permit.</p> <p>d) ASW daily co-ordinator post 9am-9pm (currently temporary) to support ASW's during waits.</p>
3.	Young carer assessments – low uptake Data Returns 5.5-5.7.	<p>Offer and completion of young carer assessments has remained low despite promotion.</p> <p>Actions;</p> <p>a) Young carers steering group established to meet quarterly to review actions.</p> <p>b) Trust set up process to register young carers as children in need through the Trust Gateway team following young carer assessment by Action for Children. This process is being reviewed for quality assurance.</p>

		<ul style="list-style-type: none"> c) Yearly promotion of young carers at MH/CAMHS social work forum and to be developed for nursing and AHP fora. d) Scoping exercise of young carers across MH and CAMHS to establish practitioner identification and targeting of young carers for assessment. e) Carer champion established across MH and CAMHS who will promote young carer assessments. f) Standing item on agenda at Trust FCC/MH/ID interface meeting. g) Yearly Divisional Audit.
	Safeguarding	
	<p>Adult Protection Bill</p> <p>Adult safeguarding continues to be managed within the core teams with sufficient numbers of IO and DAPO to ensure the protection needs of adults at risk are managed in an effective way. The Trust notes that the increased role of social work within the Adult Protection Bill will require increased resource to maintain this within community teams.</p>	<p>Adult Protection Bill</p> <p>The Implementation of the Adult Protection Bill will impact on workforce planning, with regard to recruitment and retention of Band 7 specialist staff. The Trust anticipates resource and training implications for Mental Health given the role of the B7 Social Worker within this service, who are required to undertake ASW training. It is noted social work staff will require specialist training in the legal powers relating to the Adult Protection Bill and in the discharge of statutory functions, to ensure effective social work in adult protection within the new legislation. A dedicated resource will be required to manage this additionality, to support ASW Band 7 Social Work staff required to also undertake the Social Work role in Adult Safeguarding investigations.</p>



Key:
 RED: NON-DESIGNATED POST
 BLACK: SOCIAL WORK POST
 SW: SOCIAL WORK
 ASM: ASSISTANT SERVICE MANAGER
 NEW POST



CAIT Crisis Assessment Intervention Team
 YPC Young Peoples Centre Team (14-18)
 CFC Child and Family Team (0-13)
 PMHT Primary Mental Health Team
 Central Point Assessment teams
 KOI, Knowing Our Identity (Gender service)
 DAMHS, Drug and Alcohol Mental Health Service
 EDYS, Eating Disorder Youth Service

Key:
BLACK: DESIGNATED SW POST
RED: NON-DESIGNATED SW POST

DATA RETURN 1
Mental Health and CAMHS

1 GENERAL PROVISIONS			
		<65	65+
1.1	How many adults were referred for assessment of social work or social care need during the period?	4760	N/A
1.2	Of those reported at 1.1 how many adults commenced receipt of social work or social care services during the period?	2909	N/A
1.3	How many adults are in receipt of social work or social care services at 31 st March? <i>Note: the number of adults on open caseloads of social work or social care services and aged 18+.</i>	1485	N/A
1.3a	How many adults are in receipt of social work support only at 31 st March (not reported at 1.4)? <i>Note: the number of adults on open caseloads of social workers aged 18+.</i>	1131	N/A
1.4	How many care packages are in place on 31 st March in the following categories: Note: stats for adult mental health are not broken down by age therefore only one return for under 65yrs		
	i. Residential Home Care (Source: DoH return) Trusts to provide figures as normal, as age breakdown required, however please <u>attach return</u> should further quality assurance be required. * includes 6 self funding service users	*58	N/A
	ii. Nursing Home Care (Source: DoH return) Trusts to provide figures as normal, as age breakdown required, however please <u>attach return</u> should further quality assurance be required.	158	N/A
	iii. Domiciliary Care	173	N/A
	iv. Domiciliary Non Care Managed	0	N/A
	v. Supported Living	173	N/A
vi. Shared Lives – Number of Adult Family Placements (long term placement) To note: work is ongoing with Trusts to agree definitions and minimum dataset for Shared Lives for future reporting.	N/A	N/A	
1.4a	For all those listed above in 1.4 provide assurance that the Care Management process is being applied in accordance with the DHSSPS Care Management HSC ECCU/1/2010 Circular and the subsequent update within Circular HSC (ECCU) 1/2021.	YES	N/A

	YES <i>If no, please explain</i>		
1.4b	Annual Reviews – Please provide assurances to the Commissioner that there is professional social work oversight of the Annual Review process in your Trust During this reporting period the Trust reports that reviews are undertaken by professional staff only.		N/A
1.5	Number of adults provided with a Short Break during the period.	<i>PSSID return</i>	<i>PSSID return</i>
1.5b	Shared Lives – Overnight Stays To note: work is ongoing with Trusts to agree definitions and minimum dataset for Shared Lives for future reporting.	X	X
1.6	Number of adults known to the Programme of Care in receipt of Centre based Day Care		
	- Statutory sector	153	N/A
	- Independent sector	0	N/A
1.6a	Number of adults known to the Programme of Care in receipt of Day Opportunities	330	N/A
1.6b	Shared Lives – Day Support To note: work is ongoing with Trusts to agree definitions and minimum dataset for Shared Lives for future reporting.	X	X
1.7	Of those at 1.6 how many are dementia (EMI)	N/A	N/A
	- Statutory sector	X	X
	- Independent sector	X	X
1.8	This is intentionally blank		
1.9	How many of this Programme of Care clients are in HSC Trust funded social care placements outside Northern Ireland?	5	N/A
1.10	Annual Reviews – work to commence in 2024/25 to develop regionally agreed definitions and minimum dataset.	X	X
1.11	Unallocated Cases – work to commence in 2024/25 to develop regionally agreed definitions and minimum dataset.	X	X
1.12	Vacancies (Adults) – work to commence in 2024/25 to develop regionally agreed definitions and minimum dataset.	X	X

DATA RETURN 1

No Longer Required

1 GENERAL PROVISIONS - HOSPITAL				
		<18	18-65	65+
1.1	How many adults or children were referred to Hospital Social Workers for assessment during the period?	0	0	0
1.2	Of those reported at 1.1 how many assessments of need were undertaken during the period?	0	0	0
1.3	How many adults or children are on Hospital Social Workers caseloads at 31st March?	0	0	0

Age is at date of referral for 1.1 and 1.2

Age at 31st March for 1.3

**DATA RETURN 1 – Acute Hospital (general setting)
Mental Health and CAMHS**

1 GENERAL PROVISIONS – ACUTE HOSPITAL (GENERAL SETTING) Includes Acute mental health inpatient centre, Shannon Clinic and Clare Ward, Beechcroft				
		<18	18-65	65+
1.1	How many adults or children were referred to Hospital Social Workers for assessment during the period?	51	276	N/A
1.2	Of those reported at 1.1 how many assessments of need were undertaken during the period? (assessment is to include screening). Please note it is expected that the response for sections 1.1 & 1.2 will be the same	51	276	N/A
1.3	How many adults or children are on Hospital Social Workers caseloads at 31 st March?	16	79	N/A
	<i>Age is at date of referral for 1.1 and 1.2 Age at 31st March for 1.3</i>			

DATA RETURN 2
Mental Health and CAMHS

2 CHRONICALLY SICK AND DISABLED PERSONS			
(NI) ACT 1978;			
Note figures below refer to the numbers as of the 31st March 2024			
		<65	65+
2.1	Details of patients less than 65 in hospital for long term (>3months) care who are being treated in hospital ward for over 65 (no longer required)	x	x
2.2	Number of adults known to the Programme of Care who are:		
	Certified severely sight impaired (Blind)	4	X
	Certified severely sight impaired (Partially sighted)	30	X
	Sight Loss	X	X
2.3	Number of adults known to the Programme of Care who are:		
	Profoundly Deaf sign language users	8	X
	Profoundly Deaf Oral / Lip Readers	8	X
	Hard of hearing	9	X
	Tinnitus (New) Not collated within the Programme	X	X
2.4	Number of adults known to the Programme of Care who are:		
	Deaf Blind	0	X

DATA RETURN 3
Mental Health and CAMHS

3 DISABLED PERSONS (NI) ACT 1989		
<i>Note: 'disabled people' includes individuals with physical disability, sensory impairment, learning disability</i>		
3.1	Number of referrals to Physical/Learning/Sensory Disability during the reporting period.	26
	Number of Disabled people known as at 31 st March. <i>Note: adults with a physical disability on the caseload of social workers.</i>	29
3.2	Number of assessments of need carried out during period end 31 st March.	N/A
3.3	Number of assessments undertaken of disabled children ceasing full time education.	N/A

DATA RETURN 4
Mental Health and CAMHS

4 HEALTH AND PERSONAL SOCIAL SERVICES (NI) ORDER 1972;
Article 15, Article 36 [as amended by Registered Homes (NI) Order 1992]

4.1	Number of Article 15 (HPSS Order) Payments	200 (transactions)
	Total expenditure for the above payments	£9,754
4.2	Number of TRUST FUNDED people in residential care	52
4.3	Number of TRUST FUNDED people in nursing care	149
4.4	How many clients are in receipt of £100 free nursing care allowance? (this refers only to self-funding clients and excludes Trust funded places)	9

DATA RETURN 5
Mental Health and CAMHS

5 CARERS AND DIRECT PAYMENTS ACT 2002

		16-17	18-64	65+
5.1	Number of adult carers offered individual carers assessments during the period	X	983 MH 127 CAMHS	N/A
5.2	Number of adult individual carers assessments completed during the period	X	586 MH 126 CAMHS	N/A
5.2a	Number of adult individual carers assessments declined during the period and the reasons why Reasons assessment declined; <ul style="list-style-type: none"> - The carer does not wish to discuss. - The carer does not see themselves as a carer. - - The carer feels that they do not need any support/ additional support. 	X	276 MH 1 CAMHS	N/A
	To note with moving to a single source of reporting via SPPG PSSID return for Carers Assessments, carers reassessments offered, accepted and declined will also be available – this will be sourced from existing returns.	X	X	X
5.2b	Number of Adults waiting on a Carers assessment at 31 st March - work to commence in 2024/25 to develop regionally agreed definitions and minimum dataset.	X	X	X
5.3	Of the total at 5.2 in how many of the assessments were the carers, caring for disabled children?	N/A	N/A	X
5.4	Number of adult carers receiving a service @ 31 st March	126	536	N/A
5.5	Number of young carers offered individual carers assessments during the period.		20 MH 1 CAMHS	

5.6	Number of young carers assessments completed during the period.	14 MH 1CAMHS
5.7	Number of young carers receiving a service @ 31 st March	12 MH 1 CAMHS
5.8	(a) Number of requests for direct payments during the period 1 st April – 31 st March	2
	(b) Number of new approvals for direct payments during the period 1 st April – 31 st March	2
	(c) Number of adults receiving direct payments @ 31 st March <ul style="list-style-type: none"> Return is 41 however the Trust reports that 10 cases are currently suspended/ in process of closure, so that 31 DP cases are active at present. 	*41
5.9	Number of children receiving direct payments @ 31 st March	N/A
5.9.a	Of those at 5.8 how many of these direct payments are being managed by another person acting on behalf of the service user?	0
5.10	Number of carers receiving direct payments @ 31 st March	2
5.11	Number of one off Carers Grants made in-year.	650 MH 100 CAMHS
Note: sections 5.8, 5.9 and 5.10 are to be reported as mutually exclusive.		

DATA RETURN 6
Mental Health and CAMHS

6 SAFEGUARDING ADULTS

6.1	Number of adult protection referrals within the period	SPPG to collect from PSSID
6.2	Number of adult protection referrals within the period broken down by the following categories of abuse: (a) Financial (b) Institutional (c) Neglect (d) Physical (e) Psychological/ Emotional (f) Sexual (g) Exploitation	SPPG to collect from PSSID
6.3	Number of investigations commenced within the period	SPPG to collect from PSSID
6.4	Number of cases closed to adults in need of protection within the period	230
6.5	Number of protection plans commenced within the period	SPPG to collect from PSSID
6.6	Number of care and protection plans in place on 31st March	Not required

PLEASE ENSURE A SEPARATE RETURN IS COMPLETED FOR EACH PROGRAMME

**DATA RETURN 9
Mental Health and CAMHS**

9 The Mental Health (NI) Order 1986
Article 4 (4) (b) Article 5 (1) Article 5 (6) Article 18(5) Article 18(6) Article 115

Admission for Assessment Process Article 4 and 5		TRUST ASW	RESWS ASW												
9.1	<p>Total Number of Assessments made by ASWs under the MHO</p> <table border="1" style="width:100%; border-collapse: collapse; margin-bottom: 10px;"> <tr> <td align="center">POC</td> <td align="center">2023/2024</td> </tr> <tr> <td>Mental Health</td> <td align="center">243</td> </tr> <tr> <td>Intellectual Disability</td> <td align="center">15</td> </tr> <tr> <td>Older Persons Services</td> <td align="center">19</td> </tr> <tr> <td>CAMHS</td> <td align="center">21</td> </tr> <tr> <td>Total</td> <td align="center">298</td> </tr> </table> <p>The Trust received 578 referrals for assessment under MHO. Of these, 298 assessments were made which is a 12% reduction compared to the last period.</p> <p>194 of these cases were No Further Action, compared to 124 last year. Increase is in relation to a variety of factors.35 referrals this year did not proceed within Daytime Service due to directions given by Trade Union in relation to Action Short Of Strike (July 2023-current). Referrals were signposted to RESWS for action (as after 4pm or as no ASW available to take additional referral) although in some cases where the referral was urgent, the practitioner continued to respond despite directions, in best interest of the service user). Other pressures contributing to NFA includes PSNI not available to assist with warrant or GP not available to after 6pm.</p> <p>51 of the 578 referrals were referrals received for handover for conveyance from RESWS.</p>	POC	2023/2024	Mental Health	243	Intellectual Disability	15	Older Persons Services	19	CAMHS	21	Total	298	298	N/A
POC	2023/2024														
Mental Health	243														
Intellectual Disability	15														
Older Persons Services	19														
CAMHS	21														
Total	298														
9.1.a	<p>Of these how many resulted in an application being made by an ASW under (Article 5.1b)</p> <table border="1" style="width:100%; border-collapse: collapse; margin-bottom: 10px;"> <tr> <td align="center">POC</td> <td align="center">2023/2024</td> </tr> <tr> <td>Mental Health</td> <td align="center">179</td> </tr> <tr> <td>Intellectual Disability</td> <td align="center">12</td> </tr> <tr> <td>Older Persons Services</td> <td align="center">16</td> </tr> <tr> <td>CAMHS</td> <td align="center">18</td> </tr> <tr> <td>Total</td> <td align="center">225</td> </tr> </table> <p>No of Voluntary Care plans : 19 No of Alternative care plans : 54</p>	POC	2023/2024	Mental Health	179	Intellectual Disability	12	Older Persons Services	16	CAMHS	18	Total	225	225	N/A
POC	2023/2024														
Mental Health	179														
Intellectual Disability	12														
Older Persons Services	16														
CAMHS	18														
Total	225														

9.1.b	How many assessments required the input of a second ASW (Article 5.4a)	2	N/A
9.1.c	Number of applications made by the nearest relative (Article 5.1.a)	0	
9.1.d	Can the Trust provide assurance that they are meeting their duties under Article 117.1 to take all practical steps to inform the nearest relative at least 7 days prior to discharge. YES <i>If no, please explain</i>	YES	

Use of Doctors Holding Powers (Article 7)

9.2	How many times did a hospital doctor use holding powers?	86												
	<table border="1"> <tr> <td>POC</td> <td>2023/2024</td> </tr> <tr> <td>Mental Health</td> <td>73</td> </tr> <tr> <td>Intellectual Disability</td> <td>0</td> </tr> <tr> <td>Older Persons Services</td> <td>7</td> </tr> <tr> <td>CAMHS</td> <td>6</td> </tr> <tr> <td>Total</td> <td>86</td> </tr> </table>	POC	2023/2024	Mental Health	73	Intellectual Disability	0	Older Persons Services	7	CAMHS	6	Total	86	
POC	2023/2024													
Mental Health	73													
Intellectual Disability	0													
Older Persons Services	7													
CAMHS	6													
Total	86													
9.2a	Of these, how many resulted in an application being made?	67												
	<table border="1"> <tr> <td>POC</td> <td>2023/2024</td> </tr> <tr> <td>Mental Health</td> <td>4</td> </tr> <tr> <td>Intellectual Disability</td> <td>55</td> </tr> <tr> <td>Older Persons Services</td> <td>0</td> </tr> <tr> <td>CAMHS</td> <td>6</td> </tr> <tr> <td>Total</td> <td>67</td> </tr> </table>	POC	2023/2024	Mental Health	4	Intellectual Disability	55	Older Persons Services	0	CAMHS	6	Total	67	
POC	2023/2024													
Mental Health	4													
Intellectual Disability	55													
Older Persons Services	0													
CAMHS	6													
Total	67													

ASW Applicant reports

9.3	Number of ASW applicant reports completed	298												
	<table border="1"> <tr> <td>POC</td> <td>2023/2024</td> </tr> <tr> <td>Mental Health</td> <td>243</td> </tr> <tr> <td>Intellectual Disability</td> <td>15</td> </tr> <tr> <td>Older Persons Services</td> <td>19</td> </tr> <tr> <td>CAMHS</td> <td>21</td> </tr> <tr> <td>Total</td> <td>298</td> </tr> </table>	POC	2023/2024	Mental Health	243	Intellectual Disability	15	Older Persons Services	19	CAMHS	21	Total	298	
POC	2023/2024													
Mental Health	243													
Intellectual Disability	15													
Older Persons Services	19													
CAMHS	21													
Total	298													
9.3.a	Confirm if these reports were completed within 5 working days	NO												

	<p>NO</p> <p><i>If no, please explain</i></p> <p>There were 32/298 (10%) reports not completed within 5 working days. This is an increase (16) from previous reporting period 1st April 2022-31st March 2023. The reasons for this are as follows;</p> <ol style="list-style-type: none"> 1. Work Pressures, Sick Leave and Annual Leave. 2. Impact of Action Short of Strike (ASOS) by Unions which began in July 2023 – current. 28/32 late reports during ASOS. <p>Action Short Of Strike (ASOS) impacted because;</p> <ul style="list-style-type: none"> - Reduced ASW's available on the rota due to completing only 1 ASW assessment per day, cut of at 4pm for referrals to be actioned, need for 2 ASW's for all community assessments. - ASW's in management roles took on additional assessments to supplement the rota resulting in additional unplanned workload impacting on completion of reports within 5 working days. - Bank ASW's tended to be first on rota on consecutive days which prevented them from completing the Mental Health Order (form B) report (MHOB) the next day, resulting in a backlog of reports to complete. This has now be changed to allow more admin time to complete reports. <p>See Action Plan Section 2 regarding actions to address increase in reports not completed within 5 day timeframe.</p>	
--	---	--

Social Circumstances Reports (Article 5.6)		
9.4	Total number of Social Circumstances reports completed. <i>This should equate to number given at 9.1c. If it does not please provide an explanation.</i>	0
9.4.a	Confirm if these reports were completed within 14 days? YES / NO If no, please explain	N/A

Mental Health Review Tribunal		
9.5	Number of applications to MHRT in relation to detained patients 3 patients were under 18yrs at the time of application to the MHRT. <ul style="list-style-type: none"> - One patient withdrew her application prior to tribunal being held. - One was an automatic tribunal due to patient being under 16 yrs and having been detained for one year - One patient applied to MHRT 3 weeks before their 18th birthday and turned 18yrs during the process. The hearing took place after the patient had transferred to an adult inpatient unit. 	3 CAMHS 78 MH TOTAL: 81

Guardianships (Article 18)		
9.6	Number of Guardianships in place in Trust at period end	4
9.6.a	New applications for Guardianship during period (Article 19 (1))	0
9.6.b	How many of these were transfers from detention (Article 28 (5) (b))	1
9.6.c	How many were Guardianship Orders made by Court (Article 44)	0
9.6.d	Number of new Guardianships accepted during the period (Article 22 (1))	0
9.6.e	Number of Guardianships renewed during the reporting period (Article 23)	4
9.6.f	Number of Guardianships accepted by a nominated other person	0
9.6.g	Number of MHR hearings in respect of people in Guardianship (provide total number)	3
9.6.h	Total number of Discharges from Guardianship during the reporting period (Article 24)	0
	Discharges as a result of an agreed multi-disciplinary care plan	0
	Lapsed	0
	Discharged by MHRT	0
	Discharged by Nearest Relative	0
	Total	0

Approved Social Worker (ASW) Register		
9.7	Number of newly appointed Approved Social Workers during period 3 deferrals on ASW Programme during reporting period - (6 in total currently deferred due to pregnancy (3), and social circumstances (3)).	6
9.7.a	Number of Approved Social Workers removed during period There were also 3 staff promoted to management roles which has reduced their frequency on the ASW daytime rota.	2
9.7.b	Number of Approved Social Workers at period end (who have fulfilled requirements consistent with quality standards) ASW numbers have increased during the period by 9 staff (23%) due to increased ASW's being trained each year and the addition of 2 full time ASW's (commencing post April 2024), as well as 3 bank staff providing 10-13 shifts per month.	38
9.7c	Please provide assurance of HSCT progress in relation to implementation of the ASW Quality Standards 2021. Please include progress as per standards on; <ul style="list-style-type: none"> Workforce Planning and Management <ol style="list-style-type: none"> Yearly interview and recruitment process for nominations to the ASW programme with focus on representation by other programmes of care. 	

	<ul style="list-style-type: none"> • All ASW's have access to 1-1/group supervision. An annual audit is completed of ASW supervision compliance to ensure the Trust are meeting the ASW Quality Standard of individual ASW supervision every 4 months. The Trust notes that within this reporting period ASW staff have received above the recommended requirement of supervision support. In addition ASW supervision compliance is monitored through the supervision tracker in place in the service. <ol style="list-style-type: none"> 2. Workforce planning is reviewed via the Trust Regional ASW Quality Standards Action Plan with 3 additional places being funded by the Trust per year for daytime services. However increased funding required to meet minimum target identified by DoH of 41 ASW's by 2026. 3. 2 full time ASW's recruited to the daytime rota commenced post 1st April 2024. 4. Continued use of bank ASW staff to bolster rota to ensure ASW's work no more than 10% on the rota. <ul style="list-style-type: none"> • ASW Governance <ol style="list-style-type: none"> 1. Service user feedback project in AMHIC October 22-23 – review being completed with learning to be shared with the Trust. Service user feedback extremely positive in relation to the ASW role. • ASW Training <ol style="list-style-type: none"> 1. ASW's complete mandatory re-approval training every 3 years. The Trust tracks compliance with a dashboard to ensure that re-approval is in place. This was audited within the reporting year (see Programme of Care summary 2.5) 2. Reflective practice groups provided by the MCA team to bolster knowledge and share learning in relation to the Review Tribunals and Trust panels. 3. Learning shared at ASW forums. • ASW Supervision and Supports <ol style="list-style-type: none"> 1. ASW Hub – (ASW's are co-located when on the rota). 2. Daily ASW Monday to Friday 9-9pm. 3. Annual ASW Appreciation Day. 4. Psychological model of support available – debriefing, 1-1 psychology sessions. 5. 1-1/group ASW supervision. 6. Bi-monthly ASW forum. 	
--	---	--

9.8	<p>Do any of the returns for detention and Guardianship in this section relate to an individual who was under 18 years old? If yes, please provide number and advise on any issues presenting</p> <p>21 young people under 18 yrs were assessed under the MHO, 17 of which were detained. This number reflects 16 young people, with 1 young person detained twice.</p> <p>The Trust notes that there has been delay on occasion in admitting children and young people detained under MHO and requiring support in Beechcroft. Reasons include staff vacancies, consequence of delayed discharge, for example, to adult services in another Trust area; delayed discharge to low secure support and also young people awaiting secure accommodation. On these occasions steps were taken regionally to admit children and young people to generic children's wards or support the child in place of safety. SPPG are fully appraised on these occasions and the Mental Health Services Collective Leadership Team meet regularly with SPPG to address issues. The Trust can confirm early alerts are completed on each occasion.</p>
-----	---

9.9	How many times during the reporting period has the Trust notified the Office of Care and Protection under Article 107? Please advise of any issues. There is a backlog in referrals to OCP due to; a) Backlog in OCP ability to process applications (4 current applications pending) b) Limited availability of RMO to undertake financial capacity assessments. There are currently service users waiting on assessment (9 financial capacity assessments required). All service users who are waiting on assessment have a care plan in place to support them with finance management in the interim.	10
-----	---	----

The Mental Health Order (NI) 1986 as amended by The Criminal Justice (NI) Order 1996. Article 50A(6) Schedule 2A Supervision and Treatment Orders.		
9.10	Number of supervision and treatment orders, (where a Trust social worker is the supervising officer) in force at the 31 st March	0
9.11	Of the Total shown at 9.10 how many have their treatment required as:	N/A
	(a) Treatment as an in-patient	
	(b) Treatment as an out patient	
	(c) Treatment by a specified medical practitioner	
9.12	Of the total shown at 9.10 how many include requirements as to the residence of the supervised person (excluding in-patients)	0
9.13	Of the total shown at 9.10 how many of these supervision and treatment orders were made during the reporting period. Please advise of any issues presenting	0

9 The Mental Capacity (NI) Act, 2016

Panel Applications (during the year) (to be collected from 2022/23 onwards)		
9.14	Total number of Trust Panel Applications	SPPG will source from DoH MCA team
9.15	Number of Interim Authorisations	SPPG will source from DoH MCA team
9.16	Number of Full Authorisations	SPPG will source from DoH MCA team
9.17	Number where work has started but not completed	SPPG will source

		from DoH MCA team
9.18	Total number of cases not yet referred to Attorney General	SPPG will source from DoH MCA team
9.19	Do you have sufficient numbers of staff to carry out TP Formal Assessments of Capacity (Form 1)? Yes / No If no, please provide brief explanation of action taken	Yes
9.20	Do you have sufficient numbers of staff to make TP Best Interests determination (Form 2)? Yes / No If no, please provide brief explanation of action taken	Yes
9.21	Do you have sufficient numbers of medical practitioners to complete TP medical reports (Form 6)? Yes / No If no, please provide brief explanation of action taken	Yes

Trust Panels <i>(to be collected from 2022/23 onwards)</i>		
9.22	Do you have sufficient numbers of Trust Panel members to cover first applications (Form 5)? Yes / No If no, please provide brief explanation of action taken	Yes
9.23	Do you have sufficient number of Trust Panel members to cover Trust Panel Extension applications (Form 16)? Yes / No If no, please provide brief explanation of action taken	Yes

Extensions <i>(to be collected from 2022/23 onwards)</i>		
9.24	Total number of Extension Authorisations (during the year)	SPPG will source from DoH MCA team
9.25	Number referred to RT	SPPG will source from DoH MCA team
9.26	Number Not referred to RT	SPPG will

		source from DoH MCA team
9.27	Number of Cases outstanding	SPPG will source from DoH MCA team
9.28	<p>Do you have sufficient number of staff suitably qualified to make responsible person statements (Form 15)? Yes / No</p> <p>If no, please provide brief explanation of action taken</p> <p><u>Trust Panel Extension Authorisations</u> The Code of Practice 13.18 highlights the criteria for undertaking a Form 15:</p> <p><i>The responsible person must be suitably qualified to make a formal assessment of capacity, although they must not be the person who has made the formal assessment of capacity in this particular case. The person must also be:</i></p> <p><i>a. an approved social worker who is involved in the care or treatment of P if the care and treatment where the approved social worker is involved is relevant to the measure sought; or</i></p> <p><i>b. a person designated by the managing authority in the hospital or care home where P is an in-patient or resident or by the Trust in the area where P is deprived of liberty.</i></p> <p>Due to ongoing challenges with the Approved Social Work workforce and having adequate numbers to undertake crisis work under the Mental Health (Northern Ireland) Order 1986, Belfast Trust have utilised b as per above – with assurances that this work is always undertaken by a staff member who is a minimum of Band 7 in a Senior Practitioner position. Where an Approved Social Worker has been available, they have been utilised.</p> <p>Ongoing efforts will be made to seek funding longer term for recruitment of additional Approved Social Work staff.</p>	Yes
9.29	<p>Do You have Sufficient number of staff to carry out TP Extension Formal Assessments of Capacity (Form 1): Yes / No</p> <p>If no, please provide brief explanation of action taken</p>	Yes
9.30	<p>Do you have sufficient number of staff to make TP Extension Best Interests determination (Form 2)? Yes / No</p> <p>If no, please provide brief explanation of action taken</p>	Yes

Short Term Detention Authorisations <i>(to be collected from 2022/23 onwards)</i>		
9.31	Work started but not completed (during the year)	SPPG will source from DoH MCA team
9.32	Total Number of short term detention authorisations.	SPPG will source from DoH MCA team
9.33	Do you have sufficient numbers of staff to carry out STD Formal Assessments of Capacity (Form 1)? Yes / No If no, please provide brief explanation of action taken	Yes
9.34	Do you have sufficient number of staff to make STD Best Interests determination (Form 2)? Yes / No If no, please provide brief explanation of action taken	Yes
9.35	Do you have sufficient numbers of medical practitioners to complete STD medical reports (Form 6)? Yes / No If no, please provide brief explanation of action taken	Yes
9.36	Do you have sufficient number of ASWs and appropriate healthcare professionals to authorise STDs (Form 8)? Yes / No If no, please provide brief explanation of action taken	Yes

Live Cases (during the year) <i>(to be collected from 2022/23 onwards)</i>		
9.37	Total No. Live Trust Panel / Extension Authorisations	SPPG will source from DoH MCA team
9.38	Total No. Live Short Term Detention Authorisations	SPPG will source from DoH MCA team

Training (to be collected from 2022/23 onwards)		
9.39	Do you have sufficient number of staff trained to operate DoLS? Yes / No If no, please provide brief explanation of action taken	Yes

Trust Panels (to be collected from 2022/23 onwards)		
9.40	Do you have sufficient number of Trust Panel members to cover first applications (Form 5)? Yes / No If no, please provide brief explanation of action taken	Yes
9.41	Do you have sufficient number of Trust Panel members to cover Trust? Yes / No If no, please provide brief explanation of action taken	Yes

Rule 6 reports and participation at hearings when required (to be collected from 2022/23 onwards)		
9.42	Do you have sufficient number of staff to meet the Review Tribunal deadlines for Rule 6 requests? Yes / No If no, please provide brief explanation of action taken	Yes
9.43	(Section 3) MCA section 50 – Do you have sufficient number of staff to ensure all one year extensions are referred to the Attorney General? Yes / No If no, please provide brief explanation of action taken	Yes
9.44	Can you confirm that you have authorisations in place for those people who require one or more emergency provisions are in place and clearly recorded? Yes / No If no, please provide brief explanation of action taken	Yes

Please outline any other risks or issues with regard to compliance with the Mental Capacity Act?	
<p>Section 12</p> <p>The Trust has sought 2 Declaratory Orders for patients who are subject to Deprivation of Liberty Safeguards (DoLS) and have a Trust Panel Authorisation (TPA) for same, but whose care plans include restraint / other restrictions / interventions, as this is not currently enacted under the Mental Capacity Act (Northern Ireland) 2016 (the Act).</p> <p>The Department of Health have agreed to implement Section 12 of the Act in order to address these challenges. Work is ongoing in the Department regarding implementation of this aspect of the Act which will address the need for consideration of Declaratory Order application where care plans need to consider the use of restraint to safeguard patients or others.</p>	

**ADULT COMMUNITY & OLDER PEOPLES
SERVICE**

2. PROGRAMME OF CARE SUMMARY

Adult Community and Older People's Services - Adult Social Work Services, Community Nursing and Intermediate Care Services & Adult Social Care and Community MDTs

2.1 Named Officer responsible for professional Social Work Accountability Arrangements - Please provide a copy of your Organisational Structure from Assistant Director to Band 7 Staff and highlight any changes from last year (2022/23).

Highlight any vacancies and the action taken to recruit against these.

Within this reporting period the Directorate for Adult Community and Older People's Service has reconfigured service delivery for Social Work and now comprises of 2 Divisions.

1) Adult Social Work Services, Community Nursing and Intermediate Care Services

From April 23- Oct 23 Pam Borland was employed as the Divisional Social Worker (Interim) and was the named professional officer for social work within this Division. Janine Gordon was appointed to the role of Divisional Social Worker in October 2023 and is the named professional officer for social work and social care in Adult Social Work Services, Intermediate Care Services and Acute Hospital Social Work Services.

2) Adult Social Care & Community MDTs

Grace Reihill was appointed Divisional Social Worker in August 2023 and is the named professional officer for social work and social care in ACOPS Division of Adult Social Care and Community MDT's (Encompassing Community Mental Health Services for Older People, Adult Protection Gateway Service, Physical and Sensory Disability Services, Commissioned Services Care Home Placement Team (formerly CREST), Connected Community Care, Primary MDT Social Work Service and Homecare Services). Prior to this appointment Fiona Rowan was employed as Divisional Social Worker (Interim) from April 23- Aug 23 and was named professional officer for social work within this Division.

The Interim Director of Adult Community and Older People's Services, (Colin McMullan) is supported by the Collective Leadership Teams for each of the divisions and has the responsibility and accountability for the operational delivery of statutory functions by the Directorate. Each collective leadership team consists of a Co-Director, Chair of Division, Divisional Social Worker and Divisional Nurse. Prior to the appointment of Colin McMullan this post was held by Gillian Traub.

There remains an unbroken line of professional accountability for social work, from the individual social work practitioner to the Divisional Social Worker and through to the EDSW of Social Work, who reports to the Chief Executive and to the Trust Board.

Please see organisational structure on page 53.

Vacancies:**Division: ACOPS Adult Social Work Services, Community Nursing and Intermediate Care Services and ACOPS Adult Social Care and Community MDTs**

Staff Band	Cover Arrangements
X1 Band 8a – Acute (RVH)	Within Service – recruitment ongoing
X1 Band 8a - APGT	Vacant post – EOI is being progressed
X1 Band 7 – Intermediate Care	Within Service – recruitment ongoing
X1 Band 7 – Community Social Work	Cover via EOI
X1 Band 7-Palliative Care and Oncology Team	Cover via EOI
X2 Band 7 - Care Home Placement Team (CHPT) – senior practitioner	Both posts are currently filled via Expression of Interest and recruitment process is on-going.
X1 Band 7 - Community Mental Health Team for Older People – DAPO post.	Expression of Interest is being progressed and the post will be permanently recruited.

2.2 Please highlight key Social Work Workforce planning issues, including recruitment, retention and professional roles.**Provide a summary regarding the detail and level of vacancies and any vacancy control systems in place.**

The Trust recognises the importance of retaining staff in the provision of timely, safe and effective care. The regional deficit in supply of Social Workers regionally continues to create issues for recruitment. Workforce remains a key priority for the Trust and the EDSW Office chairs a Recruitment Retention Strategic Group within the Trust and contributes to the Department of Health work streams. During this reporting period the Trust have focused on the retention of social work staff, implementing learning from exit interviews and developing a rolling action plan via the 'Valuing Social Work' work stream which has a focus on staff well-being. Four work streams are progressing action plans in relation to Capacity, Staff Experience, Leadership and creating an Open and Just Culture. During this reporting period there has been a focus on reducing temporary posts and EOIs and stabilising the workforce with permanent posts at all levels within the structure. A bank for band 6 social workers has been created which has enabled the Trust to cease all use of recruitment agencies as directed by the DOH but has brought limited additional supply to the workforce. The Trust are also seeking to introduce a Band 6 Transfer Policy to improve retention.

The vacancies at Band 5/6 across the Divisions are detailed in the table below, some posts are filled on a temporary/EOI basis.

Band	Number of WTE Vacancies	
Band 5 / 6	2	Community Mental Health Team for Older People
	0.5	Palliative Care and Oncology Team
	3.5	Hospital Social Work (HSW)
	2	Intermediate Care
	11	Community Social Work

All posts to be matched and hopefully appointed to via current ongoing regional recruitment. The Trust however acknowledges the difficulties in reducing vacancy due to current work force constraints across the region.

2.3 Supervision arrangements for social workers

Please confirm that the Trust is fully compliant with the Regional Supervision Framework

No

The compliance rate of professional social work supervision has a range of 66%-87% across service areas, with an average over the reporting period of 73%.

Full compliance with supervision standards is an area of challenge within Hospital, Intermediate Care and Community social work teams due to work pressures and staff absence. Arrangements are in place to monitor compliance with the Regional Supervision Framework via monthly exception reporting. This provides an early alert to risk of non-compliance and improves governance and oversight.

Within this reporting period a monthly escalation process to the Divisional Social Worker has commenced, to advise of any issues with completion of staff supervision and any need for further support to ensure compliance and implement contingency arrangements. Supervision compliance is analysed and discussed as part of monthly divisional senior leaders' assurance meetings. Further awareness training on the new DOH policy is also planned to help improve compliance.

2.4 Please provide an update on the robustness of the data provided in this report and any data assurances processes in relation to it.

(This may include reference to electronic or manual data sources and any data gaps and work with Encompass).

The Trust provides assurance that all data contained in this report is accurate and subject to scrutiny through three lines of assurance within the Trusts Integrated Governance and Assurance Framework. Data is

interrogated through bi- monthly Social Work Senior Leaders Assurance Group, monthly Divisional Governance meetings and the Social Care Steering Group.

Collection of data is undertaken by the Trust's Business Support Unit (BSU) and validated by individual service managers and the Collective Leadership Team. There is a process for continuous improvement around collection of data to ensure accuracy in reporting. The Trust's PARIS information system is the main source of data for delegated statutory function reporting.

The service continue to improve the accuracy of data collection in the comprehensive monthly service report for carer's assessments offered and declined. Work continues with staff to ensure these are recorded on Paris and are now included in Standard Operating Procedures.

Community Social Work has developed a service user database (SUD), to provide additional assurances in regard to data accuracy. This information is available and validated at team level.

The Trust has been working with the SPPG in relation to data variance in delegated statutory functions reporting and ensuring accuracy and consistency of data collection across the region. The introduction of Encompass will impact processes for data collation and the effectiveness of this will be kept under review following implementation

2.5 Programme of Care to advise of numbers of any significant judgements and/or decisions derived from Serious Adverse Incidents, Case Management Reviews, Mental Health Review Tribunals, Judicial Reviews, Audits or RQIA Inspection and/or Review activity *completed* during the reporting period, that directly relates to the Trusts discharge of their statutory functions.

	<i>Number</i>
Serious Adverse Incidents	9
Domestic Homicide Reviews	0
Case Management Reviews	0
Mental Health Review Tribunals	1
Judicial Reviews	1
Audits	6
RQIA Inspections	7
RQIA Enforcement notices – Failure To Comply Notices	0

Please provide details of any particular recommendations or learning that the Trust would wish to highlight.

Judicial Review – Continuing Health Care:

The Trust was subject to a Judicial Review within this reporting period in relation to Continuing Health Care (CHC). Historically the Trust position has maintained CHC is applicable in hospital/hospice settings and outside of these arrangements normal charging rules applied. In 2021 the Department of Health (DoH) also took this view and introduced the single criteria for CHC. The litigant in this Judicial Review challenged the narrow definition of CHC as outlined by the DoH. The Court returned a verdict in favour of the litigant (with full Judgement issued in September 2023). The Trust was required to reassess the service user and the English model of assessment was used. The Trust awaits guidance from the DoH and in the interim retains data in relation to service users who request assessment for CHC.

SAI - BHSCT/SAI/22/049 (completed December 2023):

Learning from this SAI noted there should be a regular review of the provision of services by multiple agencies for service users with a complex history, to ensure an integrated approach. This includes;

- When a service user is transferred to prison Community Social Work services should anticipate the individual’s release and plan for their care provision in a timely manner. This requires better liaison between Community Social Work, PSNI, PPANI and HMP.
- Adult Safeguarding Teams should confirm the details of any individual referred before commencing an investigation to ensure the appropriateness of investigating team.
- Uniformity of governance paperwork across all Health & Social Care Trusts would provide a more robust system as service users often have placements commissioned by multiple Health & Social Care Trusts.

BSO – Internal Audit – Management of client monies in Independent Sector Care Homes May 2023

Eight of nine facilities audited evidenced a satisfactory level of assurance in the management of client monies. One of the nine facilities had limited assurance.

The Trust has developed an action plan to address the recommendations from this audit and progress with audit recommendations is regularly reviewed.

Social Work and Social Care Induction Audit

Trust audit in December 2023 for 2nd line assurance in relation to the induction of social work and social care staff. This audit was conducted by the Office of the Executive Director of Social Work. Recommendations identified that impact on statutory functions:

- All service areas will ensure that NISCC registration information and standards of conduct and practice are included in induction.
- All new employees will be signposted to the NISCC portal
- Development of a framework for service users/carers to become involved in the planning and delivery of the induction for new staff across all service areas.

Action plan is developed and remains under review across all service areas. Re-audit scheduled for December 2024.

Social Worker in Difficulty Process/Professional Record Review

The Office of the Executive Director of Social Work is developing a new process that will identify social workers for whom there are practice issues and put measures in place to support and ensure safe practice. This will bring the processes for social workers into line with other professional's processes in the Trust. This piece of work is currently in development and with Trade Unions for consultation.

2.6 Discharge of Directed Statutory Functions

Summary of areas where the Trust has not adequately discharged their Directed Statutory Functions for this Programme of Care. Please outline remedial action taken to address this situation and any proposed future action.

2.6	Summary of areas where the Trust has not adequately discharged their Directed Statutory Functions for this Programme of Care.	Please outline remedial action taken to address this situation and any proposed future action.
	Older People & Adults	
	<p><u>Compliance with the Care Management Circular HSC (ECCU) 1/2010</u></p> <ul style="list-style-type: none"> • The number of outstanding reviews demonstrates an improving position, however it remains an area of concern across the service area. • In March 2024, there were 1208 outstanding annual reviews in the Older Peoples Community Social Work service. This is an improving position from March 2023 with 2715 outstanding annual reviews. <p>Care Home Placement Team: Compliance with annual reviews remains a significant challenge within Commissioned Services' Care Home Placement Team (CHPT). At the end of March 2023, there were 73 outstanding annual reviews, with this increasing to 246 by September 2023 and a further increase to 429 in December 2023.</p> <p>At the end of March 2024 there were 455 outstanding annual reviews. This worsening position followed a high level of sickness and vacancies within the service in the summer period of 2023. The workforce position is significantly improved,</p>	<p><u>Compliance with the Care Management Circular HSC (ECCU) 1/2010</u></p> <p>In order to address non-compliance with Care Management Circular within Older People's Service Community Social Work:</p> <ul style="list-style-type: none"> • Active recruitment into vacant posts and use of bank as an interim measure • Additional hours and overtime offered across the directorate to focus on completion of reviews • Weekly sit-rep in place to enhance oversight and assurance • Maximising skills mix and improved use of delegation framework where appropriate. <p>Cases kept under review by senior practitioners - use of SUD to prioritise</p> <ul style="list-style-type: none"> • Transfer of casework to Care Home Placement Team (CHPT). Transfers were stood down due to staffing in CHPT however, these are now in progress. Transfer of cases is expected to improve capacity within community social work to complete reviews and allocation of casework. • Compliance with annual review remains on the Division's Risk Register <p>Care Home Placement Team:</p> <ul style="list-style-type: none"> • Compliance with annual review remains on the Division's Risk Register for the Care Home Placement Team. • Continued monthly data return reporting to DSWs. • Focus on stabilising staff teams and filling vacant posts via regional recruitment. • Overtime offered to existing staff, with limited success. Staff employed via nurse and social work bank has proved more successful. • Caseloads are RAG rated to assess risk and focus intervention based on service capacity.

however compliance with annual review was heavily impacted due to the workforce shortage at that time.

