

STATUTORY FUNCTIONS

**PERFORMANCE MANAGEMENT AND
ASSURANCE REPORT**

For Year end 31 March 2025

**SOUTH EASTERN HEALTH &
SOCIAL CARE TRUST**

**Draft Version
Awaiting Approval from EMT & Trust Board**

Introduction

This is a performance management and assurance report on the delivery of statutory functions and corporate parenting (CC3/02), within the South Eastern Health and Social Care Trust (the Trust) covering the period 1st April 2024 to 31st March 2025.

This report provides assurance and analysis of the Trust's provision of statutory functions across social care services. This report comprises of an executive summary, corporate parenting report and assurance reports across social work services.

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EXECUTIVE SUMMARY

1.1 Executive Director of Social Work Statement of the Governance arrangements

The Trust as a corporate entity is responsible for the discharge of the statutory functions. Through the Chief Executive, the Executive Director of Social Work (EDSW) holds responsibility for personal social services functions.

Mrs Lyn Preece is the post holder of EDSW. Mrs Preece is a qualified social worker and is registered with the Northern Ireland Social Care Council (NISCC) on Part 1 of the Register.

The EDSW is a member of the Trust Board and is accountable to the Chief Executive for compliance with legislative requirements and for ensuring that systems, processes and procedures are in place to effectively discharge statutory functions in respect of child care, mental health, disability, community care and in relation to the social work and social care workforce.

A professionally qualified social worker is employed at Assistant Director level in all of the directorates undertaking statutory functions. This ensures accountability arrangements are clear and unambiguous.

Social work leads from across the Trust programmes of care and the Assistant Director of social work (ADSW) meet regularly with representatives from SPPG to review the action plan agreed as part of the annual review of the provision of statutory functions and corporate parenting for 2024/25.

Robust governance arrangements are in place across all Directorates ensuring continuous monitoring and improvements (where necessary) in all areas relating to statutory functions and all regulatory requirements for relevant bodies.

The integration of sound governance systems has ensured opportunities for continuous audit and improvement activity.

The EDSW has ensured there is an unbroken line of professional accountability from social workers, through team managers and senior managers and social work leads to the EDSW.

The EDSW has ensured that those managers who are responsible for the professional leadership of statutory functions and the operational delivery of the service are professionally qualified social workers.

The EDSW is assisted by the ADSW who is responsible for ensuring the Trust implements appropriate social care governance arrangements. The post holder maintains responsibility for the regulation and development of the workforce and quality assurance of the provision of statutory functions.

Throughout this reporting period the Trust has sought to effectively discharge the statutory functions across all directorates. Information presented in the individual directorate reports outlines performance management and assurance arrangements.

The Trust has fully co-operated with the RQIA in its discharge of its regulatory and inspectorial functions. Throughout the commentary contained in this report, reference is made to reviewing and reporting arrangements with the RQIA in relation to the provision of regulated services and the statutory duty of quality.

1.2 Statement of the Executive Director of Social Work's assessment of the Trust's performance

The Trust has experienced a number of challenges in relation to the delivery of statutory functions within this reporting period.

Workforce:

The Trust continued to face challenges in recruiting qualified social workers, largely due to ongoing regional workforce supply constraints. These staffing pressures have, at times, affected the Trust's ability to consistently meet its statutory obligations. In response, the Trust is actively engaging with the Department of Health at a regional level to develop and implement strategic recruitment initiatives. These include a rolling recruitment programme, accelerated pathways to attract final year social work into the workforce, and targeted, bespoke recruitment campaigns designed to address specific gaps.

Encompass:

There are outstanding issues in relation to regulatory reporting and data validation within the Encompass system that continue to affect the accuracy and reliability of current data. As a result, services have had to operate a dual system of data collection throughout the reporting period. Whilst this interim approach has enabled continued reporting, it is not sustainable longer term. These issues are being addressed at a regional level as they are common to all Trusts that have completed the Encompass Go Live phase and resolutions need to be developed and implemented to ensure long-data integrity.

Supervision:

During this reporting period, the Trust implemented the new Regional Social Work (NI) Supervision Policy 2024. Subsequent audits have identified gaps in full compliance, specifically in relation to the frequency of supervision being recorded for social workers across all programmes of care.