Unallocated Cases (OPS):

- Across Older Peoples Community Social Work service there are a significant number of service users, who either do not have an allocated keyworker (vacant caseloads due to staff leaving or on long term sick leave) or are unallocated cases – new referrals into service and awaiting allocation (waiting list). As a result, those screened at being lowest risk are low priority for assessment or re-assessment.
- Older Peoples Community Social Work – in March 2024 there were 762 unallocated cases (new referrals awaiting action) and 1,161 services users on vacant caseloads needing reallocation due to staff moving or leaving the service (Total: 1923) (March 2023 Total: 1367)

Unallocated Cases (CHPT):

Unallocated cases have remained a challenge in the Care Home Placement Team (CHPT), with a direct correlation to workforce resource. Numbers of unallocated cases in CHPT has significantly increased since May 2023. However, improved staffing position is reflected in a recent reduction in unallocated cases and this trend is set to continue.

Unallocated referrals in CHPT directly impacts upon flow in the community social work teams. There were 145 referrals on CHPT Paris duty desk in December 2023 (this is a reduction from 245 in September 23). This continues to be an improving picture with 25 cases on the duty desk at the end of March 24. This has, in turn impacted on the unallocated cases within CHPT, but is a significant improvement on service delivery, with improved collation of centralised data relating to care homes.

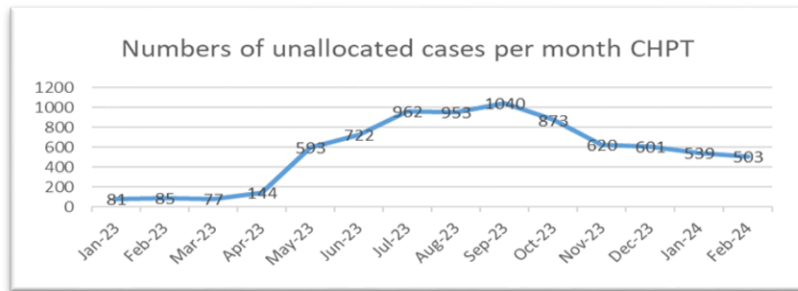
Unallocated Cases (OPS):

- Active recruitment into vacant posts and use of bank as an interim measure
- Service User Database implemented with ongoing embedding throughout all teams – identifies priority casework, providing oversight and assurance.
- Duty system in place to respond to urgent unallocated casework with re-allocation/referral to appropriate professionals when required.
- The Trust is looking at regional learning from the South Eastern Heath and Social Care Trust short term assessment team and is in the process of developing a business case for the implementation of this model.
- Established process to recommence Care Home Placement Team referrals from community social work teams. This will improve capacity for case allocation and impact on waiting times and unallocated casework.

Unallocated Cases (CHPT):

- There is an action plan in place between CSW and CHPT, which is actively transferring case responsibility of cases on the waiting list as well as implementing a target for minimum number of cases transferred per month to progress flow. This plan will lead to greater assurance and oversight regarding commissioned services
- All cases are RAG rated to identify priorities.
- Use of duty systems to address urgent issues when required.
- Recruitment and retention of staff is a divisional priority. In addition to recruitment of social work staff via regional recruitment cycles, social work bank staff have been recruited to provide cover for vacant positions.
- Overtime opportunities are available to all relevant staff. CHPT continue to actively recruit to vacant posts.

*Referral on the duty desk refers to unallocated cases and does not include service users who have a service provision but are on a vacant caseload.



At the end of March 2024 there were 459 unallocated cases in the CHPT.

Unmet Need (OPS)

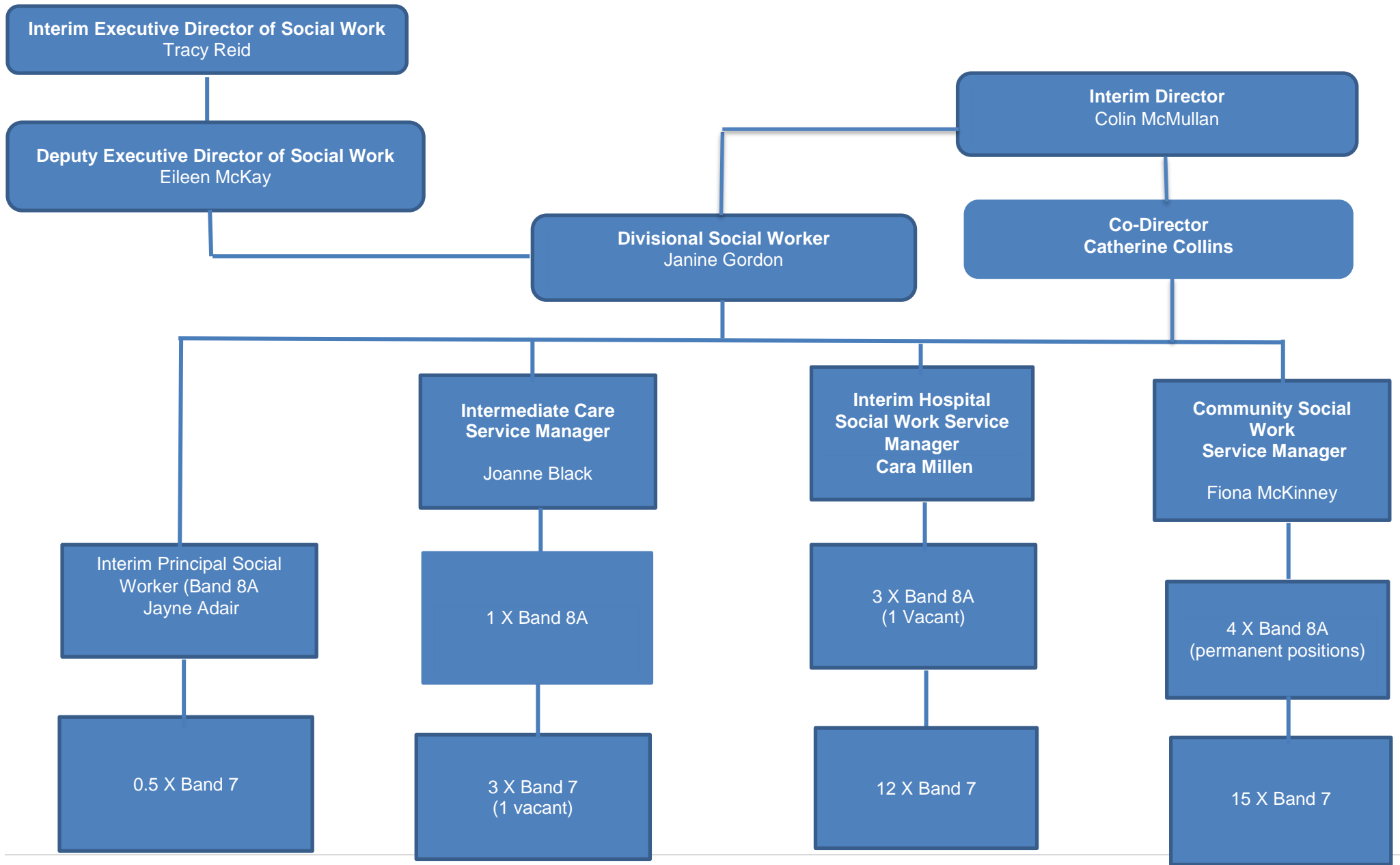
The number of packages and hours of unmet need have decreased within this reporting period. It is anticipated that this trend will continue as cleansing of the unmet need continues and processes are embedded with regards critical criteria.

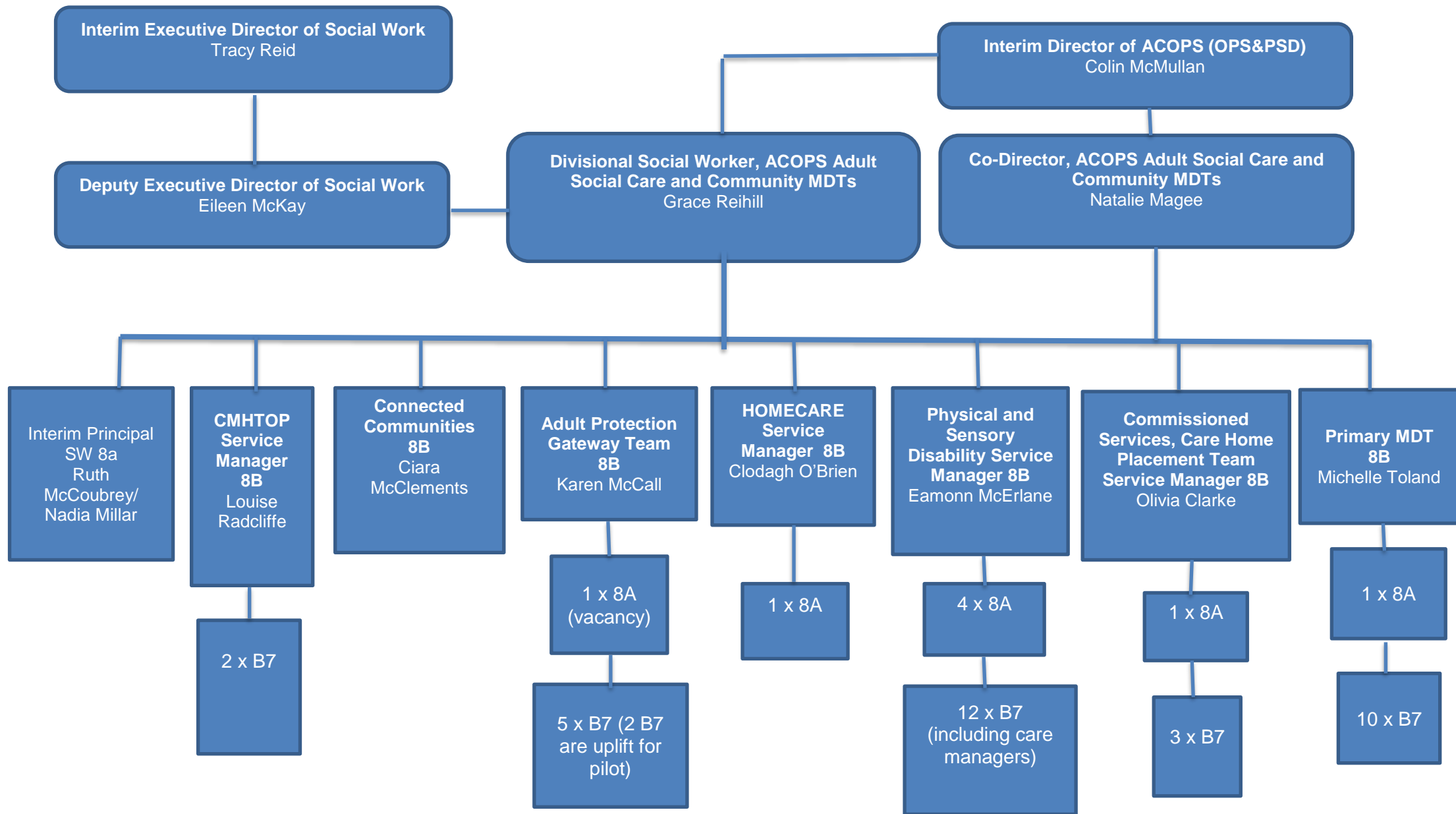
UNMET NEED	HOURS	PACKAGE NUMBERS
MARCH 2023	FULL Package of care (POC) 3072.5 PART POC 2345.5	FULL POC 396 PART POC 437
MARCH 2024	FULL POC 1559 PART POC 1681	FULL POC 259 PART POC 382

Unmet Need (OPS)

- The Trust is refocusing on the strategic drive for Self Direct Support and promoting alternative supports such as Direct Payments
- Arrangements and oversight for meeting identified priority need (including end of life care).
- Scrutiny of unmet need and regular review ensuring that critical risk and need are identified and met.
- Early Review Pilot ongoing to ensure timely review of care needs and cessation of hours where possible increasing capacity to meet those in critical need.

<p><u>Carers Assessments (OPS)</u></p> <p>There has been a decrease overall this year in the number of carers assessments offered and the number completed.</p> <p><u>Safeguarding</u> ACOPS has continued with the gateway single point of referral model for all external referrals for adults into the Trust regardless of programme of care, and work is extremely busy. A small team manage these 'duty' referrals along with screening cases for service users known to ACOPS services. Furthermore, the team has an investigative role for adults in need of protection. Acuity of cases continues to be high with social work workforce shortages presenting challenge. Work within the Trust to encourage the recognition and awareness of adult abuse in hospital settings has driven additional demand without any associated extra resource to manage the former.</p>	<p><u>Carers Assessments (OPS)</u></p> <ul style="list-style-type: none"> • Ongoing engagement and prioritisation of carers referred for assessment to ensure resource targeted to those in need of support. • Contribute to the development of the Carer Strategy to advance priority areas which seek to enhance how we work with carers. • Use of bank social work staff and consideration of skills mix for those completing Carer's assessments. • Carer's Assessment Audit undertaken to determine activity across all OPS teams to establish a baseline and identify areas for action – informing standard operating procedures. • Implementation of the carer's conversation wheel with increased emphasis on Training for staff. <p><u>Safeguarding</u> The Trust, noting retention issues and consistent high sick leave within the team, is working to provide a framework of support. This has included the implementation of additional, temporary staffing from other critical areas and the allocation of adult in need of protection investigations within community social work settings. It is certain that additional staffing resource is needed to safely maintain this essential resource.</p>
--	--





DATA RETURN 1

Adult Community and Older People's Services - Adult Social Work Services, Community Nursing and Intermediate Care Services & Adult Social Care and Community MDTs

1 GENERAL PROVISIONS			
		<65	65+
1.1	How many adults were referred for assessment of social work or social care need during the period?	N/A	6453
1.2	Of those reported at 1.1 how many adults commenced receipt of social work or social care services during the period?	N/A	2183
1.3	How many adults are in receipt of social work or social care services at 31 st March? <i>Note: the number of adults on open caseloads of social work or social care services and aged 18+.</i>	N/A	5592
1.3a	How many adults are in receipt of social work support only at 31 st March (not reported at 1.4)? <i>Note: the number of adults on open caseloads of social workers aged 18+.</i>	N/A	54
1.4	How many care packages are in place on 31 st March in the following categories:		
	vii. Residential Home Care (Source: DoH return) Trusts to provide figures as normal, as age breakdown required, however please <u>attach return</u> should further quality assurance be required.	N/A	612
	viii. Nursing Home Care (Source: DoH return) Trusts to provide figures as normal, as age breakdown required, however please <u>attach return</u> should further quality assurance be required.	N/A	1580
	ix. Domiciliary Care – Include Care and Non-Care Managed Packages. (Source: SPPG PSSID return) Trusts to provide figures as normal, as age breakdown required, however please <u>attach return</u> should further quality assurance be required.	N/A	3353
	x. Supported Living	N/A	76
	xi. Shared Lives – Number of Adult Family Placements (long term placement) To note: work is ongoing with Trusts to agree definitions and minimum dataset for Shared Lives for future reporting.	N/A	N/A
1.4a	For all those listed above in 1.4 provide assurance that the Care Management process is being applied in accordance with the DHSSPS Care Management HSC ECCU/1/2010 Circular and the subsequent update within Circular HSC (ECCU) 1/2021. NO <i>If no, please explain</i>		

	<p>OPS staff work holistically with service users, carers and families. They assess, care plan and review the assessed need. The Trust has identified the following areas for improvement</p> <ul style="list-style-type: none"> • <u>Annual Reviews</u>- Whilst there has been improvements in completion of annual care reviews within timescale in this reporting period, community social work remain on the Divisions Risk Register, due to non-compliance. The Trust undertakes monitoring of the current position and action plan, to improve compliance. • <u>Unmet need in domiciliary care</u>- There are agreed actions in relation to unmet need including ongoing scrutiny and regular review of the unmet need list ensuring that critical risk and need are identified and met. • <u>Unallocated cases</u>- This is an ongoing area of focus reported weekly to Divisional Social Worker and Co-Director. Action plan in place with regards management of casework, transfer of casework to care home placement team and permanent recruitment to reduce this number. The Trust ensures risk management strictures are in place manage unallocated cases and ensures risk stratification through rag rating of cases. Unallocated case are on the Directorate risk register. The Trust continues to prioritise staff recruitment to support stable teams and the reduction of unallocated cases. 		
1.4b	<p>Annual Reviews – Please provide assurances to the Commissioner that there is professional social work oversight of the Annual Review process in your Trust</p> <p>During this reporting period the Trust reports that reviews are undertaken by professional staff only.</p>		
1.5	Number of adults provided with a Short Break during the period.	<i>PSSID return</i>	<i>PSSID return</i>
1.5b	<p>Shared Lives – Overnight Stays</p> <p>To note: work is ongoing with Trusts to agree definitions and minimum dataset for Shared Lives for future reporting.</p>	X	X
1.6	Number of adults known to the Programme of Care in receipt of Centre based Day Care		
	- Statutory sector	N/A	628
	- Independent sector	N/A	248
1.6a	<p>Number of adults known to the Programme of Care in receipt of Day Opportunities</p> <p>The Trust is reporting a 121 reduction in Day Opportunities within this reporting period. This reflects increased accuracy in defining Day Opportunities within this service area.</p>	N/A	394

1.6b	Shared Lives – Day Support To note: work is ongoing with Trusts to agree definitions and minimum dataset for Shared Lives for future reporting.	X	X
1.7	Of those at 1.6 how many are dementia (EMI)		
	- Statutory sector	N/A	159
	- Independent sector	N/A	0
1.8	This is intentionally blank		
1.9	How many of this Programme of Care clients are in HSC Trust funded social care placements outside Northern Ireland?	N/A	2
1.10	Annual Reviews – work to commence in 2024/25 to develop regionally agreed definitions and minimum dataset.	X	X
1.11	Unallocated Cases – work to commence in 2024/25 to develop regionally agreed definitions and minimum dataset.	X	X
1.12	Vacancies (Adults) – work to commence in 2024/25 to develop regionally agreed definitions and minimum dataset.	X	X

DATA RETURN 1 – Hospital

No Longer Required

1 GENERAL PROVISIONS - HOSPITAL				
		<18	18-65	65+
1.1	How many adults or children were referred to Hospital Social Workers for assessment during the period?	0	0	0
1.2	Of those reported at 1.1 how many assessments of need were undertaken during the period?	0	0	0
1.3	How many adults or children are on Hospital Social Workers caseloads at 31st March?	0	0	0

Age is at date of referral for 1.1 and 1.2

Age at 31st March for 1.3

DATA RETURN 1 – Acute Hospital (general setting) Adult Community and Older People’s Services - Adult Social Work Services, Community Nursing and Intermediate Care Services & Adult Social Care and Community MDTs

1 GENERAL PROVISIONS – ACUTE HOSPITAL (GENERAL SETTING)				
		<18	18-65	65+
1.1	How many adults or children were referred to Hospital Social Workers for assessment during the period?	73	1795	5863
1.2	Of those reported at 1.1 how many assessments of need were undertaken during the period? (assessment is to include screening). Please note it is expected that the response for sections 1.1 & 1.2 will be the same	73	1795	5863
1.3	How many adults or children are on Hospital Social Workers caseloads at 31 st March? The Programme of Care are currently unable to reliably report the figures by age range for 31 st March 2024 **282 is reported as composite number			**282
	<i>Age is at date of referral for 1.1 and 1.2 Age at 31st March for 1.3</i>			

DATA RETURN 2

Adult Community and Older People's Services - Adult Social Work Services, Community Nursing and Intermediate Care Services & Adult Social Care and Community MDTs

Please refer to Physical and Sensory Disability Data Return 2 for complete Directorate data

2 CHRONICALLY SICK AND DISABLED PERSONS (NI) ACT 1978;			
		<65	65+
2.1	Details of patients less than 65 in hospital for long term (>3months) care who are being treated in hospital ward for over 65 (no longer required)	x	x
2.2	Number of adults known to the Programme of Care who are:		
	Certified severely sight impaired (Blind)	PSD	PSD
	Certified severely sight impaired (Partially sighted)	PSD	PSD
	Sight Loss	PSD	PSD
2.3	Number of adults known to the Programme of Care who are:		
	Profoundly Deaf sign language users	PSD	PSD
	Profoundly Deaf Oral / Lip Readers	PSD	PSD
	Hard of hearing	PSD	PSD
	Tinnitus (New)	PSD	PSD
2.4	Number of adults known to the Programme of Care who are:		
	Deaf Blind	PSD	PSD

DATA RETURN 3

Adult Community and Older People's Services - Adult Social Work Services, Community Nursing and Intermediate Care Services & Adult Social Care and Community MDTs

Please refer to Physical and Sensory Disability Data Return 3 for complete Directorate data

3 DISABLED PERSONS (NI) ACT 1989 <i>Note: 'disabled people' includes individuals with physical disability, sensory impairment, learning disability</i>		
3.1	Number of referrals to Physical/Learning/Sensory Disability during the reporting period.	PSD
	Number of Disabled people known as at 31 st March. <i>Note: adults with a disability on the caseload of social workers.</i>	PSD
3.2	Number of assessments of need carried out during period end 31 st March.	PSD
3.3	Number of assessments undertaken of disabled children ceasing full time education.	PSD

DATA RETURN 4**Adult Community and Older People's Services - Adult Social Work Services, Community Nursing and Intermediate Care Services & Adult Social Care and Community MDTs****4 HEALTH AND PERSONAL SOCIAL SERVICES
(NI) ORDER 1972;****Article 15, Article 36 [as amended by Registered Homes (NI) Order 1992]**

4.1	Number of Article 15 (HPSS Order) Payments	60
	Total expenditure for the above payments	£7125
4.2	Number of TRUST FUNDED people in residential care	487
4.3	Number of TRUST FUNDED people in nursing care	991
4.4	How many clients are in receipt of £100 free nursing care allowance? (this refers only to self-funding clients and excludes Trust funded places)	449

DATA RETURN 5

Adult Community and Older People's Services - Adult Social Work Services, Community Nursing and Intermediate Care Services & Adult Social Care and Community MDTs

5 CARERS AND DIRECT PAYMENTS ACT 2002

		16-17	18-64	65+																								
5.1	<p>Number of adult carers offered individual carers assessments during the period (Source: SPPG PSSID Return)</p> <p>Trusts to provide figures as normal, however please <u>attach returns</u> for the 4 quarters should further quality assurance be required.</p>	1	676	416																								
5.2	<p>Number of adult individual carers assessments completed during the period (Source: SPPG PSSID Return)</p> <p>Trusts to provide figures as normal, however please <u>attach returns</u> for the 4 quarters should further quality assurance be required.</p>	2	587	303																								
5.2a	<p>Number of adult individual carers assessments declined during the period and the reasons why (Source: SPPG PSSID Return)</p> <table border="1"> <tbody> <tr> <td>A 1</td> <td>PRIVATE MATTER/ NOT DISCUSSED</td> <td>3</td> </tr> <tr> <td>A 2</td> <td>DOESN'T SEE SELF AS CARER</td> <td>26</td> </tr> <tr> <td>A 3</td> <td>TIME UNSUITABLE-RECONSIDER</td> <td>9</td> </tr> <tr> <td>A 4</td> <td>DOES NOT REQUIRE SUPPORT</td> <td>144</td> </tr> <tr> <td>A 5</td> <td>PERCEPTION OF NO BENEFIT</td> <td>22</td> </tr> <tr> <td>A 6</td> <td>CONCERN OF IMPACT ON BENEFITS</td> <td>1</td> </tr> <tr> <td>A 7</td> <td>TOO COMPLICATED/TIME CONSUMING</td> <td>0</td> </tr> <tr> <td>A8</td> <td>NO REASON GIVEN</td> <td>23</td> </tr> </tbody> </table> <p>*There are an additional 26 reasons for decline included from the total carers who declined an assessment during this reporting period. These relate to referrals prior to 1st April 2023- 31st March 2024.</p> <p>Trusts to provide figures as normal, however please <u>attach returns</u> for the 4 quarters should further quality assurance be required.</p>	A 1	PRIVATE MATTER/ NOT DISCUSSED	3	A 2	DOESN'T SEE SELF AS CARER	26	A 3	TIME UNSUITABLE-RECONSIDER	9	A 4	DOES NOT REQUIRE SUPPORT	144	A 5	PERCEPTION OF NO BENEFIT	22	A 6	CONCERN OF IMPACT ON BENEFITS	1	A 7	TOO COMPLICATED/TIME CONSUMING	0	A8	NO REASON GIVEN	23	0	89	113
	A 1	PRIVATE MATTER/ NOT DISCUSSED	3																									
	A 2	DOESN'T SEE SELF AS CARER	26																									
	A 3	TIME UNSUITABLE-RECONSIDER	9																									
	A 4	DOES NOT REQUIRE SUPPORT	144																									
	A 5	PERCEPTION OF NO BENEFIT	22																									
	A 6	CONCERN OF IMPACT ON BENEFITS	1																									
	A 7	TOO COMPLICATED/TIME CONSUMING	0																									
	A8	NO REASON GIVEN	23																									
	<p>To note with moving to a single source of reporting via SPPG PSSID return for Carers Assessments, carers reassessments offered, accepted and declined will also be available – this will be sourced from existing returns.</p>	X	X	X																								
5.2b	<p>Number of Adults waiting on a Carers assessment at 31st March - work to commence in 2024/25 to develop regionally agreed definitions and minimum dataset.</p>	X	X	X																								
5.3	<p>Of the total at 5.2 in how many of the assessments were the carers, caring for disabled children?</p>	0	0	0																								
5.4	<p>Number of adult carers receiving a service @ 31st March</p>	0	137	53																								

	The Trust notes a significant reduction in carers receiving a service within this reporting period; from a total of 929 to 190. This reflects the work undertaken to ensure accuracy in caseloads and to close the records of those no longer receiving a service.			
5.5	Number of young carers offered individual carers assessments during the period.	1		
5.6	Number of young carers assessments completed during the period.	0		
5.7	Number of young carers receiving a service @ 31 st March	0		
5.8	(a) Number of requests for direct payments during the period 1 st April – 31 st March (b) Number of new approvals for direct payments during the period 1 st April – 31 st March (c) Number of adults receiving direct payments @ 31 st March (Source: SPPG PSSID Return) Trusts to provide figures as normal, however please <u>attach return</u> should further quality assurance be required.	68 68 229		
5.9	Number of children receiving direct payments @ 31 st March	0		
5.9.a	Of those at 5.8 how many of these direct payments are being managed by another person acting on behalf of the service user in respect of another person?	137		
5.10	Number of carers receiving direct payments @ 31 st March	0		
5.11	Number of one off Carers Grants made in-year.	887		
Note: sections 5.8, 5.9 and 5.10 are to be reported as mutually exclusive.				

DATA RETURN 6

Adult Community and Older People's Services - Adult Social Work Services, Community Nursing and Intermediate Care Services & Adult Social Care and Community MDTs

7 SAFEGUARDING ADULTS

6.1	Number of adult protection referrals within the period	SPPG to collect from PSSID
6.2	Number of adult protection referrals within the period broken down by the following categories of abuse: (h) Financial (i) Institutional (j) Neglect (k) Physical (l) Psychological/ Emotional (m) Sexual (n) Exploitation	SPPG to collect from PSSID
6.3	Number of investigations commenced within the period	SPPG to collect from PSSID
6.4	Number of cases closed to adults in need of protection within the period	120
6.5	Number of protection plans commenced within the period	SPPG to collect from PSSID
6.6	Number of care and protection plans in place on 31st March	Not required

PLEASE ENSURE A SEPARATE RETURN IS COMPLETED FOR EACH PROGRAMME

DATA RETURN 9

Adult Community and Older People's Services - Adult Social Work Services, Community Nursing and Intermediate Care Services & Adult Social Care and Community MDTs

9 The Mental Health (NI) Order 1986
Article 4 (4) (b) Article 5 (1) Article 5 (6) Article 18(5) Article 18(6) Article 115

Admission for Assessment Process Article 4 and 5		TRUST ASW	RESWS ASW
9.1	Total Number of Assessments made by ASWs under the MHO	19	N/A
9.1.a	Of these how many resulted in an application being made by an ASW under (Article 5.1b)	16	N/A
9.1.b	How many assessments required the input of a second ASW (Article 5.4a)	0	N/A
9.1.c	Number of applications made by the nearest relative (Article 5.1.a)	0	
9.1.d	Can the Trust provide assurance that they are meeting their duties under Article 117.1 to take all practical steps to inform the nearest relative at least 7 days prior to discharge. YES <i>If no, please explain</i>	YES	

Use of Doctors Holding Powers (Article 7)		
9.2	How many times did a hospital doctor use holding powers?	7
9.2a	Of these, how many resulted in an application being made?	6

ASW Applicant reports		
9.3	Number of ASW applicant reports completed	19
9.3.a	<i>Confirm if these reports were completed within 5 working days</i> NO <i>If no, please explain</i> SEE MENTAL HEALTH RETURN	

Social Circumstances Reports (Article 5.6)		
9.4	Total number of Social Circumstances reports completed. <i>This should equate to number given at 9.1c. If it does not please provide an explanation.</i>	0
9.4.a	Confirm if these reports were completed within 14 days? YES / NO <i>If no, please explain</i>	N/A

Mental Health Review Tribunal		
9.5	Number of applications to MHRT in relation to detained patients	0

Guardianships (Article 18)		
9.6	Number of Guardianships in place in Trust at period end	1
9.6.a	New applications for Guardianship during period (Article 19(1))	0
9.6.b	How many of these were transfers from detention (Article 28 (5) (b))	N/A
9.6.c	How many were Guardianship Orders made by Court (Article 44)	N/A
9.6.d	Number of new Guardianships accepted during the period (Article 22 (1))	N/A
9.6.e	Number of Guardianships renewed during the reporting period (Article 23)	0
9.6.f	Number of Guardianships accepted by a nominated other person	0
9.6.g	Number of MHR hearings in respect of people in Guardianship (provide total number)	1
9.6.h	Total number of Discharges from Guardianship during the reporting period (Article 24)	0
	Discharges as a result of an agreed multi-disciplinary care plan	0
	Lapsed	0
	Discharged by MHRT	0
	Discharged by Nearest Relative	0
	Total	0

Approved Social Worker (ASW) Register		
9.7	Number of newly appointed Approved Social Workers during period	MH RETURN
9.7.a	Number of Approved Social Workers removed during period	MH RETURN
9.7.b	Number of Approved Social Workers at period end (who have fulfilled requirements consistent with quality standards)	MH RETURN
9.7c	Please provide assurance of HSCT progress in relation to implementation of the ASW Quality Standards 2021. Please include progress as per standards on; <ul style="list-style-type: none"> • Workforce Planning and Management • ASW Governance • ASW Training • ASW Supervision and Support 	MH RETURN

9.8	Do any of the returns for detention and Guardianship in this section relate to an individual who was under 18 years old? If yes, please provide number and advise on any issues presenting. N/A- Older People's services only	
9.9	How many times during the reporting period has the Trust notified the Office of Care and Protection under Article 107? Please advise of any issues. The Trust can confirm there are no outstanding issues with the Office of Care and Protection within Older People's services.	48

The Mental Health Order (NI) 1986 as amended by The Criminal Justice (NI) Order 1996.SArticle 50A(6) Schedule 2A Supervision and Treatment Orders.		
9.10	Number of supervision and treatment orders, (where a Trust social worker is the supervising officer) in force at the 31 st March	0
9.11	Of the Total shown at 9.10 how many have their treatment required as:	0
	(a) Treatment as an in-patient	
	(b) Treatment as an out patient	0
	(c) Treatment by a specified medical practitioner	0
9.12	Of the total shown at 9.10 how many include requirements as to the residence of the supervised person (excluding in-patients)	0
9.13	Of the total shown at 9.10 how many of these supervision and treatment orders were made during the reporting period. Please advise of any issues presenting	0

9 The Mental Capacity (NI) Act, 2016

Panel Applications (during the year) (to be collected from 2022/23 onwards)		
9.14	Total number of Trust Panel Applications	SPPG will source from DoH MCA team
9.15	Number of Interim Authorisations	SPPG will source from DoH MCA team
9.16	Number of Full Authorisations	SPPG will source

		from DoH MCA team
9.17	Number where work has started but not completed	SPPG will source from DoH MCA team
9.18	Total number of cases not yet referred to Attorney General	SPPG will source from DoH MCA team
9.19	Do you have sufficient numbers of staff to carry out TP Formal Assessments of Capacity (Form 1)? Yes / No If no, please provide brief explanation of action taken	MH RETURN
9.20	Do you have sufficient numbers of staff to make TP Best Interests determination (Form 2)? Yes / No If no, please provide brief explanation of action taken	MH RETURN
9.21	Do you have sufficient numbers of medical practitioners to complete TP medical reports (Form 6)? Yes / No If no, please provide brief explanation of action taken	MH RETURN

Trust Panels <i>(to be collected from 2022/23 onwards)</i>		
9.22	Do you have sufficient numbers of Trust Panel members to cover first applications (Form 5)? Yes / No If no, please provide brief explanation of action taken	MH RETURN
9.23	Do you have sufficient number of Trust Panel members to cover Trust Panel Extension applications (Form 16)? Yes / No If no, please provide brief explanation of action taken	MH RETURN

Extensions <i>(to be collected from 2022/23 onwards)</i>		
9.24	Total number of Extension Authorisations (during the year)	SPPG will source from DoH MCA team
9.25	Number referred to RT	SPPG will source from DoH MCA team

9.26	Number Not referred to RT	SPPG will source from DoH MCA team
9.27	Number of Cases outstanding	SPPG will source from DoH MCA team
9.28	Do you have sufficient number of staff suitably qualified to make responsible person statements (Form 15)? Yes / No If no, please provide brief explanation of action taken	MH RETURN
9.29	Do You have Sufficient number of staff to carry out TP Extension Formal Assessments of Capacity (Form 1): Yes / No If no, please provide brief explanation of action taken	MH RETURN
9.30	Do you have sufficient number of staff to make TP Extension Best Interests determination (Form 2)? Yes / No If no, please provide brief explanation of action taken	MH RETURN

Short Term Detention Authorisations <i>(to be collected from 2022/23 onwards)</i>		
9.31	Work started but not completed (during the year)	SPPG will source from DoH MCA team
9.32	Total Number of short term detention authorisations.	SPPG will source from DoH MCA team
9.33	Do you have sufficient numbers of staff to carry out STD Formal Assessments of Capacity (Form 1)? Yes / No If no, please provide brief explanation of action taken	MH RETURN
9.34	Do you have sufficient number of staff to make STD Best Interests determination (Form 2)? Yes / No If no, please provide brief explanation of action taken	MH RETURN
9.35	Do you have sufficient numbers of medical practitioners to complete STD medical reports (Form 6)? Yes / No If no, please provide brief explanation of action taken	MH RETURN

9.36	Do you have sufficient number of ASWs and appropriate healthcare professionals to authorise STDs (Form 8)? Yes / No If no, please provide brief explanation of action taken	MH RETURN
------	--	--------------

Live Cases (during the year) (to be collected from 2022/23 onwards)		
9.37	Total No. Live Trust Panel / Extension Authorisations	SPPG will source from DoH MCA team
9.38	Total No. Live Short Term Detention Authorisations	SPPG will source from DoH MCA team

Training (to be collected from 2022/23 onwards)		
9.39	Do you have sufficient number of staff trained to operate DoLs? Yes / No If no, please provide brief explanation of action taken	MH RETURN

Trust Panels (to be collected from 2022/23 onwards)		
9.40	Do you have sufficient number of Trust Panel members to cover first applications (Form 5)? Yes / No If no, please provide brief explanation of action taken	MH RETURN
9.41	Do you have sufficient number of Trust Panel members to cover Trust? Yes / No If no, please provide brief explanation of action taken	MH RETURN

Rule 6 reports and participation at hearings when required (to be collected from 2022/23 onwards)		
9.42	Do you have sufficient number of staff to meet the Review Tribunal deadlines for Rule 6 requests? Yes / No If no, please provide brief explanation of action taken	MH RETURN

9.43	(Section 3) MCA section 50 – Do you have sufficient number of staff to ensure all one year extensions are referred to the Attorney General? Yes / No If no, please provide brief explanation of action taken	MH RETUR N
9.44	Can you confirm that you have authorisations in place for those people who require one or more emergency provisions are in place and clearly recorded? Yes / No If no, please provide brief explanation of action taken	MH RETUR N

Please outline any other risks or issues with regard to compliance with the Mental Capacity Act?
MH RETURN

The background of the page is a light blue gradient with several curved, overlapping lines in a slightly darker shade of blue, creating a sense of movement and depth. The text is centered in the middle of the page.

**PHYSICAL DISABILITY & SENSORY
SUPPORT SERVICE**

2. PROGRAMME OF CARE SUMMARY

Programme of Care / Directorate:- ADULT COMMUNITY AND OLDER PEOPLES SERVICE (ACOPS), DIVISION OF ADULT SOCIAL CARE AND COMMUNITY MDTs, PHYSICAL & SENSORY DISABILITY SERVICE

2.1	<p>Named Officer responsible for professional Social Work</p> <p>Accountability Arrangements - Please provide a copy of your Organisational Structure from Assistant Director to Band 7 Staff and highlight any changes from last year (2022/23).</p> <p>Grace Reihill is the Divisional Social Worker, appointed August 2023, and named professional officer for social work and social care in ACOPS Adult Social Care and Community MDT's; (Encompassing Community Mental Health Services for Older People, Adult Protection Gateway Service, Physical and Sensory Disability Services, Commissioned Services Care Home Placement Team (formerly CREST), Connected Community Care, Primary MDT Social Work Service and Homecare Services). Prior to this appointment Fiona Rowan was the Divisional Social Worker (Interim) and named professional officer.</p> <p>Colin McMullan is the Interim Director of Adult Community and Older People's Services, appointed in September 2023. Prior to this appointment the post holder was Gillian Traub.</p> <p>The Director of Adult Community and Older People's Services, supported by the Collective Leadership Team which comprises of the division's Co-Director, Chair of Division, Divisional Social Worker and Divisional Nurse has the responsibility and accountability for the operational delivery of statutory functions by the Directorate.</p> <p>There remains an unbroken line of professional accountability for social work, from the individual social work practitioner to the Divisional Social Worker and through to the EDSW of Social Work, who reports to the Chief Executive and to the Trust Board.</p> <p>Please see chart of the organisational structure on page 81.</p> <p>Highlight any vacancies and the action taken to recruit against these.</p> <p>The Trust reports one Band 8a permanent social work vacancy and 2 Band 5/6 vacancy within the physical and sensory disability service. Within this reporting period the Band 8a post has been filled by bank staff. The Trust continues to actively manage recruitment for Band 5/6 Social Work staff through the regional recruitment process.</p>
------------	--

2.2

Please highlight key Social Work Workforce planning issues, including recruitment, retention and professional roles.

The cessation of off contract agency staff was completed in the service area by the regionally agreed deadline of 31st June 2023.

The deficit in supply of social workers regionally have contributed to recruitment challenges in this reporting period. Work to improve recruitment and retention is being progressed by the Executive Director of Social Work, Social Work Recruitment Retention Strategic group which has four associated work streams as follows:

- Organisation and workforce capacity
- Enhancing leadership
- Being open and just
- Staff experience and well being

The work streams have supported the Trust to cease all use of recruitment agencies for social work in line with the DOH directive. The creation of a social work bank has brought some additionality to the workforce however this too is limited by supply of social workers not already in fulltime employment. The Trust continues to work with the regional recruitment system and Health Sector Talent to reduce employment process delays. The Trust have continued implementation of the social work retention programme 'valuing social work' which places particular emphasis on well-being.

Provide a summary regarding the detail and level of vacancies and any vacancy control systems in place.

The Physical and Sensory Disability Service has 2 Band 5/6 social work vacancies. Social work vacancies continue to be managed through regional recruitment processes. In addition, there is one 8a vacancy, which is currently filled by a bank member of staff.

Recruitment and retention of staff is a divisional priority. Social work bank staff have been recruited to provide cover for vacant positions.

The vacancies across the Division are detailed in the table below. There are no vacancy control systems in place.

Band	Number of WTE Vacancies	Cover Arrangements
Band 8a PSD	1	Filled by bank staff
Band 5 / 6 PSD	2	Actively managed through regional recruitment. Attempts to fill these posts are ongoing and every effort will be made to recruit from the upcoming regional recruitment exercise targeting social work graduates.

2.3 Supervision arrangements for social workers

Please confirm that the Trust is fully compliant with the Regional Supervision Framework
No

If no, how are the supervision needs of staff being met and how is the Trust intending to meet compliance?

The average compliance rate of professional social work supervision is 71% as at the end of March 2024 across the Physical and Sensory Disability Service. Compliance rates within Physical and Sensory Disability are impacted by staff vacancies and long-term sick leave.

A monthly supervision reporting system is in place to monitor compliance on the occurrence of supervision for individual social work staff, providing assurance of provision and areas where there are deficits. This is addressed directly with service managers to action through the bi- monthly Social Work Leaders Assurance Group and quarterly with the EDSW Supervision Oversight Group.

The implementation of the new regional supervision policy is ongoing and will support increased compliance. The service is actively engaging with the development of service area and individual supervision plans, the introduction of group (and other) methods of supervision and contingency arrangements to ensure supervisor availability in instances of long term sick leave / maternity leave. The Trust complete a yearly sample audit of the compliance with the new regional supervision policy. This will inform planning on how to support social work supervision in Trust within the next reporting period. A review of training requirements in relation to the new policy is also underway.

2.4

Please provide an update on the robustness of the data provided in this report and any data assurance processes in relation to it. (This may include reference to electronic or manual data sources and any data gaps and work with Encompass).

The Trust provides assurance that all data contained in this report is accurate and subject to scrutiny through three lines of assurance within the Trusts Integrated Governance and Assurance Framework. There are robust assurance processes in place to ensure the accuracy of data deriving from the comprehensive monthly service report. Data is interrogated through the monthly Social Work Senior Leaders Assurance Group, monthly Divisional Governance meetings, the quarterly Social Care Steering Group and a new EDSW Dashboard is being implemented and will be reviewed bi-monthly.

The majority of data provided for this report is via the Trust's PARIS information system. Data is gathered by the Trust's Business Support Unit (BSU), which is validated by individual service managers and the Collective Leadership Team. There is a process for continuous improvement around collection of data to ensure accuracy in reporting.

There is improved confidence in reporting of Article 15 payments due to improvements in data quality inputted into the system.

The accuracy in reporting of carers assessments offered and declined remains a challenge due to staff inconsistencies in recording on the PARIS system.

The Division has been working to develop a methodology to disaggregate the number of adults in receipt of a social work support only (1.3a). The Division will continue to work to improve the accuracy of the data in the next reporting period.'

It is anticipated the implementation of Encompass may allow additional opportunities for data collation and analysis. The effectiveness of this will be reviewed further to Go-Live on 6th June 2024.

2.5 Programme of Care to advise of numbers of any significant judgements and/or decisions derived from Serious Adverse Incidents, Case Management Reviews, Mental Health Review Tribunals, Judicial Reviews, Audits or RQIA Inspection and/or Review activity *completed* during the reporting period, that directly relates to the Trusts discharge of their statutory functions (please complete table below).

	Number
Serious Adverse Incidents	1
Domestic Homicide Reviews	0
Case Management Reviews	0
Mental Health Review Tribunals	0
Judicial Reviews	0
Audits	Social work Governance Team – ACOPS - Internal audit Adult Safeguarding Alternative Responses – Oct 2023 BSO Internal Audit Financial Assessments and SDS – May 2023 Social Work and Social Care Induction Audit- Dec 2023.
RQIA Inspections	In the reporting period there were 14 inspections across 13 day centres. 7 inspections across 4 statutory care homes (one was a pre-registration inspection) 5 inspections across 5 supported housing facilities. 3 inspections across Homecare Service.
RQIA Enforcement notices – Failure To Comply Notices	0

Please provide details of any particular recommendations or learning that the Trust would wish to highlight.

BSO Internal Audit Financial Assessments and Self Directed Support (SDS)

The Trust is working to develop and implement an action plan and enhanced monitoring to significantly improve compliance with the requirement to have a Support plan in place for all Self Directed Support (SDS) clients and that these are reviewed with the required frequency.

The BHSCT is reviewing the SDS Governance Group effectiveness to strengthen processes and reporting mechanisms, this will include clarifying reporting arrangements of the SDS Implementation Group and the SDS Steering Group into the BHSCT governance framework together with a review

of the steering group terms of reference to renew the focus and improve accountability and governance.

Social Work Governance Team – ACOPS - Audit of Adult Safeguarding Alternative Responses – Oct 2023

The Social Work Governance team completed an audit into the management of Alternative Safeguarding Responses (ASRs). Learning and recommendations identified include:

- Review of information access arrangements for DAPOs in relation to previous concerns, to improve decision-making.
- Review and agreement of where ASRs are recorded to improve governance arrangements and consistency across teams.
- Improved insight and governance is needed over actions delegated to care homes agreed in ASRs.

An action plan is to address recommendations and learning to be agreed.

Social Work and Social Care Induction Audit

Trust audit in December 2023 for 2nd line assurance in relation to the induction of social work and social care staff. This audit was conducted by the Office of the Executive Director of Social Work. Recommendations identified that impact on statutory functions

- All service areas will ensure that NISCC registration information and standards of conduct and practice are included in induction.
- All new employees will be signposted to the NISCC portal
- Development of a framework for service users/carers to become involved in the planning and delivery of the induction for new staff across all service areas.

Action plan is developed and remains under review across all service areas. Re-audit scheduled for December 2024.

Social Worker in Difficulty Process/Professional Record Review

The Office of the Executive Director of Social Work is developing a new process that will identify social workers where there are practice issues and put measures in place to support and ensure safe practice. This will bring the processes for social workers into line with other professional's processes in the Trust. This piece of work is currently in development and with Trade Unions for consultation.

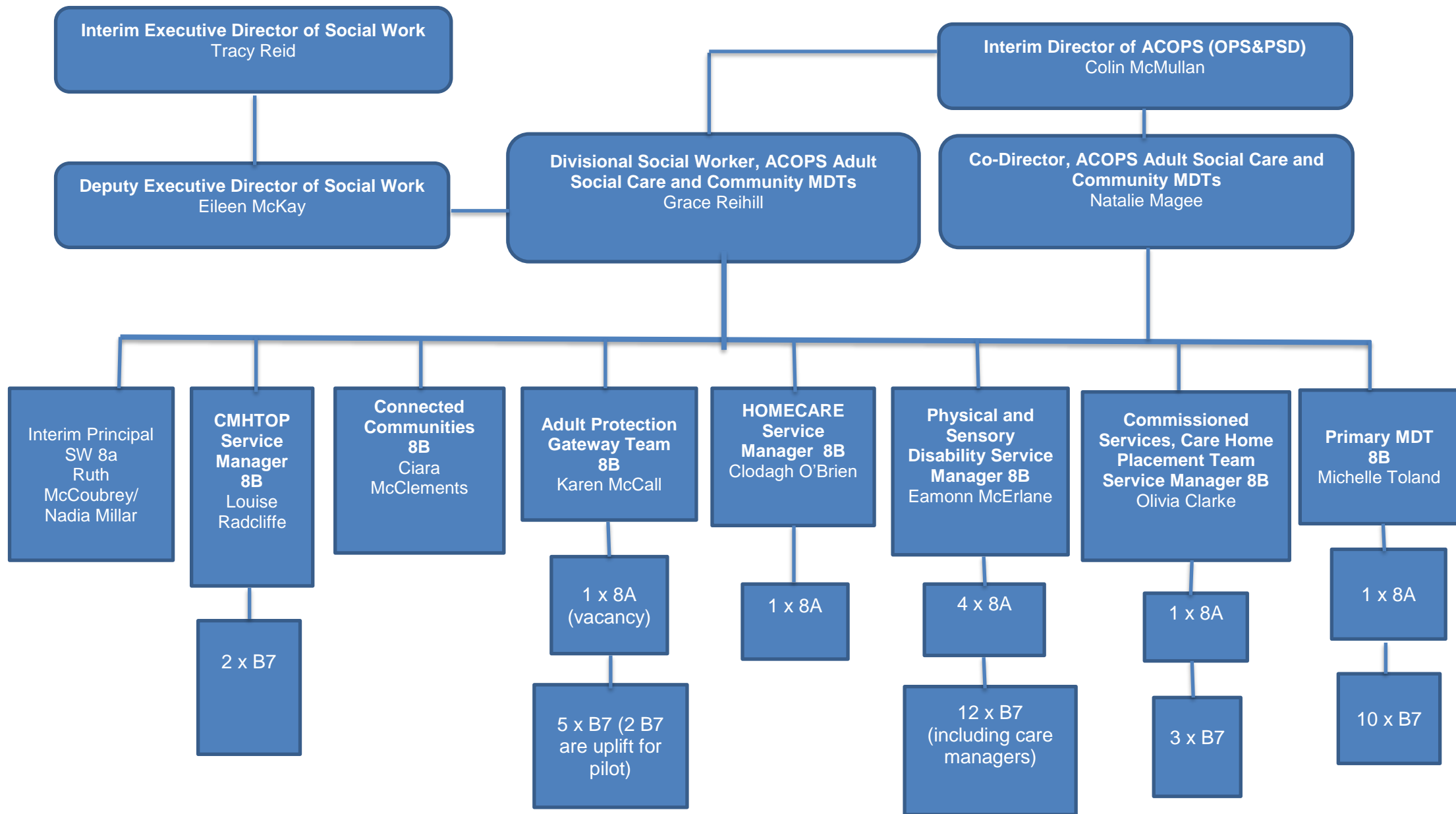
2.6 Discharge of Directed Statutory Functions

**Summary of areas where the Trust has not adequately discharged their Directed Statutory Functions for this Programme of Care.
Please outline remedial action taken to address this situation and any proposed future action.**

2.6	Summary of areas where the Trust has not adequately discharged their Directed Statutory Functions for this Programme of Care.	Please outline remedial action taken to address this situation and any proposed future action.
	Physical Disability and Sensory Impairment Issues	
	<p>Statutory Annual Review The number of outstanding reviews remains a challenge across the service area. However, there has been improved compliance with annual review within the Physical and Sensory Disability Service. Overall compliance is 87% at the end of this reporting period. At end of March 24, there were 126 outstanding reviews, with the majority of these within care management. This is an increase in compliance of 13% from the previous reporting period (74% compliance March 2023).</p> <p>Unallocated Cases Whilst there had been improvements in the reduction of unallocated cases during the reporting period, there has been a recent significant increase in the last quarter. There are service users, who either do not have an allocated keyworker (vacant caseload and known to the service) or are unallocated (awaiting allocation). At the end of March 24 there were 361 unallocated cases. This has been a direct result of vacancies and long-term sick leave and application of the BHSC working definition of unallocated cases.</p>	<p>Statutory Annual Review</p> <ul style="list-style-type: none"> • The number of outstanding reviews remains an area of ongoing improvement and action plans are updated on a monthly basis and monitored by senior management. • Overtime offered to achieve compliance in area of outstanding annual review. • Recruitment into vacant posts to stabilise workforce and ensure adequate staffing to meet targets. <p>Unallocated Cases</p> <ul style="list-style-type: none"> • Requests for reassessment are screened and prioritised by senior social work practitioners. • All new referrals that require social work assessment are screened and prioritised by a senior social work practitioner. Any referrals screened as an emergency are allocated on the same day, urgent referrals within three days and routine referrals within four weeks. Letters are sent to service users if their referral has been screened as routine and they are advised how to contact the service if their circumstances change. • Recruitment and retention strategies in place across Trust.

<p>The new definition and format for presenting the rationale for unallocated cases provides greater governance and oversight of unallocated cases and the reasons.</p> <p>Carers Assessments There has been a small increase in the number of Carers Assessments offered in comparison to the previous reporting year. There has been an 8.5% increase in the number of carers assessments offered in this reporting period (228 carers assessments offered). Carer assessments completed has risen by 19.7% (206).</p> <p>Unmet Need There has been a decrease from the previous reporting period in unmet need. At 31st March 2024 there were 34 service users (252.75 hours) waiting for a full package. This represents a decrease of 22.7% in the number of service users waiting for a full package and a 35% decrease in the hours of unmet full packages since the last reporting period.</p> <p>In addition, 56 service users (312 hours) were waiting for part of a package on the 31st March 2024. Whilst this is an increase of one service user since the last reporting period, it is a 37.9% decrease in the number of hours for unmet part packages since the last reporting period.</p>	<p>Carers Assessments</p> <ul style="list-style-type: none"> • Carer’s Conversation Wheel has been piloted in PSD, and will be extended in 2024/25. To support the successful implementation of the Carers Conversation Wheel across the service area the Trust is focussing on ensuring appropriate and timely training support for all staff. • Monitoring of Carers Assessments is part of the monthly action plan. • Established Carers Forum, chaired by Co-Director with a focus on oversight, governance and accountability for the work undertaken with carers. • Completion of Trust wide audit of carers assessments with identification of actions. • All staff to review carer assessments during supervision to refocus staff in identifying and completing carers assessment. <p>Unmet Need</p> <ul style="list-style-type: none"> • Unmet need list is monitored and reviewed on a monthly basis. • Arrangements in place for priority packages, including those who need end of life care and support. • Ongoing recruitment and digitisation by Homecare Service, who are also working with Human Resources to improve processes and up-take of care worker interviews. <p>Homecare currently provide 15% of the overall domiciliary provision, which equates to 7325 hours utilised mostly across Physical and Sensory Disability and Older People’s Services</p>
--	---

<p>Complex Placements</p> <p>Physical and Sensory Disability Services have continued to experience challenges over the last 12 months with the limited provision of community placements, these include Care Homes, Supported Housing and Domiciliary Care to meet the needs of service users under 65 years of age. Physical and Sensory Disability Service continues to experience challenge in meeting the needs of service users with very complex needs; including people living with addiction and mental health issues and people living with Alcohol Related Brain Injury.</p>	<p>Complex placements</p> <p>Reconfiguration of supported living accommodation within the Trust resulted in (6) beds in Mullen Mews being repurposed for PSD service users. However, this has not been finalised as anticipated. Whilst NIHE Supporting People colleagues were involved in planning and discussions around this project, it was determined that NIHE Supporting People would not fund the initiative just as the process of matching service users was underway.</p> <p>The Trust was optimistic that voids within existing supported living for people living with a dementia could be utilised to meet the significant unmet demand within Physical and Sensory Disability for supported living, therein easing pressures regarding complex placements. Unfortunately, despite discussions between BHSCT, RQIA and NIHE being advanced; NIHE Supporting People were not in a position to progress this initiative for people living with a Physical or Sensory Disability. The service continues to work to support service users in the identification of appropriate care planning for their needs. Specific challenges and high level risk is assessed and escalated within the division.</p>
---	---



DATA RETURN 1

Adult Community and Older Peoples Service (ACOPS), Division of Adult Social Care and Community MDTs, Physical & Sensory Disability Service

1 GENERAL PROVISIONS			
		<65	65+
1.1	How many adults were referred for assessment of social work or social care need during the period? N.B -65+ age group refers to service users with a sensory disability or brain injury	1731	964
1.2	Of those reported at 1.1 how many adults commenced receipt of social work or social care services during the period?	629	457
1.3	How many adults are in receipt of social work or social care services at 31 st March? <i>Note: the number of adults on open caseloads of social work or social care services and aged 18+.</i>	1345	294
1.3a	How many adults are in receipt of social work support only at 31 st March (not reported at 1.4)? <i>Note: the number of adults on open caseloads of social workers aged 18+.</i>	223	74
1.4	How many care packages are in place on 31 st March in the following categories:		
	xii. Residential Home Care (Source: DoH return) Trusts to provide figures as normal, as age breakdown required, however please <u>attach return</u> should further quality assurance be required.	13	N/A
	xiii. Nursing Home Care (Source: DoH return) Trusts to provide figures as normal, as age breakdown required, however please <u>attach return</u> should further quality assurance be required.	122	N/A
	xiv. Domiciliary Care – Include Care and Non-Care Managed Packages. (Source: SPPG PSSID return) Trusts to provide figures as normal, as age breakdown required, however please <u>attach return</u> should further quality assurance be required.	595	N/A
	xv. Supported Living	48	N/A
	xvi. Shared Lives – Number of Adult Family Placements (long term placement) To note: work is ongoing with Trusts to agree definitions and minimum dataset for Shared Lives for future reporting.	N/A	N/A

1.4a	<p>For all those listed above in 1.4 provide assurance that the Care Management process is being applied in accordance with the DHSSPS Care Management HSC ECCU/1/2010 Circular and the subsequent update within Circular HSC (ECCU) 1/2021.</p> <p>NO <i>If no, please explain</i></p> <p>PSD staff work holistically with service users, carers and families. They assess, care plan and review the assessed need. In the following areas only limited assurances can be provided;</p> <ul style="list-style-type: none"> • Care home and domiciliary care reviews – annual care reviews. PSD has developed monthly reporting on annual reviews completed. An action plan is in place and monthly monitoring and reporting is ongoing. • Assessed need not being met – unmet need Domiciliary Care is monitored and reported daily. There is an ongoing action plan to address where possible increased uptake can be managed • Unallocated cases – resulting from new referrals unallocated after 20 working days (as per Trust definition) with no allocated worker, vacancies and long term sick leave. Monthly monitoring and reporting is ongoing. 		
1.4b	<p>Annual Reviews – Please provide assurances to the Commissioner that there is professional social work oversight of the Annual Review process in your Trust</p> <p>Yes</p>		
1.5	Number of adults provided with a respite Short Break during the period.	<i>PSSID return</i>	<i>PSSID return</i>
1.5b	<p>Shared Lives – Overnight Stays To note: work is ongoing with Trusts to agree definitions and minimum dataset for Shared Lives for future reporting.</p>	X	X
1.6	Number of adults known to the Programme of Care in receipt of Centre based Day Care		
	- Statutory sector	199	OPS return
1.6a	- Independent sector	4	N/A
1.6a	Number of adults known to the Programme of Care in receipt of Day Opportunities	51	N/A
1.6b	<p>Shared Lives – Day Support To note: work is ongoing with Trusts to agree definitions and minimum dataset for Shared Lives for future reporting.</p>	X	X
1.7	Of those at 1.6 how many are dementia (EMI)		

	- Statutory sector	6	N/A
	- Independent sector	0	0
1.8	This is intentionally blank		
1.9	How many of this Programme of Care clients are in HSC Trust funded social care placements outside Northern Ireland?	0	0
1.10	Annual Reviews – work to commence in 2024/25 to develop regionally agreed definitions and minimum dataset.	X	X
1.11	Unallocated Cases – work to commence in 2024/25 to develop regionally agreed definitions and minimum dataset.	X	X
1.12	Vacancies (Adults) – work to commence in 2024/25 to develop regionally agreed definitions and minimum dataset.	X	X

**DATA RETURN 1 – Hospital
No Longer Required**

1 GENERAL PROVISIONS - HOSPITAL				
		<18	18-65	65+
1.1	How many adults or children were referred to Hospital Social Workers for assessment during the period?	0	0	0
1.2	Of those reported at 1.1 how many assessments of need were undertaken during the period?	0	0	0
1.3	How many adults or children are on Hospital Social Workers caseloads at 31st March?	0	0	0

Age is at date of referral for 1.1 and 1.2
Age at 31st March for 1.3

DATA RETURN 1 Acute Hospital (general setting)

Adult Community and Older Peoples Service (ACOPS), Division of Adult Social Care and Community MDTs, Physical & Sensory Disability Service

1 GENERAL PROVISIONS – ACUTE HOSPITAL (GENERAL SETTING)				
		<18	18-65	65+
1.1	How many adults or children were referred to Hospital Social Workers for assessment during the period?	OPS return	OPS return	OPS return
1.2	Of those reported at 1.1 how many assessments of need were undertaken during the period? (assessment is to include screening). Please note it is expected that the response for sections 1.1 & 1.2 will be the same	OPS return	OPS return	OPS return
1.3	How many adults or children are on Hospital Social Workers caseloads at 31 st March?	OPS return	OPS return	OPS return
	<i>Age is at date of referral for 1.1 and 1.2 Age at 31st March for 1.3</i>	OPS return	OPS return	OPS return

DATA RETURN 2

Adult Community and Older Peoples Service (ACOPS), Division of Adult Social Care and Community MDTs, Physical & Sensory Disability Service

2 CHRONICALLY SICK AND DISABLED PERSONS (NI) ACT 1978;			
		<65	65+
2.1	Details of patients less than 65 in hospital for long term (>3months) care who are being treated in hospital ward for over 65 (no longer required)	x	x
2.2	Number of adults known to the Programme of Care who are:		
	Certified severely sight impaired (Blind)	319	614
	Certified severely sight impaired (Partially sighted)	159	345
	Sight Loss	238	1157
2.3	Number of adults known to the Programme of Care who are:		
	Profoundly Deaf sign language users	84	36
	Profoundly Deaf Oral / Lip Readers	122	66
	Hard of hearing	449	2154
	Tinnitus (New)	60	32
2.4	Number of adults known to the Programme of Care who are:		
	Deaf Blind	20	205

DATA RETURN 3

Adult Community and Older Peoples Service (ACOPS), Division of Adult Social Care and Community MDTs, Physical & Sensory Disability Service

3 DISABLED PERSONS (NI) ACT 1989		
<i>Note: 'disabled people' includes individuals with physical disability, sensory impairment, learning disability</i>		
3.1	Number of referrals to Physical/Learning/Sensory Disability during the reporting period.	2695
	Number of Disabled people known as at 31 st March. <i>Note: adults with a disability on the caseload of social workers.</i>	1639
3.2	Number of assessments of need carried out during period end 31 st March.	1086
3.3	Number of assessments undertaken of disabled children ceasing full time education.	0

DATA RETURN 4**Adult Community and Older Peoples Service (ACOPS), Division of Adult Social Care and Community MDTs, Physical & Sensory Disability Service****4 HEALTH AND PERSONAL SOCIAL SERVICES
(NI) ORDER 1972;****Article 15, Article 36 [as amended by Registered Homes (NI) Order 1992]**

4.1	Number of Article 15 (HPSS Order) Payments	62
	Total expenditure for the above payments	£2309.31
4.2	Number of TRUST FUNDED people in residential care	13
4.3	Number of TRUST FUNDED people in nursing care	122
4.4	How many clients are in receipt of £100 free nursing care allowance? (this refers only to self-funding clients and excludes Trust funded places)	2

DATA RETURN 5

Adult Community and Older Peoples Service (ACOPS), Division of Adult Social Care and Community MDTs, Physical & Sensory Disability Service

5 CARERS AND DIRECT PAYMENTS ACT 2002

		16-17	18-64	65+																								
5.1	<p>Number of adult carers offered individual carers assessments during the period (Source: SPPG PSSID Return)</p> <p>Trusts to provide figures as normal, however please <u>attach returns</u> for the 4 quarters should further quality assurance be required.</p>	0	184	43																								
5.2	<p>Number of adult individual carers assessments completed during the period (Source: SPPG PSSID Return)</p> <p>Trusts to provide figures as normal, however please <u>attach returns</u> for the 4 quarters should further quality assurance be required.</p>	0	166	40																								
5.2a	<p>Number of adult individual carers assessments declined during the period and the reasons why (Source: SPPG PSSID Return)</p> <table border="1"> <tr> <td>A1</td> <td>PRIVATE MATTER / NOT DISCUSSED</td> <td>0</td> </tr> <tr> <td>A2</td> <td>DOESN'T SEE SELF AS CARER</td> <td>1</td> </tr> <tr> <td>A3</td> <td>TIME UNSUITABLE - RECONSIDER</td> <td>1</td> </tr> <tr> <td>A4</td> <td>DOES NOT REQUIRE SUPPORT</td> <td>4</td> </tr> <tr> <td>A5</td> <td>PERCEPTION OF NO BENEFIT</td> <td>1</td> </tr> <tr> <td>A6</td> <td>CONCERN IMPACT ON BENEFITS</td> <td>0</td> </tr> <tr> <td>A7</td> <td>TOO COMPLICATED / TIME CONSUMING</td> <td>8</td> </tr> <tr> <td>A8</td> <td>NO REASON GIVEN</td> <td>6</td> </tr> </table> <p>Trusts to provide figures as normal, however please <u>attach returns</u> for the 4 quarters should further quality assurance be required.</p>	A1	PRIVATE MATTER / NOT DISCUSSED	0	A2	DOESN'T SEE SELF AS CARER	1	A3	TIME UNSUITABLE - RECONSIDER	1	A4	DOES NOT REQUIRE SUPPORT	4	A5	PERCEPTION OF NO BENEFIT	1	A6	CONCERN IMPACT ON BENEFITS	0	A7	TOO COMPLICATED / TIME CONSUMING	8	A8	NO REASON GIVEN	6	0	18	3
	A1	PRIVATE MATTER / NOT DISCUSSED	0																									
	A2	DOESN'T SEE SELF AS CARER	1																									
	A3	TIME UNSUITABLE - RECONSIDER	1																									
	A4	DOES NOT REQUIRE SUPPORT	4																									
	A5	PERCEPTION OF NO BENEFIT	1																									
	A6	CONCERN IMPACT ON BENEFITS	0																									
	A7	TOO COMPLICATED / TIME CONSUMING	8																									
	A8	NO REASON GIVEN	6																									
	<p>To note with moving to a single source of reporting via SPPG PSSID return for Carers Assessments, carers reassessments offered, accepted and declined will also be available – this will be sourced from existing returns.</p>	X	X	X																								
5.2b	<p>Number of Adults waiting on a Carers assessment at 31st March - work to commence in 2024/25 to develop regionally agreed definitions and minimum dataset.</p>	X	X	X																								
5.3	<p>Of the total at 5.2 in how many of the assessments were the carers, caring for disabled children?</p>	N/A	N/A	N/A																								
5.4	<p>Number of adult carers receiving a service @ 31st March</p>	3	79	14																								

5.5	Number of young carers offered individual carers assessments during the period.	8
5.6	Number of young carers assessments completed during the period.	8
5.7	Number of young carers receiving a service @ 31 st March	3
5.8	(a) Number of requests for direct payments during the period 1 st April – 31 st March	40
	(b) Number of new approvals for direct payments during the period 1 st April – 31 st March	34
	(c) Number of adults receiving direct payments @ 31 st March (Source: SPPG PSSID Return)	162
Trusts to provide figures as normal, however please <u>attach return</u> should further quality assurance be required.		
5.9	Number of children receiving direct payments @ 31 st March	N/A
5.9.a	Of those at 5.8 how many of these direct payments are being managed by another person acting on behalf of the service user in respect of another person?	0
5.10	Number of carers receiving direct payments @ 31 st March	0
5.11	Number of one off Carers Grants made in-year.	369
Note: sections 5.8, 5.9 and 5.10 are to be reported as mutually exclusive.		

DATA RETURN 6**Adult Community and Older Peoples Service (ACOPS), Division of Adult Social Care and Community MDTs, Physical & Sensory Disability Service****8 SAFEGUARDING ADULTS**

6.1	Number of adult protection referrals within the period	SPPG to collect from PSSID
6.2	Number of adult protection referrals within the period broken down by the following categories of abuse: <ul style="list-style-type: none"> (o) Financial (p) Institutional (q) Neglect (r) Physical (s) Psychological/ Emotional (t) Sexual (u) Exploitation 	SPPG to collect from PSSID
6.3	Number of investigations commenced within the period	SPPG to collect from PSSID
6.4	Number of cases closed to adults in need of protection within the period This year the Trust has been able to disaggregate the total figure to provide a breakdown:	18
6.5	Number of protection plans commenced within the period	SPPG to collect from PSSID
6.6	Number of care and protection plans in place on 31st March	Not required

DATA RETURN 9 – NIL Return**Return provided with ACOPS (Adult Social Work Services, Community Nursing and Intermediate Care Services & Adult Social Care and Community MDTs) for full Directorate information**

ADULT LEARNING DISABILITY SERVICES

2. PROGRAMME OF CARE SUMMARY

Adult Learning Disability Services

2.1 Named Officer responsible for professional Social Work

Colette Johnston is the Divisional Social Worker (Interim) and the named professional officer for Social Work and Social Care in Adult Learning Disability Services.

The Director of Adult Learning Disability Services, (Peter Sloan) is supported by the Co-Directors with the responsibility and accountability for the operational delivery of statutory functions by the Directorate.

Accountability Arrangements

There remains an unbroken line of professional accountability for social work, from the individual social work practitioner to the Divisional Social Worker and through to the EDSW of Social Work, who reports to the Chief Executive and to the Trust Board.

Please see organisational structure on page 104.

Highlight any vacancies and the action taken to recruit against these.

Community/ Hospital Social Work

Within this reporting period there have been ongoing staff vacancies in the community and hospital social work. Recruitment through the regional recruitment process continues for band 6 posts. Additionally, staff have facilitated recruitment events to profile Learning Disability services. The service area was compliant with the Department of Health direction to cease off contract agency staff by June 2023.

Within this reporting period 6 additional social work posts were secured through the reconfiguration of monies and are currently going through the regional recruitment process. These additional posts will be located in all four of the community teams.

The Trust has an established Social Work Recruitment Retention Steering Group with associated work streams which have progressed initiatives such as 'Valuing Social Work and Social Care' well-being events, the creation of a Social Work Bank and enhanced leadership support. A Trust Transfer policy for band 6 social workers is currently out for consultation and will be operational in the next reporting period.

The retention of the majority of all final year social work students, who had placements within the Learning Disability Service last year was another successful recruitment exercise.

Banding	2023	Currently 2024
	Vacancies	Vacancies (where there is no cover in place)
B6 Social Work Posts	20%	27% - (currently progressed with regional recruitment)
B7 Team Leader Posts	20%	20% (One vacant post, currently in recruitment process.)
B7 Senior Practitioner Posts	78%	0%

Within the Hospital Social Work Team (HSW), due to the pending closure of MAH, recruitment has remained difficult. Re-deployment is ongoing and both the Band 7 Team Leader and Band 6 Social Worker are part of this process. In-reach cover arrangements are in place from Community Teams to ensure attendance at MDT, Strategy and Resettlement meetings.

Adult Safeguarding

As of 31st March 2024, The Adult Safeguarding Team has the following staffing structure.

This staff group includes a number of redeployments from other areas:

- 8b Interim Service Manager (vacant post)
- 8a ASG Lead x 2
- Band 7 Senior Social Work Practitioner DAPO x 2
- Band 6 Social Worker (vacant) Recruitment has not been successful to this post and the Trust continues to engage with Social Work bank to identify appropriate cover.

2.2 Please highlight key Social Work Workforce planning issues, including recruitment, retention and professional roles.

Provide a summary regarding the detail and level of vacancies and any vacancy control systems in place.

In relation to recruitment within the MAH site, redeployment is currently the main focus with the pending closure of the hospital in June 2024.

Over this reporting period permanent Social Work recruitment at all bands within the Community has significantly improved. Vacancies for Band 6 have increased but this is due to the additional six posts that were identified after budget reconfiguration. All vacant posts have been raised through scrutiny and the Regional Recruitment process in a timely manner.

At present the Principal Social work post for Governance is vacant; recruitment is ongoing with interviews arranged for April 2024.

The introduction of an induction programme, has improved outcomes for staff in Adult Learning Disability Services. This has resulted in staff retention within the Trust and feedback from staff who have attended the induction programme is very positive. Exit interviews indicate staff who have left the service during the past year highlighted personal reasons and promotion as reasons why they were leaving the service.

In addition the Trust has focussed on staff retention by facilitating events for staff, such as team building exercises, coffee mornings, staff care activities, well-being sessions and bespoke training days. This focus will continue

	<p>during 2024/2025, as feedback from staff has been extremely positive in promoting and maintaining staff wellbeing.</p> <p>The Division has two qualified Band 7 and one Band 8 ASW staff who participate in the ASW daytime rota. In addition there is a Band 6 Social Worker undergoing the ASW training and is due to complete in September 2024.</p>
2.3	<p>Supervision arrangements for social workers</p> <p>Please confirm that the Trust is fully compliant with the Regional Supervision Framework YES</p> <p>Adult Learning Disability Services reports an overall annual compliance rate of 88% with the final quarter of the reporting period at 91%. Reasons for non-compliance include work pressures and the high level of compliance in the services reflect the priority given to supervision.</p>
2.4	<p>Please provide an update on the robustness of the data provided in this report and any data assurances processes in relation to it. (This may include reference to electronic or manual data sources and any data gaps and work with Encompass).</p> <p>The Trust provides assurance that all data contained in this report is accurate and subject to scrutiny through three lines of assurance within the Trusts Integrated Governance and Assurance Framework. Data is interrogated through bi- monthly Social Work Senior Leaders Assurance Group, monthly Divisional Governance meetings and the Social Care Steering Group.</p> <p>Community Teams The community teams use PARIS and a Microsoft Team's Excel dashboard for data collection.</p> <p>Learning Disability services are in the process of developing a new informatics system – Power BI in partnership with the Trust's Information Service. This system is being piloted within the community teams with the aim of incorporating this system across the entire Learning Disability service. The data is reviewed monthly by the Business Support Team.</p> <p>Commissioned Services All data in relation to commissioned services is recorded on a dashboard and assured by the Service Manager on a monthly basis.</p> <p>Adult Safeguarding Team (ASG)</p> <p>There is an ongoing pilot of an ASG data set, developed by the ASG lead Rhoda McBride. This is in partnership with the Power BI team and is being piloted across Learning Disability services. It is anticipated that pilot outcomes will indicate improvements in good governance across the service with regard to ASG referrals, ongoing investigations and outcomes. This will also enable the analysis of ASG themes and patterns across the service</p>

2.5 Programme of Care to advise of numbers of any significant judgements and/or decisions derived from Serious Adverse Incidents, Case Management Reviews, Mental Health Review Tribunals, Judicial Reviews, Audits or RQIA Inspection and/or Review activity *completed* during the reporting period, that directly relates to the Trusts discharge of their statutory functions (please complete table below).

	Number
Serious Adverse Incidents	0
Domestic Homicide Reviews	0
Case Management Reviews	0
Mental Health Review Tribunals	0
Judicial Reviews	9
Audits	<p>Carer assessment tool</p> <p>Supervision audit was completed by SW Governance Lead.</p> <p>Access NI for agency staff audit completed</p> <p>Social Work and Social Care Induction Audit- Dec 2023</p> <p>Self Directed Support audit</p>
RQIA Inspections	<p>Unannounced care inspections</p> <p>LD Day Care Centres Everton - 01/09/23 Edgumbe – 08/09/23 Mount Oriel – 19/09/23 and 23/02/24 Fortwilliam – 04/12/23 Orchardville – 08/12/23 Suffolk – 07/03/24 Fallswater – 28/03/24</p> <p>Supported Living/Residential/Respite</p> <p>Hanna Street Supported Living 31/10/2023 Hanna Street Residential Care Home - 24/08/2023 Mertoun Park - 14/06/2023 Trench Park - 26/07/2023 611 Ormeau Road - 21/08/2023 Trench Park – 13/10/2023 Finaghy – 30/10/2023 Greystone – 27/11/2023 80 Malone road – 30/11/2023 Cherryhill 04/12/2023 29a Annadale Ave – 05/12/2023 Rigby Close 30/01/2024 Mertoun Park – 25/01/2024</p>

RQIA Enforcement notices – Failure To Comply Notices	0

Please provide details of any particular recommendations or learning that the Trust would wish to highlight.

RQIA Inspection Muckamore Abbey Hospital

An unannounced RQIA care inspection took place on all inpatient wards in Muckamore Abbey hospital on 21st August 2023. Engagement in relation to 1 individual focussed on incident management training for staff. This has been completed and resettlement is being progressed. A follow up unannounced care inspection on same issues was undertaken by RQIA on the 10th January 2024 and no areas for improvement were identified.

Muckamore Abbey Hospital Public Inquiry and PSNI Investigation

The Muckamore Abbey Hospital Public Inquiry was ongoing throughout this reporting period. The Trust are fully engaged with the Inquiry and have been involved in the collation of relevant documentation, compilation of statements and the provision of witnesses, to assist the Inquiry.

The Trust continue to support the ongoing PSNI led investigation in relation to the abuse that occurred within Muckamore Abbey Hospital and have deployed a number of staff for the duration of that work.

Northern Ireland Public Services Ombudsman Review

The Adult Learning Disability service has commenced work based on the learning from Northern Ireland Public Services Ombudsman Recommendations; in regard to transitions from Children with a Disability Services The aim of this work to provide a smooth transition process which pro-actively plans to meet a service user’s aspirations and assessed needs within a person centred framework in a timely manner. The following actions have taken place within this reporting period;

1. Interim Arrangement for Transition from CWD to LD Service has been agreed and implemented with the development of a transition pathway
2. Transition Working Subgroup has been established.
3. Quality Improvement project has been agreed to ensure that aim and outcomes are measured

This work has included improvements in the interface across the services and with other disciplines within LD service. (Psychological Services, CNLD, Psychiatry, Speech and Language, OT, and CWDT).

Direct Payments

Further to the sample audit carried out during the last reporting period 2023, that highlighted issues of compliance with DP Policies and procedures, a further audit has been completed exploring compliance across all four learning disability teams.

- The audit highlighted a number of themes:
- Non-compliance with administrative framework

- Non- compliance with statutory obligations
- Poor communication with families
- Service user engagement and impact/outcomes for service users.

These issues have been addressed through:

- Review of SDS policies and procedures and updated training for all staff attendant to the operational delivery of SDS;
- An auditing framework for all new direct payment applications before approval via the resource allocation panel;
- Ongoing review of all SDS payments to ensure compliance with policy and procedure;
- Re assessment of high cost cases and commencement of business cases where appropriate;
- Ongoing consultation with finance department to provide assurance around financial compliance and support to SDS recipients; and
- Policy and procedural development around SDS for young people transitioning to adult LD services.
- Work is ongoing to develop an outcome measurement tool in line with provision across LD services. Work is also continuing to devise contingency plans for SDS recipients in line with future care planning.

Carers Assessment Tool

14 carer assessments were audited across the community teams and the learning and recommendations shared across the service. Development of carers support has remained a focus within this reporting period with introduction of specific actions to support the Trust's carer strategy.

1. Focus on the identification of carers and creating an accurate baseline.
2. Dedicate resources to support carer navigation within the service.
3. Educate learning disability staff teams to support carer identification.
5. Organise carer events, which will be carer-led, to connect with and involve carers.

Two projects are identified to deliver on the Carer Strategy Action Plan for LD.

Project 1: Respite. Involving carers with the development of services in Learning disability, focusing on respite/short breaks and involving carers in a respite-working group.

Project 2: Identifying and involving young carers with support through young carer hubs/support groups.

Social Work and Social Care Induction Audit

Trust audit in December 2023 for 2nd line assurance in relation to the induction of social work and social care staff. This audit was conducted by the Office of the Executive Director of Social Work. Recommendations identified that impact on statutory functions

- All service areas will ensure that NISCC registration information and standards of conduct and practice are included in induction.
- All new employees will be signposted to the NISCC portal
- Development of a framework for service users/carers to become involved in the planning and delivery of the induction for new staff across all service areas.

Action plan is developed and remains under review across all service areas. Re-audit scheduled for December 2024.

Judicial Review

Judicial Review (JR 128) of the failure of the Respondent Trust to discharge the Applicant from the Iveagh Assessment and Treatment Centre (“Iveagh Centre”), into a community placement appropriate to the service users needs, within a reasonable period of time. The application dated back to Dec 2021 and a position was agreed by all parties in Jan 2024, whereby an alternative provision for the young person who had since transitioned to adult services was identified. An adult placement has been identified which has been accepted by the young person’s family.

2.6 Discharge of Directed Statutory Functions

Summary of areas where the Trust has not adequately discharged their Directed Statutory Functions for this Programme of Care. Please outline remedial action taken to address this situation and any proposed future action.

2.6	Summary of areas where the Trust has not adequately discharged their Directed Statutory Functions for this Programme of Care.	Please outline remedial action taken to address this situation and any proposed future action.
	Learning Disability Issues	
	<p>1- <u>Annual Reviews</u></p> <p>Community Social Work experienced staffing resource issues during 2023/2024 due to a combination of vacant posts and staff sickness. This has resulted in some reviews occurring outside the expected time frame. Those of highest risk are prioritised for review purposes to ensure a safe service.</p> <p>2 - <u>Muckamore Abbey</u></p> <p>Identifying and developing appropriate placements for the patients in Muckamore hospital has been challenging for a range of reasons, which includes the need for bespoke placements to meet individual need and individual choice by patients and families.</p>	<p style="text-align: center;"><u>Annual Reviews</u></p> <p>Ongoing review of RAG rating within the current structures for risk escalation Social work staff have the opportunity to undertake additional hours to complete priority cases.</p> <p>This issue was added to the Trust risk register in January 2023</p> <p style="text-align: center;"><u>Muckamore Abbey</u></p> <p>Care Management report that finding appropriate placements for patients in Muckamore has been challenging due to the need for bespoke environments and appropriately skilled staff. All Trust patients (11) now have plans in place for resettlement.</p> <p>The Trust has identified the need to develop an Intensive Support Service to provide a wraparound service during crises, to reduce risk and support community placements. A revenue business case has been submitted to SPPG for an intensive intervention team and assessment and treatment inpatient beds at KHCP once approved admission pathway will be finalised</p>

3 - Interface between Mental Health (NI) Order 1986 (MHO)/Mental Capacity Act (2016) and transitional provisions for the purposes of detention

A review of patients legal status in the context of resettlement has identified that there are a number of patients in Muckamore Abbey Hospital who require both DoLS and a Declaratory Order due to the level of restriction included in their care plans. 4 patients at MAH are subject to DoLS and 6 remain subject to detention under the Mental Health Order (NI) 1986.

Two Declaratory Orders were progressed in respect of patients in Muckamore whereby their care plans included restraint where necessary; these patients both had Deprivation of Liberty Safeguards, but the Mental Capacity Act (Northern Ireland) 2016 is in partial implementation and the section related to restraint is not yet implemented.

The Trust remains challenged to resource suitable mental health provision for adults with a learning disability who require in-patient support. There have been 2 Applications for Detention under MHO within this reporting period with no available LD Inpatient placements within the Trust. One individual was admitted to a Mental Health inpatient ward with a bespoke support package. This remains an ongoing situation. The second individual, further to an application for Judicial Review, was admitted to MAH.

4 -Domiciliary Care Packages (unmet need)

There are 13 service users awaiting domiciliary care packages at this time. The longest waiting period for a package of care is 25/07/2022.

The number of service users awaiting domiciliary care package has reduced during this reporting period.

Interface between Mental Health (NI) Order 1986 (MHO)/Mental Capacity Act (2016) and transitional provisions for the purposes of detention.

The Trust has liaised with the Mental Capacity Act Unit in the Department of Health regarding challenges in this area. Through collaborative working between Trusts and the Department of Health, it is agreed that Section 12 of the Mental Capacity Act (Northern Ireland) 2016 will be implemented. Section 12 relates specifically to acts of restraint. Work in the Department of Health is ongoing in relation to this matter with implementation expected in Autumn 2024. Implementation of Section 12 will negate the necessity of Declaratory Orders in these specific instances. The Trust MCA Lead sits on a working group in relation to Section 12 implementation and will share updates as they are available.

The Trust have progressed a business case to secure Inpatient beds on the Knockbracken Health Care Park site. Complementary to this action is the progressing of an Intensive Treatment Team to support individuals both pre and post mental health presentations. In addition, the Trust are engaged with Regional stakeholders in the development of a Regional Pathway for service users who require this level of support. Staff have also developed a range of supports for family members and carers attendant to those individuals experiencing mental ill health challenges.

Community Domiciliary Care Packages (unmet need) and Specialist Placements

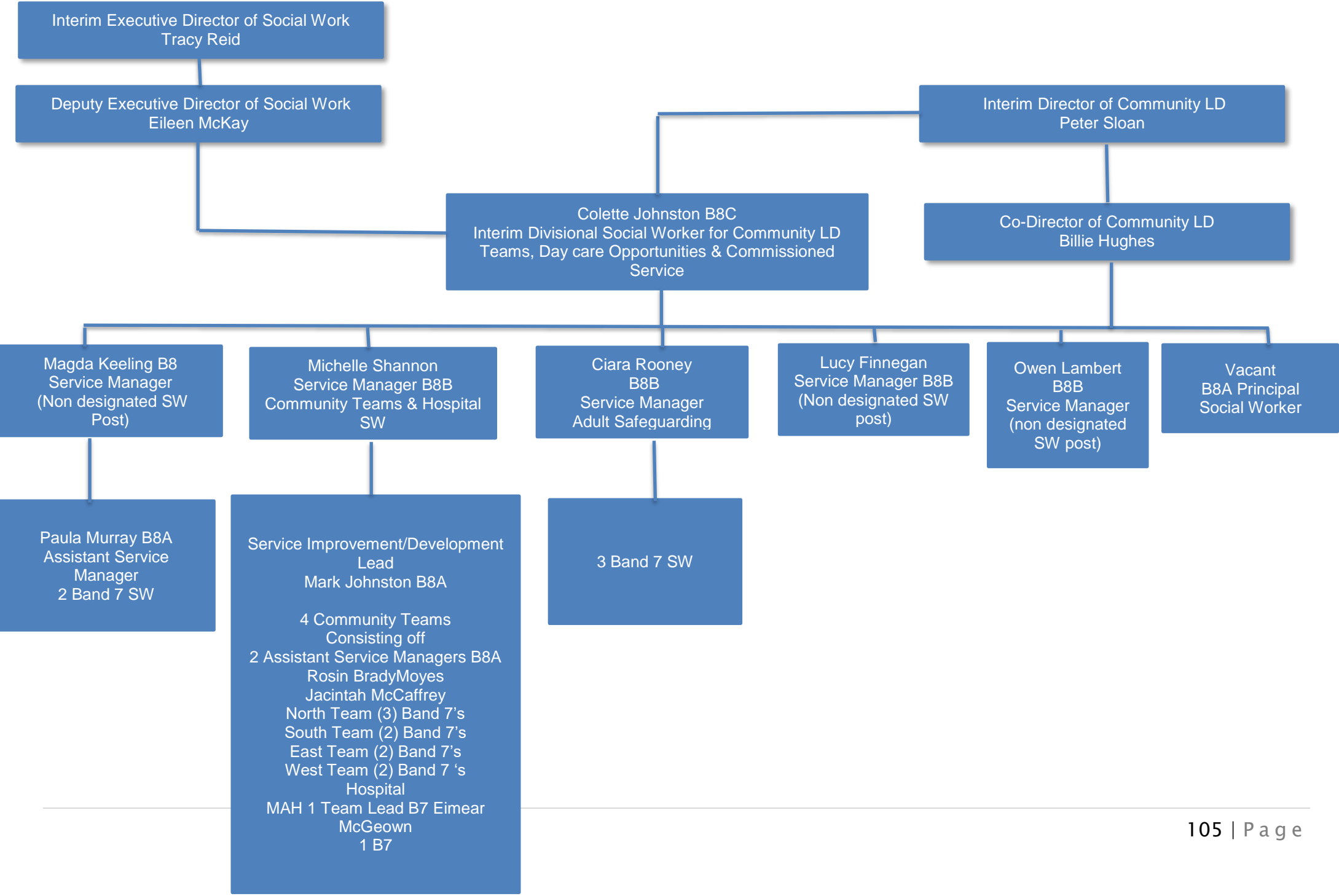
The service areas continue to liaise with the Care Bureau on a case by case basis to identify progress.