Mental Capacity Act:

Limited staffing resource continues to impact on the Trust's ability to meet its full legislative responsibilities in relation to the Mental Capacity Act (NI) 2016 particularly in light of the incoming requirements.

Approved Social Work (ASW):

The ASW role continues to be impacted by a number of challenges in this reporting period. These include protracted waits, difficulties with interface working (PSNI and NIAS), RESWs handover, action short of strike action, increased complexity and acuity of people requiring ASW support.

Adult Services

Physical Disability Services:

Physical disability services are reporting an inability to meet the assessed needs of service users due to lack of appropriate services, including supported living and care home placements. The report also highlights a lack of clinical care pathways for service users with complex health needs and the need for assessment and treatment of individuals with alcohol related brain injuries.

The service has not been fully compliant in completing annual reviews within this reporting period.

Adult Learning Disability Services:

Three individuals remain as inpatients within Muckamore Abbey Hospital. Transition for 2 of these service users is planned for June 2025 with further planning required for the third individual due to presentation requiring forensic services.

The Trust continues to face significant challenges in accessing Inpatient assessment and treatment for adults with a learning disability who have mental health (MHL) issues resulting in individuals being admitted to mental health wards. This has been identified on the Trust corporate risk register. The Trust is progressing plans at both a local and regional level to address this identified need.

The Trust reports an increase in the number of adults requiring bespoke placements due to complex needs. This is exacerbated by difficulties for the independent sector in the recruitment and retention of staff. The service is progressing plans to meet this need.

To align with regional services, individuals with a learning disability will now transition from Children's Services at the age of 18. A number of these young people transitioning require bespoke placements to meet their identified needs. The service is recruiting a transition worker to provide additional resource to meet the needs of this population.

Pressures within the service continue to impact on the completion of annual reviews, and financial reviews for service users within residential, nursing and supported living placements. The completion of carer's assessment has also been impacted. Monitoring is in place alongside an action plan to address these issues.

Adult Learning Disability services report a Failure to complete Deprivation of Liberty applications under the Mental Capacity Act in a timely manner. This impacts on approximately 100 services users with Emergency Protection requiring a full application to be processed.

Adult Mental Health

The challenges in relation to the ASW role are highlighted above. The Trust continues to take steps to increase the numbers of ASW's and work at local and regional level to address these challenges and meet its' statutory duty under Article 115.

Primary Care and Older Peoples Services

Pressures within the service continue to impact on the completion of annual care management reviews within the community teams and care home support service. Action plans are in place to resolve the issue.

The service also reports that due to ongoing staffing challenges not all statutory care home beds across the Trust can be utilised. Recruitment is ongoing and as workforce capacity improves, bed occupancy will increase.

Children's Services

Unallocated cases/ Waiting lists

The Trust continues to have a high number of children and families awaiting allocation of a social worker, a total of 652 across children's services (Gateway: 53; Safeguarding: 177; Children's Disability: 422). This continues to be reported in line with monthly requirements to SPPG. Enhanced governance arrangements are in place for all unallocated cases across the Trust ensuring an appropriate level of risk management.

Separated or unaccompanied asylum seeking children:

Pressure continues in meeting the needs of separated or unaccompanied asylum seeking children. The Trust is accommodating 80 such young people at report end, an increase of 24 in this reporting period. There are significant pressures on the Trust to secure appropriate and timely accommodation to meet the needs of these young people and additional beds have been sourced to meet the accommodation needs of this population.

Bespoke Placements:

Complexity of assessed need and service commissioning gaps has resulted in the Trust supporting 7 bespoke placements (3 of which are outside of NI). A further 2 children have currently been assessed as needing high cost / bespoke residential care provision.

These high cost placements continue to place significant financial pressures on the Trust and have been included in growth funding bids made to SPPG.

Regional Secure Care Centre (Lakewood):

The Trust continues to be unable to meet the demands for secure beds due to workforce issues across the Centre and the increased complexity of need presented by the children accommodated therein. Lakewood's inability to operate at full bed capacity is currently reviewed on the Corporate Risk Register. The Senior Management Team worked in partnership with SPPG to finalise a service specification for Lakewood. This sets out the remit for secure provision in Northern Ireland and became operational in December 2024.