Care management have ongoing contact with family to update on position of care packages.

Alternative supports are explored through Trust provisions and Direct Payments.

<p>Risks associated with Domiciliary Care Unmet Need across the Trust are recorded on the Board Assurance Framework</p> <p><u>5- Unallocated cases within Community Teams</u></p> <p>At this time, there are total of 579 community cases which are spread across 4 teams awaiting a Social Worker allocation and review at the end of this reporting period.</p> <p>This is recorded, on the Divisional Risk Register.</p>	<p>A scoping of caseloads to identify those cases of highest risk of placement breakdown or changing needs to identify future planning requirements is ongoing. The Trust awaits the DOH framework for people with a Learning Disability</p> <p><u>Unallocated cases within Community Teams</u></p> <p>The community teams have developed an action plan for unallocated cases and new referrals.</p> <p>Overtime has been offered to Band 6 staff to complete this outstanding work.</p> <p>Teams continue to Rag rate all unallocated cases, prioritising allocation.</p> <p>Care and Attention database has been devised across the four community teams, with professional oversight of senior management.</p> <p>Active engagement with recruitment process to address workforce deficits.</p>
<p><u>6- SDS/Direct Payments</u></p> <p>Full compliance with the Direct Payments guidelines remains a risk:</p> <p>This remains on the Divisional Risk Register.</p>	<p><u>SDS/Direct Payments</u></p> <p>Given the concern attendant to compliance with Policy and Procedures the service completed a service wide audit in relation to adherence with policy and procedures</p> <ul style="list-style-type: none"> -A number of areas for improvement were identified and remedial action taken. <p>Work is ongoing to ensure full compliance in all areas attendant to the delivery and monitoring of direct payments.</p>
<p><u>Adult Protection Bill</u></p> <p>Within this reporting period the Trust has continued to discharge it's responsibility with regard to the safeguarding of adults at risk within the Adult Learning Disability population. The Adult Safeguarding service continues to experience staff vacancy at Band 6 and Band 8a which continues to have implications in relation to workforce capacity. The introduction</p>	<p><u>Adult Protection Bill</u></p> <p>The Trust notes a significant additional workforce resource pressure with the introduction of the Adult Protection Bill, including the facilitation of the training for additional specialist knowledge required for the APSW role. In addition the provision from within the current workforce resources to the APSW role will have implication for current resource allocation and management.</p>

	<p>of the Adult Protection Bill will have additional resource implication_</p>	<p>The Trust is considering training and resource implications in regard to the enhanced risk management expectations in the context of prioritisation of risk for adults at risk of harm.</p>
	<p><u>Use of Seclusion within a community setting</u></p> <p>The Trust has ongoing concerns attendant to the use of seclusion as a behaviour management support within the community. This is in relation to commissioned service provision. The Trust has ongoing engagement with a range of stakeholders and reduction plans in place.</p>	<p><u>Use of seclusion within a community setting</u></p> <p>The Trust ensures that there is full consideration to the promotion of human rights through safeguarding adults with a learning disability in the context of the deprivation of liberty. This is achieved through the introduction of seclusion reduction plans which are closely monitored via multi-disciplinary review.</p> <p>The Trust has ensured DOH are kept informed though Early Alerts. Further to this the Trust has had extensive discussions with RQIA and shared concerns formally with DOH in a letter & requested guidance. Where appropriate the Trust have involved PSNI.</p> <p>The Trust have sought advice from the Directorate of Legal Services, which was to manage seclusion within adult safeguarding processes.</p> <p>The Trust await the regional policy on the use of Restrictive Practices in its's social care settings.</p>



DATA RETURN 1
Adult Learning Disability Services

1 GENERAL PROVISIONS			
		<65	65+
1.1	How many adults were referred for assessment of social work or social care need during the period?	261	52
1.2	Of those reported at 1.1 how many adults commenced receipt of social work or social care services during the period?	183	44
1.3	How many adults are in receipt of social work or social care services at 31 st March? <i>Note: the number of adults on open caseloads of social work or social care services and aged 18+.</i>	1378	222
1.3a	How many adults are in receipt of social work support only at 31 st March (not reported at 1.4)? *The Trust is reporting an increase from 215 to 700 adults in receipt of social work only support. This increase is due to improved accuracy of reporting through the introduction of Power BI <i>Note: the number of adults on open caseloads of social workers aged 18+.</i>	*700	57
1.4	How many care packages are in place on 31 st March in the following categories:		
	xvii. Residential Home Care (Source: DoH return) Trusts to provide figures as normal, as age breakdown required, however please <u>attach return</u> should further quality assurance be required.	82	27
	xviii. Nursing Home Care (Source: DoH return) Trusts to provide figures as normal, as age breakdown required, however please <u>attach return</u> should further quality assurance be required.	86	65
	xix. Domiciliary Care – Include Care and Non-Care Managed Packages. (Source: SPPG PSSID return) Trusts to provide figures as normal, as age breakdown required, however please <u>attach return</u> should further quality assurance be required.	109	22
	xx. Supported Living xxi. *This accurately reflects the number of supported living placements. The Trust notes an error in recording in the last reporting period, where number should have been recorded as 193 rather than 93.	*173	18
	xxii. Shared Lives – Number of Adult Family Placements (long term placement) To note: work is ongoing with Trusts to agree definitions and minimum dataset for Shared Lives for future reporting.	153	0
1.4a	For all those listed above in 1.4 provide assurance that the Care Management process is being applied in accordance with the DHSSPS Care Management HSC ECCU/1/2010 Circular and the subsequent update within Circular HSC (ECCU) 1/2021.		

	YES		
1.4b	Annual Reviews – Please provide assurances to the Commissioner that there is professional social work oversight of the Annual Review process in your Trust During this reporting period the Trust reports that reviews are undertaken by professional staff only.		
1.5	Number of adults provided with a respite Short Break during the period.	<i>PSSID return</i>	<i>PSSID return</i>
1.5b	Shared Lives – Overnight Stays To note: work is ongoing with Trusts to agree definitions and minimum dataset for Shared Lives for future reporting.	X	X
1.6	Number of adults known to the Programme of Care in receipt of Centre based Day Care		
	- Statutory sector	482	46
	- Independent *The Trust notes a significant decrease in numbers reported from 463 to 70. This reflects increased accuracy of reporting systems and criteria in regard to contracts.	*70	9
1.6a	Number of adults known to the Programme of Care in receipt of Day Opportunities *The Trust notes a significant decrease in numbers reported from 927 to 373. This reflects increased accuracy of reporting systems and strengthened assurance mechanisms.	*373	9
1.6b	Shared Lives – Day Support To note: work is ongoing with Trusts to agree definitions and minimum dataset for Shared Lives for future reporting.	X	X
1.7	Of those at 1.6 how many are dementia (EMI)		
	- Statutory sector	11	4
	- Independent sector	3	1
1.8	This is intentionally blank		
1.9	How many of this Programme of Care clients are in HSC Trust funded social care placements outside Northern Ireland?	0	0
1.10	Annual Reviews – work to commence in 2024/25 to develop regionally agreed definitions and minimum dataset.	X	X
1.11	Unallocated Cases – work to commence in 2024/25 to develop regionally agreed definitions and minimum dataset.	X	X
1.12	Vacancies (Adults) – work to commence in 2024/25 to develop regionally agreed definitions and minimum dataset.	X	X

**DATA RETURN 1 – Hospital
Adult Learning Disability Services**

1 GENERAL PROVISIONS - HOSPITAL				
		<18	18-65	65+
1.1	How many adults or children were referred to Hospital Social Workers for assessment during the period?	0	0	0
1.2	Of those reported at 1.1 how many assessments of need were undertaken during the period?	0	0	0
1.3	How many adults or children are on Hospital Social Workers caseloads at 31st March?	0	0	0

Age is at date of referral for 1.1 and 1.2
Age at 31st March for 1.3

DATA RETURN 1 – Acute Hospital (general setting)
Adult Learning Disability Services ; Muckamore Abbey Hospital and Iveagh Centre

1 GENERAL PROVISIONS – ACUTE HOSPITAL (GENERAL SETTING)				
		<18	18-65	65+
1.1	How many adults or children were referred to Hospital Social Workers for assessment during the period?	6	1	0
1.2	Of those reported at 1.1 how many assessments of need were undertaken during the period? (assessment is to include screening). Please note it is expected that the response for sections 1.1 & 1.2 will be the same	6	1	0
1.3	How many adults or children are on Hospital Social Workers caseloads at 31 st March?	3	26	2
	<i>Age is at date of referral for 1.1 and 1.2 Age at 31st March for 1.3</i>			

DATA RETURN 2
Adult Learning Disability Services

2 CHRONICALLY SICK AND DISABLED PERSONS (NI) ACT 1978;			
		<65	65+
2.1	Details of patients less than 65 in hospital for long term (>3months) care who are being treated in hospital ward for over 65 (no longer required)	x	x
2.2	Number of adults known to the Programme of Care who are:		
	Certified severely sight impaired (Blind)	19	1
	Certified severely sight impaired (Partially sighted)	55	0
	Sight Loss	10	0
2.3	Number of adults known to the Programme of Care who are:		
	Profoundly Deaf sign language users	16	0
	Profoundly Deaf Oral / Lip Readers	17	1
	Hard of hearing	52	2
	Tinnitus (New)	0	0
2.4	Number of adults known to the Programme of Care who are:		
	Deaf Blind	3	0

DATA RETURN 3
Adult Learning Disability

3 DISABLED PERSONS (NI) ACT 1989		
<i>Note: 'disabled people' includes individuals with physical disability, sensory impairment, learning disability</i>		
3.1	Number of referrals to Physical/Learning/Sensory Disability during the reporting period.	0
		313
		0
	Number of Disabled people known as at 31 st March. <i>Note: adults with a disability on the caseload of social workers.</i>	1600
3.2	Number of assessments of need carried out during period end 31 st March	298
3.3	Number of assessments undertaken of disabled children ceasing full time education	37

DATA RETURN 4
Adult Learning Disability Services

4 HEALTH AND PERSONAL SOCIAL SERVICES (NI) ORDER 1972;
Article 15, Article 36 [as amended by Registered Homes (NI) Order 1992]

4.1	Number of Article 15 (HPSS Order) Payments	50
	Total expenditure for the above payments	£14913
4.2	Number of TRUST FUNDED people in residential care	123
4.3	Number of TRUST FUNDED people in nursing care *The Trust notes an Incorrect figure submitted during the last reporting period. This should have been recorded as 66 not 166	*65
4.4	How many clients are in receipt of £100 free nursing care allowance? (this refers only to self-funding clients and excludes Trust funded places)	4

DATA RETURN 5
Adult Learning Disability Services

5 CARERS AND DIRECT PAYMENTS ACT 2002

		16-17	18-64	65+	
5.1	Number of adult carers offered individual carers assessments during the period (Source: SPPG PSSID Return) Trusts to provide figures as normal, however please <u>attach returns</u> for the 4 quarters should further quality assurance be required.	5	119	84	
5.2	Number of adult individual carers assessments completed during the period (Source: SPPG PSSID Return) Trusts to provide figures as normal, however please <u>attach returns</u> for the 4 quarters should further quality assurance be required.	5	108	75	
5.2a	Number of adult individual carers assessments declined during the period and the reasons why (Source: SPPG PSSID Return)	0	11	9	
	A 1 PRIVATE MATTER/ NOT DISCUSSED				0
	A 2 DOESN'T SEE SELF AS CARER				0
	A 3 TIME UNSUITABLE-RECONSIDER				0
	A 4 DOES NOT REQUIRE SUPPORT				2
	A 5 PERCEPTION OF NO BENEFIT				2
	A 6 CONCERN OF IMPACT ON BENEFITS				0
	A 7 TOO COMPLICATED/TIME CONSUMING				0
	A8 NO REASON GIVEN				16
Trusts to provide figures as normal, however please <u>attach returns</u> for the 4 quarters should further quality assurance be required.					
	To note with moving to a single source of reporting via SPPG PSSID return for Carers Assessments, carers reassessments offered, accepted and declined will also be available – this will be sourced from existing returns.	X	X	X	
5.2b	Number of Adults waiting on a Carers assessment at 31 st March - work to commence in 2024/25 to develop regionally agreed definitions and minimum dataset.	x	X	X	
5.3	Of the total at 5.2 in how many of the assessments were the carers, caring for disabled children?	0	0	0	
5.4	Number of adult carers receiving a service @ 31 st March	5	712	253	
5.5	Number of young carers offered individual carers assessments during the period.	5			
5.6	Number of young carers assessments completed during the period.	5			
5.7	Number of young carers receiving a service @ 31 st March	5			

5.8	(a) Number of requests for direct payments during the period 1 st April – 31 st March	99
	(b) Number of new approvals for direct payments during the period 1 st April – 31 st March	68
	(c) Number of adults receiving direct payments @ 31 st March (Source: SPPG PSSID Return)	274
Trusts to provide figures as normal, however please <u>attach return</u> should further quality assurance be required.		
5.9	Number of children receiving direct payments @ 31 st March	0
5.9.a	Of those at 5.8 how many of these direct payments are being managed by another person acting on behalf of the service user in respect of another person?	274
5.10	Number of carers receiving direct payments @ 31 st March	8
5.11	Number of one off Carers Grants made in-year.	207
Note: sections 5.8, 5.9 and 5.10 are to be reported as mutually exclusive.		

DATA RETURN 6
Adult Learning Disability Services

9 SAFEGUARDING ADULTS

6.1	Number of adult protection referrals within the period	SPPG to collect from PSSID
6.2	Number of adult protection referrals within the period broken down by the following categories of abuse: (v) Financial (w) Institutional (x) Neglect (y) Physical (z) Psychological/ Emotional (aa) Sexual (bb) Exploitation	SPPG to collect from PSSID
6.3	Number of investigations commenced within the period	SPPG to collect from PSSID
6.4	Number of cases closed to adults in need of protection within the period 187 Adult Protection cases closed across the MAH and community sites 270 closures last year submission reflected historical cases closed at MAH and a percentage of community teams closures	187
6.5	Number of protection plans commenced within the period	SPPG to collect from PSSID
6.6	Number of care and protection plans in place on 31st March	Not required

PLEASE ENSURE A SEPARATE RETURN IS COMPLETED FOR EACH PROGRAMME

DATA RETURN 9
Adult Learning Disability Services

9 The Mental Health (NI) Order 1986
Article 4 (4) (b) Article 5 (1) Article 5 (6) Article 18(5) Article 18(6) Article 115

Admission for Assessment Process Article 4 and 5		TRUST ASW	RESWS ASW
9.1	Total Number of Assessments made by ASWs under the MHO	15	N/A
9.1.a	Of these how many resulted in an application being made by an ASW under (Article 5.1b)	12	N/A
9.1.b	How many assessments required the input of a second ASW (Article 5.4a)	0	N/A
9.1.c	Number of applications made by the nearest relative (Article 5.1.a)	0	
9.1.d	Can the Trust provide assurance that they are meeting their duties under Article 117.1 to take all practical steps to inform the nearest relative at least 7 days prior to discharge. YES <i>If no, please explain</i>		

Use of Doctors Holding Powers (Article 7)		
9.2	How many times did a hospital doctor use holding powers?	0
9.2a	Of these, how many resulted in an application being made?	0

ASW Applicant reports		
9.3	Number of ASW applicant reports completed	15
9.3.a	<p><i>Confirm if these reports were completed within 5 working days</i></p> <p>NO <i>If no, please explain</i></p> <p>There were 32/298 (10%) reports not completed within 5 working days. This is an increase (16) from previous reporting period 1st April 2022-31st March 2023. The reasons for this are as follows;</p> <ul style="list-style-type: none"> 3. Work Pressures, Sick Leave and Annual Leave. 4. Impact of Action Short of Strike (ASOS) by Unions which began in July 2023 – current. 28/32 late reports during ASOS. 5. <p>This is across all service areas and number for ALD not separated.</p>	

Social Circumstances Reports (Article 5.6)		
9.4	Total number of Social Circumstances reports completed. <i>This should equate to number given at 9.1c. If it does not please provide an explanation.</i>	0
9.4.a	Confirm if these reports were completed within 14 days? YES / NO If no, please explain	N/A

Mental Health Review Tribunal		
9.5	Number of applications to MHRT in relation to detained patients	4

Guardianships (Article 18)		
9.6	Number of Guardianships in place in Trust at period end	0
9.6.a	New applications for Guardianship during period (Article 19(1))	0
9.6.b	How many of these were transfers from detention (Article 28 (5) (b))	0
9.6.c	How many were Guardianship Orders made by Court (Article 44)	0
9.6.d	Number of new Guardianships accepted during the period (Article 22 (1))	0
9.6.e	Number of Guardianships renewed during the reporting period (Article 23)	0
9.6.f	Number of Guardianships accepted by a nominated other person	0
9.6.g	Number of MHR hearings in respect of people in Guardianship (provide total number)	0
9.6.h	Total number of Discharges from Guardianship during the reporting period (Article 24)	0
	Discharges as a result of an agreed multi-disciplinary care plan	0
	Lapsed	0
	Discharged by MHRT	0
	Discharged by Nearest Relative	0
	Total	0

Approved Social Worker (ASW) Register		
9.7	Number of newly appointed Approved Social Workers during period	MH return
9.7.a	Number of Approved Social Workers removed during period	MH return
9.7.b	Number of Approved Social Workers at period end (who have fulfilled requirements consistent with quality standards)	MH return
9.7c	Please provide assurance of HSCT progress in relation to implementation of the ASW Quality Standards 2021. Please include progress as per standards on; <ul style="list-style-type: none"> • Workforce Planning and Management • ASW Governance 	MH return

	<ul style="list-style-type: none"> • ASW Training • ASW Supervision and Support 	
--	---	--

9.8	<p>Do any of the returns for detention and Guardianship in this section relate to an individual who was under 18 years old?</p> <p>YES</p> <p>If yes, please provide number and advise on any issues presenting</p> <p>5 children have been subject to detention in Iveagh during this period. Not all children admitted to Iveagh are detained under the MHO and some are admitted on a voluntary basis with parental consent. At times it is appropriate for a child to be detained as, rather than being viewed as solely as restrictive the MHO also provides additional procedural and legislative safeguards for children and young people who are suffering from severe mental impairment and who, as a result of presenting as a risk to themselves and/or others, are subject to restrictive practices.</p>	
9.9	How many times during the reporting period has the Trust notified the Office of Care and Protection under Article 107? Please advise of any issues.	17

The Mental Health Order (NI) 1986 as amended by The Criminal Justice (NI) Order 1996.SArticle 50A(6) Schedule 2A Supervision and Treatment Orders.		
9.10	Number of supervision and treatment orders, (where a Trust social worker is the supervising officer) in force at the 31 st March	0
9.11	Of the Total shown at 9.10 how many have their treatment required as:	0
	(a) Treatment as an in-patient	0
	(b) Treatment as an out patient	0
	(c) Treatment by a specified medical practitioner	0
9.12	Of the total shown at 9.10 how many include requirements as to the residence of the supervised person (excluding in-patients)	0
9.13	Of the total shown at 9.10 how many of these supervision and treatment orders were made during the reporting period. Please advise of any issues presenting	0

9 The Mental Capacity (NI) Act, 2016

Panel Applications (during the year) (to be collected from 2022/23 onwards)		
9.14	Total number of Trust Panel Applications	SPPG will source

		from DoH MCA team
9.15	Number of Interim Authorisations	SPPG will source from DoH MCA team
9.16	Number of Full Authorisations	SPPG will source from DoH MCA team
9.17	Number where work has started but not completed	SPPG will source from DoH MCA team
9.18	Total number of cases not yet referred to Attorney General	SPPG will source from DoH MCA team
9.19	Do you have sufficient numbers of staff to carry out TP Formal Assessments of Capacity (Form 1)? Yes / No If no, please provide brief explanation of action taken	MH return
9.20	Do you have sufficient numbers of staff to make TP Best Interests determination (Form 2)? Yes / No If no, please provide brief explanation of action taken	MH return
9.21	Do you have sufficient numbers of medical practitioners to complete TP medical reports (Form 6)? Yes / No If no, please provide brief explanation of action taken	MH return

Trust Panels <i>(to be collected from 2022/23 onwards)</i>		
9.22	Do you have sufficient numbers of Trust Panel members to cover first applications (Form 5)? Yes / No If no, please provide brief explanation of action taken	MH return
9.23	Do you have sufficient number of Trust Panel members to cover Trust Panel Extension applications (Form 16)? Yes / No If no, please provide brief explanation of action taken	MH return
Extensions <i>(to be collected from 2022/23 onwards)</i>		
9.24	Total number of Extension Authorisations (during the year)	SPPG will source

		from DoH MCA team
9.25	Number referred to RT	SPPG will source from DoH MCA team
9.26	Number Not referred to RT	SPPG will source from DoH MCA team
9.27	Number of Cases outstanding	SPPG will source from DoH MCA team
9.28	Do you have sufficient number of staff suitably qualified to make responsible person statements (Form 15)? Yes / No If no, please provide brief explanation of action taken	MH return
9.29	Do You have Sufficient number of staff to carry out TP Extension Formal Assessments of Capacity (Form 1): Yes / No If no, please provide brief explanation of action taken	MH return
9.30	Do you have sufficient number of staff to make TP Extension Best Interests determination (Form 2)? Yes / No If no, please provide brief explanation of action taken	MH return

Short Term Detention Authorisations <i>(to be collected from 2022/23 onwards)</i>		
9.31	Work started but not completed (during the year)	SPPG will source from DoH MCA team
9.32	Total Number of short term detention authorisations.	SPPG will source from DoH MCA team
9.33	Do you have sufficient numbers of staff to carry out STD Formal Assessments of Capacity (Form 1)? Yes / No If no, please provide brief explanation of action taken	MH return
9.34	Do you have sufficient number of staff to make STD Best Interests determination (Form 2)? Yes / No If no, please provide brief explanation of action taken	MH return
9.35	Do you have sufficient numbers of medical practitioners to complete STD medical reports (Form 6)? Yes / No	MH return

	If no, please provide brief explanation of action taken	
9.36	Do you have sufficient number of ASWs and appropriate healthcare professionals to authorise STDs (Form 8)? Yes / No If no, please provide brief explanation of action taken	MH return

Live Cases (during the year) (to be collected from 2022/23 onwards)

9.37	Total No. Live Trust Panel / Extension Authorisations	SPPG will source from DoH MCA team
9.38	Total No. Live Short Term Detention Authorisations	SPPG will source from DoH MCA team

Training (to be collected from 2022/23 onwards)

9.39	Do you have sufficient number of staff trained to operate DoLs? Yes / No If no, please provide brief explanation of action taken	MH return
------	---	-----------

Trust Panels (to be collected from 2022/23 onwards)

9.40	Do you have sufficient number of Trust Panel members to cover first applications (Form 5)? Yes / No If no, please provide brief explanation of action taken	MH return
9.41	Do you have sufficient number of Trust Panel members to cover Trust? Yes / No If no, please provide brief explanation of action taken	MH return

Rule 6 reports and participation at hearings when required (to be collected from 2022/23 onwards)

9.42	Do you have sufficient number of staff to meet the Review Tribunal deadlines for Rule 6 requests? Yes / No If no, please provide brief explanation of action taken	MH return
------	---	-----------

9.43	(Section 3) MCA section 50 – Do you have sufficient number of staff to ensure all one year extensions are referred to the Attorney General? Yes / No If no, please provide brief explanation of action taken	MH return
9.44	Can you confirm that you have authorisations in place for those people who require one or more emergency provisions are in place and clearly recorded? Yes / No If no, please provide brief explanation of action taken	MH return

Please outline any other risks or issues with regard to compliance with the Mental Capacity Act?
MH return



CHILDRENS COMMUNITY SERVICES

2. PROGRAMME OF CARE SUMMARY

Programme of Care / Directorate:- Children's Community Services

2.1	<p>Named Officer responsible for professional Social Work</p> <p>Accountability Arrangements - Please provide a copy of your Organisational Structure from Assistant Director to Band 7 Staff and highlight any changes from last year (2022/23).</p> <p>Highlight any vacancies and the action taken to recruit against these.</p> <p>Lisa Hine is the Divisional Social Worker and the named officer for professional social work in children's community services with professional accountability to the Executive Director of Social Work (EDSW) Tracy Reid.</p> <p>The Director of Children's Community Services (CCS), Kerrylee Weatherall, supported by the Co-Directors, Michael Murray (Safeguarding services) and Martin Morgan (Corporate Parenting Services) have responsibility and accountability for the operational delivery of statutory functions by the CCS Directorate.</p> <p>Accountability Arrangements</p> <p>There remains an unbroken line of professional accountability for social work. Both the EDSW and Director of CCS are social work qualified which ensures an unbroken line of operational and professional accountability from the social work practitioner, through to the Director of CCS and the EDSW of social work who both report to the Chief Executive and to the Trust Board</p> <p>Please see copy of organisational structure on page 137 - 139.</p> <p>Highlight any vacancies and the action taken to recruit against these.</p> <p>At the end of the reporting period the CCS had no social work vacancies at Children Service Manager (CSM Band 8B) level, 2 of which are filled on a temporary basis (Regional Emergency Social Work Service RESWS and Looked After Children LAC).</p> <p>At the end of the reporting period all 3 principal practitioner posts were vacant. Recruitment is not in place for these posts at present as vacancies are due to staff secondment. This will be kept under review in the next reporting period. In addition, 1 LAC Principal Social Work post and 1 Band 8A governance post were vacant, with recruitment in process. There are no senior social work posts vacant and there are 8 senior social work practitioner posts vacant, and subject to recruitment processes.</p>
2.2	<p>Please highlight key Social Work Workforce planning issues, including recruitment, retention and professional roles.</p> <p>Provide a summary regarding the detail and level of vacancies and any vacancy control systems in place.</p> <p>The social work workforce within Children's services is under significant pressure. The Trust has continued to implement and progress the following actions to mitigate the risk arising from work force shortages;</p>

- Fortnightly workforce meetings remain ongoing, supported by HR staff member and temporary Band 7 Social Work Recruitment and Retention Officer, who works closely with the HR colleagues and BSO.
- 18 additional Senior Social Work practitioner posts were implemented to strengthen support to AYE staff. Whilst recruitment was successful, due to promotional opportunities within the service at both Senior Social Work and Principal Social Work grades during the reporting period, 8 of these additional posts are currently vacant and subject to recruitment processes.
- The addition of 12 Band 4 Social Work Assistants on a temporary basis has continued utilising social work vacancy funding.
- Via regional graduate recruitment CCS were successful at recruiting a total of 34 new AYE's between July – September 2023. Workshops were progressed with SSW to develop support plans for this cohort of new recruits into the service and 1 week induction was delivered for all new AYE staff.
- The Learning and Development Team continued to provide additional support to newly qualified social workers through monthly mentoring sessions and AYE forums.
- CCS was represented on DOH working group focused on safe staffing and social work case load size in Children's Services. The report has been drafted and is currently with the CSWO, before sharing with the working group.
- CCS has continued to support recruitment initiatives and supported staff to apply for 4 funded Open University opportunities. The Trust has also progressed the placement of 2 internationally qualified social workers, who are now permanently employed in Children's services. .
- The service has also offered practice learning opportunities to student social workers studying in England and have 2 students currently on placement in CCS.
- The Trust has created a social work bank during the reporting period.
- The Trust has developed a Social Work Workforce Plan across all divisions which is overseen by the recruitment and retention Steering Group. The plan has developed short, medium and long term goals for 4 work streams - Organisational and Workforce Capacity; Enhancing leadership; Being Just and Open and Staff experience and wellbeing. The workstreams supported the Trust to cease use of agency social workers by 1st June 2023 and have also begun a consultation on a Trust Band 6 Transfer policy.
- CCS has utilised charitable funds to implement independently facilitated reflective practice for band 8a and band 7, with capacity for sessions to be offered to some teams. This project commenced in October 2023. This is a 2 year project and the outcomes will be evaluated over time.

Challenges arising from workforce capacity and increased demands however have continued to escalate and have been shared on an ongoing basis with the Trust Board, Social Care Committee, SPPG and DoH.

Trade Union NIPSA has held consultations with DOH, more recently including regional Trust Directors of HR and Social Work to request significant changes to avert industrial action. The requests include delaying implementation of Encompass; an acknowledgement payment to staff in critical posts; more commissioned student placements for social work training and for the DOH to share responsibility for the workforce crisis and put into place a safe staffing framework in a timely manner. Whilst the delay to Encompass occurred, the other requests continue to be negotiated and worked through. The 5 Trusts are collectively writing a business case for a retention premium proposal to present to DOH for its permission and funding.

(Subsequent to the end of the reporting period Action Short of Strike was implemented in the Trust on the 25th April followed by 3 days of strike action from 8th May, affecting 8 teams.)

Provide a summary regarding the detail and level of vacancies and any vacancy control systems in place.

CCS continues to experience significant workforce challenges across the Directorate due the deficit in supply of social workers regionally. The Directorate has continued to operate under business continuity arrangements since January 2022 and reports vacancies on a monthly basis to SPPG. At the end of the reporting period:

Service Area	% vacancies of band 5-7
Gateway	22.6%
Family Support	51.4%
LAC	38.4%
14+/16+ Leaving and Aftercare	21.5%
Fostering/Adoption	34.0%
CWD	38.8%
Residential Care/Peripatetic Teams	16.7%
RESWS	31.3%

The Directorate has implemented vacancy controls by restricting support of EOI to only promotional posts within Children's services.

2.3 Supervision arrangements for social workers

Please confirm that the Trust is fully compliant with the Regional Supervision Framework (Yes/No)

No

If no, how are the supervision needs of staff being met and how is the Trust intending to meet compliance?

The EDSW office undertook a social work supervision audit at the end of the reporting period. A sample of 27 files were audited from across the Directorate, (Band 7 & Band 8a supervisors), which evidenced 66% of files to be compliant with supervision standards across the year. This is a 16% improvement on last year's audit. The main reasons for non-compliance are associated with pressure on services due to a combination of vacancies and responding to crises situations.

The March 2023 audit had identified a range of actions required to improve compliance with the supervision policy and the following actions have been achieved:

- The implementation of the revised DOH Supervision Policy for supervision. This was launched in March 2024 for implementation in April 2024. Plans are in place to engage social work supervisors in the Directorate with awareness raising in April 2024 and new service plans have been drafted for agreement with Co-Directors and Senior Managers during these sessions.

	<ul style="list-style-type: none"> The Divisional SW in CCS has reviewed the supervision reporting structure to support completion of monthly reports on supervision compliance. This has been achieved to ensure it takes account of the supervision requirements set out in the new policy launched in March 24. This is to be implemented with the roll out of the supervision policy in the new reporting period. <p>These actions will be led by the Children's Services Divisional Social Worker and reported to the EDSW on a bi-monthly basis through the Divisional Social Work oversight group.</p>
2.4	<p>Please provide an update on the robustness of the data provided in this report and any data assurance processes in relation to it. (This may include reference to electronic or manual data sources and any data gaps and work with Encompass)</p> <p>Children's community service have implemented a range of data assurance systems to ensure the robustness of data provided in this report:</p> <ul style="list-style-type: none"> The Directorate information team has established a range of monthly controlled data quality processes, whereby a number of data quality reports are run from Paris, manually checked and errors or queries resolved on the system on an individual basis. This ongoing quality assurance process gives confidence that the Trust can accurately report on a range of key data at any stage and at any point in time. The Directorate information team quality assurance processes includes a monthly return from teams which quality is assured by line managers, including CSMs to track unallocated, statutory visits and review compliance of Child Protection and LAC. This informs the Trust DSF reporting and monitoring application of Business Continuity Plan BCP). The Directorate information team provides all teams with a client list for return and completion of any manual information required for the completion of the Data 10 report on a six monthly basis. Staffing capacity return is updated by all frontline managers on a weekly basis to ensure accuracy of monthly reporting to SPPG on workforce capacity and inform BCP. Risk triaging of needs of LAC has been established to inform implementation of BCP, which agreed to reduction of visits to 6 weekly visits to LAC who have lower level support needs. Monthly supervision return, (as noted in point 2.3) requires a review of reporting structure to support completion of this return. Over the reporting period the Divisional Social worker and Children's Information Service Manager has collaborated with SSPG and Encompass to ensure that all data requirements for DSF are incorporated into Encompass build for CCS to ensure effective reporting for DSF data return.

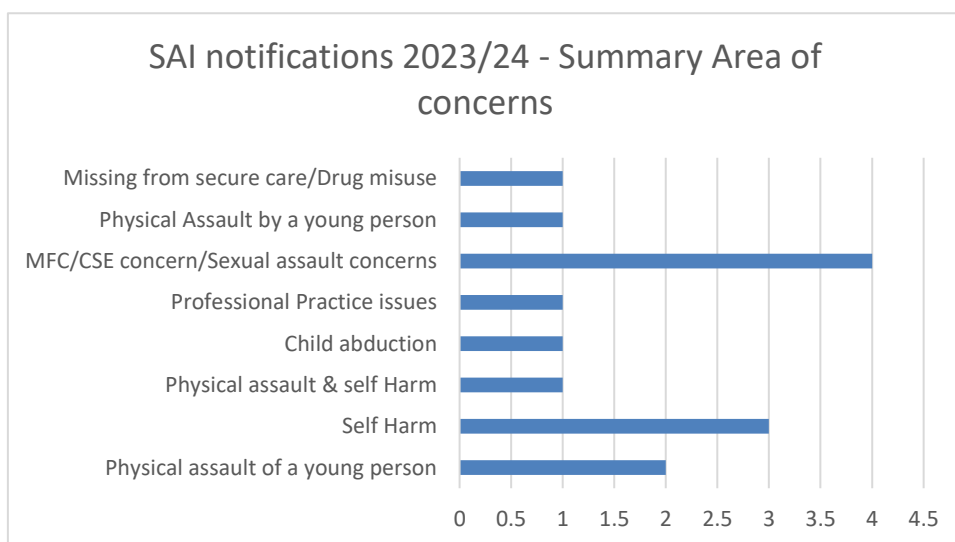
2.5 Programme of Care to advise of numbers of any significant judgements and/or decisions derived from Serious Adverse Incidents, Case Management Reviews, Mental Health Review Tribunals, Judicial Reviews, Audits or RQIA Inspection and/or Review activity *completed* during the reporting period, that directly relates to the Trusts discharge of their statutory functions

	Number
Serious Adverse Incidents	15
Domestic Homicide Reviews	0
Case Management Reviews	2 notifications 3 reports completed
Mental Health Review Tribunals	0
Judicial Reviews	2
Audits	5
RQIA Inspections	15
RQIA Enforcement notices – Failure To Comply Notices	0

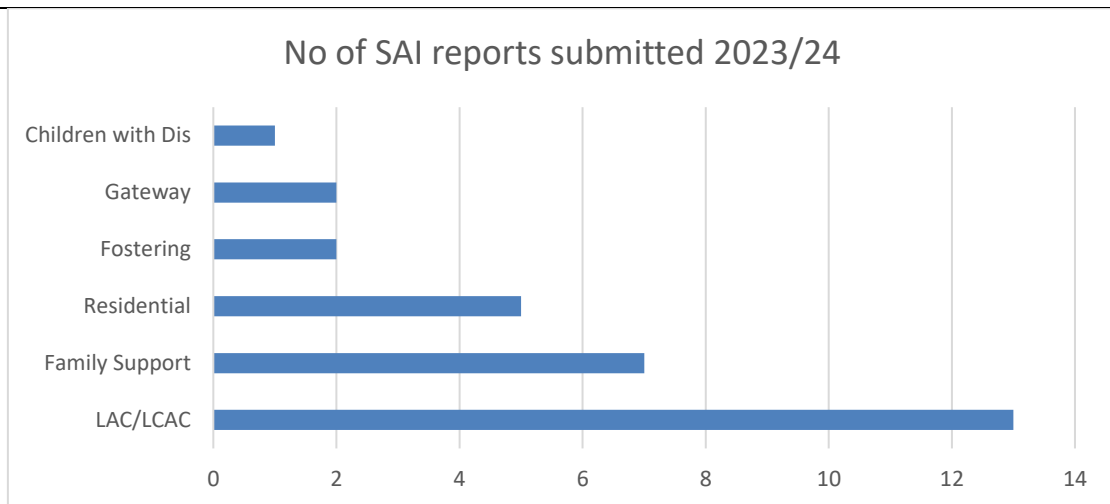
Serious Adverse incidents

During the reporting period the Directorate has submitted a total of 16 notifications to SPPG, 1 was subsequently withdrawn. Of the remaining 15 notifications 3 related to safeguarding services; and 12 from Corporate Parenting services. Of the notifications submitted one report has been completed and closed by SPPG and included in the summary of reports below.

In respect of the 15 notifications during the reporting period the areas of concerns are summarised below.



During the reporting period the Directorate has submitted a total of 30 SAI reports to SPPG relating to social work services. *Not all reports submitted relate to notifications within the reporting period. The table below outlines a breakdown of reports submitted by service area during the reporting period.



The Directorate has reported 5 SAI reports on the tragic and untimely death of 5 children and young people. These SAI's were historic and delayed in terms of their submission. One death relates to the sudden infant death of a child in August 2018 and the 4 remaining deaths relate to care experienced young people known to the Trust Leaving Care services, all of whom died between June 2018 and March 2022. The reviews identified the high levels of social work and multi-disciplinary support offered to these young people, who have experienced significant trauma in their young lives. The reports highlighted the work within the Leaving Care and Aftercare Service to be a high-risk area. It was noted this work is compounded when working with young people who refuse or are unable to engage and whose lifestyle places them at risk of serious self-harm. Two consistent themes were identified:

- The need to improve the transfer point to the leaving and after care service. This has been a priority for the Trust for a number of years. The progression of which is subject to the outcomes of the regional review of Leaving and Aftercare services, to which the Trust has contributed. The Directorate awaits the sharing of this review report to inform service restructure.
- Lack of commissioned resource to meet assessed need of the care leaving population in respect of substance use. The Trust has developed partnerships with voluntary and community sector to offer services to young people struggling with substance misuse. Additionally, the Directorate has also sought via SPPG to be included in working groups relating to the implementation of the Preventing Harm, Empowering Recovery - A Strategic Framework to Tackle the Harm from Substance Use 2021-2031.

In addition to the above themes, the Directorate has identified the following learning themes from SAIs reported during this period:

- Improvement in engagement with external agencies in terms of information sharing with Social Services to assist with risk assessment and case managements.
- Lack of commissioned services – in addition to the above need for service development of substance misuse services, SAI's identified the need to develop skills mix across the residential sector and this is currently being progressed.
- Challenges with CORU registration of social work staff to enable practice in the Republic of Ireland. This matter has been progressed with quarterly

meetings now established with CORU, NISCC and Trust representatives to redress challenges experienced.

Compliance with statutory function was identified in 5 SAI reviews, which identified learning to ensure

1. Compliance with statutory requirement for each LAC to be seen on their own during visits to placements
2. The LAC review process considers the need for an independent visitor for young people who are not engaging with social work staff.
3. The Trust continued non-compliance with the allocation of Personal Advisors to young people transitioning to leaving care services. The timely allocation of personal advisor to young people from the age of 16 years in line with the Trust statutory requirements was also highlighted in one SAI review relating to the tragic death of a care experienced young person indicated above.
4. Non-compliance with annual review of fostering care registrations.
5. Compliance with Child protection policy and procedures in respect of recording expectations of child protection case conferences.

SAI reports are shared with the respective teams and staff engaged in the review process. The Directorate will be progressing service wide staff engagement regarding the lesson learned via tiger page and learning events regarding these themes during the next reporting period.

At the end of the reporting period 31st March 2024 Children's Community Services had a total of 67 open SAI, of which 13 have been submitted to SPPG and awaiting closure approval. Furthermore, 2 de-escalation requests were submitted for 2 cases and the remaining have been allocated and are at varying stages of being progressed by the Directorate.

Case Management Reviews

During the reporting period the Belfast area have made 2 CMR notifications and has received 2 CMR reports from SBNI

Notifications

- Naomi - PSNI notification in May 23
- Clare - notification by the Trust in March 2024

CMR reports

- Alfie – A number of PSNI led recommendations were made, including the establishment of a task and finish group with a focus on information sharing with Gateway services. The Trust recommendation related to the Lifeline Service submitting a UNOCINI to Gateway Services in all cases where they make a referral by phone call in the first instance.
- Ava – Learning identified the need for inter-jurisdictional policy regarding case transfers, information sharing across jurisdictions (including promptly addressing disclosure of criminal offences), robust holistic assessment and prompt sharing of safety plan.

The Trust has contributed to 3 other Trust cases in reporting period:

- Nora (SHSCT) – Learning identified the need to develop awareness of information sharing protocol and inter- jurisdictional information sharing as well as the Regional Emergency Social Work service access to data. Awareness raised regarding PPANI arrangements was also recommended.
- Zachary (SHSCT) – Learning identified the need for comprehensive pre-birth risk assessment; training to improve comprehensive compliance with the Pre-mobile Baby Protocol; Improvement in interagency information sharing; training in the management of complex cases and thresholding in cases of disguised compliance; awareness raising of SBNI protocol for escalation of professional disagreements and compliance with the national guidance on triage of requests for ambulance response.

Judicial Reviews

During the reporting period there was 5 applications for leave to apply for Judicial reviews were considered by the Courts. Leave was refused in 2 Cases, following representation by Trust staff. A further 2 cases proceeding to hearing and applications against the Trust were successful in respect of

1. Judicial Review (JR 128): failure of the Respondent Trust to discharge the Applicant from the Iveagh Assessment and Treatment Centre (“Iveagh Centre”), into a community placement appropriate to their needs, within a reasonable period of time. The application dated back to Dec 2021 and a position was agreed by all parties in Jan 2024, whereby an alternative provision for the young person who had since transitioned to adult services was identified. An adult placement has been identified which has been accepted by the young person’s family.
2. Judicial Review (JR232) Respondent Trust breached the father’s Article 8 ECHR rights in that they were not properly consulted in respect of the placement of the child in a residential home in January 2022. In terms of all placement moves, the lack of involvement of the parents and the lack of Trust transparency surrounding both decision making and care planning, breaches the Article 8 rights of the parents. The child is now placed in a specialist high-cost placement.
An order for the Respondent Trust to pay the applicant father the costs of the application.

Audits

1. Protecting Looked After Children – This audit was requested by the Department of Health and was completed in September 2023, auditing 25 % of LAC reviews which took place in residential care over a 6 month period. The audit focused on 8 LAC standards including child protection arrangements from both a qualitative and quantitative perspective and concluded that records demonstrated:

The audit recommended 1 area for development; the need to record timescales for actions Audit and outcomes have been shared with staff via Lessons Learned forum.

Induction audit – (Dec 2023) The purpose of this induction audit, was measure effectiveness of the Trust induction in Children Service's. The audit concluded:

- There was a clear demonstration of the Trust's commitment to the importance of induction for new staff. CCS were strong in providing an induction that outlined job requirements, processes and procedures. Individual teams provided detailed presentations in conjunction with the Workforce, Learning, Development and improvement service.
- Evidence including both NISCC standards of conduct and NISCC standards of practice were evident.
- The joined - up approach between practitioners and the Workforce, learning, development, and improvement team was strong and consistent in the evidence provided. The voice of service users was evident in CCS induction.
- Clear evidence of evaluation being offered.

The audit made recommendation to engage service user/carer steering groups to develop co-production in induction. This is being progressed via the LAC Your Say group.

2. **Supervision audit** – please refer to section 2.3

3. **Gateway audit** of 'No Further Action' referrals was completed in November 2022 and repeated in February 2024. This repeat audit was aimed at providing assurance of lessons learnt from previous CMR and DHR's, which identified shortcomings with the robustness of screening undertaken to inform the decision to NFA (No Further Action); specifically electronic local and regional checks to ascertain if the cases were previously known either to the Trust or other Trusts; summaries on the referrals of previous or current service interventions and staffs knowledge of Trust geographical boundary areas. In November 2022, the Audit Team were satisfied the actions taken to improve the robustness of screening referrals had significantly improved the quality of decision making and rationale for same and the errors noted in respect of the CMR and DHR were not evident with the exception of 2 cases, which was addressed with the Duty staff involved. The repeat audit in February 2024 concluded that improvements continue to evidence the robustness of screening on referrals to inform NFA decisions.

BSO internal safeguarding audit of Child Protection policy and procedures. Auditors sampled 25 cases subject to child protection procedures over a 3-year period (April 2020 – March 2023). The final report from BSO Internal auditors was received in February 2024 and concluded an overall rating of limited level of assurance. Whilst acknowledging that this service area had between 40-50% vacancy rates to deliver on statutory duties, it identified weaknesses within the governance, risk management and control framework. Findings related to compliance as follows;

- 1 case showed not all 4 weekly visits were recorded and, in some cases, whilst recording and visits were completed there was a delay in uploading the recording onto the Paris system
- Delays in initial and review case conferences and in 7% of cases sampled the conference did not occur
- Core groups not taking place in the time frame as set out by policy and procedures
- Incorrect recording on the child protection register in 4 cases.

An action plan has been developed to progress audit recommendations and increase governance and levels of assurance.

Inspections

RQIA Inspections

There was a total of 15 RQIA Inspections within the reporting period, including 4 in children with disabilities services. There were 11 serious concerns meetings during the reporting period (including within children with disability services), of which;

- 2 related to the Trust use of an unregulated placement for a number of separated and unaccompanied asylum seekers.
- 1 further serious concerns meeting resulted from the Trust use of a further unregulated children home, which the Directorate was utilising to facilitate time out for one young person placed within one of the Trust children's homes. An application was subsequently made to vary the statement of purpose of this home. The application was declined and a notice of decision was subsequently received.

The Directorate received notification from RQIA in March 2024 of an improvement notice resulting from concerns relating to patterns of activity across the residential sector, in relation to using unregistered services and making applications to vary the registration of services. It was noted that between Jan 2023 and March 2024 the Directorate had made application to vary the registration of eight of the nine Children's Homes. In the main the requests were in response to admitting a child on an emergency placement basis.

RQIA have engaged with the Trust in respect of its view that the approach to service provision for Children and Young People (CYP) is not compliant with quality standards:

- Standard 5 - safe and effective care
- Standard 6 - Accessible, Flexible and Responsive Services

Due to the current pressure on resources arising from the increase in LAC admissions, and admissions of children whose needs are best met in Children with Disability Service, alongside challenges with the recruitment of social work staff, progressing improvements plans will be part of medium to long term strategic planning.

Residential care provision

There were 10 RQIA inspections during the reporting period, (8 care and 1 pharmacy inspections and 1 estates).

Care Inspections

Common themes and learning from the RQIA QIPS in the reporting period included:

- Estates/Environmental refurbishment and repair
- Safety planning/risk assessments
- Staffing: Induction/recruitment/training of all staff, core/agency/bank
- Restrictive practice, proportionate and monitoring arrangements.
- Young people's participation within the home.

- Governance processes i.e. incident notifications, recording and analysis of incidents.

The Trust continues to progress QIPs in response to inspection recommendations from RQIA.

Children with Disability services

Somerton, care home for children with learning disability had 2 care inspections, 1 pharmacy inspections and 2 serious concerns meetings convened by RQIA.

Common learning themes from the improvement plans included:

- Safe staffing
- Governance processes i.e incident notification and record management
- Health and safety
- Consistency of leadership

Forest Lodge, a nurse led short break service for children and young people aged 5 - 18 years who have complex learning/physical disabilities and health care needs had 1 care inspection. This inspection resulted in no areas for improvement being identified. One pharmacy inspection progressed improvement plans for staff training and documentation.

Willow Lodge – Short breaks home for children with disability.

Since 6th April 2022 Willow Lodge has not been registered following an RQIA serving of an enforcement notice. Throughout the reporting period the Trust has progressed a number of recruitment initiatives (5) to achieve safe staffing levels to allow the reopening of Willow Lodge. However, those staff appointed are now working in Somerton Children's Disability Home to provide safe staffing levels. The Trust met with SPPG in March 2024 and advised of this current situation and their inability to reopen Willow Lodge at this time. They also advised SPPG that they were re-profiling the funding for Willow Lodge to open a short breaks facility following partnership working a Community and Voluntary provider, which is anticipated to open in June 2024.

2.6 Discharge of Directed Statutory Functions

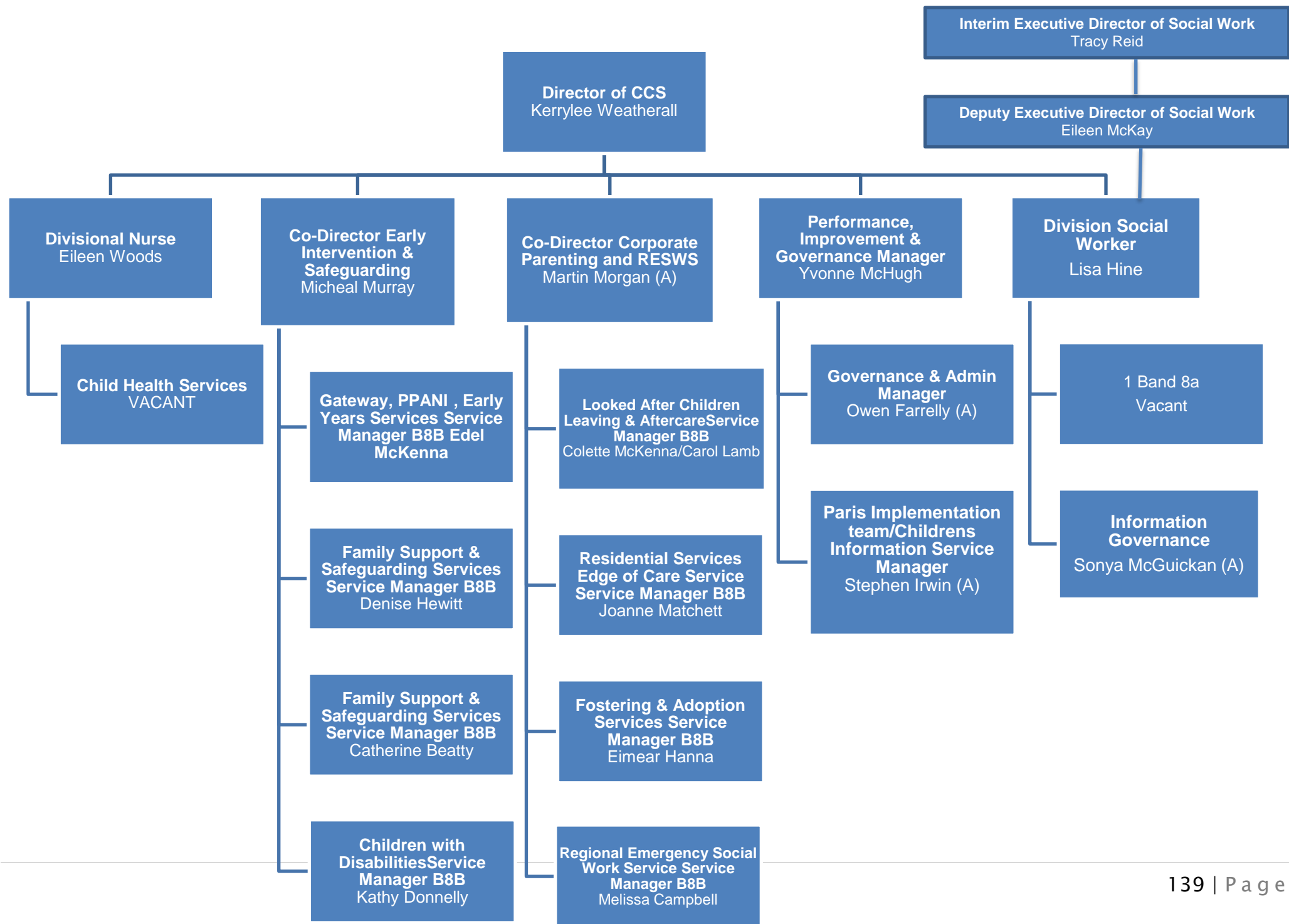
Summary of areas where the Trust has not adequately discharged their Directed Statutory Functions for this Programme of Care. Please outline remedial action taken to address this situation and any proposed future action.

2.6	Summary of areas where the Trust has not adequately discharged their Directed Statutory Functions for this Programme of Care.	Please outline remedial action taken to address this situation and any proposed future action.
	Family & Childcare Issues	
	<p>Children with Disabilities</p> <p>Provision of Short Breaks for Children with Disabilities - Willow Lodge</p> <p>The Trust has encountered workforce challenges with establishing a stable team for Willow Lodge. The Trust was not able to meet the previously agreed action plan to resume short breaks via Willow Lodge.</p> <p>Leaving and Aftercare services</p> <p>Personal Advisors</p> <p>The Trust continues to experience challenges with the allocation of Personal Advisors. 93 young people are not allocated with a PA at the end of reporting period. There is a vacancy of 3.5 WTE PA at end of period pending recruitment activity in April 2024. There is currently 1 permanent vacancy with other absence in relation to maternity leave.</p>	<p>Willow Lodge</p> <p>In response to this the Trust has agreed a contract with an external provider to provide short breaks (15 overnights per week). Service to commence in June 2024.</p> <p>Personal Advisors</p> <ul style="list-style-type: none"> • The Trust will be progressing recruitment of a further 3 x B4 PA staff for SUASC. The recruitment for the 3 PA will be achieved in the next reporting period. • The regional review of Leaving and Aftercare Services will inform the structure of the service within the Trust. This will support the integration of personal advisors into teams managing Looked After Children from the age of 16+ who are eligible for PA allocation. • A PA Duty system will be established within the next reporting period.

<p>Unallocated Cases At end of this reporting period The Trust notes the continued increasing trajectory of unallocated cases across children’s services with the exception of CwD. All children’s service areas have seen a corresponding increase in vacancy</p> <p>Unallocated gateway – 228 cases with workforce capacity reduced by 28%.</p> <p>Unallocated family support –113 cases with workforce capacity reduced by 51.4%.</p> <p>Unallocated LAC – 141 cases with workforce capacity reduced by 38.4%.</p> <p>Unallocated Fostering 147 – workforce capacity reduced by 42.4%</p> <p>Unallocated CwD cases – A reduction of 77% in unallocated cases in CWD from 463 to 107 cases in the last reporting period with workforce capacity increased by 10%. Skills mix has been successfully embedded</p> <p>Statutory visits/ statutory reviews</p> <p>At end of March 2024 – 472 (Increase 108) LAC visits and 180 (increase 77) LAC reviews were held outside of timescale.</p>	<p>Unallocated Cases</p> <ul style="list-style-type: none"> • Unallocated cases are tracked on a monthly basis and reported to SPPG. • The Trust manages unallocated cases in line with Business continuity arrangements. Case priority via a risk triage system, and statutory visits and reviews for unallocated LAC cases are completed on a duty basis in line with BCP. • The Trust is reconfiguring the Looked After Children’s Teams to enable a dedicated team to managing the unallocated LAC cases, which are triaged as more stable cases with lower risk. This will be in place within the next reporting period. Whilst these cases are deemed unallocated as not having a specific, assigned social worker, their statutory visits and LAC review will be undertaken by this social work team. • The Trust awaits the regional unallocated cases paper from SPPG. • Ongoing engagement with regional recruitment and social work retention strategy. • Development of skills mix in Gateway services. • Safe Staffing research. The Trust Children’s services are represented on the DOH safe staffing project. Timescale for publication is during the next reporting period. • Trust specific Children’s Services Reform Board • Regional work is to commence that will propose, where possible and safe to do so, flexibilities to current practice, which may require changes to policy and standards. <p>Statutory visits/ statutory reviews</p> <ul style="list-style-type: none"> • The Trust manages unallocated LAC cases in line with Business continuity arrangements. Case are prioritised via a risk triage system, and statutory visits and reviews for unallocated LAC cases are completed on a duty basis in line with Business Continuity arrangements.
---	--

<p>Placement moves for children</p> <p>This continues to remain high at 158 however has reduced by 53 within this reporting period despite the continued increase of children requiring a care placement (n=35).</p> <p>Increased numbers of Looked After Children</p> <p>Continued increase in number of LAC> 66 LAC over the 12 mth reporting period (total at 31st Marc 24;1095).</p> <p>There has been an increase of 63 households providing support to LAC within this reporting period. This however is in relation to kinship placements. The Trust notes continuing decline (n=8) in non-kinship carers.</p>	<ul style="list-style-type: none"> • The Trust is reconfiguring the Looked After Children’s Teams to enable a dedicated team to managing the unallocated LAC cases, which are triaged as low risk. This will be in place within the next reporting period. • Regional work is to commence that will propose, where possible and safe to do so, flexibilities to current practice, which may require changes to policy and standards. <p>Placement moves for children</p> <ul style="list-style-type: none"> • The Trust continues to lead on the regional recruitment strategy for foster carers and implements recruitment and retention plans at a local level. • The fostering service tracks placement moves on a monthly basis • Trust reviews placements under pressure across teams on an ongoing basis, to consider supports to enhance placement stability. <p>Increased numbers of Looked After Children</p> <ul style="list-style-type: none"> • The Trust are progressing plans to review all LAC in care placements to consider appropriateness of care plan. • BSO Looked After children audit to be progressed in the next reporting period • The Trust is establishing an Options panel to monitor LAC admissions and complex placement issues. This will be operational in the next reporting period. • The Trust has established a dedicated resource for Court report writing to support teams to progress discharge of Care Order to Residence Order applications.
---	---

<p>Fostering There has been an increase in the Trusts unregulated placement population with 44 unregulated households at the end of the reporting period; an increase of 26. The fostering service has a total of 64 unallocated assessments as at 31st March 2024. 126 foster carers have annual reviews outstanding- this is an increase of 90 from 31st March 23- 31st March 24 The vacancy rates in Fostering currently sits a 42.4%.</p>	<p>Fostering</p> <ul style="list-style-type: none">• The Trust has an action plan in place to manage outstanding annual reviews.• Assessments offered to Trust Social Work staff who are part of a fostering bank.
---	--



Co-Director Early Intervention & Safeguarding
Michael Murray

Gateway, PPANI & Early Years Services Service Manager B8B
Edel McKenna

4 Gateway Teams
- 1 PSW
- 4 SSWs
- 2 POs

Early Years/Early Intervention service

Early Years Team
- 2 SSWs

Early Intervention Service
- 3 Sure Starts

Family Support & Safeguarding Services Service Manager B8B
Catherine Beatty

6 FS Teams
- 3 PSWs
- 6 SSWs
- 2 PSWs
- 1 PP(vacant)

Child Care Centre
- 1 PSW

2 Family Centres
- 1SSW

Family Support & Safeguarding Services Service Manager B8B
Denise Hewitt

5 FS Teams
2 IAS Teams
- 3 PSWs
- 7 SSWs
- 1 PP (vacant)

1 Court Team
- 1SSW

Children with Disabilities Service Manager B8B
Kathy Donnelly

3 PSWs
4 SSWs
2 TLs Childrens Homes
2 Deputy Home Managers

Co Director Corporate Parenting
Martin Morgan (A)

Looked After Children Leaving & Aftercare Service
Manager B8B
Colette McKenna/Carol Lamb

7 LAC teams
2 LCAC teams
4 PSWs
9 SSWs (1.6 Temp vacant)

Contact Centre
1 SSW

NIFTIC Lead
1 PSW
1 Associate Psychologist

Residential Services Edge of Care Service
Manager B8B
Joanne Matchett

3 PSWs
1 PPSW LAC Vacant
8 Residential Homes = 8 SSWs
1 Regional sUCAS Home = 1 SSW
PACCS - SSW
Peripatetic Team (Doors)
1 SSW

Fostering & Adoption Services
Service Manager B8B
Eimear Hanna

Adoption Service
- 1 PSW
- 2 SSWs
Fostering Service
- 2 PSWs
- 4 SSWs
ACA Transformation lead
- 1 PSW

Regional Adoption and Fostering Service
1 PSW

Regional Emergency Social Work Service
Service Manager B8B
Melissa Campbell

4 Assistant Service Managers

DATA RETURN

Children's Community Services

DATA RETURN 1- NIL RETURN

DATA RETURN 2- NIL RETURN

DATA RETURN 3- NIL RETURN

DATA RETURN 4- NIL RETURN

DATA RETURN 5
Children's Community Services

5 CARERS AND DIRECT PAYMENTS ACT 2002

		16-17	18-64	65+
5.1	Number of adult carers offered individual carers assessments during the period (Source: SPPG PSSID Return) Trusts to provide figures as normal, however please <u>attach returns</u> for the 4 quarters should further quality assurance be required.	11	159	0
5.2	Number of adult individual carers assessments completed during the period (Source: SPPG PSSID Return) Trusts to provide figures as normal, however please <u>attach returns</u> for the 4 quarters should further quality assurance be required.	11	159	0
5.2a	Number of adult individual carers assessments declined during the period and the reasons why (Source: SPPG PSSID Return) Trusts to provide figures as normal, however please <u>attach returns</u> for the 4 quarters should further quality assurance be required.	0	0	0
	To note with moving to a single source of reporting via SPPG PSSID return for Carers Assessments, carers reassessments offered, accepted and declined will also be available – this will be sourced from existing returns.	X	X	X
5.2b	Number of Adults waiting on a Carers assessment at 31 st March - work to commence in 2024/25 to develop regionally agreed definitions and minimum dataset.	X	X	X
5.3	Of the total at 5.2 in how many of the assessments were the carers, caring for disabled children?	11	159	0
5.4	Number of adult carers receiving a service @ 31 st March		170	
5.5	Number of young carers offered individual carers assessments during the period.		46	
5.6	Number of young carers assessments completed during the period.		46	
5.7	Number of young carers receiving a service @ 31 st March		46	
5.8	(a) Number of requests for direct payments during the period 1 st April – 31 st March		8	
	(b) Number of new approvals for direct payments during the period 1 st April – 31 st March		8	
	(c) Number of adults receiving direct payments @ 31 st March (Source: SPPG PSSID Return)		*286	

	Trusts to provide figures as normal, however please <u>attach return</u> should further quality assurance be required. *56 DP packages currently suspended leaving a total of 230 active DP packages	
5.9	Number of children receiving direct payments @ 31 st March	286
5.9.a	Of those at 5.8 how many of these direct payments are being managed by another person acting on behalf of the service user in respect of another person?	286
5.10	Number of carers receiving direct payments @ 31 st March	0
5.11	Number of one off Carers Grants made in-year.	342
Note: sections 5.8, 5.9 and 5.10 are to be reported as mutually exclusive.		

DATA RETURN 6- NIL RETURN

DATA RETURN 9- NIL RETURN

STRATEGIC PLANNING AND PERFORMANCE GROUP

Directed Statutory Functions

Data Return 10

In order to ensure that there is no duplication in submitting data to SPPG the key below indicates which data should be completed in this return. Data which is sourced from the DSF spreadsheets or DoH is indicated by colour coding.

Key to Data Items:-

	This data item is completed in the DSF spreadsheet
	This data item should be completed in this Data return 10
	Other - there is no need to complete this data item and it is sourced from DoH

DATA RETURN 10
Children's Community Services

Please Note: Information for this section will inform the Corporate Parenting Report (CC3/02)

10 Children (NI) Order 1995

Article 18 (2)Schedule 2 Para 1, Article 18 (2)Schedule 2 Para 5(2) ,Article 18 (2)Schedule 2 Para 9, Article 27 (1)(2),Article 27 (1)(2), Article 27 (8), Article 35,Article 36 (1) Article 44,Article 45 (1)(2) ,Article 45 (3)(5)(6)(7)(8), Article 108 (1), Article 118, Article 130,Article 174 ,Article 175, Article 177

10.1 CHILDREN IN NEED

10.1.1	How many Children in Need are there in your area as at 30th September? (exclude children on the caseloads of statutory mental health services)							DSF - Children In Need Spreadsheet	
	Children in need	2018	2019	2020	2021	2022	2023		2024
	As at: 31 March	4331	4088	3546	3681	3888	4192		4033
	As at: 30 Sept	4179	3844	3528	3619	3963	4310		

Trend analysis and commentary (Trusts must clarify how they arrive at this total figure, and reference any likelihood of double or under representation)

In this reporting period the Trust has seen a reduction (277) in the numbers of children in need of support across Children's Community Services. This reduction is reflected of the processes of cleansing the data systems over the past 6 months in preparation for encompass go live, which has subsequently been postponed for children's services.

Data Return 10

10.1.2	Ethnic Origin of Children in Need		DSF - Children In Need Spreadsheet
	Ethnicity	Total	
	White	2570	
	Chinese	15	
	Irish Traveller	24	
	Roma Traveller	9	
	Indian	17	
	Pakistani	11	
	Bangladeshi	11	
	Black Caribbean	0	
	Black African	98	
	Black Other	10	
	Mixed Ethnic Group	123	
	Any Other Ethnic Group	57	
Not Stated	1088		
TOTAL	4033		

<p>10.1.3</p>	<p>Religion of Children in Need</p> <table border="1" data-bbox="220 165 1139 689"> <thead> <tr> <th>Religion</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Roman Catholic</td> <td>1055</td> </tr> <tr> <td>Presbyterian</td> <td>426</td> </tr> <tr> <td>Church of Ireland</td> <td>74</td> </tr> <tr> <td>Church of England</td> <td>14</td> </tr> <tr> <td>Methodist</td> <td>18</td> </tr> <tr> <td>Other Christian</td> <td>294</td> </tr> <tr> <td>Jewish</td> <td>0</td> </tr> <tr> <td>Muslim</td> <td>118</td> </tr> <tr> <td>Other</td> <td>122</td> </tr> <tr> <td>Not Known</td> <td>805</td> </tr> <tr> <td>Not Completed</td> <td>1039</td> </tr> <tr> <td>None</td> <td>68</td> </tr> <tr> <td>Refused</td> <td>0</td> </tr> <tr> <td>TOTAL</td> <td>4033</td> </tr> </tbody> </table>	Religion	Total	Roman Catholic	1055	Presbyterian	426	Church of Ireland	74	Church of England	14	Methodist	18	Other Christian	294	Jewish	0	Muslim	118	Other	122	Not Known	805	Not Completed	1039	None	68	Refused	0	TOTAL	4033	<p>DSF - Children In Need Spreadsheet</p>
Religion	Total																															
Roman Catholic	1055																															
Presbyterian	426																															
Church of Ireland	74																															
Church of England	14																															
Methodist	18																															
Other Christian	294																															
Jewish	0																															
Muslim	118																															
Other	122																															
Not Known	805																															
Not Completed	1039																															
None	68																															
Refused	0																															
TOTAL	4033																															
<p>10.1.4</p>	<p>(a) How many children have been referred for an Assessment of Need during the reporting period i.e. 1st October 2023 – 31st March.</p> <p>3550 children have been referred for an assessment of need within this reporting period. This is an increase of 158 from the previous reporting period</p> <p>(b) What was the source of referral for children referred for assessment of need during the reporting period i.e. 1st October 2023 – 31st March.</p> <p>See CIN spreadsheet 10.1.4 for referral details</p>	<p>DSF - Children In Need Spreadsheet</p>																														
<p>10.1.5</p>	<p>How many children are currently awaiting an Assessment of Need at period end by length of wait (unallocated cases including disability as at 31st March).</p> <p>Source PMSI data on Unallocated cases – comes with child protection data.</p>	<p>SPPG (PMSID)</p>																														
<p>10.1.6</p>	<p>How many of these Children in Need are Disabled and known to Trust Social Workers (by major category) at 31st March?</p> <table border="1" data-bbox="220 1503 799 1785"> <thead> <tr> <th>Major Disability</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Physical (Ex. Sensory)</td> <td>90</td> </tr> <tr> <td>Sensory</td> <td>14</td> </tr> <tr> <td>Learning</td> <td>508</td> </tr> <tr> <td>Chronic illness</td> <td>27</td> </tr> <tr> <td>Autism(ASD)/ADHD/Asperger</td> <td>358</td> </tr> <tr> <td>Other</td> <td>16</td> </tr> <tr> <td>TOTAL (With Disability)</td> <td>1013</td> </tr> </tbody> </table> <p>Within this reporting period the population of children in need with a disability has increased by 88 a total increase of 309 across the year.</p>	Major Disability	Total	Physical (Ex. Sensory)	90	Sensory	14	Learning	508	Chronic illness	27	Autism(ASD)/ADHD/Asperger	358	Other	16	TOTAL (With Disability)	1013	<p>DSF - Children In Need Spreadsheet</p>														
Major Disability	Total																															
Physical (Ex. Sensory)	90																															
Sensory	14																															
Learning	508																															
Chronic illness	27																															
Autism(ASD)/ADHD/Asperger	358																															
Other	16																															
TOTAL (With Disability)	1013																															

10.1.7	<p>Disabled children known to the Trust who left school during the reporting period and the transition plans that are in place.</p> <table border="1"> <thead> <tr> <th>Age at leaving school</th> <th colspan="2">>16 <17</th> <th colspan="2">>17 <18</th> <th colspan="2">18+</th> <th colspan="2">Number with Transitions in place</th> </tr> <tr> <th>Disability Type</th> <th>M</th> <th>F</th> <th>M</th> <th>F</th> <th>M</th> <th>F</th> <th>M</th> <th>F</th> </tr> </thead> <tbody> <tr> <td>Physical disability</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Sensory Impairment</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Learning disability</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Chronic illness</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Autism (ASD)/ADHD/Asperger</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Other</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>TOTAL</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> </tbody> </table> <p>No children with disability leave school during the reporting period.</p>	Age at leaving school	>16 <17		>17 <18		18+		Number with Transitions in place		Disability Type	M	F	M	F	M	F	M	F	Physical disability	0	0	0	0	0	0	0	0	Sensory Impairment	0	0	0	0	0	0	0	0	Learning disability	0	0	0	0	0	0	0	0	Chronic illness	0	0	0	0	0	0	0	0	Autism (ASD)/ADHD/Asperger	0	0	0	0	0	0	0	0	Other	0	0	0	0	0	0	0	0	TOTAL	0	0	0	0	0	0	0	0	DSF - Children In Need Spreadsheet
Age at leaving school	>16 <17		>17 <18		18+		Number with Transitions in place																																																																												
Disability Type	M	F	M	F	M	F	M	F																																																																											
Physical disability	0	0	0	0	0	0	0	0																																																																											
Sensory Impairment	0	0	0	0	0	0	0	0																																																																											
Learning disability	0	0	0	0	0	0	0	0																																																																											
Chronic illness	0	0	0	0	0	0	0	0																																																																											
Autism (ASD)/ADHD/Asperger	0	0	0	0	0	0	0	0																																																																											
Other	0	0	0	0	0	0	0	0																																																																											
TOTAL	0	0	0	0	0	0	0	0																																																																											
10.1.8	How many Children in Need are currently awaiting assessment or treatment with child and adolescent mental health services as at 30th September?	SPPG (PMSI)																																																																																	
	<i>Trend analysis and commentary (Refers to ALL i.e. tiers 2-4 children awaiting CAMHS regardless of the pathway to the waiting list)</i>																																																																																		
10.1.9	This is intentionally blank																																																																																		
10.1.10	<p>How many of the Children in Need are Young Carers</p> <table border="1"> <thead> <tr> <th>Teams</th> <th>Number of Young Carers</th> <th>Number of Young Carer Payments</th> </tr> </thead> <tbody> <tr> <td>Children with Disabilities Team</td> <td>46</td> <td>118</td> </tr> <tr> <td>Mental Health Services</td> <td>15</td> <td>13</td> </tr> <tr> <td>Learning Disability Services</td> <td>5</td> <td>10</td> </tr> <tr> <td>Physical & Sensory Services</td> <td>8</td> <td>3</td> </tr> <tr> <td>Older Peoples Services</td> <td>0</td> <td>0</td> </tr> <tr> <td>Total</td> <td>74</td> <td>144</td> </tr> </tbody> </table> <p>The Trust is delighted that all service areas are providing support to young carers as children in need, including carers grants. Within the population of young carers the Trust accesses support for young</p>	Teams	Number of Young Carers	Number of Young Carer Payments	Children with Disabilities Team	46	118	Mental Health Services	15	13	Learning Disability Services	5	10	Physical & Sensory Services	8	3	Older Peoples Services	0	0	Total	74	144	Data Return 10																																																												
Teams	Number of Young Carers	Number of Young Carer Payments																																																																																	
Children with Disabilities Team	46	118																																																																																	
Mental Health Services	15	13																																																																																	
Learning Disability Services	5	10																																																																																	
Physical & Sensory Services	8	3																																																																																	
Older Peoples Services	0	0																																																																																	
Total	74	144																																																																																	

	carers from Action for Children. During the reporting period 43 referrals for assessment were made to Action for Children and 64 children in need were receiving a service from this provider. Over this reporting period there has been a total increase of 8 young carers receiving support. This increase is reflective of the increased number of cases allocated within the children with disability service.																								
10.1.11	<p>How many young people aged 16 and 17 years presented to the Trust as homeless ?</p> <p>A total of 5 young people presented to the Trust as homeless during the reporting period.</p> <p>This has remained consistent from the previous reporting period. For the purposes of this report the Trust has counted referrals where the source was the Northern Ireland Housing Executive and any young person aged 16/17 who presented to the Trust as homeless. This information has been manually verified via PARIS.</p>	DSF-Children In Need Spreadsheet																							
10.1.12	<p>(a) How many Trust sponsored Day Care Places provided through any means including Article 18, Fostering or others are there for Children in Need at period end</p> <p>(b) How many of these children have a disability</p> <table border="1"> <thead> <tr> <th rowspan="2">Day care</th> <th colspan="2">Number of Purchased Places by Age</th> </tr> <tr> <th>0-4</th> <th>5-12</th> </tr> </thead> <tbody> <tr> <td>Day Nursery</td> <td>187</td> <td>0</td> </tr> <tr> <td>Playgroup</td> <td>0</td> <td>0</td> </tr> <tr> <td>Childminder</td> <td>0</td> <td>0</td> </tr> <tr> <td>Out of School hours club</td> <td>0</td> <td>0</td> </tr> <tr> <td>Total</td> <td>187</td> <td>62</td> </tr> <tr> <td>No of these children have a disability?</td> <td>16</td> <td>25</td> </tr> </tbody> </table>	Day care	Number of Purchased Places by Age		0-4	5-12	Day Nursery	187	0	Playgroup	0	0	Childminder	0	0	Out of School hours club	0	0	Total	187	62	No of these children have a disability?	16	25	DSF-Children In Need Spreadsheet
Day care	Number of Purchased Places by Age																								
	0-4	5-12																							
Day Nursery	187	0																							
Playgroup	0	0																							
Childminder	0	0																							
Out of School hours club	0	0																							
Total	187	62																							
No of these children have a disability?	16	25																							
10.1.13	<p>Trust usage of Family Centre Places for interventions</p> <p>A total of 86 referrals have been made to Family Centre Places during the reporting period. This is an increase of 36 referrals. Thorndale Assessment Centre was contracted in April 2023 to provide parenting assessments via day services. Within this reporting period the Trust has supported (28) families through this day service, an increase of 14 since the previous reporting period. This service also provides assessment and intervention to family with lower level need via the Bridge service, in operation since Nov 2022; during this reporting period this service has supported 21 families.</p>	DSF-Children In Need Spreadsheet																							
10.1.14	This is intentionally blank																								
10.1.15	<p>Please provide the number of children (if any) subject to a Supervision / Interim Supervision Order at period end (moved from Child Protection section)</p> <p>34 compared to 28 in the last reporting period.</p>	DSF - Children In Need Spreadsheet																							
10.1.16	During the period, please provide the number of children (if any) that became subject of a Supervision / Interim Supervision Order (moved from Child Protection section)	DSF - Children In Need																							

	20 children became subject of a Supervision/ Interim Supervision Order within this reporting period. This is an increase of 8 .	Spreadsheet
10.2 Children (NI) Order 1995		
Article 18 (2)Schedule 2 Para 1, Article 18 (2)Schedule 2 Para 5(2) ,Article 18 (2)Schedule 2 Para 9, Article 27 (1)(2),Article 27 (1)(2), Article 27 (8), Article 35,Article 36 (1) Article 44,Article 45 (1)(2) ,Article 45 (3)(5)(6)(7)(8), Article 108 (1), Article 118, Article 130,Article 174 ,Article 175, Article 177		

CHILD PROTECTION		
<i>No data is required for items (10.2.1-10.2.8)– data sourced from SPPG quarterly Child protection Report.</i>		
10.2.1	How many children are on the Child Protection Register as at 30th September?	Quarterly CP return to SPPG
10.2.2	How many of these children have a learning disability?	Quarterly CP return to SPPG
10.2.3	How many of these children have a physical disability?	Quarterly CP return to SPPG
10.2.4	Religion of children on the Child Protection Register	Quarterly CP return to SPPG
10.2.5	Ethnic origin of children on the Child Protection Register (Note new categories now used in quarterly child protection template)	Quarterly CP return to SPPG
10.2.6	How many registrations have there been during the period?	Quarterly CP return to SPPG/So scare Reports
10.2.7	How many de-registrations have there been during the period?	Quarterly CP return to SPPG
10.2.8	What percentage of registrations are re-registrations?	Quarterly CP return to SPPG
10.2.9	This is intentionally blank	
10.2.10	For children on the register, how long have they spent on the Register (as at 10.2.1)?	Quarterly CP return to SPPG
10.2.11	This is intentionally blank	
10.2.12	This is intentionally blank	
10.2.13	This in intentionally blank	

10.3 Children (NI) Order 1995

Looked After Children

10.3.1	<p>Provide the current legal status for all Looked After Children at 30th September (excluding any who are LAC on that day only by virtue of a short break arrangement)</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="text-align: left;">Looked After Children</th> <th>2016</th> <th>2017</th> <th>2018</th> <th>2019</th> <th>2020</th> <th>2021</th> <th>2022</th> <th>2023</th> <th>2024</th> </tr> </thead> <tbody> <tr> <td>As at: 31 March</td> <td>739</td> <td>743</td> <td>766</td> <td>824</td> <td>866</td> <td>875</td> <td>945</td> <td>1029</td> <td>1095</td> </tr> <tr> <td>As at: 30 Sept</td> <td>763</td> <td>757</td> <td>795</td> <td>826</td> <td>881</td> <td>905</td> <td>991</td> <td>1060</td> <td></td> </tr> </tbody> </table>	Looked After Children	2016	2017	2018	2019	2020	2021	2022	2023	2024	As at: 31 March	739	743	766	824	866	875	945	1029	1095	As at: 30 Sept	763	757	795	826	881	905	991	1060		DSF – LAC Spreadsheet																														
Looked After Children	2016	2017	2018	2019	2020	2021	2022	2023	2024																																																					
As at: 31 March	739	743	766	824	866	875	945	1029	1095																																																					
As at: 30 Sept	763	757	795	826	881	905	991	1060																																																						
10.3.2	<p>Religion and Ethnic origin of Looked After Children (please provide by new list of ethnic minorities)</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="text-align: left;">Ethnicity</th> <th>Total</th> </tr> </thead> <tbody> <tr><td>White</td><td>928</td></tr> <tr><td>Chinese</td><td>4</td></tr> <tr><td>Irish Traveller</td><td>21</td></tr> <tr><td>Roma Traveller</td><td>2</td></tr> <tr><td>Indian</td><td>1</td></tr> <tr><td>Pakistani</td><td>0</td></tr> <tr><td>Bangladeshi</td><td>0</td></tr> <tr><td>Black Caribbean</td><td>0</td></tr> <tr><td>Black African</td><td>24</td></tr> <tr><td>Black Other</td><td>7</td></tr> <tr><td>Mixed Ethnic Group</td><td>48</td></tr> <tr><td>Any Other Ethnic Group</td><td>22</td></tr> <tr><td>Not Stated</td><td>38</td></tr> <tr><td>TOTAL</td><td>1095</td></tr> </tbody> </table> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="text-align: left;">Religion</th> <th>Total</th> </tr> </thead> <tbody> <tr><td>Roman Catholic</td><td>485</td></tr> <tr><td>Presbyterian</td><td>203</td></tr> <tr><td>Church of Ireland</td><td>31</td></tr> <tr><td>Church of England</td><td>5</td></tr> <tr><td>Methodist</td><td>7</td></tr> <tr><td>Other Christian</td><td>114</td></tr> <tr><td>Jewish</td><td>0</td></tr> <tr><td>Muslim</td><td>38</td></tr> <tr><td>Other</td><td>20</td></tr> <tr><td>Not Known</td><td>146</td></tr> <tr><td>Not Completed</td><td>11</td></tr> <tr><td>None</td><td>35</td></tr> <tr><td>Refused</td><td>0</td></tr> <tr><td>TOTAL</td><td>1095</td></tr> </tbody> </table>	Ethnicity	Total	White	928	Chinese	4	Irish Traveller	21	Roma Traveller	2	Indian	1	Pakistani	0	Bangladeshi	0	Black Caribbean	0	Black African	24	Black Other	7	Mixed Ethnic Group	48	Any Other Ethnic Group	22	Not Stated	38	TOTAL	1095	Religion	Total	Roman Catholic	485	Presbyterian	203	Church of Ireland	31	Church of England	5	Methodist	7	Other Christian	114	Jewish	0	Muslim	38	Other	20	Not Known	146	Not Completed	11	None	35	Refused	0	TOTAL	1095	DSF – LAC Spreadsheet
Ethnicity	Total																																																													
White	928																																																													
Chinese	4																																																													
Irish Traveller	21																																																													
Roma Traveller	2																																																													
Indian	1																																																													
Pakistani	0																																																													
Bangladeshi	0																																																													
Black Caribbean	0																																																													
Black African	24																																																													
Black Other	7																																																													
Mixed Ethnic Group	48																																																													
Any Other Ethnic Group	22																																																													
Not Stated	38																																																													
TOTAL	1095																																																													
Religion	Total																																																													
Roman Catholic	485																																																													
Presbyterian	203																																																													
Church of Ireland	31																																																													
Church of England	5																																																													
Methodist	7																																																													
Other Christian	114																																																													
Jewish	0																																																													
Muslim	38																																																													
Other	20																																																													
Not Known	146																																																													
Not Completed	11																																																													
None	35																																																													
Refused	0																																																													
TOTAL	1095																																																													

<p>10.3.3</p>	<p>Number of Looked After Children (as at 10.3.1) by type of placement at 30th September. Note Additional categories.</p> <table border="1" data-bbox="209 197 1166 555"> <thead> <tr> <th>Type of placement</th> <th>Totals</th> </tr> </thead> <tbody> <tr> <td>Residential</td> <td>60</td> </tr> <tr> <td>Fostering – (stranger)</td> <td>205</td> </tr> <tr> <td>Fostering (Kinship)</td> <td>566</td> </tr> <tr> <td>Fostering (Independent)</td> <td>148</td> </tr> <tr> <td>Placed at home with parents</td> <td>61</td> </tr> <tr> <td>Placed for adoption</td> <td>17</td> </tr> <tr> <td>Other Placements</td> <td>33</td> </tr> <tr> <td>Other</td> <td>5</td> </tr> <tr> <td>Total</td> <td>1095</td> </tr> </tbody> </table> <p>The Trust continues to see the majority of Looked After Children placed within families with little variation of placement type within this reporting period.</p>	Type of placement	Totals	Residential	60	Fostering – (stranger)	205	Fostering (Kinship)	566	Fostering (Independent)	148	Placed at home with parents	61	Placed for adoption	17	Other Placements	33	Other	5	Total	1095	<p>DSF – LAC Spreadsheet</p>
Type of placement	Totals																					
Residential	60																					
Fostering – (stranger)	205																					
Fostering (Kinship)	566																					
Fostering (Independent)	148																					
Placed at home with parents	61																					
Placed for adoption	17																					
Other Placements	33																					
Other	5																					
Total	1095																					
<p>10.3.4</p>	<p>Age bands and length of time looked after for all Looked After Children at period end See spreadsheet 10.3.4 for details</p>	<p>DSF – LAC Spreadsheet</p>																				
<p>10.3.5</p>	<p>Number of children provided with a short break during the period who become Looked After by virtue of the short break arrangement</p> <p>The number of young people provided with overnight support through short break arrangement is 25</p> <p>See spreadsheet 10.3.5 for details</p> <p>The Trust notes this is a reduction of 2 young people receiving support within this reporting period. Short breaks in Lindsay House have been suspended from 1st November 2023, so the 3 young people recorded have not received short breaks since then. This is a loss of 120 nights per month for the Trust. This has been raised with the Commissioner in a meeting with the Trust in March 2024. The Trust notes the provision of short breaks for Children with a Disability continues to fall short of the assessment of need within the community for this group of children and young people, and requires its Short Break provision from Lindsay House to be reinstated as raised with SPPG . The Trust continues to work in partnership with families, stakeholders and partner organisations regarding ongoing work to improve the current provision of overnight support through short break arrangements. The Trust is progressing a contract with an external provider to make available 15 nights short break per week, which is anticipated to commence in the next reporting period.</p>	<p>DSF – LAC Spreadsheet</p>																				
<p>10.3.6</p>	<p>Number of children accommodated for 3 months or more in a hospital</p> <p>There were 11 young people accommodated for three months or more in a hospital setting. This equates to 1 young person in the Iveagh Centre and 10 young people in Beechcroft. This is an increase of 5 since the last reporting period.</p>	<p>DSF – LAC Spreadsheet</p>																				
<p>10.3.7</p>	<p>Number of children accommodated for 3 months or more in an adult facility. For example Residential Care Home, Nursing Home, Private Hospital</p> <p>There were 0 children accommodated for three months or more in an adult facility.</p>	<p>DSF – LAC Spreadsheet</p>																				