Placement provision in fostering:

170 young people cared for by the Trust are in 'unregulated placements', a kinship placement, which has not been approved within the requisite timescales. This is attributed to workforce pressures and the continued increase in demand for kinship placements. Enhanced assurance arrangements are in place with rigorous oversight of all unregulated placements.

During the reporting period, capacity issues within the Trust led to 36 children who are looked after being accommodated in an inappropriate placement given their assessed needs. The pressure to secure appropriate fostering placements has led to continued reliance on independent providers with 127 children being supported in 88 independent placements. This usage places considerable fiscal pressures on the Trust. SPPG are monitoring the Trust's use of independent fostering providers through the Support and Intervention Framework (level 2).

Children and Young People with a Disability:

Residential short break support available to children with disabilities has decreased over this reporting period, with 211 overnight stays provided for 22 children. Additional funding from the DoH has progressed plans to open an additional facility in the next reporting period increasing short break provision.

The Children's Disability Service is registered on the Corporate Risk Registers due to its inability to meet the trajectory of young people requiring services and short breaks. SPPG are monitoring the short breaks for children with a disability through the Support and Intervention Framework (level 2).

SF Action Plans

The social work leads maintain regular communication with the SPPG, ensuring that there is a shared understanding of progress and expectations. They are actively working through all areas of concern identified in the Statutory Functions Action Plans, with clear actions in place, ongoing monitoring, and a commitment to delivering sustained improvements in service delivery and compliance.

Lyn Preece
Executive Director of Social Work and Director of Children's Services

SECTION 2

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 depth and movement.

MENTAL HEALTH

2.0 Adult Mental Health Services Adult Services and Prison Healthcare Directorate

2.1 Named Officer responsible for professional Social Work

Yvonne Russell-Coyles is the Mental Health Social Work Lead and the named officer for professional social work in mental health services.

Jackie Carr is the Assistant Director for Community Mental Health services and Mental Capacity Act service (MCA). This has provided the opportunity for an unbroken line of professional accountability for social work.

Restructuring within mental health services has seen the integration of Mental Health Services for Older People (MHSOP), Adult Mental Health (AMH) and MCA. This process is ongoing and services have continued to operate under interim arrangements as Acute and Community structures are agreed and substantive posts recruited to. Yvonne Russell-Coyles will be stepping down from her Mental Health Social Work Lead position and a new 8b Social Work Lead appointed. Jackie Carr will be retiring from her Assistant Director role in May 2025, with Fiona Dagg assuming the Assistant Director for Community Mental Health services and MCA role.

Please see organisational structure for Mental Health/MCA services on page 19.

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

Recruitment

There are 3 social work (b6) posts in the recruitment process currently.

In planning for the future needs of mental health social work, consideration is being given to the demographics of the workforce.

Mental health managers continue to utilise Trust and regional recruitment to reduce vacancy levels.

Retention

Exit interviews are completed as part of a service improvement project to address any issues, learning and opportunities to meet change within key services. This is incorporated into the Wellbeing Action Plan. The introduction of partial retirement may support the retention of the 6% of staff who are eligible for retirement.

Approved Social Work (ASW) role

The ASW operational 8a post was recruited to successfully in 2024. The key function of this role is to oversee the operation of the ASW Hub, provide support and professional ASW supervision to staff on rota. Due to the service continuing to work to NIPSA's Action Short of Strike Action (ASOSA) it has been difficult at times to fulfil the statutory function role due to the demand for assessments under the Mental Health Order (MHO) and the limited capacity that arises from 2 staff being required to do community assessments. To stabilise and grow the ASW Hub, 3 full-time ASW posts have been recruited which should provide a greater level of capacity, consistency and working hours outside 9-5pm.

There are 52 active ASWs (38 wte), however 13 are Team Leaders and provide a reduced number of shifts on the rota per month. There are 9 staff who are not fulfilling ASW duties due to health, or work adjustments. The ASW Regional Quality Standards identify that the Trust should have 42wte ASWs by 2026. The Trust continues to be proactive in increasing numbers of ASWs through ongoing recruitment, access to ASW training places and workforce planning.