<p>10.3.8</p>	<p>(a) What facilities – statutory, voluntary and private are available to care for these Looked After Children i.e. how many places in residential homes, foster care placements</p> <p>See spreadsheet 10.3.8 for details Lindsay House occupancy is reduced to 4% in this reporting period as from 1st November 2023 short breaks support from this facility was not available for children and young people with a disability.</p> <p>(b) Provide your number of foster carers (should agree with 10.5.1) Provide the number of approved places offered (should agree with 10.5.2)</p> <table border="1" data-bbox="209 568 863 707"> <tr> <td>Number of Foster Carers</td> <td>601</td> </tr> <tr> <td>Number of Approved Places Offered</td> <td>881</td> </tr> </table>	Number of Foster Carers	601	Number of Approved Places Offered	881	<p>DSF – LAC Spreadsheet</p>																																
Number of Foster Carers	601																																					
Number of Approved Places Offered	881																																					
<p>10.3.9</p>	<p>How many Looked After Children have had placement moves throughout the period?</p> <table border="1" data-bbox="209 813 1062 1227"> <thead> <tr> <th>Placement changes</th> <th>0-4</th> <th>5-11</th> <th>12-15</th> <th>16+</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Number who moved once</td> <td>44</td> <td>36</td> <td>17</td> <td>27</td> <td>124</td> </tr> <tr> <td>Number who moved twice</td> <td>6</td> <td>5</td> <td>0</td> <td>5</td> <td>16</td> </tr> <tr> <td>Number who moved 3 times</td> <td>2</td> <td>3</td> <td>3</td> <td>3</td> <td>11</td> </tr> <tr> <td>Number who moved 4 times or more</td> <td>0</td> <td>2</td> <td>1</td> <td>4</td> <td>7</td> </tr> <tr> <td>Total</td> <td>52</td> <td>46</td> <td>21</td> <td>39</td> <td>158</td> </tr> </tbody> </table> <p>The number of placement moves within this reporting period has reduced by 53. It is of note that the number of children subject to 4 or more moves has decreased by 13 in this reporting period, from 20 to 7. There has also been a decrease in the number of children who experience placement moves once (30) and twice (18) and an increase of 7 children who move 3 times. While the reduction in placement moves is to some extent positive it is also reflective of, the increased number of children inappropriately placed as set out in 10.3.23.</p> <p>However, it also reflects the proactive and collaborative actions taken across our placements and field social work services, which includes:</p> <ul style="list-style-type: none"> The fostering leadership group twice weekly (minimum) placement meetings, monthly duty meetings and long-term match reviews to ensure appropriate placements are made to meet the individual needs of Looked after Children, matched with the skill base of foster carers, to avoid and minimise placement moves when Looked after Children are being matched for placements. These review meetings also take cognisance of Looked after Children placed within independent fostering agencies to avoid “drift” in care planning of children placed outside of Trust placements. 	Placement changes	0-4	5-11	12-15	16+	Total	Number who moved once	44	36	17	27	124	Number who moved twice	6	5	0	5	16	Number who moved 3 times	2	3	3	3	11	Number who moved 4 times or more	0	2	1	4	7	Total	52	46	21	39	158	<p>DSF – LAC Spreadsheet</p>
Placement changes	0-4	5-11	12-15	16+	Total																																	
Number who moved once	44	36	17	27	124																																	
Number who moved twice	6	5	0	5	16																																	
Number who moved 3 times	2	3	3	3	11																																	
Number who moved 4 times or more	0	2	1	4	7																																	
Total	52	46	21	39	158																																	

	<ul style="list-style-type: none"> • Fostering and Adoption Principal social work staff meet regularly to review children aged 0-5 years in foster care to again prevent drift where possible and promote timely move- on for children who should ideally not be in a foster placement to achieve permanence as quickly as possible. • Bi-monthly review meetings are also held with independent fostering agencies to ensure the needs of children are being met appropriately, that disruptions are managed well and in a timely fashion to ensure contingency planning and endeavor to mitigate unnecessary placement moves for children. • 'Placement Under Pressure' and Placement Support Meetings are convened across fostering and field social work teams to support children and carers and to try and prevent placement disruption where possible. 	
<p>10.3.10</p>	<p>(a) How many Looked After Children are awaiting assessment or treatment with child and adolescent mental health services at 30th September?</p> <p>There are 12 looked after children awaiting assessment or treatment from CAMHS.</p> <p>(b) How many Looked After Children have been referred for therapeutic services and their waiting time.</p> <p>See spreadsheet 10.3.10(b) for details</p> <p>There have been 55 referrals for looked after children to TSS within this reporting period, which is a reduction of 46 referrals in the past six months. Whilst the number discharged has reduced by 20, by the end of the reporting period there was an overall reduction of 22 children/young people engaged with the TSS service (n= 354).</p> <p>The average wait period from 1st April- 30th September has remained static within this reporting period at 12 weeks.</p>	<p>DSF – LAC Spreadsheet</p>
	<p>(c) Please provide actions taken to reduce waiting time.</p> <p>Initial Professional Network Meetings (IPNM) continue to be facilitated by the Therapeutic Service for LAC within 12 weeks of receipt of referral, with IPNM being offered within 6 weeks for those higher priority cases and those under 5 years. The service offers a range of supports to carers and professionals to meet the needs of young person. Direct therapy is offered, if required.</p> <p>The service continues to experience increased complexity of cases and associated increase in the therapy needs of children/young people requiring more intensive and longer-term work given the extent of trauma. This impacts on the length of service provided and consequent availability for new referrals. Waiting time is also impacted by the ongoing turnover in social work workforce, which impacts availability of staff for consultation and initial assessment of therapeutic needs, as well as workforce challenges within LAC and Adoption Therapeutic Support Service. The service has</p>	<p>Data Return 10</p>

	recently recruited a new psychologist who is anticipated to take up a vacant post within the next reporting period. This additional resource will enable the service to further reduce the waiting time for therapy.																					
10.3.11	How many Looked After Children are also on Child Protection Register at 30th September?	Quarterly CP return to SPPG																				
10.3.12	<p>How many Looked After Children are Disabled by major category at period end?</p> <table border="1"> <thead> <tr> <th>Major Disability</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Physical (Ex. Sensory)</td> <td>13</td> </tr> <tr> <td>Sensory</td> <td>5</td> </tr> <tr> <td>Learning</td> <td>68</td> </tr> <tr> <td>Chronic illness</td> <td>5</td> </tr> <tr> <td>Autism(ASD)/ADHD/Asperger</td> <td>131</td> </tr> <tr> <td>Other</td> <td>12</td> </tr> <tr> <td>TOTAL (With Disability)</td> <td>234</td> </tr> <tr> <td>No Disability Known</td> <td>861</td> </tr> <tr> <td>Total Looked After Children</td> <td>1095</td> </tr> </tbody> </table> <p>The Trust notes a further increase in children with a disability within the Looked After Child population of 35 (a total of 63 across the year). This reflects the increase in the number of children in care who have a disability. The Trust notes an increase of 19 Children with a learning disability, which have seen the greatest increase over the period. There was a decrease of 13 children with a diagnosis of autism within the Looked After Children population.</p>	Major Disability	Total	Physical (Ex. Sensory)	13	Sensory	5	Learning	68	Chronic illness	5	Autism(ASD)/ADHD/Asperger	131	Other	12	TOTAL (With Disability)	234	No Disability Known	861	Total Looked After Children	1095	DSF – LAC Spreadsheet
Major Disability	Total																					
Physical (Ex. Sensory)	13																					
Sensory	5																					
Learning	68																					
Chronic illness	5																					
Autism(ASD)/ADHD/Asperger	131																					
Other	12																					
TOTAL (With Disability)	234																					
No Disability Known	861																					
Total Looked After Children	1095																					
10.3.13	<p>How many Looked After Children have a Statement of Educational Needs (SEN) by school status at period end?</p> <table border="1"> <thead> <tr> <th>Statement of Educational Needs</th> <th>M</th> <th>F</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Primary school</td> <td>59</td> <td>22</td> <td>81</td> </tr> <tr> <td>Secondary school</td> <td>39</td> <td>22</td> <td>61</td> </tr> <tr> <td>Special school</td> <td>48</td> <td>23</td> <td>71</td> </tr> <tr> <td>Total</td> <td>146</td> <td>67</td> <td>213</td> </tr> </tbody> </table> <p>The number of LAC children with SEN has remained static within this reporting period.</p>	Statement of Educational Needs	M	F	Total	Primary school	59	22	81	Secondary school	39	22	61	Special school	48	23	71	Total	146	67	213	DSF – LAC Spreadsheet
Statement of Educational Needs	M	F	Total																			
Primary school	59	22	81																			
Secondary school	39	22	61																			
Special school	48	23	71																			
Total	146	67	213																			

<p>10.3.14</p>	<p>(a) Has each Looked After Child an allocated a named social worker at period end?</p> <p>No</p> <p>(b) If no, give number of children and provide an update in the service summary on current position and actions taken</p> <p>Provide an update on current position and actions taken</p> <p>.</p> <p>At period end the Trust confirms that 141 Looked After Children do not have an allocated social worker. This is a significant increase (n=107) from the previous reporting period where 34 Looked After Children did not have an allocated social worker and is reflective of the increase in the number of LAC and the decrease in workforce capacity. A breakdown of placement for the 141 Looked After Children is as follows;</p> <p>75 Children are in foster care with relatives 53 Children in Foster Care 7 Care order at home 6 children in residential care</p> <p>The Trust tracks the number of Looked after children without a named social worker, on a monthly basis and this is kept under continuous review by the Divisional social worker with the Children’s Services Managers.</p>	<p>DSF – LAC Spreadsheet</p>
<p>10.3.15</p>	<p>(a) Did each Looked After Child receive a statutory visit by their allocated and named social worker at least once a month during the period?</p> <p>No</p> <p>(b) If no, give number of children and provide an update in the service summary on current position and actions taken.</p> <p>A total of 10670 statutory LAC visits took place during the reporting period, however a total 236 children (472 visits) were visited outside of statutory timescales. This is an increase of 17 children (364 visits) children from the previous reporting period. Reason for non-compliance with statutory timescales;</p> <p>221 were out of timescales due to unavailability of social worker related to workforce pressures; availability of social work staff to cover a visit to an unallocated case and staff sick leave.</p> <p>98 visits were completed on a 6-weekly basis in line with the Trust business continuity plan, agreed by the Trust Board in Jan 2022.</p> <p>70 due to action short of strike/strike action</p> <p>55 visits were out of timescales due to the availability of the child/ young person</p> <p>16 visits were out of timescales due to availability of carer or parent.</p> <p>6 Due to the Child/Parent refusing access</p> <p>6 visits were out of timescale due to case transfer</p>	<p>DSF – LAC Spreadsheet</p>

	The Trust tracks the number of children not seen/ statutory visits missed on a monthly basis and this is kept under continuous review by Children's Services Managers	
10.3.16	<p>No. of Looked After Children Reviews held during the period</p> <p>A total of 977 Looked After Statutory Reviews were held during the period.</p> <p>This is an increase of 70 from the previous reporting period.</p>	DSF – LAC Spreadsheet
10.3.17	<p>Was the case of each Looked After Child reviewed in line with Statutory requirements?</p> <p>No</p> <p>If No, please provide number (<i>in the LAC spreadsheet</i>) and explain actions taken to address this issue.</p> <p>During the reporting period a total of 977 LAC reviews took place of which 180 did not take place within the statutory timescales, this is an increase of 77 from the previous reporting period 1st April 23 – 31st September 2023. The reasons for non-compliance during the reporting period are outlined below;</p> <p>90 due to availability of social worker or LAC review Chair due staff sickness, leave or responding to other workload priorities</p> <p>23 due to availability of parent, carer or young person</p> <p>14 delayed due to transfer of case to new social worker/team</p> <p>15 to facilitate the completion of assessment or expert witness reports to be taken account of as part of care planning processes</p> <p>12 delayed due to action short of strike/Strike action</p> <p>10 delayed to enable attendance of key professionals to attend</p> <p>9 due to the case being unallocated</p> <p>4 delayed for up to 4 weeks in line with the Trust Business Continuity Plan/case unallocated</p> <p>3 were delayed for other reasons not recorded</p> <p>It is evident from the breakdown of reasons for delay that there has been an increase in LAC Reviews completed out of timescale due to workforce pressures. The Trust continues to actively engage in recruitment and retention strategies for social work staff, both regionally and locally, however the regional deficit in supply of social workers remains a significant challenge.</p> <p>The Trust tracks the number of LAC Reviews out of timescale monthly and this is kept under continuous review by Children's Services Managers.</p>	Data Return 10

10.3.18	This is intentionally blank	
10.3.19	This is intentionally blank	
10.3.20	<p>Is there an adequate supply of placements for children to enable placement choice? (If no, Please explain) No</p> <p>The Trust continues to experience an increase in the total number of children in care with an increase of 35 LAC within the reporting period (a total increase of 66 children and young people in the care the Trust across the year). This impacts upon the capacity of fostering and residential services to enable placement choice and has a direct impact upon the Trust's ability to provide planned, matched placements to all children and young people in timely way.</p> <p>As outlined in 10.5.5 the Trust continues to progress regional and local recruitment and retention of foster carers. Additionally, the Trust continues to access fostering services through independent fostering agencies to supplement fostering support. The number of foster placements offered through independent fostering agencies has been reduced during this reporting period by 4 to 100 independent fostering households, which does incur cost pressures to the Trust.</p> <p>Within this reporting period the Trust residential service has responded to the varying complexities of need and increase in the LAC population by requesting a number of variations to the Statement of Purpose (SOP) via the Regulation and Quality Improvement Authority (RQIA). The Trust notes that over the reporting period there were 17 admissions to residential care; three of which were planned and the rest were emergency admissions. Six of the total admissions were unaccompanied and separated young people, five of whom went to Aran House when the Trust were on the regional rota and one to another children's home in the Trust. Five of the admissions were young people admitted straight to a medium/ long term home from the community or foster placement breakdown, as the short-term admission home was at capacity.</p> <p>The Trust has maintained variation of the Statement of Purpose (SOP) to one home (Slemish House) to accommodate a lower age range (age 9). The most recent variation submission to maintain this variation is awaiting approval by RQIA.</p> <p>The Trust maintains the variation of SOP for two homes (444 Antrim Rd, Mertoun House) to add the learning disability category of care. This is to accommodate two young people who are assessed as having a moderate to severe learning disability. 444 Antrim Road also amended the SOP to extend the assessment period for a specific young person with a learning disability to 18 months (from 6 months). This action was required to ensure continued planning and placement identification.</p> <p>The Trust maintained compliance with the enforcement notice during this reporting period for 2 homes (Mertoun, Osborne); to reduce capacity as per the RQIA enforcement process. One home (Slemish) is to be maintained as a six-bedded home (previously 8), as per assurances provided to RQIA by the Trust following an inspection.</p> <p>During the period the Trust has complied with the Notice of Decision not to agree to the variation and not to add the temporary variation of the acquired premises to one home (Osborne). This Premise (Aldergrove) closed on 19.2.24 as the child was accommodated by an independent residential provider.</p>	Data Return 10

	<p>The Trust has maintained the two bedded home, opened in September 2021, however, has also amended its SOP in line with RQIA enforcement procedures, to a one bedded home for a child with a learning disability. A business case was completed for non-recurrent funding for a staffing model to maintain the current child until such times as alternative longer-term accommodation is achieved.</p> <p>At this time the Trust remains concerned about its capacity to offer appropriate placement choice given the increasing trajectory of admissions into care. This is reflected (10.3.23); in the increased number of children who are deemed to be inappropriately placed, while it is noted this has decreased by 6 within this reporting period.</p>	
10.3.21	<p>How many exceptions to the normal fostering limit were made to foster care approvals in order for a child to be placed in an emergency in the reporting period?</p> <p>12 exceptions to the normal fostering limit were made to foster care approvals within this reporting period. This is an increase of 5 from the previous reporting period.</p>	DSF – LAC Spreadsheet
10.3.22	This is intentionally blank	
10.3.23	<p>How many children are deemed to be in an inappropriate placement given their assessed needs? <i>(Please explain)</i></p> <p>There are 61 children deemed to be in inappropriate placements. This is an increase of four from the last reporting period. The increase in care admissions coupled with the regional decrease in numbers of foster carers has resulted in a regional crisis in foster placement availability. The overview of LAC in inappropriate placements is broken down as follows:</p> <ul style="list-style-type: none"> • 6 Children remain at home due to no appropriate placement availability / awaiting court date removal • 5 Children placed in Bridge/emergency foster placement/ moving between emergency placements • 2 Children with concerns regards their current non-kinship placement and alternative required • 8 Children placed in a short-term placement but requires a long-term placement • 8 Children placed with family (unregulated placement) but require alternative placement • 8 Children placed in inappropriate/unsustainable/fragile kinship placement • 5 Children placed in Independent Fostering Agency placements where time has been called or where carers will not maintain short/long term • 1 Child placed in residential placement and requires fostering placement • 8 Children in short-term placement with Care Plans of Adoption (and not being adopted by current cases) • A total of 5 Young people placed in residential care outside the Statement of purposes, whilst short term variations have been agreed with RQIA for 3 (2 to lower the age and 1 to include learning disability); Of the 5 young people - 1 young person was admitted without an amended SOP due to RQIA enforcement which meant an application to vary the SOP has not been progressed; And 1 young person requires an ECR placement as the current residential 	DSF – LAC Spreadsheet

	<p>placement is unable to progress the therapeutic treatment plan, to date all ECR providers have rejected the referral.</p> <ul style="list-style-type: none"> • 5 Children with disability in the community who are deemed at high risk of need for a care admission, which due to placement availability cannot be safely progressed. <p>The Directorate is currently in the process of establishing a Care Placement Options Panel, to ensure robust oversight at service management level of care admission and discharges and reduce emergency admissions to residential care.</p> <p>In March 2024 the service received an improvement notification from RQIA resulting from concerns relating to patterns of activity across the residential section, of using unregistered services and making applications to vary the registration of services. An improvement plan will be progressed in the next reporting period.</p>													
<p>10.3.24</p>	<p>Please provide the number of restraints carried out by staff on young people within each Home during the period.</p> <p>See spreadsheet 10.3.24 for details.</p> <p>The Trust notes an increase in the number of restraints required in supporting children with a disability in Somerton Road, from 22 (involving 1 child) to 30 (involving 4 children) over this reporting period.</p> <p>Over the reporting period Slemish has also seen a rise in restraints required, to support dysregulated children to stay safe and prevent injury to themselves or others; from 26 incidents (involving 6 children) to 33 incidents involving two children.</p> <p>Over the period in Slemish House, regrettably several young people presented with highly dysregulated behaviours impacting on the group dynamics, with two young people requiring secure care admission, one young person placed of outside statement of purpose (due to age) and an emergency admission in December 2023.</p>	<p>DSF – LAC Spreadsheet</p>												
<p>10.3.25</p>	<p>Do all looked after children have a concurrent plan by the time of their first 3 month statutory LAC Review?</p> <p>No</p> <table border="1" data-bbox="209 1480 1166 1827"> <thead> <tr> <th>Concurrent Plan Status</th> <th>Number of children</th> </tr> </thead> <tbody> <tr> <td>N/A as Looked After for less than 3 months</td> <td>68</td> </tr> <tr> <td>No – Did not have concurrent plan by 3 month LAC review and still has no concurrent plan</td> <td>8</td> </tr> <tr> <td>No – Did not have concurrent plan by 3 months LAC review, but now has concurrent plan in place</td> <td>27</td> </tr> <tr> <td>Yes – Had concurrent plan by time of first 3 month LAC review</td> <td>992</td> </tr> <tr> <td>Total</td> <td>1095</td> </tr> </tbody> </table> <p>The Trust has seen an increase (13) in Looked After Children who had a concurrent plan in place by their first 3-month statutory LAC review, and a reduction (7) in the number of children who do not have a concurrent plan in place at the end of this reporting period.</p>	Concurrent Plan Status	Number of children	N/A as Looked After for less than 3 months	68	No – Did not have concurrent plan by 3 month LAC review and still has no concurrent plan	8	No – Did not have concurrent plan by 3 months LAC review, but now has concurrent plan in place	27	Yes – Had concurrent plan by time of first 3 month LAC review	992	Total	1095	<p>Data Return 10</p>
Concurrent Plan Status	Number of children													
N/A as Looked After for less than 3 months	68													
No – Did not have concurrent plan by 3 month LAC review and still has no concurrent plan	8													
No – Did not have concurrent plan by 3 months LAC review, but now has concurrent plan in place	27													
Yes – Had concurrent plan by time of first 3 month LAC review	992													
Total	1095													

10.3.26	<p>Permanency Planning for Looked After Children at period end</p> <table border="1" data-bbox="209 165 1166 651"> <thead> <tr> <th colspan="2">Permanency Plan</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Return to Birth Family</td> <td></td> <td>56</td> </tr> <tr> <td>Return to Kinship Carers outside LAC system (Friend/Relative/Family Placement)</td> <td></td> <td>22</td> </tr> <tr> <td>Adoption</td> <td></td> <td>55</td> </tr> <tr> <td>Long term Fostering (Including Kinship)</td> <td></td> <td>659</td> </tr> <tr> <td>Supported Living/Independent Living</td> <td></td> <td>24</td> </tr> <tr> <td>Other</td> <td></td> <td>89</td> </tr> <tr> <td>Total</td> <td></td> <td>905</td> </tr> <tr> <td>Number of children not included above as they have been in care for less than 9 months</td> <td></td> <td>190</td> </tr> <tr> <td>Total</td> <td></td> <td>1095</td> </tr> <tr> <td>Number where plan has been in place for 12 months or more and yet to be achieved</td> <td></td> <td>110</td> </tr> </tbody> </table>	Permanency Plan		Total	Return to Birth Family		56	Return to Kinship Carers outside LAC system (Friend/Relative/Family Placement)		22	Adoption		55	Long term Fostering (Including Kinship)		659	Supported Living/Independent Living		24	Other		89	Total		905	Number of children not included above as they have been in care for less than 9 months		190	Total		1095	Number where plan has been in place for 12 months or more and yet to be achieved		110	DSF – LAC Spreadsheet
Permanency Plan		Total																																	
Return to Birth Family		56																																	
Return to Kinship Carers outside LAC system (Friend/Relative/Family Placement)		22																																	
Adoption		55																																	
Long term Fostering (Including Kinship)		659																																	
Supported Living/Independent Living		24																																	
Other		89																																	
Total		905																																	
Number of children not included above as they have been in care for less than 9 months		190																																	
Total		1095																																	
Number where plan has been in place for 12 months or more and yet to be achieved		110																																	
10.3.27	This is intentionally blank																																		
10.3.28	This is intentionally blank																																		
10.3.29	<p>(a) How many Looked After Children are involved in offending behaviour (are formally cautioned or convicted)</p> <table border="1" data-bbox="209 891 1166 1070"> <thead> <tr> <th>Formal process</th> <th>M</th> <th>F</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Cautioned</td> <td>10</td> <td>12</td> <td>22</td> </tr> <tr> <td>Remanded</td> <td>3</td> <td>1</td> <td>4</td> </tr> <tr> <td>Convicted</td> <td>2</td> <td>0</td> <td>2</td> </tr> <tr> <td>Total</td> <td>15</td> <td>13</td> <td>28</td> </tr> </tbody> </table> <p>The Trust is reporting a total of 28 young people have been cautioned/remanded/convicted at period end. This is a decrease of 12 at period end 31st September 2023.</p>	Formal process	M	F	Total	Cautioned	10	12	22	Remanded	3	1	4	Convicted	2	0	2	Total	15	13	28	DSF – LAC Spreadsheet													
Formal process	M	F	Total																																
Cautioned	10	12	22																																
Remanded	3	1	4																																
Convicted	2	0	2																																
Total	15	13	28																																
10.3.30	This is intentionally blank																																		
10.3.31	This is intentionally blank																																		
10.3.32	What progress are children making at school and what are their examination results – School Year Ended 30 th June 2022 (this will be collected in September Data Return only)	DOH																																	
10.3.33	Looked After Children, School Attendance – School Year Ended 30 th June 2022	DOH																																	
10.3.34	(a) Number of children notified to the police as having gone missing from residential or foster care for 24 hours or more? (This data will be sourced directly from the Untoward Event Report)	Untoward Events database, SPPG																																	
	(b) How many Looked After Children have been reported to the Police for reasons other than having gone missing for 24 hours or more during the period?	DSF – LAC																																	

	<p>(This table should be completed for each Residential Facility, it is not required for Foster Carers)</p> <p>Within this reporting period there have been a significant number of children reported to the police for reasons other than going missing for 24 hours.</p> <p>Most reports are in relation to assault within the children's homes, which has risen significantly since the last reporting period. Most of these incidents related to Slemish House which as outlined in 10.3.24 regrettably related to several young people who presented with highly dysregulated behaviors and resulted in two young people requiring secure care admission, one young person placed of outside statement of purpose (due to age) and an emergency admission in December 2023.</p> <p>Across all homes unauthorised absence has decreased over the period from 520 to 226 across the reporting period.</p> <p>See spreadsheet 10.3.34(b) for details</p>	Spreadsheet
10.3.35	<p>Number of children accommodated by ELB for 3 months or more by category</p> <p>There are 2 children accommodated by ELB for 3 months or more.</p>	DSF – LAC Spreadsheet
10.3.36	<p>(a) Number of Sibling groups accommodated:</p> <ul style="list-style-type: none"> • Together 124 • Not accommodation together at period end 106 <p>The Trust notes an increase in the number of children not accommodated together; from 86 to 106</p>	Data Return 10
10.3.37	<p>Number of young people admitted to Secure Accommodation and the reasons for admission during the period</p> <p><i>This data is sourced directly from Lakewood (it will be forwarded by South Eastern Trust) – after this reporting period the data will be sourced from the Regional Secure panel which is located within SPPG</i></p>	Lakewood/Regional Panel
10.3.38	<p>Please provide report into the operation of the Trusts Restriction of Liberty Panel</p> <p><i>This data is collected annually and sourced from a Restriction of Liberty report (it comes in with DSF). The data will be sources from the Regional Secure Panel going forward – panel began on 1.9.19.</i></p>	Lakewood/Regional Panel
10.3.39	<p>(a) During the period how many children or young people became a Looked After Child by age, gender and first placement</p> <p>148 children became looked after during the reporting period.</p> <p>(b) To your knowledge have any of the children admitted during the period been subject to a full Adoption Order</p> <p>0 have been reported as being subject to a full Adoption Order</p>	DSF – LAC Spreadsheet

	<p>(c) Of those children at 10.3.39(a) admitted to care during the period how many have previously been on the Child Protection Register in the last 2 years from the period end date</p> <p>A total of 90 of these children had previously been on the child protection register. This is an increase of 19 from the previous reporting period.</p> <p>(d) Number of Children and Young People who became Looked After during the period had a CLA1 form completed and forwarded to School?</p> <p>54</p> <p>(e) Can you confirm that all the above admissions to care are properly recorded and do not include what should rightly be reported as a placement move (e.g. a fostering breakdown where the RESWS moves the child to a children's home)</p> <p>Yes</p>											
<p>10.3.40</p>	<p>(a) During the period how many children or young people became a Looked After Child by age, gender and legal status on admission;</p> <p>(b) (i) Were these admissions planned, unplanned or emergency;</p> <table border="1" data-bbox="209 943 1166 1122"> <thead> <tr> <th>Admissions</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Planned</td> <td>60</td> </tr> <tr> <td>Unplanned</td> <td>51</td> </tr> <tr> <td>Emergency</td> <td>37</td> </tr> <tr> <td>Total</td> <td>148</td> </tr> </tbody> </table> <p>(ii) Of those that were unplanned or emergency how many were admitted to kinship foster care?</p> <p>49</p> <p>(iii) Of those unplanned or emergency admissions how many were admitted by RESWS?</p> <p>10</p>	Admissions	Total	Planned	60	Unplanned	51	Emergency	37	Total	148	<p>DSF – LAC Spreadsheet</p>
Admissions	Total											
Planned	60											
Unplanned	51											
Emergency	37											
Total	148											
<p>10.3.41</p>	<p>During the period how many children or young people ceased to be Looked After by age, gender and length of time looked after at discharge</p> <p>114 children or young people ceased to be Looked After during the reporting period.</p> <p>See spreadsheet 10.3.41 for details</p>	<p>DSF – LAC Spreadsheet</p>										

10.3.42

(a) Of all the children and young people reported at 10.3.41 what was their destination at discharge by age and gender

Destination	Total
Returned to Parents/Siblings	44
Returned to Relatives/friends	17
Adopted	17
Independent living/Tenancy (NIHE/HAsoc./Private etc)	2
Foster Carers (GEM)	16
Jointly Commissioned Supported Accommodation Projects	8
Bed + Breakfast	0
Hostel. Foyer	1
Supported Board and Lodgings	3
Prison, Hospital	1
Other	5
Total	114

Category	16		17		Count		Total
	M	F	M	F	M	F	
Number entitled to access Leaving Care Services	0	1	22	19	22	20	42
Number not entitled to access Leaving Care Services	1	0	0	0	1	0	1
Total	1	1	22	19	23	20	43

(b) Of those 16+ year olds who ceased to be Looked After during the period what was their entitlement to Leaving Care Services by age and gender

DSF – LAC Spreadsheet

10.3.43

This is intentionally blank

10.3.44

(a) Please provide the total number of children that became subject of a Residence Order during the period.

For (a) above please give the number of children that were formerly placed with Stranger (Foster Carers), Kinship (Foster Carers), Residential Care or other placement.

Placement	No. of Children
Stranger (Foster Carers)	1
Kinship (Foster Carers)	7
Residential Care	0
Other Placement	0
Total	8

(c) How many Residence Orders are in place at period end?
192

DSF – LAC Spreadsheet

<p>10.3.45</p>	<p>Number of Children or Young People who died during the current reporting period and were Looked After by the Trust by cause/age</p> <p>There were 0 children or young people who were looked after by the Trust who died within this reporting period.</p>	<p>DSF – LAC Spreadsheet</p>
-----------------------	--	--------------------------------------

Note: Sections 10.3.41 to 10.3.43 should include all discharges including those reported in section 10.4

10.4 CHILDREN (LEAVING CARE) ACT (NI) 2002

Article 34E, Article 34F

<p>10.4.1</p>	<p>Number of young people subject to Leaving Care Act by category, age and gender</p> <p>458</p> <p>This is an increase of 15 from the previous reporting period.</p> <p>See spreadsheet 10.4.1 for details</p>	<p>DSF-16+ Spreadsheet</p>																																																																												
<p>10.4.2</p>	<p>Of those eligible young people reported at 10.4.1 give the Children Order Legal Status at period end.</p> <p>Age reference table will automatically update as spreadsheets completed.</p> <table border="1" data-bbox="225 741 1155 1048"> <thead> <tr> <th>Legal Status</th> <th>16</th> <th>17</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Accommodated (Article 21)</td> <td>9</td> <td>17</td> <td>26</td> </tr> <tr> <td>Care order (Art 50 or 59)</td> <td>53</td> <td>64</td> <td>117</td> </tr> <tr> <td>Interim Care Order (Art 57)</td> <td>1</td> <td>0</td> <td>1</td> </tr> <tr> <td>Deemed Care Order</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Other</td> <td>3</td> <td>1</td> <td>4</td> </tr> <tr> <td>Total</td> <td>66</td> <td>82</td> <td>148</td> </tr> </tbody> </table> <table border="1" data-bbox="225 1084 1145 1375"> <thead> <tr> <th>Category</th> <th>16</th> <th>17</th> <th>18</th> <th>19</th> <th>20</th> <th>21+</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Eligible</td> <td>66</td> <td>82</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>148</td> </tr> <tr> <td>Relevant</td> <td>0</td> <td>2</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>2</td> </tr> <tr> <td>Fmr Relevant</td> <td>0</td> <td>0</td> <td>67</td> <td>78</td> <td>83</td> <td>78</td> <td>306</td> </tr> <tr> <td>Qualifying</td> <td>0</td> <td>0</td> <td>0</td> <td>1</td> <td>1</td> <td>0</td> <td>3</td> </tr> <tr> <td>Total</td> <td>66</td> <td>84</td> <td>67</td> <td>79</td> <td>84</td> <td>79</td> <td>459</td> </tr> </tbody> </table>	Legal Status	16	17	Total	Accommodated (Article 21)	9	17	26	Care order (Art 50 or 59)	53	64	117	Interim Care Order (Art 57)	1	0	1	Deemed Care Order	0	0	0	Other	3	1	4	Total	66	82	148	Category	16	17	18	19	20	21+	Total	Eligible	66	82	0	0	0	0	148	Relevant	0	2	0	0	0	0	2	Fmr Relevant	0	0	67	78	83	78	306	Qualifying	0	0	0	1	1	0	3	Total	66	84	67	79	84	79	459	<p>DSF-16+ Spreadsheet</p>
Legal Status	16	17	Total																																																																											
Accommodated (Article 21)	9	17	26																																																																											
Care order (Art 50 or 59)	53	64	117																																																																											
Interim Care Order (Art 57)	1	0	1																																																																											
Deemed Care Order	0	0	0																																																																											
Other	3	1	4																																																																											
Total	66	82	148																																																																											
Category	16	17	18	19	20	21+	Total																																																																							
Eligible	66	82	0	0	0	0	148																																																																							
Relevant	0	2	0	0	0	0	2																																																																							
Fmr Relevant	0	0	67	78	83	78	306																																																																							
Qualifying	0	0	0	1	1	0	3																																																																							
Total	66	84	67	79	84	79	459																																																																							
<p>10.4.3</p>	<p>This is intentionally blank</p>																																																																													
<p>10.4.4</p>	<p>This is intentionally blank</p>																																																																													
<p>10.4.5</p>	<p>This is intentionally blank</p>																																																																													
<p>10.4.6</p>	<p>Of the young people reported at 10.4.1</p> <p>(a) What are the social worker and personal adviser arrangements in place for each category of young people?</p>	<p>DSF-16+ Spreadsheet</p>																																																																												

Category	Named Social Worker only	Named Personal Adviser only	Named Social Worker and Personal Adviser	Awaiting allocation of a social worker	Awaiting allocation of a personal adviser
Eligible	91	7	37	20	91
Relevant	2	0	0	0	2
Former Relevant	12	227	67	0	0
Qualifying	1	2	0	0	0

The Trust note that the above table does not enable the identification of eligible young people who are unallocated both a social worker and personal advisor. Therefore, would highlight the following for clarification of the above information:

- The Trust has **20** eligible young people with no social worker at end of period.
- **7 (named PA only column)** of these 20 have a personal advisor allocated and 13 do not.
- The 7 are included in the awaiting allocation SW category and the 13 are included in the awaiting allocation of a PA category.

(b) Of the young people with a named personal adviser, how many have a Person Specific Personal Adviser?

Category	Of the young people with a named Personal Adviser - how many have a person Specific Personal Adviser
Eligible	0
Relevant	0
Former Relevant	0
Qualifying	0

(c) How many do not have an up to date Pathway Plan at period end?

Category	No. without an Up to Date Pathway Plan
Eligible	19
Relevant	0
Former Relevant	0
Qualifying	0
Total	19

10.4.7	<p>Of the young people reported at 10.4.1 how many do not have a completed needs assessment and how long have they been waiting at period end?</p> <table border="1" data-bbox="225 232 1182 611"> <thead> <tr> <th>Category</th> <th>No. Without a completed Needs Assessment</th> <th><3 Months</th> <th>3-6 Months</th> <th>7-12 Months</th> <th><1 Year</th> </tr> </thead> <tbody> <tr> <td>Eligible</td> <td>19</td> <td>9</td> <td>4</td> <td>1</td> <td>5</td> </tr> <tr> <td>Relevant</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Former Relevant</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Qualifying</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Total</td> <td>19</td> <td>9</td> <td>4</td> <td>1</td> <td>5</td> </tr> </tbody> </table>	Category	No. Without a completed Needs Assessment	<3 Months	3-6 Months	7-12 Months	<1 Year	Eligible	19	9	4	1	5	Relevant	0	0	0	0	0	Former Relevant	0	0	0	0	0	Qualifying	0	0	0	0	0	Total	19	9	4	1	5	DSF-16+ Spreadsheet
Category	No. Without a completed Needs Assessment	<3 Months	3-6 Months	7-12 Months	<1 Year																																	
Eligible	19	9	4	1	5																																	
Relevant	0	0	0	0	0																																	
Former Relevant	0	0	0	0	0																																	
Qualifying	0	0	0	0	0																																	
Total	19	9	4	1	5																																	
10.4.8	<p>Summary of failure to comply as detailed in 10.4.6, 10.4.7 at period end.</p> <p>There are currently 93 young people awaiting allocation of a personal advisor. This is a reduction of 37 from the previous reporting period. As noted in 10.4.6 there are 20 eligible LAC who are not allocated a social worker, 13 of which have neither a social worker or personal advisor allocated. The Trust non-compliance with PA allocation, and social workers for LAC, continues to be highlighted as issues of concern. As noted failure to comply has been attributed to the factors highlighted below:</p> <ul style="list-style-type: none"> • Workforce challenges in recruiting and retaining personal advisors' with 3.5 WTE vacancy in PA at end of reporting period continuing to impact. The Trust has undertaken recruitment exercises and interviews are pending in April 2024. To mitigate the risk associated with the level of unallocated PA, the Trust is in the process of establishing a PA duty system. • The rising number of UASC population in Northern Ireland has also impacted on levels of compliance in the allocation of Personal Advisors. The Trust continues to support the highest number of UASC in the region. This is in part due to previous UASC arrangements. There are 85 young people (26 under the age of 18 / 59 aged 18+) entitled to a Personal Advisor service. UASC represent approximately 18.5% of the totality of those persons entitled to a Personal Advisor. The Trust will be progressing recruitment of PA for the UASC population in the next reporting period. <p>In the next reporting period the Trust will be reviewing its internal structures for LCAC, subject to the publication of the SPPG regional review of leaving and aftercare services, to reduce existing internal interfaces to best meet the needs of the young people.</p>	Data Return 10																																				
10.4.9	<p>Of the young people reported at 10.4.1 what are their living arrangements at period end? Please complete for</p> <p>(a) Eligible;</p> <table border="1" data-bbox="225 1827 1182 2031"> <thead> <tr> <th>Placement Type</th> <th>16</th> <th>17</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Foster Placement (Stranger)</td> <td>22</td> <td>24</td> <td>46</td> </tr> <tr> <td>Foster Placement (Kinship)</td> <td>22</td> <td>24</td> <td>46</td> </tr> <tr> <td>At Home In Care</td> <td>7</td> <td>7</td> <td>14</td> </tr> <tr> <td>Residential Children's Home</td> <td>4</td> <td>3</td> <td>7</td> </tr> <tr> <td>Secure Care</td> <td>3</td> <td>2</td> <td>5</td> </tr> </tbody> </table>	Placement Type	16	17	Total	Foster Placement (Stranger)	22	24	46	Foster Placement (Kinship)	22	24	46	At Home In Care	7	7	14	Residential Children's Home	4	3	7	Secure Care	3	2	5	DSF-16+ Spreadsheet												
Placement Type	16	17	Total																																			
Foster Placement (Stranger)	22	24	46																																			
Foster Placement (Kinship)	22	24	46																																			
At Home In Care	7	7	14																																			
Residential Children's Home	4	3	7																																			
Secure Care	3	2	5																																			

Specialist Residential Placement (NI/UK)	0	1	1
Hospital	0	1	1
Jointly Commissioned Supported Accommodation Projects	0	8	8
Unregulated Placement	6	12	18
Other	2	0	2
Total	66	82	148

(b) Relevant;

Living Arrangements	16	17	Total
Tenancy (NIHE/H Assoc./Private)	0	0	0
At Home with Parents/Siblings	0	1	1
Jointly Commissioned Supported Accommodation Projects	0	0	0
Relatives/friends	0	1	1
Hostel, B+B, Foyer	0	0	0
Supported Board and Lodgings	0	0	0
Halls of residence/Student Accommodation	0	0	0
Prison	0	0	0
Other	0	0	0
Total	0	2	2

(c) Former Relevant; and

Living Arrangements	18	19	20	21+	Total
Former Foster Carers (GEM)	25	22	11	14	72
Tenancy (NIHE/H Assoc./Private)	3	8	18	20	49
At Home with Parents/Siblings	11	9	14	5	39
Jointly Commissioned Supported Accommodation Projects	12	8	2	0	22
Relatives/friends	6	6	15	9	36
Hostel, B+B, Foyer	0	6	3	6	15
Supported Board and Lodgings	2	3	2	3	10
Halls of residence/Student Accommodation	2	2	2	9	15
Prison	1	1	1	2	5
Other	5	13	15	10	43
Total	67	78	83	78	306

(d) Qualifying young people

Living Arrangements	16	17	18	19	20	21+	Total
Former Foster Carers (GEM)	0	0	0	0	0	0	0
Tenancy (NIHE/H Assoc/Private)	0	0	0	0	1	0	1
At Home with Parents/Siblings	0	0	0	0	0	1	1
Jointly Commissioned Supported Accommodation Projects	0	0	0	0	0	0	0
Relatives/friends	0	0	0	0	0	0	0
Hostel, B+B, Foyer	0	0	0	1	0	0	1
Supported Board and Lodgings	0	0	0	0	0	0	0
Halls of residence/Student Accommodation	0	0	0	0	0	0	0
Prison	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0
Total	0	0	0	0	1	1	3

10.4.10

Of the young people reported at 10.4.1 what is their current education, training and employment status, and how many are being supported financially at period end? 10.4.10

(a) Eligible;

ETE Status	16	17	Total	No. Receiving financial support
Secondary Level Education	45	28	73	27
Further Education	8	12	20	12
Training (Govt. sponsored training)	10	19	29	19
Pre-Vocational	0	2	2	2
Employment	0	4	4	2
ETE Inactive	2	7	9	0
Training (Non Govt. sponsored training)	0	0	0	0
Other(Sick/Disabled, Parent, Carer)	1	10	11	7
Total	66	82	148	69

DSF-16+ Spreadsheet

(b) Relevant;

ETE Status	16	17	Total	No. Receiving Financial support
Secondary Level Education	0	1	1	0
Further Education	0	0	0	0
Training (Govt. sponsored training)	0	0	0	0
Pre-Vocational	0	0	0	0
Employment	0	1	1	0
ETE Inactive	0	0	0	0
Training (Non Govt. sponsored training)	0	0	0	0
Other	0	0	0	0
Total	0	2	2	0

(c) Former Relevant; and

ETE Status	18	19	20	21+	Total	No. Receiving Financial support
Secondary Level Education	4	2	0	0	6	2
Further Education	1	4	1	3	9	3
Higher Education	1	6	5	13	25	22
Training (Govt. sponsored training)	23	18	16	20	77	29
Pre-Vocational	1	1	1	1	4	0
Employment	8	13	26	21	68	0
ETE Inactive	23	26	29	20	98	0
Training (Non Govt. sponsored training)	6	8	5	0	19	13
Other	0	0	0	0	0	0
Total	67	78	83	78	306	69

(d) Qualifying young people								
ETE Status	16	17	18	19	20	21 +	Total	No. Receiving Financial support
Secondary Level Education	0	0	0	0	0	0	0	0
Further Education	0	0	0	0	1	0	1	1
Higher Education	0	0	0	0	0	0	0	0
Training (Govt. sponsored training)	0	0	0	0	0	0	0	0
Pre-Vocational Employment	0	0	0	0	0	0	0	0
ETE Inactive	0	0	0	1	0	0	1	0
Training (Non Govt. sponsored training)	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0
Total	0	0	0	1	1	1	3	1

10.4.11	<p>Of the young people reported at 10.4.1 how many were convicted during this reporting period?</p> <p>During this reporting period no young people were formally convicted, this a significant reduction from the previous reporting period (n= 11). Additionally, 11 young people were formally remanded and 6 young people were formally cautioned. Comparative to the period April – September 2023 this is a reduction of 2 remanded and increase of 3 cautioned.</p>	DSF16 S/Sheet																		
10.4.12	<p>Of the young people reported at 10.4.1 how many have a disability by major disability – physical, sensory, learning, chronic illness, Autism (see definition) and other, type and gender at period end?’</p> <table border="1"> <thead> <tr> <th>Type of Disability</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Physical (Ex. Sensory)</td> <td>6</td> </tr> <tr> <td>Sensory</td> <td>1</td> </tr> <tr> <td>Learning</td> <td>35</td> </tr> <tr> <td>Chronic illness</td> <td>2</td> </tr> <tr> <td>Autism(ASD)/Asperger/ADHD</td> <td>46</td> </tr> <tr> <td>Other (undefined)</td> <td>0</td> </tr> <tr> <td>No Disability</td> <td>369</td> </tr> <tr> <td>Total</td> <td>459</td> </tr> </tbody> </table> <p>A total of 90 young people have a disability</p>	Type of Disability	Total	Physical (Ex. Sensory)	6	Sensory	1	Learning	35	Chronic illness	2	Autism(ASD)/Asperger/ADHD	46	Other (undefined)	0	No Disability	369	Total	459	DSF-16+ S/Sheet
Type of Disability	Total																			
Physical (Ex. Sensory)	6																			
Sensory	1																			
Learning	35																			
Chronic illness	2																			
Autism(ASD)/Asperger/ADHD	46																			
Other (undefined)	0																			
No Disability	369																			
Total	459																			

10.4.13	<p>Of the young people reported at 10.4.1 what is their parental status at period end?</p> <table border="1" data-bbox="220 199 1059 360"> <thead> <tr> <th>Parental Status</th> <th>No of Young People</th> </tr> </thead> <tbody> <tr> <td>Parent</td> <td>20</td> </tr> <tr> <td>Lone Parent</td> <td>14</td> </tr> </tbody> </table>	Parental Status	No of Young People	Parent	20	Lone Parent	14	DSF-16+ S/Sheet																																										
Parental Status	No of Young People																																																	
Parent	20																																																	
Lone Parent	14																																																	
10.4.14	<p>'Of the young people reported at 10.4.1 how many are receiving treatment for mental health issues at period end? Of these, how many were new referrals to mental health services during the period?</p> <table border="1" data-bbox="220 535 1171 913"> <thead> <tr> <th>Mental Health Concerns</th> <th>No. of Young People waiting for or receiving Mental Health interventions/services</th> <th>Number of new referrals to mental health intervention/services during period (1.4.20 - 30.9.20).</th> </tr> </thead> <tbody> <tr> <td>Mental Health Concerns</td> <td>90</td> <td>55</td> </tr> <tr> <td>Self-Harm</td> <td>2</td> <td>0</td> </tr> </tbody> </table> <p>The Trust has seen an increase on 9 of young people referred for mental health intervention/services during the period, and a slight reduction of 5 young people waiting for/receiving mental health interventions.</p>	Mental Health Concerns	No. of Young People waiting for or receiving Mental Health interventions/services	Number of new referrals to mental health intervention/services during period (1.4.20 - 30.9.20).	Mental Health Concerns	90	55	Self-Harm	2	0	DSF-16+ S/Sheet																																							
Mental Health Concerns	No. of Young People waiting for or receiving Mental Health interventions/services	Number of new referrals to mental health intervention/services during period (1.4.20 - 30.9.20).																																																
Mental Health Concerns	90	55																																																
Self-Harm	2	0																																																
10.4.15	<p>Number of Young People who are no longer Looked After but who died during the current reporting period and were in receipt of aftercare services by cause/age.</p> <table border="1" data-bbox="220 1218 1158 1496"> <thead> <tr> <th rowspan="2">Cause</th> <th colspan="2">16-17</th> <th colspan="2">18+</th> <th colspan="2">Total</th> </tr> <tr> <th>M</th> <th>F</th> <th>M</th> <th>F</th> <th>M</th> <th>F</th> </tr> </thead> <tbody> <tr> <td>Natural Causes</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Accident</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Suicide</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Other</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Total</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> </tbody> </table>	Cause	16-17		18+		Total		M	F	M	F	M	F	Natural Causes	0	0	0	0	0	0	Accident	0	0	0	0	0	0	Suicide	0	0	0	0	0	0	Other	0	0	0	0	0	0	Total	0	0	0	0	0	0	DSF-16+ S/Sheet
Cause	16-17		18+		Total																																													
	M	F	M	F	M	F																																												
Natural Causes	0	0	0	0	0	0																																												
Accident	0	0	0	0	0	0																																												
Suicide	0	0	0	0	0	0																																												
Other	0	0	0	0	0	0																																												
Total	0	0	0	0	0	0																																												

10.5 FOSTERING

10.5.1

(a) How many foster carers are registered with the Trust at period end?

601 - Inclusive of 96 kinship carers who are not yet approved i.e. who are on waiting list for assessment/being assessed/are unregulated (67 are unregulated placements)

How many of the carers above also provide a GEM placement? **21**

Of the carers above how many are Prospective adopters dually approved as foster carers? **17**

Of the Prospective Adopters/Dually Approved carers above how many are Concurrent Foster/Adoptive Carers? **8**

This is an increase of **23** fostering household since of the previous reporting period. Of note there are a total of **70** households which are caring for children and young people who are not yet approved, an increase on **26** from the previous reporting period (a total of **44** are deemed unregulated).

(b) Please give the number of other foster carers;
100 Independent Fostering Agency Carers (providing foster placements to 147 children)

(c) Please give a breakdown of the number of foster carers de-registered during the period and the reason;

Reason for Foster Carer De-registered	Number
Carer has adopted or been granted a residence order	9
No longer wishing to foster	28
Retired	5
Deregistered following concerns re: care of children	6
Opted to be GEM Carer Only	2

DSF-Foster care Spreadsheet

(d) Please advise of the recruitment process activity during the period;

Recruitment Process Activity During the period*		No. Of Carers
Number receiving information packs. 0 as regional agreement is referral to HSCNI Foster Care website for information	Kinship	Nil
	Non-Kinship	Nil
Number of Initial Home Visits	Kinship	110
	Non-Kinship	8
Numbers of Households attending Skills to Foster course	Kinship	30
	Non-Kinship	12
Number of Completed Assessments during the period	Kinship	45
	Non-Kinship	9
Number of these assessments that were already approved as Adopters	Kinship	0
	Non-Kinship	0

(e) Please give the number of regional enquirers received by the Trust

27

<p>10.5.2</p>	<p>For the foster carers return at 10.5.1 how many places are they registered for and the number of vacant places at period end. Please also provide the number of fostering households that have no child placed with them at period end.</p> <table border="1" data-bbox="248 264 1061 1249"> <thead> <tr> <th>Type of Approval</th> <th>Total Places</th> <th>Vacant at Period End</th> <th>Fostering Households with no Child placed at the period end</th> </tr> </thead> <tbody> <tr> <td>Foster Care (Kinship) <12 weeks not yet approved by panel</td> <td>56</td> <td>0</td> <td>0</td> </tr> <tr> <td>Foster Care (Kinship) >12 wks but not panel approved by 16 wks</td> <td>86</td> <td>0</td> <td>0</td> </tr> <tr> <td>Kinship Foster Carers not approved within 12 wks, but within 16 wks during the period</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Panel Approved Kinship carer</td> <td>427</td> <td>7</td> <td>6</td> </tr> <tr> <td>Panel Approved Foster Carer (Non-Kinship)</td> <td>83</td> <td>49</td> <td>37</td> </tr> <tr> <td>Specialist Foster Carers (Fee Paid Carers)</td> <td>229</td> <td>18</td> <td>7</td> </tr> <tr> <td>Total</td> <td>881</td> <td>74</td> <td>50</td> </tr> </tbody> </table> <p>In reporting period 1st Sept 2023 – 31st March 2024 there has been an increase in the number of approved non-kinship foster carers (15 households) not providing a placement. The total number of foster homes (kinship and non-kinship) with no child placed has increased (n=9) to 50 within this period. Reasons highlighted include waiting for deregistration (24) and carers taking a break due to individual family circumstance (26).</p>	Type of Approval	Total Places	Vacant at Period End	Fostering Households with no Child placed at the period end	Foster Care (Kinship) <12 weeks not yet approved by panel	56	0	0	Foster Care (Kinship) >12 wks but not panel approved by 16 wks	86	0	0	Kinship Foster Carers not approved within 12 wks, but within 16 wks during the period	0	0	0	Panel Approved Kinship carer	427	7	6	Panel Approved Foster Carer (Non-Kinship)	83	49	37	Specialist Foster Carers (Fee Paid Carers)	229	18	7	Total	881	74	50	<p>DSF-Foster care Spreadsheet</p>
Type of Approval	Total Places	Vacant at Period End	Fostering Households with no Child placed at the period end																															
Foster Care (Kinship) <12 weeks not yet approved by panel	56	0	0																															
Foster Care (Kinship) >12 wks but not panel approved by 16 wks	86	0	0																															
Kinship Foster Carers not approved within 12 wks, but within 16 wks during the period	0	0	0																															
Panel Approved Kinship carer	427	7	6																															
Panel Approved Foster Carer (Non-Kinship)	83	49	37																															
Specialist Foster Carers (Fee Paid Carers)	229	18	7																															
Total	881	74	50																															
<p>10.5.3</p>	<p>How many foster carers have annual reviews outstanding? At the end of this reporting period 126 foster carers have annual reviews outstanding. This is an increase of 32 outstanding reviews from the previous reporting period (see 10.5.4), and an increase of 90 across 2023/24. This increase is reflective of the workforce pressures that have persisted throughout the reporting period.</p> <p>Please provide the number of viability visits undertaken during the reporting period. (moved from 10.5.1f) There have been 110 viability visits undertaken during this reporting period, all visits were joint in line with kinship standards.</p>	<p>Data return 10</p> <p>DSF-Foster care Spreadsheet</p>																																
<p>10.5.4</p>	<p>Please provide specific actions being taken by the Trust to ensure outstanding reviews are completed The completion of outstanding Annual Reviews continues to be an ongoing priority for the Fostering Service. The level of outstanding Annual Reviews is</p>	<p>Data return 10</p>																																

	<p>primarily related to workforce pressures within the Service which includes challenges in recruiting social workers (and support workers) and filling vacant posts. At the end of the reporting period the vacancy and absence rate for the service was 42.4%. In addition to this there is limited availability of agency support workers. Higher workforce vacancies have resulted in increasing numbers of unallocated cases, with 147 unallocated registered foster carers to provide support and 64 unallocated assessments (both kinship and non-Kinship) at the end of the reporting period.</p> <p>There is a direct correlation between the number of unallocated cases and the service's ability to complete annual reviews (n=126); when there is no social worker to work the case or complete the review process and report. The number of vacant posts and unallocated cases have significantly increased over the past 6-12 months.</p> <p>Mitigation & Action Plan</p> <p>Whilst annual reviews are outstanding, support workers (Band 4) have been visiting foster carers who are without an allocated fostering social worker and processing statutory checks i.e. medicals and access NI checks to assure a level of governance and safeguarding.</p> <p>Low risk cases are supported via support workers who are accountable to Senior Social Workers (SSW). SSWs triage cases to continually ensure that only low risk cases are being supported via support workers. If issues arise the cases are reclassified via the triage system and are allocated to a social worker.</p> <p>The Service has implemented a plan to reduce the number of outstanding annual reviews, which will be kept under ongoing monitoring and review.</p>	
10.5.5	<p>What action is being taken to maintain and increase the range, diversity and supply of foster care places</p> <p>During this reporting period, the Trust Children's Services Manager has continued to manage and lead the HSCNI Adoption and Fostering Service. There are currently 2 work streams that are operational to develop a regional recruitment and retention strategy. This strategic approach, in collaboration with the central team, promotes joint working across all Trusts to develop collectively beneficial recruitment activity.</p> <p>The use of marketing tools such as radio interviews, face book and online activity and newspaper articles has continued to expand and increase the supply of foster carers both within the Trust and regionally.</p> <p>Internally the Recruitment group meets on a fortnightly basis to progress Belfast specific activities. This is in addition to contributing to the progress of the Sports Strategy including presence at GAA matches.</p> <p>Internally within the Trust, as the largest HSCNI employer, communication resources are utilised to advertise our events and promote fostering to Trust staff. The 'Trust staff recruitment' strategy has been a successful recruitment tool in recent years. The Trust has co-ordinated 1 internal recruitment campaign in this reporting period. This generated a small number of enquiries which progressed through the assessment and approval stages. The Trust plan to run another internal campaign mid-2024.</p> <p>Much of the recruitment activity carried out by the Trust is face to face, in addition to facilitating, on rotation with other HSC Trust Fostering Services, two virtual recruitment events per month. The Trust is the regional lead for recruitment initiatives for the online regional retirement workshops. These are held quarterly to promote fostering as a potential option for HSC workers approaching retirement.</p> <p>The Trust Recruitment and Retention activity calendar allows planned, targeted activity. In this review period the following activities have been progressed;</p>	Data return 10

- Stands at several children’s fun days and events;
- Presence at a local road race;
- Presentation at a virtual coffee morning for an organisation that supports children and adults with disabilities;
- Stands in shopping centres over the busy Christmas period;
- Information session with schools for Children with Disabilities;
- Continued partnership with local sports organisations, primarily the Internal Football Association and GAA;
- In January 2024 the regional launch of the catholic church recruitment campaign was achieved. HSC fostering teams throughout Northern Ireland had a presence and spoke at dozens of masses over the one weekend. The Trust has continued to attend other masses and intend to do so on an ongoing basis;
- Partnership with Home for Good to promote fostering in a number of Protestant faith churches. Going forward the Trust plans to roll this out to other denominations not involved with Home for Good, in addition to places of worship outside of the Christian faith;
- Continued efforts to recruit carers for Young Refugees. Whilst this has been a challenge it remains a key priority for the Service;
- Development of recruitment plan for supported lodgings in partnership with the STAY/ Supported Lodging staff. Within this reporting period Supported Lodgings have transferred to the Fostering Service from the Leaving Care and After Care Service. Two new workers are in the process of being recruited for this scheme and it is anticipated this placement provision can be further developed.
- The Trust notes the need to recruit carers to care specifically for Children with Disabilities and complex needs and have recently met with colleagues from another Trust area to explore best practice and receive support in planning how best to recruit carers for this specialist type of fostering, ensure adequate provision of suitable placements.
- Child specific profiling/campaigns where appropriate.

Both locally and regionally recruitment activity is reviewed and evaluated to support decision making regarding ongoing recruitment plans.

Retention Activities

In addition to the array of recruitment activity the Trust has organised several successful retention events;

- A special event for foster carers who have/had fostered for upwards of 20 years. (This was attended by the Lord Mayor of Belfast and was promoted by the media; so whilst a retention event it was also a good opportunity to support recruitment.
- The annual Carer Christmas Coffee Morning.
- Three children’s Christmas parties.
- Fostering Achievement Awards event
- Care Day event
- The Trust has also resumed support groups, face to face training and carer and toddlers groups. Again whilst not directly recruitment events these events are instrumental in increasing carer morale and in supporting one of the strongest recruitment methods – word of mouth.

Other activity to ensure foster placement retention and supply includes:

- Identification of early signs of potential disruption and timely access to therapeutic and support services.
- Ensuring foster carers are fostering within their agreed registration where possible to avoid overload and potential disruption.

	<ul style="list-style-type: none"> • Considering safe over-approvals and exemptions to create capacity within the current pool of carers given the disparity in numbers of children requiring foster placements and the number of placements available. • Timely referral of children to permanence panel. This enables regular monitoring of care plans, exploration of potential permanence options for children, thus reducing multiple moves and delay in children moving to permanent placements and the 'blocking' of short-term placements when there is delay in children moving to permanent placements. • Quarterly review meetings with Adoption service to ensure children requiring adoptive placements that are currently within short term foster placements are identified and approximate timescales given to ensure projected availability planning for fostering and placements required. • Involvement in the on-going development of the therapeutic model of care to identify long term foster placements to meet the needs of children aged 8-12 in Osbourne House. • Use of PACSS service to: <ul style="list-style-type: none"> a) support families and children where children are at risk of requiring an admission into care and therefore to support them to remain at home safely. b) support carers and children and prevent placement disruption. <p>Recruitment and retention of foster carers the Trust acknowledged is also dependent upon appropriate remuneration, particularly given the ongoing cost of living crisis. The development of a fee framework for NI continues to be a priority for the regional Fostering reform board, which is a key priority to enabling the growth and development of the fostering resource.</p>	
--	---	--

10.5 PRIVATE FOSTERING
The Children Order (NI) 1995 - Part X
NB Advice from DLS is that the 28day period should be continuous.

10.5.6	What steps has the Trust taken to encourage notifications? NIL return	DSF-Foster care Spreadsheet
10.5.7	How many Private Fostering Arrangements under Article 106 are in place within the Trust as at the 30th September? NIL return	DSF-Foster care Spreadsheet
10.5.8	How many Private Fostering notifications under Article 106 has the Trust received during the period? NIL return	DSF-Foster care Spreadsheet
10.5.9	Please provide DOB and Date notification was received in respect of each child/young person reported at 10.5.8 NIL return	DSF-Foster care Spreadsheet
10.5.10	Of the notifications received (10.5.8) how many has the Trust accepted? NIL return	DSF-Foster care Spreadsheet
10.5.11	Of those notifications not accepted please summarise reasons and action taken by the Trust NIL return	DSF-Foster care Spreadsheet
10.5.12	Number of appeals made during the year under Article 113 NIL return	DSF-Foster care Spreadsheet
10.5.13	Are supervisory visits undertaken in accordance with Regulation 3(1)(a) and (b) as a minimum to children privately fostered? Please provide details of any circumstances where the Regulation has not been adhered to. Not applicable- NIL return	DSF-Foster care Spreadsheet
	Notifications under Regulation 4 of the Children (Private Arrangements for Fostering) Regulations (NI) 1996	
10.5.14	How many notifications has the Trust received in respect of children being adopted from abroad i.e. Inter-country Adoption within the period. 0	DSF-Foster care Spreadsheet
	Please specify the child's DOB and the date the Trust received each notification NA	DSF-Foster care Spreadsheet
10.6 (a)	Please provide the number of Allegations made against Foster carers during 1/4/23 - 31/3/24 10	DSF-Foster care Spreadsheet
10.6(b)	Please provide the number of Complaints made against Foster carers during the period 1/4/23 - 31/3/24 6	

**10.6 Adoption (NI) Order 1987
Adoption (Intercountry Aspects) Act (NI) 2001**

Article 3(as amended by HPSS Order 1994), Article 11

10.6.1	<p>(a) Number of enquiries, by type, received by the Trust and what prompted their initial approach?</p> <p>4 enquiries prompted by Word of Mouth 13 enquiries prompted by Trust Website 1 enquiry promoted by Specific local campaign</p> <p>(b) Please provide the waiting time from initial inquiry to commencement of training</p> <ul style="list-style-type: none"> • 12 waiting more than 1 months, less than 3 • 6 waiting more than 3 months less than 6 • 0 waited more than 6 months, less than 12 • 1 waited more than 1 year. As noted in the last reporting period, this is purposeful delay at the request of the carers. 	DSF-Adoption Spreadsheet												
10.6.2	<p>Number of domestic applications for assessment received by the Trust by civil status of applicant</p> <table border="1" data-bbox="220 913 1161 1245"> <thead> <tr> <th>Household type</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>Single carer</td> <td align="center">3</td> </tr> <tr> <td>Cohabiting heterosexual couple (where this is a joint application)</td> <td align="center">0</td> </tr> <tr> <td>Cohabiting same sex couple (where this is a joint application)</td> <td align="center">1</td> </tr> <tr> <td>Married</td> <td align="center">8</td> </tr> <tr> <td>Total</td> <td align="center">12</td> </tr> </tbody> </table>	Household type	No	Single carer	3	Cohabiting heterosexual couple (where this is a joint application)	0	Cohabiting same sex couple (where this is a joint application)	1	Married	8	Total	12	DSF-Adoption Spreadsheet
Household type	No													
Single carer	3													
Cohabiting heterosexual couple (where this is a joint application)	0													
Cohabiting same sex couple (where this is a joint application)	1													
Married	8													
Total	12													
10.6.3	<p>Number of Prospective Domestic Adopters awaiting assessment at period end, length of time waiting, and reason waiting</p> <ul style="list-style-type: none"> • 1 waiting more than 1 month, less than 3 • 11 waiting more than 3 months, less than 6 • 1 waiting more than 6 months, less than 12 • 1 waiting for more than 12 months <p>Reasons for waiting outlined in Excel sheet.</p>	DSF-Adoption Spreadsheet												
10.6.4	<p>Number of inter-country applications for assessment received by the Trust by civil status of applicant (to be completed by NHSCT on behalf of the region)</p>	DSF-Adoption Spreadsheet												
10.6.5	<p>Number of Prospective Inter-country adopters awaiting assessment at period end (to be completed by NHSCT on behalf of the region)</p>	DSF-Adoption Spreadsheet												
10.6.6	<p>Of all adoption assessments (both domestic and inter country) completed during the period please give details of the outcomes</p>	DSF-Adoption												

	<table border="1"> <thead> <tr> <th data-bbox="220 219 906 353">Outcome of assessment</th> <th data-bbox="906 219 1177 353">No. of Domestic Assessments</th> </tr> </thead> <tbody> <tr> <td data-bbox="220 353 906 405">Counselled out in Assessment Process</td> <td data-bbox="906 353 1177 405">0</td> </tr> <tr> <td data-bbox="220 405 906 456">Went to Panel and Refused</td> <td data-bbox="906 405 1177 456">1</td> </tr> <tr> <td data-bbox="220 456 906 508">Households approved as Adoptive carers</td> <td data-bbox="906 456 1177 508">1</td> </tr> <tr> <td data-bbox="220 508 906 568">Households approved as Dual carers/Concurrent Carers</td> <td data-bbox="906 508 1177 568">4</td> </tr> <tr> <td data-bbox="220 568 906 674">Households where previous Foster Carers have been approved as Adoptive carers for their LAC</td> <td data-bbox="906 568 1177 674">1</td> </tr> <tr> <td data-bbox="220 674 906 719">Total</td> <td data-bbox="906 674 1177 719">7</td> </tr> </tbody> </table>	Outcome of assessment	No. of Domestic Assessments	Counselled out in Assessment Process	0	Went to Panel and Refused	1	Households approved as Adoptive carers	1	Households approved as Dual carers/Concurrent Carers	4	Households where previous Foster Carers have been approved as Adoptive carers for their LAC	1	Total	7	Spreadsheet
Outcome of assessment	No. of Domestic Assessments															
Counselled out in Assessment Process	0															
Went to Panel and Refused	1															
Households approved as Adoptive carers	1															
Households approved as Dual carers/Concurrent Carers	4															
Households where previous Foster Carers have been approved as Adoptive carers for their LAC	1															
Total	7															
10.6.7	<p>Number of looked after children freed for adoption and not yet placed with their prospective adopters as of 30th September; and duration of wait since freeing order as granted:</p> <ul style="list-style-type: none"> • 1 male has waited more than 1 month, less than 3 months • 1 female has waited more than 6 months, less than 12 months 	DSF-Adoption Spreadsheet														
10.6.8	<p>(a) Activity under the Adoption (NI) Order 1987 during the period; Of the number above please give the number who were adopted in a Hague designated country and therefore not through the Courts in NI and have had their Article 23 reports completed in the time period; Please provide the number of Freeing Orders made during the reporting period; 0</p> <p>(b) Of those children who were adopted this period please give the length of time from becoming looked after (last episode) to going to live with the family who went on to adopt them.</p> <p>There was a total of 17 children adopted during the period, of which</p> <ul style="list-style-type: none"> • 9 waited more than 6 months, less than 12 • 3 waited more than 12 months, less than 2 years • 2 waited more than 2 years, less than 3 years • 3 waited more than 3 years, less than 5 years. 	DSF-Adoption Spreadsheet														

<p>10.6.9</p>	<p>Please provide the number of children who, at period end, had received a best interest decision for adoption and had not been placed with approved adopters (either adopters, dual approved carers including concurrent carers) and the duration of that wait</p> <table border="1" data-bbox="220 320 986 797"> <thead> <tr> <th data-bbox="220 320 699 456">Children who have received a best interest decision and have not been placed with approved adopter.</th> <th data-bbox="699 320 850 456">M</th> <th data-bbox="850 320 986 456">F</th> </tr> </thead> <tbody> <tr> <td data-bbox="220 456 699 517">Less than 1 month</td> <td data-bbox="699 456 850 517">1</td> <td data-bbox="850 456 986 517">0</td> </tr> <tr> <td data-bbox="220 517 699 584">More than 1 month less than 3 months</td> <td data-bbox="699 517 850 584">4</td> <td data-bbox="850 517 986 584">3</td> </tr> <tr> <td data-bbox="220 584 699 651">More than 3 months less than 6 months</td> <td data-bbox="699 584 850 651">1</td> <td data-bbox="850 584 986 651">3</td> </tr> <tr> <td data-bbox="220 651 699 719">More than 6 month less than 12 months</td> <td data-bbox="699 651 850 719">1</td> <td data-bbox="850 651 986 719">0</td> </tr> <tr> <td data-bbox="220 719 699 763">1 year or more</td> <td data-bbox="699 719 850 763">4</td> <td data-bbox="850 719 986 763">0</td> </tr> <tr> <td data-bbox="220 763 699 797">Total</td> <td data-bbox="699 763 850 797">11</td> <td data-bbox="850 763 986 797">6</td> </tr> </tbody> </table>	Children who have received a best interest decision and have not been placed with approved adopter.	M	F	Less than 1 month	1	0	More than 1 month less than 3 months	4	3	More than 3 months less than 6 months	1	3	More than 6 month less than 12 months	1	0	1 year or more	4	0	Total	11	6	<p>DSF-Adoption Spreadsheet</p>
Children who have received a best interest decision and have not been placed with approved adopter.	M	F																					
Less than 1 month	1	0																					
More than 1 month less than 3 months	4	3																					
More than 3 months less than 6 months	1	3																					
More than 6 month less than 12 months	1	0																					
1 year or more	4	0																					
Total	11	6																					
<p>10.6.10</p>	<p>How many children are in receipt of an Adoption Allowance at 31st March and how many households is this?</p> <p>107 children are in receipt of an Adoption Allowance. This is 87 households</p>	<p>DSF-Adoption Spreadsheet</p>																					
<p>10.6.11</p>	<p>Of the number at 10.6.10 how many commenced during the period and how many households is this?</p> <p>1 child commenced Adoption Allowance in the reporting period. This relates to 1 household.</p>	<p>DSF-Adoption Spreadsheet</p>																					
<p>10.6.12</p>	<p>Details of recruitment, assessment, training, support for prospective adopters</p> <p>In November 2023 the Adoption team delivered a Preparation to Adopt Course attended by 7 Trust couples, 1 Family Care couple and 3 single applicants.</p> <p>Following completion of the course, 6 of the couples and 3 of the single applicants expressed a wish to proceed to stage 1 statutory checks. Five couples and 3 single applicants are waiting for statutory checks to be completed. It is anticipated these will be completed within the next 4 weeks. The delay is due to a slow response from referees returning completed references and the waiting time applicants are experiencing in securing GP appointments for adoption medicals to be completed. 1 couple have had all statutory checks completed and their assessment has commenced.</p> <p>All approved prospective adopters have an allocated social worker for support and to encourage ongoing development of skills and knowledge. This is provided through opportunities to attend bespoke monthly training delivered by the Service for prospective and approved adopters. The Adoption Service has developed a yearly training programme that is emailed to all prospective and approved adopters and is forwarded to service users on a 6 monthly basis with the Service's Newsletter.</p>	<p>Data Return 10</p>																					

	<p>The annual training programme offered is influenced by patterns and trends emerging from analysis of the support needs arising post an adoption order being granted. The Trust wishes to ensure that prospective and approved adopters are provided with opportunities at the earliest stage to develop their knowledge and skills to meet the demands of parenting through adoption. The Trust also takes cognisance of training provided by Adoption UK to ensure there is a wide selection of training available to adopters.</p> <p>During the reporting period, 8 participants attended training on Supporting a Child with post adoption contact arrangements. Fifteen prospective adopters and 1 approved adopter with a child in placement attended 2 day ACE's training.</p> <p>In addition to this the newly established 'Dads group' set up by the post adoption service (see 10.6.13) has met participants in the assessment process. The feedback from this has been very encouraging from those in the assessment process who have met with participants from the 'Dad's group'.</p> <p>The Trust also held an information morning on Concurrent Care in Oct 2023 with the aim of increasing the numbers of concurrent carers. This was attended by 12 prospective adopters. Since this event there has been 50% of applicants expressing an interest in Concurrent Care.</p>	
10.6.13	<p>Details of Post Adoption Support - this section should include data in respect of the number of and action taken in respect of placement breakdowns both pre (i.e. where adoption is the Care Plan) and post Adoption Order</p>	Data Return 10
	<p>The Trust Post Adoption Team provide a high-quality post adoption service to ensure stability and positive wellbeing for adopted children and their families. The Post Adoption Team provides a continuum of support that extends to adult adoptees and their birth relatives.</p> <p>389 post adoption service users are currently availing of post adoption support services. This can be broken down to the following areas of support:</p> <p>Indirect contact</p> <p>118 children are supported with indirect contact arrangements. These arrangements are managed by a social worker within the team and involves the administrative role of exchanging letters between adoptive parents, adopted children and birth relatives. The service also offers support to all persons involved in the arrangements to write letters and to manage the range of emotions that may be triggered when letters are exchanged. A high number of birth parents avail of this support.</p> <p>Direct Contact</p> <p>121 families are receiving support with direct contact arrangements. Contact whilst beneficial for children, can also be challenging for all those involved. A high level of support is required to ensure contact is a positive and purposeful experience for all those involved.</p> <p>Over half of the families receiving support with post adoption contact arrangements also availed of a family support service in addition to this.</p> <p>Family Support Service</p> <p>A family support services has been provided to 50 families. The service provides a skill mix within the team to provide both practical and therapeutic support to families. Services vary in kind and intensity dependent upon the presenting need and fragility of the family situation at point of referral. Provisions provided during the reporting period range from one-to-one direct work to more specialised assessments and work with other partner agencies.</p>	

Adult Work

The Post Adoption Team continues to complete Article 54 interviews with adult adoptees, providing support to **100** adults during the reporting period, who wished to learn more about their origin. This provides an intermediary service to those that wish to trace birth families after they have obtained information from their adoption records.

The team offers support to adult adoptees and offers individuals a synopsis in the form of a narrative of their file (letter of information). Individual's copies of adoption files which are minimally redacted can also be offered. These files are provided under Regulation 15 (2) (a) of the Adoption Agencies (Northern Ireland) 1989, and in line with Departmental guidance issued November 2023.

The Post Adoption Team continue to offer a service to Birth Relatives regarding adoption related issues and make approaches and offer a trace service.

Training/Groups

In addition to the above support during the reporting period, the post adoption service offered the following training/support groups:

Nurturing Attachments Training

This is an 18 week group work programme designed to provide support and guidance to adoptive parents and caregivers of children, who have experienced trauma and attachment difficulties.

It was delivered between September 2023 until March 2024 with 22 participants, 10 adopters and 12 foster carers.

Contact Training

4 families attended this training within this reporting period.

Narrative/Lifestory

Course is delivered in April and October. 18 parents attended this training.

Children's group

20 children and 20 parents attended two 6 week children's group March/April 23 and September/October 23. Children's parents report that the children have gained confidence, have learned how to feel successful, and have greatly benefited from meeting other children who are adopted. Secondary to this the parents report that they are thoroughly benefiting from the opportunity to have a few hours with other adoptive parents, building relationships and availing of mutual support.

Given the number of children and growing adoption community, the Trust has split the group, and now have an older and younger group. Both groups are run in 6 weeks blocks twice a year. The two groups will run in the next reporting March/April 24 and September 2024.

Mothers Group

The Service continues to offer a mother's group open to all mothers who are approved adopters. Currently 10 -12 mothers regularly attend the group which meets six times a year during term time. The group affords the mothers the opportunity to meet informally and share their experiences of parenting an adopted child.

Father's Group

	<p>The father's group, is open to all fathers who are approved adopters. The group meets 5 times a year, during term time and at present, the Trust has 10 fathers who attend consistently. This is based at a community venue and is informal, with discussion being led by the group.</p> <p><u>Step-parent/family adoptions</u> During the review period the Trust has completed three adoption assessments. Additionally, the Trust supported adoption orders in two of the three cases, and the Court ratified this.</p> <p><u>Breakdown</u></p> <p>The Trust reports 1 adoption breakdown within this reporting period, of a teenage boy aged 15 years old who currently resides in residential care.</p> <p>Prior to breakdown, the post adoption social worker provided intensive 1-1 support to the young person and his parents. The social worker also had 1-1 meetings with his birth mother. Extern Time Out was used for respite for the family, and kinship respite was also used, TSS therapeutic provided support to parents private therapeutic intervention, Equine therapy was provided by Tessa, and PACS. Unfortunately, despite the support outlined, the adoption broke down in December 2023 and the young person was placed in foster care, which subsequently broke down and led to an admission to residential care.</p>	
10.6.14	This is intentionally blank	

10.7 EARLY YEARS

10.7.1	<p>Please provide the current early years provision / places, registrations and de-registrations Include Number of Approved Home Child Carers</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">Sector</th> <th style="width: 20%;">Total number of services</th> <th style="width: 20%;">Total number of placements</th> </tr> </thead> <tbody> <tr> <td>Day Nursery</td> <td style="text-align: center;">100</td> <td style="text-align: center;">4298</td> </tr> <tr> <td>Out of School within Day Nursery</td> <td style="text-align: center;">57</td> <td style="text-align: center;">1571</td> </tr> <tr> <td>Total Day Nursery Places</td> <td></td> <td style="text-align: center;">5869</td> </tr> <tr> <td>Creche</td> <td style="text-align: center;">12</td> <td style="text-align: center;">223</td> </tr> <tr> <td>Playgroup</td> <td style="text-align: center;">44</td> <td style="text-align: center;">1297</td> </tr> <tr> <td>Stand-Alone Out of School</td> <td style="text-align: center;">54</td> <td style="text-align: center;">1803</td> </tr> <tr> <td>Childminder</td> <td style="text-align: center;">191</td> <td style="text-align: center;">1170</td> </tr> <tr> <td>Approved Home Childcarers</td> <td style="text-align: center;">68</td> <td style="text-align: center;">0</td> </tr> <tr> <td>Holiday Scheme</td> <td style="text-align: center;">8</td> <td style="text-align: center;">283</td> </tr> <tr> <td>Two Year old Prog.</td> <td style="text-align: center;">26</td> <td style="text-align: center;">360</td> </tr> <tr> <td>Total</td> <td style="text-align: center;">560</td> <td style="text-align: center;">11005</td> </tr> </tbody> </table>	Sector	Total number of services	Total number of placements	Day Nursery	100	4298	Out of School within Day Nursery	57	1571	Total Day Nursery Places		5869	Creche	12	223	Playgroup	44	1297	Stand-Alone Out of School	54	1803	Childminder	191	1170	Approved Home Childcarers	68	0	Holiday Scheme	8	283	Two Year old Prog.	26	360	Total	560	11005	DSF-Early Years Spreadsh eet
Sector	Total number of services	Total number of placements																																				
Day Nursery	100	4298																																				
Out of School within Day Nursery	57	1571																																				
Total Day Nursery Places		5869																																				
Creche	12	223																																				
Playgroup	44	1297																																				
Stand-Alone Out of School	54	1803																																				
Childminder	191	1170																																				
Approved Home Childcarers	68	0																																				
Holiday Scheme	8	283																																				
Two Year old Prog.	26	360																																				
Total	560	11005																																				
10.7.2	<p>Registration issues and commentary as at period end <i>(If any challenges or issues please provide a brief analysis)</i></p> <p>During this reporting period registration has been given priority to ensure there is no undue delay for businesses service provision, with an increase in 137 registered places achieved during the period. Delays in process are related to applicants not providing the required paperwork or additional external factors outside the Early Years' service.</p> <p>There have been no challenges with registrations, however there is an Inspection backlog (n= 30) due to capacity issues</p>	Data Return 10																																				
10.7.3	<p>Total number of annual Inspections required, number carried out, number outstanding and time outstanding as at 30th September</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">Sector</th> <th style="width: 20%;">No Requiring Inspections</th> <th style="width: 20%;">No Inspections carried out</th> <th style="width: 20%;">Inspections still to be carried out</th> </tr> </thead> <tbody> <tr> <td>Day Nursery</td> <td style="text-align: center;">34</td> <td style="text-align: center;">30</td> <td style="text-align: center;">4</td> </tr> <tr> <td>Crèche</td> <td style="text-align: center;">5</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> </tr> <tr> <td>Playgroup</td> <td style="text-align: center;">21</td> <td style="text-align: center;">12</td> <td style="text-align: center;">9</td> </tr> <tr> <td>Out of School</td> <td style="text-align: center;">32</td> <td style="text-align: center;">20</td> <td style="text-align: center;">12</td> </tr> <tr> <td>Childminder</td> <td style="text-align: center;">81</td> <td style="text-align: center;">79</td> <td style="text-align: center;">2</td> </tr> <tr> <td>Holiday Scheme</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> </tr> <tr> <td>Two year old Programme</td> <td style="text-align: center;">11</td> <td style="text-align: center;">11</td> <td style="text-align: center;">0</td> </tr> <tr> <td>Total</td> <td style="text-align: center;">184</td> <td style="text-align: center;">154</td> <td style="text-align: center;">30</td> </tr> </tbody> </table>	Sector	No Requiring Inspections	No Inspections carried out	Inspections still to be carried out	Day Nursery	34	30	4	Crèche	5	2	3	Playgroup	21	12	9	Out of School	32	20	12	Childminder	81	79	2	Holiday Scheme	0	0	0	Two year old Programme	11	11	0	Total	184	154	30	DSF-Early Years Spreadsh eet
Sector	No Requiring Inspections	No Inspections carried out	Inspections still to be carried out																																			
Day Nursery	34	30	4																																			
Crèche	5	2	3																																			
Playgroup	21	12	9																																			
Out of School	32	20	12																																			
Childminder	81	79	2																																			
Holiday Scheme	0	0	0																																			
Two year old Programme	11	11	0																																			
Total	184	154	30																																			

10.7.4	Number of outstanding applications for each of the above categories as at 30th September?	DSF-Early Years Spreadsheet																																																						
<table border="1"> <thead> <tr> <th>Sector</th> <th>0-3mths</th> <th>4-6mths</th> <th>7-9mths</th> <th>10-12mths</th> <th>12mths+</th> </tr> </thead> <tbody> <tr> <td>Day Nursery</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Crèche</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Playgroup</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Out of School</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Childminder</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Holiday Scheme</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Two year old Programme</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Total</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> </tbody> </table>			Sector	0-3mths	4-6mths	7-9mths	10-12mths	12mths+	Day Nursery	0	0	0	0	0	Crèche	0	0	0	0	0	Playgroup	0	0	0	0	0	Out of School	0	0	0	0	0	Childminder	0	0	0	0	0	Holiday Scheme	0	0	0	0	0	Two year old Programme	0	0	0	0	0	Total	0	0	0	0	0
Sector	0-3mths	4-6mths	7-9mths	10-12mths	12mths+																																																			
Day Nursery	0	0	0	0	0																																																			
Crèche	0	0	0	0	0																																																			
Playgroup	0	0	0	0	0																																																			
Out of School	0	0	0	0	0																																																			
Childminder	0	0	0	0	0																																																			
Holiday Scheme	0	0	0	0	0																																																			
Two year old Programme	0	0	0	0	0																																																			
Total	0	0	0	0	0																																																			
10.7.5	Number of current applications being assessed at period end and duration of assessment	DSF-Early Years Spreadsheet																																																						
<table border="1"> <thead> <tr> <th>Sector</th> <th>0-3mths</th> <th>4-6mths</th> <th>7-9mths</th> <th>10-12mths</th> <th>12mths+</th> </tr> </thead> <tbody> <tr> <td>Day Nursery</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Crèche</td> <td>1</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Playgroup</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Out of School</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Childminder</td> <td>1</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Holiday Scheme</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Two year old Programme</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Total</td> <td>2</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> </tbody> </table>			Sector	0-3mths	4-6mths	7-9mths	10-12mths	12mths+	Day Nursery	0	0	0	0	0	Crèche	1	0	0	0	0	Playgroup	0	0	0	0	0	Out of School	0	0	0	0	0	Childminder	1	0	0	0	0	Holiday Scheme	0	0	0	0	0	Two year old Programme	0	0	0	0	0	Total	2	0	0	0	0
Sector	0-3mths	4-6mths	7-9mths	10-12mths	12mths+																																																			
Day Nursery	0	0	0	0	0																																																			
Crèche	1	0	0	0	0																																																			
Playgroup	0	0	0	0	0																																																			
Out of School	0	0	0	0	0																																																			
Childminder	1	0	0	0	0																																																			
Holiday Scheme	0	0	0	0	0																																																			
Two year old Programme	0	0	0	0	0																																																			
Total	2	0	0	0	0																																																			

10.8 Complaints & Representation		
10.8.1	Does the Trust have an appropriately authorised and experienced children's complaints officer? Yes	Data Return 10
10.8.2	Does the Trust have an independent advocacy service for children and their families? Yes	Data Return 10
10.8.3	Please confirm arrangements are in place to ensure that all complaints – both formal and informal – from children and their families are recorded and dealt with? Yes	Data Return 10
10.8.4	Please confirm whistle-blowing arrangements are in place to ensure that concerns raised by staff working in children's services are recorded and dealt with? Yes	Data Return 10
10.8.5	This is intentionally blank	
10.8.6	This is intentionally blank	
10.8.7	This is intentionally blank	
10.8.8	This is intentionally blank	
10.8.9	This is intentionally blank	

SEPARATED CHILDREN

DATA NOW SOURCED FROM REGIONAL SHAREDPOINT LIST

10.9.1	Number of separated children referred to Gateway Teams by status of children for this period (self-reported age at presentation)	SPPG Separated Children Database
---------------	--	---

ASSESSED YEAR OF EMPLOYMENT

8 Assessed Year in Employment

**Assessed Year in Employment (AYE) 2023-2024
Return for Employers year ending 31st March 2024**

1. The Standards referred to in this document are the “Minimum Standards for Completion of the Assessed Year in Employment (AYE)” as published by NISCC in Revised Guidance for Registrants and their Employers NISCC November 2015 (Version 2).

Please complete the sections below which provides an overview of all staff who were subject to an assessed Year in Employment (AYE) in your organisation for the period 1st April 2023 to 31st March 2024. These are staff that are in a post which is suitable for the verification of practice against the required Standards, such that they are eligible to be registered without the AYE condition with the NISCC.

Table 1 asks for the number of Newly Qualified Social Workers who are subject to an AYE by setting. The table requires numbers of AYE’s that were in post at any time during the year and those who are still in post at 31st March 2024. These should be counted as mutually exclusive, that is if the person is in post on 31st March they should not be returned in the column for ‘during’ the year.

Table 1		Leavers	Total no of AYE’s supported during the period 1/4/2023 – 31/3/2024	Total no of AYE’S At 31st March 2024
Job setting				
1	Gateway	1	2	2
2	Family support/intervention team	5	7	15
3	Looked after team		4	7
4	Fostering team/ (Family Placement)		0	2
5	Adoption		0	0
6	Leaving and after care/ (14+ or 16+)		0	0
7	Children’s disability		4	4
8	Residential child care	1	10	7
9	Early years		0	0
10	Other Children’s (CAMHS/Autism)		2	0
11	Hospital social work Children/maternity		0	1
12	Hospital social work – adults	1	7	7
13	Older People	2	8	6
14	Mental Health	2	5	4
15	Health and Physical disability (Adults)		0	2
16	Sensory impairment		0	0
17	Learning Disability		2	3
18	Safeguarding Adults		0	0
19	Other (Adult)		0	0
Total number of AYE’s		12	51	60

2. Of the Total AYE’s employed, describe their employment status?

Table 2	Leavers	During year 1/4/23 to 31/3/24	At 31st March 2024
Employment Status			

Permanent	10	44	57
Temporary/Bank	1	7	3
Recruitment agency	1	0	0

3a.

Standard	Yes	No
Audit of min. 25 AYE Files	25	
Summary of Learning ¹	24	1
Evidence of a Personal Development Plan (PDP)	25	
Evidence of Induction	25	
Record & Analysis of 10 days training	25	
Evidence of Assessment of harm/abuse & work plan	25	
Evidence of risk assessment & management plan	25	
Evidence of application & evaluation of at least 2 methods/models of SW intervention to promote change	25	
Evidence of AYE reflection on their practice at mid-point appraisal	25	
Evidence of line manager feedback at mid-point appraisal	25	
Evidence of PDP at mid-point appraisal	25	
Evidence of AYE reflection on practice at final appraisal	25	
Evidence of Line manager feedback at final appraisal	25	
Evidence of appropriate AYE forms signed by Designated Signatory	25	
Feedback from Line Managers & AYE's	25	

3b. Please provide a narrative on how you have complied with the standards as noted above or mitigated any challenges?

The audit evidences a high level of compliance with the standards.

Standard 2: Summary of Learning

Staff in their AYE who have been in a previous AYE post may submit an AYE 4 reference in lieu of a Summary of Learning. All staff submitted one or the other.

¹ Not required for staff who have undertaken part of AYE in another setting

Qualitative feedback from our AYE evaluation events across 2023/24 continue to highlight a number of issues in relation to staffing levels (recruitment and retention), caseload numbers and complexity, levels of supervision and support from line managers in completion of the AYE.

An Action Plan is currently being developed around the following areas and further audit will identify if actions have been implemented:

Standard 4: Evidence of Induction

The 2022/23 audit together with additional evaluation of AYE experience highlighted disparity in the induction experience of new staff. This issue was flagged with Divisional Social workers, and measures put in place to improve induction for the 2023/24 cohort. For the 2023/24 internal audit, it was agreed that there would be a focus on Standard 4, Evidence of Induction.

Feedback from AYEes re: Induction

31 of the 56 AYE staff who completed AYE during 2023/24 returned a questionnaire evaluating their AYE experience. All noted that they had received an AYE induction, with 26 responding that it had been a helpful experience. In the questionnaire, AYE staff are asked if there is anything that they could suggest to improve their AYE experience. Three of the 31 respondents noted that they would have preferred to have had their induction to the role earlier in their AYE year. This had been identified as an issue in one particular service area and was fed back to managers and Divisional Social Workers.

A newly developed 4-day induction programme was delivered for AYEes in Children's Community Services. Pre and post induction polls were conducted and noted a self-reported increase in AYE confidence, competence and feeling valued as an employee.

Actions regarding AYE Induction

1. WLDI staff will continue to update Senior Management and Divisional Social Workers with regard to AYE staff's experience of local induction.
2. WLDI staff will continue to support local induction across the Social Work Divisions.
3. The AYE handbook and Evidence Folder will be modified to allow more detailed recording of induction activities.
4. The AYE questionnaire will be modified to allow respondents to give more specific feedback regarding their experience of induction

Staffing levels

The Recruitment and Retention Coordinator remains in post with positive results from regional recruitment processes to fill vacant posts. Learning from exit interviews is communicated out to service areas. Plan for more retention-focused work in 2024/25 by this staff member including supports to AYEes. Retention of AYEes in 2023/24 has increased compared to 2022/23 with positive feedback in relation to supports offered by the Workforce, Learning, Development, Improvement Service staff.

Caseload numbers and complexity

Regional work is progressing around safe staffing levels and caseload weighting. Within Children's services, the introduction of a skills mix in some teams is intended to allow opportunities to delegate some social work tasks to band 4 staff. Feedback is provided to service areas following AYE evaluation events in relation to caseload pressures.

Supervision and Line Manager support

Workforce, Learning Development, Improvement Service continued to provide monthly Professional Development Support to AYE's in the 2023/24 cohort. Line manager engagement events also took place to further develop understanding of the AYE process and to seek feedback from line managers about concerns/challenges. Feedback is currently being evaluated and an action plan to be agree ahead of the incoming cohort of AYE's.

AYE Feedback

AYE feedback suggests that there is a high degree of satisfaction with the materials and support required to complete AYE. Any concerns and suggestions for improvement will be taken into consideration in preparation for the incoming cohort of AYE's.

The background features a light blue gradient with several curved, overlapping bands of a slightly darker blue on the left side, creating a sense of movement and depth.

**SOCIAL SERVICES
LEARNING DEVELOPMENT**

11 Accountability Report

Personal Social Services Development and Training Strategy 2006-2016
Personal Social Services Learning and Development Strategy 2019 - 2027

11.1 Practice Learning Opportunities

11.1.1	PLO Investment 01.04.23 - 31.03.24	Accountability 23-24
11.1.2	How many PLOs have been provided by the Trust during the period?	Accountability 23-24
11.1.3	How many Children's PLOs have been provided during the period? (Trust must specify the numbers of level I, II and III placements)	47 Level 2- 22 Level 3- 25
11.1.4	How many Adult's PLO have been provided during the period? (Trust must specify the numbers of level I, II and III placements)	37 Level 2-20 Level 3-17
11.1.5	<p>Have you provided the stipulated number of PLOs. If no, please provide a brief summary of the reasons why and actions taken to address.</p> <p>YES</p> <p>The Trust is commissioned for 90x PLOs across the two PLO periods. The Trust offered and allocated 90x PLOs from the NIDSWP, but only 84 students commenced their PLO with the Trust.</p> <p>August – December 2023 - 27x students were allocated from the NIDSWP. This was a slightly lower allocation than usual for this cohort and was reflected regionally in allocations to all practice learning sites. From the 27x students allocated, 1x student did not commence PLO (personal reasons).</p> <p>January – May 2024 - 63x students were allocated from the NIDSWP. From the 63x students allocated, 5x students did not commence PLO. Reasons include change in personal circumstances, awaiting outcome of previous Fitness to Practice referrals, failing preparation for practice academic work.</p> <p>Overspend</p> <p>The overspend in practice learning can be attributed to several factors including: increased demands on the Practice Learning Coordinators (0.7 WTE) in identifying and maintaining appropriate PLOs; regular support to practice teachers and on-site supervisors regarding PLO management; facilitation of standardisation workshops for on-site supervisors and practice teachers; additional supports for students such as facilitation of group supervision. Significant additional time was needed by the Practice Learning Coordinators and the Learning and Development Coordinators relating to a small number of students in need of additional support due to mental ill-health, physical ill-health and other support needs.</p>	

<p>Open University Route to studying Social Work</p> <p>There were additional costs associated with supporting DoH funded candidates (4x) on the Open University route to studying Social Work. Specifically, these costs are linked to tuition fees, administrative costs linked to the recruitment process (communication and promotion of the pathway, the recruitment and selection process, interview preparation session for candidates and completion of interviews) and Practice Teaching costs for their first PLOs which sit outside the NIDSWP arrangements.</p> <p>The Trust has supported 2x additional candidates on the Open University route – they are due to graduate later in 2024. This is an excellent pathway which encourages and provides a route for social care staff to study social work. However, it is a cost pressure for the Trust and additional Department-funded places on the Open University route in 2023 (from 4x to 6x) was welcomed. Cost pressures on the provision of Practice Teacher hours will remain. (£16,608. ref: line 19 of the excel report).</p> <p>An overspend in this area is subsumed by underspend in other areas of the budget.</p>	
<p>11.2 Professional in Practice Training</p>	
<p>11.2.1</p>	<p>Professional in Practice Training for Social Workers Investment</p> <p style="text-align: right;">Accountability 23-24</p>
<p>11.2.2</p>	<p>Professional in Practice Training for Social Workers Activity</p> <p style="text-align: right;">Accountability 23-24</p>
<p>11.2.3</p>	<p>Confirm financial position within budget, under spend or over spend. If over or under spend noted, please provide a brief summary of the reasons why and actions taken to address</p> <p>Overspend</p> <p>There continues to be an overspend in this area (£36,854) however, overspend associated with Professional in Practice (PiP) programmes for this reporting period has reduced compared to 2022/23 (£73,731). A total of 133x staff were enrolled in PiP programmes in 2023/24. A total of 172x staff completed PiP programmes in 2023/24 and this figure included staff who enrolled in 2022/23 but completed their studies in 2023/24.</p> <p>IPD</p> <p>Following completion of their AYE (Assessed Year in Employment), staff must complete 2x Mandatory Professional in Practice (PiP) Requirements within 3 years to meet registration requirements. There continues to be a high number of new social workers joining the Trust and subsequently increased demand for IPD (Initial Professional Development).</p> <p>Revalidation of all Ulster University PiP Programmes has impacted on the workload of the Workforce, Learning, Development, Improvement (WLDI) Service PiP Representative and management team in terms of regular collaborative meetings with the university; review of programme content/structure/assessment; reporting to Joint Management Boards and liaison with the NISCC (Northern Ireland Social Care Council) to prepare for the re-approval process that ran in conjunction with the university's re-approval process. The revalidation process for these courses has led to changes in assessment methods and assessment points within the academic calendar year. The impact of which will require monitoring and review in the concluding months of the 23/24 academic year.</p> <p>This section of the report must be read in conjunction with section 11.3 of the Excel Report as this includes the details of course fee expenditure. The Trust's partnership with Ulster University results in a 60% reduction in fees, this is in lieu of the WLDI service providing 60% of the course teaching and assessment of PiP Programmes. The expenditure in 11.3 will be</p>

	<p>greater than the allocation as the additional contribution by the Trust is not reflected. In the context of the rising number of staff engaged in PiP Programmes, the Trust and the SSPG may need to review the funding allocation for PiP.</p> <p>The BHSCT ASW (Approved Social Worker) Workforce Action plan highlights the current pressures on the ASW service in meeting the statutory functions under the Mental Health (NI) Order. Challenges mentioned in previous submissions remain live including a reduction in the number of ASWs on the daytime rota and within the RESWS (Regional Emergency Social Work Service) due to staff retiring, moving posts, or standing down from this role. The WLDI Service continues to meet with the Divisional SW for Mental Health Services and the operational lead for ASWs to discuss ASW workforce pressures. The Trust has financially supported an additional five places on the ASW Programme for 2023-24. This funding was outside of the allocation from the SPPG. The WLDI Service have subsumed these costs within this year's allocation to support the needs of the Trust's ASW service. It is likely that additional funding for places on this programme will be a recurring priority need to meet the Trust's statutory obligations.</p> <p>An overspend in this area is subsumed by underspend in other areas of the budget.</p>		
<p>11.2.4</p>	<p>Please confirm process in place to select candidates for professional and practice training YES If no, please provide brief explanation of actions taken to address this.</p>		
<p>11.3 Learning and Development in Children's Services</p>			
<p>11.3.1</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Investment in Learning and Development in Children's Services</td> <td style="text-align: center;">Accountability 23-24</td> </tr> </table>	Investment in Learning and Development in Children's Services	Accountability 23-24
Investment in Learning and Development in Children's Services	Accountability 23-24		
<p>11.3.2</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Learning and Development in Children's Services Training Activity</td> <td style="text-align: center;">Accountability 23-24</td> </tr> </table>	Learning and Development in Children's Services Training Activity	Accountability 23-24
Learning and Development in Children's Services Training Activity	Accountability 23-24		
<p>11.3.3</p>	<p>Confirm financial position within budget, under spend or over spend. If over or under spend noted, please provide a brief summary of the reasons why and actions taken to address.</p> <p>Underspend</p> <p>Workforce Challenges</p> <p>The significant workforce pressures (vacancy rates and complex workloads) in Children's Services have impacted on the attendance rates of all learning and development activities in Children's Services and has resulted in some training programmes being cancelled or postponed. There is a need to adapt the learning and development training plans to deliver more courses with fewer learners to ensure staff can attend training amidst current workforce challenges which impact on staff attendance at training. This will increase the time commitment for learning and development staff and will also increase training costs in the next reporting period.</p> <p>The Workforce, Learning, Development, Improvement Service will continue to work closely with operational services to meet the learning and development needs of its social work and social care workforce and plan to review their communication strategy and training plan in the next reporting year with the hope to increase attendance at all learning and development activity.</p> <p>Impact of Encompass Go Live</p> <p>In anticipation of Encompass "Go Live" on 6th June 2024, many of the Trust facilities often used for training have been allocated to the Encompass Team. This has resulted in the need</p>		

	<p>to source external venues for learning and development activities which will increase training costs in the next reporting period.</p> <p>While anticipating Encompass “Go Live”, many external training programmes were not booked for Spring 2024 to promote capacity for Encompass training in the workforce. This will have contributed to the underspending in these training programmes in the reporting period. As Children’s Services will no longer go live on Encompass on 6th June, these external programmes have now been scheduled for Autumn 2024 and may increase the training costs in the next reporting period.</p> <p>An underspend in this area has been used across other areas within this budget.</p>
--	---

11.4 Learning and Development in Adult’s Services

11.4.1	Investment in Learning and Development in Adult’s Services	Accountability 23-24
11.4.2	Learning and Development in Adult’s Services Training Activity	Accountability 23-24

11.4.3	<p>Confirm financial position within budget, under spend or over spend. If over or under spend noted, please provide a brief summary of the reasons why and actions taken to address</p> <p>Underspend</p> <p>There is an underspend in this area. The training activity has decreased in terms of the provision of 55 programmes compared to 93 in 2022/23. There has also been a reduction in attendees from 1277 in 2022/23 to 1109 in this reporting period. This can be contributed to a “blended” approach to training with most programmes returning to in-person delivery and a reduction in attendance in comparison to previous years when delivery was “live” but online. Another factor is workforce pressures with staff not being released for training. It should be noted that the spend in this area has not reduced significantly due to the associated cost for venues.</p> <p>It should also be noted that in preparation for Encompass going “live” in June 2024 the Trust directed that from January 2024 only mandatory/statutory training for staff in adult services should be provided to enable staff to attend Encompass Training. This has impacted on WLDI activity. Training programmes will resume in September 2024.</p> <p>The WLDI Service continues to work closely with operational services to meet the learning and development needs of its social work and social care workforce. A “blended” approach to delivery will continue and wherever possible provide in-person training. WLDI will continue to monitor and review the costs of venues and how best to meet the needs of our workforce.</p> <p>An underspend in this area has been used across other areas within this budget.</p>
---------------	---

11.5 Regulated Qualifications Framework Training

11.5.1	Investment in Regulated Qualifications Framework Training	Accountability 23-24
11.5.2	Regulated Qualifications Framework Training Activity	Accountability 23-24
11.5.3	<p>Confirm financial position within budget, under spend or over spend. If over or under spend noted, please provide a brief summary of the reasons why and actions taken to address</p> <p>Breakeven</p> <p>The first external quality scrutiny of Regulated Qualifications Framework (RQF) provision through Open College Network Northern Ireland (OCN NI Awarding Organisation), occurred in October 2023 and February 2024, with very positive outcomes, including the identification of the provision as a model of good practice. Level 5 Diploma leadership and management provision in particular was commented upon very favourably: <i>“the delivery of learning for this substantial qualification is excellent in terms of content and support for learners”...</i></p> <p>Achievement of RQF qualifications has facilitated career progression within the Trust for many social care practitioners, which was well evidenced at the Vocational Training Awards Ceremony held in December 2023, where 186 social care staff were acknowledged for their achievements. This Ceremony was particularly significant since many of those being acknowledged had made substantial personal commitment during Covid, in order to achieve their qualification. It was and remains fitting and important to acknowledge staff achievements and their associated investment in service improvement and professional development.</p> <p>The introduction of a new qualification for peer support workers in mental health services provided an opportunity for co-production and collaborative work with the Service User Consultant and Senior Peer Support Worker. Achievement of this Level 3 Award has been acknowledged as a positive response by the Trust to a key action within the DoH Mental Health Strategy and is being reviewed by other Trusts as a model of best practice. This provision is continuing to develop further within mental health services.</p> <p>The ASM, Manager and Team have contributed to a range of NISCC fora and initiatives in the past year, most notably the development of a new level 2 Certificate, which NISCC anticipates will become the main ‘entrance’ qualification for those new in social care posts. The Team will undertake an initial pilot delivery, to inform regional outworking of the qualification, as well as Trust strategy regarding its implementation.</p> <p>Collaboration occurred with ASM and WLDI Children’s Services Team, to advocate for development of a qualification's pathway for social care staff within children’s services, thus supporting equity in relation to the applicability of the NISCC Care in Practice Framework. Involvement in such initiatives remains a key strategic priority for the Manager and Team, to influence the future provision of accredited development opportunities for social care staff, in line with the Trust’s current and future needs, and the anticipated DoH Social Care Workforce Strategy, due to be published later in 2024.</p> <p>The Vocational Training Team has continued to navigate through a transition period in relation to staffing. A new Manager and Vocational Training Advisor are in post; and with their upskilling and additional known staff changes in 2024, there are opportunities for stability, as well as increased capacity to develop and extend provision in the coming year.</p> <p>Whilst capacity is expected to increase in relation to outputs from the Vocational Training Team, the most significant barrier to engagement in vocational training courses remains</p>	

	<p>front line service pressures and the associated difficulties of releasing staff from services. Efficiencies, particularly in relation to the investment of time required for qualification completion, will continue to be explored, coupled with promoting the benefits of such training opportunities to those who manage safe staffing levels within services.</p> <p>The Accountability report includes for the first time the minimum number of support/assessment contacts per candidate each year reflecting the amount of work required for staff as they progress through these qualifications.</p>	
11.5.4	<p>Confirm Trust has measures in place to ensure RQF training is embedded across the workforce YES If no, please advise on actions taken to address this</p>	
11.6 Quality and Safety Issues (RQIA)		
11.6.1	Investment in Quality and Safety Issues	Accountability 23-24
11.6.2	Quality and Safety Issues Activity	Accountability 23-24
11.6.3	<p>Confirm financial position within budget, under spend or over spend. If over or under spend noted, please provide a brief summary of the reasons why and actions taken to address</p> <p>Overspend</p> <p>There continues to be an overspend in this area although there is a reduction from 2022/23 of £7,000.</p> <p>The overspend continues to be attributed to meeting the statutory/mandatory needs of the social care workforce. In this reporting period 1073x staff attended training compared to 1735x in 2022/23. During the reporting period 88x programmes were delivered compared to 143x in 2022/23 where there was significant demand from the Home Care Service. Whilst in this reporting period there is a reduction in activity this is comparable to provision in 2021/22. The overall investment in this area has not significantly reduced due to the associated delivery costs of external facilitators and provision of venues as all this training is now in-person.</p> <p>The Trust has continued to support social work and social care staff in the provision of quality services through the sharing of information relevant to their role. The 'Road to Good Governance' Page Tiger, launched 30th March 2023 provides governance advice, information and support for all social work and social care staff and their managers. This resource provides all the information staff require to understand what good governance is, with links to resources to support them in their governance practice. Staff have accessed the page tiger 1,500 times within this reporting period.</p> <p>The Trust has also developed Lessons Learned quarterly newsletter to support social work and social care staff in learning from service user involvement, Serious Adverse Incidents, Case management Reviews, Domestic Homicide Reviews, Judicial Reviews, current research, complaints and compliments, service evaluations, audits, policies, service improvements and good practice successes. This was launched in September 2023, with 2 editions published via Page Tiger and disseminated across social work and social care staff. As of 31st March 2024, the Lessons Learned page tigers were accessed 900 times.</p> <p>The underspend in other areas of the budget has enabled us to meet the demand in this area.</p>	

11.7 Children's Safeguarding

11.7.1	Investment in Children's Safeguarding Training	Accountability 23-24
11.7.2	Investment in Children's Safeguarding Training Activity	Accountability 23-24
11.7.3	<p>Confirm financial position within budget, under spend or over spend. If over or under spend noted, please provide a brief summary of the reasons why and actions taken to address</p> <p>Overspend</p> <p>Part of the underspend from ACPC budget was redirected to Children's Safeguarding activity.</p> <p>Some of the overspend can be attributed to the development of a new e-learning resource for Safeguarding Adults and Children (Level 1) for all staff in the organisation to complete as part of Corporate Induction. This resource has significantly increased the number of staff completing Level 1 Safeguarding to 7417. At this point the Trust are not able to report on how many of these staff are outside of the social work and social care workforce but suffice to say it is most of this number. This resource has helped raise awareness of child safeguarding within the organisation.</p> <p>There has been an increase in level 3 Children's Safeguarding Training which is now face to face. This has increased the costs of external venue hire as many Trust training facilities have been utilised by the Encompass Team (as above). It is anticipated that these costs will continue to increase in the next reporting period. Some of the underspend has been redirected from the ACPC budget against these costs.</p> <p>The Workforce, Learning, Development, Improvement Service are considering strategies to improve attendance at Children's Safeguarding Training at all levels by reviewing the current training plan in line with the SBNI framework.</p> <p>The underspend in other areas of the budget has enabled us to meet the demand in this area.</p>	
11.7.4	<p>Of those who attended Children's Safeguarding Training, how many staff were from other disciplines or sectors?</p> <p>244x staff from other disciplines attended Children's Safeguarding training.</p> <p>In addition to this, 7417x staff within the organisation completed the combined Adult and Child Safeguarding Level 1. Most of these staff will be outside of the social work and social care workforce.</p>	

11.8 Adult Safeguarding

11.8.1	Investment in Adult Safeguarding Training	Accountability 23-24
11.8.2	Investment in Adult Safeguarding Training Activity	Accountability 23-24
11.8.3	<p>Confirm financial position within budget, under spend or over spend. If over or under spend noted, please provide a brief summary of the reasons why and actions taken to address</p> <p>Breakeven</p> <p>There has been a significant increase in attendance at Adult Safeguarding training in this reporting period (9,368) in comparison to last year. This is primarily due to the inclusion of reporting on Level 1 training in these figures, which is mandatory for all staff joining the organisation. At this point the Trust are not able to report on how many of these staff are outside of the social work and social care workforce but suffice to say it is most of this number. This resource has helped raise awareness of adult safeguarding within the organisation.</p> <p>There has been a reduction in other safeguarding training activity compared to 2022/23 reporting period (1735 staff trained over 143 programmes) however, it should be noted that this increase in 2022/23 was due to the demand and additional provision of Level 3 training to Nursing and Allied Health Professionals. This ongoing demand from staff outside of the social care/work profession far outweighs the capacity to deliver. The Trust is considering how to respond to this demand.</p> <p>As per previous reports since the 2016 policy, there has been ongoing demand for Adult Safeguarding training (Level 2 and Level 3) across the organisation without additional resources to support full implementation.</p> <p>In this reporting year WLDI staff developed a level 1 online programme the content of which was agreed regionally. This training resource is now available and is part of the new staff mandatory induction to Belfast Trust.</p> <p>The demand for Level 2 Awareness and subsequent refresher training has continued over the past year. The WLDI service is required to prioritise social work and social care staff, therefore the position remains unchanged in that there are only limited places available to non- social work/social care staff. Meeting the training needs of this diverse range of staff remains a significant workforce challenge.</p> <p>The Level 2 Adult Safeguarding mandatory awareness raising (3-hour course) and Level 2 Refresher training continues to be provided twice monthly to attempt to meet this demand and staff can choose to attend either an in-person session or a “live” session on Microsoft Teams. Staff need to be compliant with both the Northern Ireland Adult Safeguarding Partnership Training Framework (NIASP) and RQIA requirements - to facilitate this the WLDI Service provide bespoke sessions on request. Demand for this training will continue.</p> <p>A key focus in 2022 – 2023 was meeting the demand for Level 3 training to nursing staff /AHPs in the acute hospital and community settings (n = 638). These staff are now required to undertake a full day refresher every 2 years and these staff will require refresher places 2024 / 2025. There continues to be demand from other hospital / nursing settings and facilitation has been agreed for staff within the Acute Mental Health Inpatient Centre in April 2024.</p>	

	<p>The WLDI also continues to respond to operational requests for urgent training outside of the Adult Safeguarding training calendar each year e.g. Designated Adult Protection Officer (DAPO) training in Dec 2023.</p> <p>Support groups continue to be facilitated, namely the quarterly DAPO and IO (Investigating Officer) groups, which will be amalgamated in 2024 - this will reduce pressure on facilitator and operational staff time. Line manager (Level 3) support groups will continue to be facilitated by the WLDI Service to ensure that staff are kept up to date in addition to their 2-year refresher training.</p> <p>The WLDI Service has also facilitated Adult Safeguarding Champion groups when requested and will continue to support Trust operational staff to disseminate key Adult Safeguarding messages to this group and explore any issues such as referral pathways, thresholds that this group might have.</p> <p>Domestic Homicide review & Domestic Violence Learning Events (May and December 2023)</p> <p>Domestic Homicide Reviews were introduced in NI in 2020 and the Trust have provided awareness raising training for staff and also provided additional training on issues related to action plans and recommendations from the reviews. The Trust has not received any additional funding and the costs have had to be met from underspend in other areas.</p> <p>The learning from DHRs have prompted the Trust to fund Licences for the 8 stage Domestic Homicide Timeline Training.</p>	
<p>11.8.4</p>	<p>Of those who attended Adult Safeguarding Training, how many staff were from other disciplines or sectors?</p> <p>282x staff from other disciplines attended Adult Safeguarding training.</p> <p>In addition to this, 7417x staff within the organisation completed the combined Adult and Child Safeguarding Level 1. Most of these staff will be outside of the social work and social care workforce.</p>	
<p>11.9 Leadership and Management</p>		
<p>11.9.1</p>	<p>Investment in Leadership and Management Training</p>	<p>Accountability 23-24</p>
<p>11.9.2</p>	<p>Leadership and Management Training Activity</p>	<p>Accountability 23-24</p>
<p>11.9.3</p>	<p>Confirm financial position within budget, under spend or over spend. If over or under spend noted, please provide a brief summary of the reasons why and actions taken to address</p> <p>Underspend</p> <p>The Trust actively promotes a variety of leadership and management courses a number of which do not incur direct costs as they are funded through Service Level Agreements or are funded by DoH.</p> <p>Activity in this area has increased from last year due to improved capture of service activity and engagement with staff.</p> <p>It is anticipated with the planned launch of the Social Work Leadership Framework in 2024/25 that further leadership and development supports will be developed by the service for students, AYEs, frontline social workers and social care workers, line managers and senior managers. As part of the Trust Workforce Recruitment Retention plans for social</p>	

	work and social care there is a workstream focused on Enhancing Leadership. The activity of this workstream has been scaled back due to Encompass implementation however will be a key priority in 2024-25 and therefore costs in this area are anticipated in the next reporting period. The underspend in this area is utilised across other areas of the budget.
11.10 Programme Support	
11.10.1	Programme Support Expenditure Accountability 23-24
11.10.2	<p>Confirm financial position within budget, under spend or over spend. If over or under spend noted, please provide a brief summary of the reasons why and actions taken to address</p> <p>Underspend</p> <p>There was a minimal underspend in this area despite a high level of activity to support and recognise staff across social work and social care settings. In response to workforce pressures and increasing demands in older people's community social work teams the Trust hosted a regional Delegation Workshop in January 2024 which was attended by XX staff and provided an opportunity for learning and development of an action plan to address challenges. Follow up events to support the action plan will incur a cost in 2024-25.</p> <p>The underspend in this area is utilised across other areas of the budget.</p>
11.11 ACPC	
11.11.1	Investment in ACPC Training Accountability 23-24
11.11.2	ACPC Training Activity Accountability 23-24
11.11.3	<p>Confirm financial position within budget, under spend or over spend. If over or under spend noted, please provide a brief summary of the reasons why and actions taken to address</p> <p>Underspend</p> <p>BHSCT had a 20-year partnership arrangement with Volunteer Now (VN) to provide Child Safeguarding training to community and voluntary (C&V) sector organisations. 'Keeping Safe' training was provided at no cost to C&V sector organisations.</p> <p>In 2023, DoH ceased the funding to VN to provide this training. VN were moving to a 'paid for' model i.e. charging for training. BHSCT are not permitted to charge for training and after consultation with VN, the Trust and DoH the partnership was ended.</p> <p>The underspend in the ACPC allocation was used to provide child safeguarding training for BHSCT staff and across other areas of the budget. It is anticipated that the full ACPC allocation will be used for child safeguarding and children's services training in BHSCT in 2024/25.</p>
11.12 Additional Allocations	
11.12.1	Investment in other Training Activity/Initiatives Accountability 23-24
11.12.2	Other Training Activity Accountability 23-24
11.12.3	Commentary. <i>Trust should include comment on each additional allocation individually including those allocations for regional initiatives or schemes and in-year additional allocations.</i>

Overspend

BHSCT administers the Additional Allocations for ASW, NIPTTP, Adult Safeguarding Programme and Regional Sensory monies on behalf of the 5x HSCTs. There is an overall overspend across these programmes and BHSCT subsumes any overspend on the administration of regional courses (additional allocations) See below for individual programme comments.

Approved Social Work (ASW) Training**Overspend**

There was an overspend in this area in relation to the regional ASW Programme. This is attributed to course fees for 27x places which exceeds the allocated budget. These are regionally allocated places that are filled each year across the 5x Trusts and includes the RESWS. Costs also include administrative staff remuneration and external examiner fees. The underspend on the other additional allocations for this reporting period helps to offset the overspend for this programme.

Northern Ireland Practice Teacher Training Programme (NIPTTP)**Underspend**

There is an underspend in this area after staff remuneration for oversight of the programme is paid. The underspend in this area is used to off-set the overspend in the ASW programme.

Adult Safeguarding Programme**Underspend**

There is a small underspend in this area and it is used to offset the overspend in the ASW programme.

Regional Sensory Services – allocation**Underspend**

These are recurrent monies for Regional Sensory Support Training. The ASM WLDI continues to coordinate this training/funding on behalf of the region, meeting regularly with the training sub-group of the Regional Sensory Network. This group identified training priorities for this reporting period. This includes funding for the Rehab Programme at Birmingham University. The Trust also provides administration support in respect of payment of invoices.

The small underspend can be attributed to the uptake of Virtual Reality – Visual Awareness Training provided by Empatheyeyes across the region. The funding for this training was included in these recurrent monies and was secured via procurement. 5x training places were secured in each Trust area, however, due to workforce issues and the rollout of Encompass training several sessions had to be cancelled. In 2024/25 the allocation of this training will be reviewed with colleagues across the region.

General

11.13 In addition to those listed at 11.7 and 11.8, how many attendees at in-service training were from other disciplines within Trust or from external providers? (including voluntary, community and commercial organizations)

Insert table outlining the title of course, number of attendees and their discipline.

Course Title:	Number of attendees:	Discipline:
Domestic Abuse and its impact on the mother and child	3	Health Visitors Child Safeguarding Nurses
DHR & Domestic Violence Learning Event May and December 2023	134	Trust wide attendees
Domestic Violence - Raising Awareness	1	Health Visitor
Graded Care Profile 2 Training	16	Health Visitors Child Safeguarding Nurses
Narrative Model	1	Child Safeguarding Nurse
Signs of Safety - Advanced	1	Health Visitor
Signs of Safety - Foundation Workshop	7	Health Visitors Child Safeguarding Nurses
Keeping Safe	232	C&V sector organisation staff
Total:	395	

11.14 Removed

11.15 Identify key achievements or awards within the Trust which specifically support the delivery of the Learning and Improvement Strategy for Social Workers and Social Care Workers, 2019-2027

PiP Awards 2023

Consolidation Awards Winners = 9
Specialist Award recipients = 24
Leadership & Strategic Award recipients = 2

The numbers of staff achieving PiP requirements continues to be much higher than those achieving full awards which again reflects workforce pressures and challenges in releasing staff for longer programmes.

Social Care Awards - Recognising excellence in our social care workforce

This inaugural event on 30th June 2023 recognised and celebrated the amazing work of our social care staff within BHSCT.

Approximately 150x guests attended the Social Care Awards, including the finalists in each category, supported by their colleagues and managers.
The event was attended by key speakers including: BHSCT Chief Executive, Chairman and Interim Executive Director of Social Work; Department of Health Chief Social Worker; each of whom spoke about the significant contribution that social care staff make to the lives of children and adults in the Belfast Trust area every day.

There were 10x award categories on the day recognising the individual and collective contribution that social care staff make in the lives of service users.

Vocational Training Awards Ceremony

186x social care staff achieved a vocational qualification in Health and Social Care over the last number of years. Unfortunately, due to Covid restrictions a celebratory event to acknowledge this achievement was not possible. However, on 1st December 2023 a graduation ceremony was organised to celebrate their achievement. BHSCT Deputy Executive Director for Social Work and a representative from the Northern Ireland Social Care Council presented the awards.

The qualifications that the Vocational Training Team align with the needs of the organisation and there are clear benefits for staff, the organisation and most importantly, those who use services. Many staff commented on the emotional impact of the day, when they received their certificate of achievement in front of their peers.

SistersIN- Celebration Event

12th March 2024 – Inspiring Northern Ireland’s female leaders of tomorrow. The WLDI Service were excited to have the opportunity to participate in this event and showcase social work in Belfast Trust. This was a great opportunity to network with hundreds of young women and showcase social work as a career option.

Belfast Met - Health, Wellbeing & Inclusion Careers Fair

The Vocational Training Manager and Training Manager for the Home Care Service joined forces in attending this careers event on 12th March 2024. There was great interest in education, training and employment opportunities in the social care sector in Belfast Trust. A great opportunity to promote social care as a profession.

Valuing Social Work and Social Care Events

The Trust ran 4x half-day sessions for our social work and social care staff, providing an opportunity for staff to have time away from the office. In total, 221x staff attended across the 4 sessions. Psychology staff provided sessions on mindfulness and self-care.

Feedback:

- 74% of staff agree that an event like this makes them feel valued as a staff member of BHSCT
- 94% of staff express some degree of importance in events like this in supporting their retention in BHSCT
- 69% of staff agree that an event like this contributes to their wellness in work

World Social Work Day March 2024

The Trust organised an event open to all social workers to celebrate the profession. 129x staff attended with each of the 5x Divisions providing a short presentation on the unique contribution that social work makes within health and social care settings. BHSCT partnered with other HSCTs and invited Sharon Shoesmith (former Director of Children’s Services in Haringey).

BHSCT ‘Employer of Choice’ Event February 2023

The Trust organised an event for student social workers on their final placement with the aim to give them an overview of employment opportunities by service area in older people, adults, children’s, learning disability and mental health services. The Trust recognises the importance of such events in recruiting new staff and this is reflected in the number of successful appointments to BHSCT via the graduate recruitment process.

SW Research Conference March 2024

The Trust had several contributors at this year’s

- Reduction in unallocated cases for Children with Disability (CWD) Social Work Service

	<ul style="list-style-type: none"> - Alternatives to Acute Admission for Patients with a Primary Diagnosis of Emotionally Unstable Personality Disorder - Valuing Social Work – increasing retention of social work employees in a statutory organisation - The Lumineers: Collaboration in action to ignite & inspire Social Work leaders at all levels - Thematic Group Supervision to support Social Work Practice Learning Opportunities in BHST - Thematic Group Supervision to support Social Work Practice Learning Opportunities in BHST <p>Move a Mile a Day in May 2023 During the month of May, the Trust coordinated an initiative to improve the physical and mental well-being of our social work staff. All social work staff were encouraged to do a daily activity that involved moving ‘a mile a day’ i.e. cycling, walking, swimming, running etc.</p> <p>Social Work Quality Improvement The Trust continues to engage with the regional Quality Improvement in Social Work Programme. This is a level 2 Quality Improvement qualification that also supports staff to gain Professional in Practice requirements from NISCC. Last year the Trust supported 6 social workers and 1 social care manager through the QISW programme and they qualified in February 2024. All 6 social workers claimed 3 requirements from the Leadership and Strategic Award. The next cohort of social workers started the QISW course in March 2024. The Trust is supporting 8 social workers in their improvement journey this incoming year 2024/25.</p> <p>Dragon’s Den The regional Staying Connected Dragon’s Den took place in February 2023 and the Trust was delighted to support applications from social workers and social care workers who had identified improvement ideas in their area of work. The Trust was represented in the final of Dragon’s Den by social care staff working with people with dementia in a community setting. Staff were delighted to be awarded funds to support the development of a virtual reality project that will support service users, carers and staff.</p> <p>Schools Event November 23 The Trust organised a Virtual Social Work Open Day for school pupils with approximately 70x attending and representing 45 schools. Several Trust-employed staff spoke about ‘a day in the life of a social worker’ and there was opportunity for a Q&A session. Feedback from the attendees indicated that their understanding of social work had increased because of them attending and they were interested in applying to study social work and pursue it as a career.</p>
<p>11.16</p>	<p>Describe List any activities which have been undertaken in the reporting period to evaluate how learning and development activities have improved service delivery within the Trust. Trusts should comment on outcomes of such activities where applicable. (Narrative) <i>Examples may include audits and evaluations undertaken</i></p> <p>Practice Learning Supervision Folder Audit 17x Practice Teacher folders were audited within the WLDI service following the August – December 2023 PLO. Folders were audited against the file structure in terms of the whether it was included and the quality of the work within.</p>

Supervision Folder Contents	Complete	Incomplete	Notes
Section 1 -NI Social Care Council registration certificate [copy] and date student's annual renewal fee is due -Student Profile Individual Learning Plan -Student travel documentation	5	12	The most common documents missing: -NISCC Certificate -Student travel documentation -Individual Learning Plan
Section 2 -Induction Programme -First two-week timetable -Certificate of completed statutory/mandatory training -Any induction task	4	13	The most common documents missing: -Certificate of completed statutory/mandatory training -Induction timetable or programme for the first 2 weeks in the PLO.
Section 3 Placement attendance record [signed by PT/onsite/student]	15	2	2 folders had no placement attendance record
Section 4 Supervision Agreement [signed by PT/student]	17	0	All completed
Section 5 Supervision minutes [individual & group]	17	0	All completed
Section 6 -Initial Learning Agreement -Interim Assessment Report -Additional Meetings [if appropriate]	14	3	3 folders had not fully completed section 6 to include the Initial Learning Agreement.
Section 7 Practice Teacher Assessments – Direct observations	15	2	2 folders did not have evidence of the direct observation reports.
Section 8 -Practice Teacher Assessment Report -Summary Matrix and -Line Manager	16	1	1 folder did not have evidence of the practice teacher report.

Endorsement (Level 3 Only)			
Section 9 Formal Evidence-Community Development and/or Group Care -Matrix (If not recorded in supervision minutes)	15	2	2 folders did not have evidence of Community Development and/or Group Care
Section 10 Previous Practice Teacher report [from level 2] OR Progress report [for previous incomplete PLO(s)]	17	0	As Level 2 students no previous practice teacher report. No student was repeating PLO, therefore no progress reports.
Section 11 Individual circumstances etc.	2	15 N/A	For the 2 students with individual circumstances, section 11 was completed.

Children’s Services Induction Programme for AYEs

In September 2023, the Workforce, Learning, Development, Improvement Service coordinated a four-day induction for all AYEs in Children’s Community Services in partnership with operational teams. This was an action following a previous AYE appreciation/evaluation event in terms of utilising the “You said, We did” approach. The induction programme was evaluated in terms of measuring the AYE self-reported confidence, competence and sense of feeling valued. Feedback following induction indicated an increase in all the above and the most recent AYE appreciation/evaluation highlighted that the induction programme in Children’s Community Services had “worked well”. The Workforce, Learning, Development, Improvement Service hope to coordinate this induction programme for the next cohort of AYEs coming into Children’s Community Services in the summer of 2024.

Group Supervision for social work students

Themed group supervision for students on PLO in BHSCT (adult services) is developed, facilitated and audited during each student cohort (2 per annum). This initiative draws upon the specialist skills and knowledge base of Workforce Learning Development Improvement Coordinators to provide group supervision in relation to the themes of *tuning in, reflection, social isolation, loss, bereavement and endings*. The PiP Lead in BHSCT has been published in The International Journal of Practice Teaching <https://doi.org/10.1921/jpts.v21i2.2052> (doi: 10.1921/jpts.v21i2.2052)) in November 2023. They also delivered an oral presentation on themed group supervision to the 11th Annual Social Work and Social Care Research in Practice Conference in Northern Ireland in March 2024 at Belfast Castle.

Narrative Consultations

Learning and Development Coordinators provide 1:1 narrative consultations to practitioners in Family Support, LAC and Residential Childcare (Children’s Community Services). These sessions have been very positively evaluated in terms of the outcomes for children, young people and their families/carers. The Workforce, Learning, Development, Improvement

Service plan to engage further with these services and develop a more robust outcome measurement tool for the next reporting period.

Unaccompanied and Separated Children Workshop

The Learning and Development Team have co-designed and co-delivered an awareness workshop for staff supporting unaccompanied and separated children. This workshop has been co-produced with operational staff in the regional unit for unaccompanied and separated children. Learning and Development Coordinators have engaged with VOYPIC with the hope of engaging young people who have used the service in the past and supporting them to co-produce and co-deliver future training programmes.

Additional Supports to AYEs

Learning and Development Coordinators provide individual professional development support to AYEs in their first 6 months of employment in the Trust. This additional resource promotes the AYE need for continuous professional development while also supporting the social work manager. The Learning and Development Team provided 232x AYE professional development sessions in the reporting period (Section 11.10 of Accountability Report 2023-24). The format of this AYE professional development support is currently under review considering the requirements of the new Social Work Supervision Policy.