As the implementation of the Mental Capacity Act continues, the role of the ASW has been changing, and the ASW Operational Lead role has elements of MCA built into the role to support this, including training of GPs, chairing Trust panel meetings and joint assessments with MCA staff.

There continues to be an increase in MHO/MCA interfaces, both in wards and the community. The ASW Hub has been proactive in supporting community colleagues, with short-term detention authorisations commencing in the community and pathways being developed.

Adult Mental Health Specialist DAPO role

Mental Health services have a specialist mental health DAPO. The role involves co-ordinating Adult Protection investigations and alternative safeguarding plans, carrying out early indicator audits, and having a substantial role in educating staff and ensuring overall governance.

The Specialist DAPO undertakes early indicator audits within the inpatient wards and supported living facilities to identify areas of risk and develop action plans to ensure compliance with standards. The governance around completion of safeguarding processes continues to be reviewed, which has improved quality and maintains a minimum level of governance around vulnerable adults.

There is a recognition across the service area that Adult Protection requires to be sufficiently resourced to meet statutory functions and to be proactive in approach. As such, service restructuring will be seen as an opportunity to build on this, going forward.

2.3 Supervision arrangements for social workers

There was a mini audit completed in November 2024 which demonstrated improved compliance from March 2024. The Regional Supervision Framework was implemented from September 2024. Individual supervision achieved 47% compliance. Enhanced focus is required in the next 6 months. Attendance at professional forums needs to be recorded in supervision along with feedback on performance.

Social Work and ASW forums take place quarterly and are well attended. There is a Collective Social Work Leadership meeting which occurs 3 times per year. This drives the social work agenda forward and improves standardisation and co-production.

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.

The Encompass system has progressed and can collate some data but remains difficult to navigate and does not provide all data required for statutory functions at this point. These issues are being addressed on a regional level with the Epic and Cogito teams and will be further developed once all 5 Trusts are utilising Encompass.

The Care Management team have been working hard to provide assurances around compliance of 6-monthly and annual reviews. The database is able to run reports evidencing compliance, whilst the service await Encompass build in this area.

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
<i>Serious Adverse Incidents</i>	<i>34</i>
<i>Domestic Homicide Reviews</i>	<i>0</i>
<i>Case Management Reviews</i>	<i>0</i>
<i>Mental Health Review Tribunals</i>	<i>31</i>
<i>Judicial Reviews</i>	<i>0</i>
<i>Audits</i>	<i>1</i>
<i>RQIA Inspections</i>	<i>2</i>
<i>RQIA Enforcement notices – Failure To Comply Notices</i>	<i>0</i>

Serious Adverse Incidents

There is a local and regional review of the process for reporting and completing SAIs being undertaken. Hot and cold de-briefing is offered to staff post-incident.

Datix

Increased scrutiny is occurring within the ASW service with Datix reports completed when there are difficulties in delivery of the service, handover to RESWS, bed pressures and conveyancing. There were 28 incidents recorded which was an increase of 6% from last year.

Audits

The audit for Adult Mental Health Care Management remains 99.9% compliant and this system is being applied to the Care Management service that has traditionally been part of Mental Health Services for Older People. A correction plan has been put in place to ensure the outstanding annual reviews will be completed by the end of May 2025.

RQIA Inspections

The Trust's 2 supported living schemes have had RQIA inspections.

Both Schemes have a recommendation to request completion of AccessNI checks for staff on commencement of all posts even if already employed with the Trust. This issue has been taken forward regionally with the HR dept.

The facilities need to formalise a process and system to collate service user, carer and family feedback. This will be in addition to the monthly feedback via monitoring visits.

There is significant positive feedback from service users and families and staff working within the Schemes. The level of complexity of people within the Schemes has continued to increase. The process of referral and admission to all supported living in-house and contracted services is discussed fully in a multi-disciplinary accommodation panel. The demand for supported living continues to increase and outweigh capacity with waiting lists for all schemes. The senior management team are involved in the regional strategic development for supported living and as such are involved in influencing the future direction and changes and options required for service need and development. Bespoke packages of care are being commissioned by business cases where current provision does not meet need.

2.6 Discharge of Directed Statutory Functions

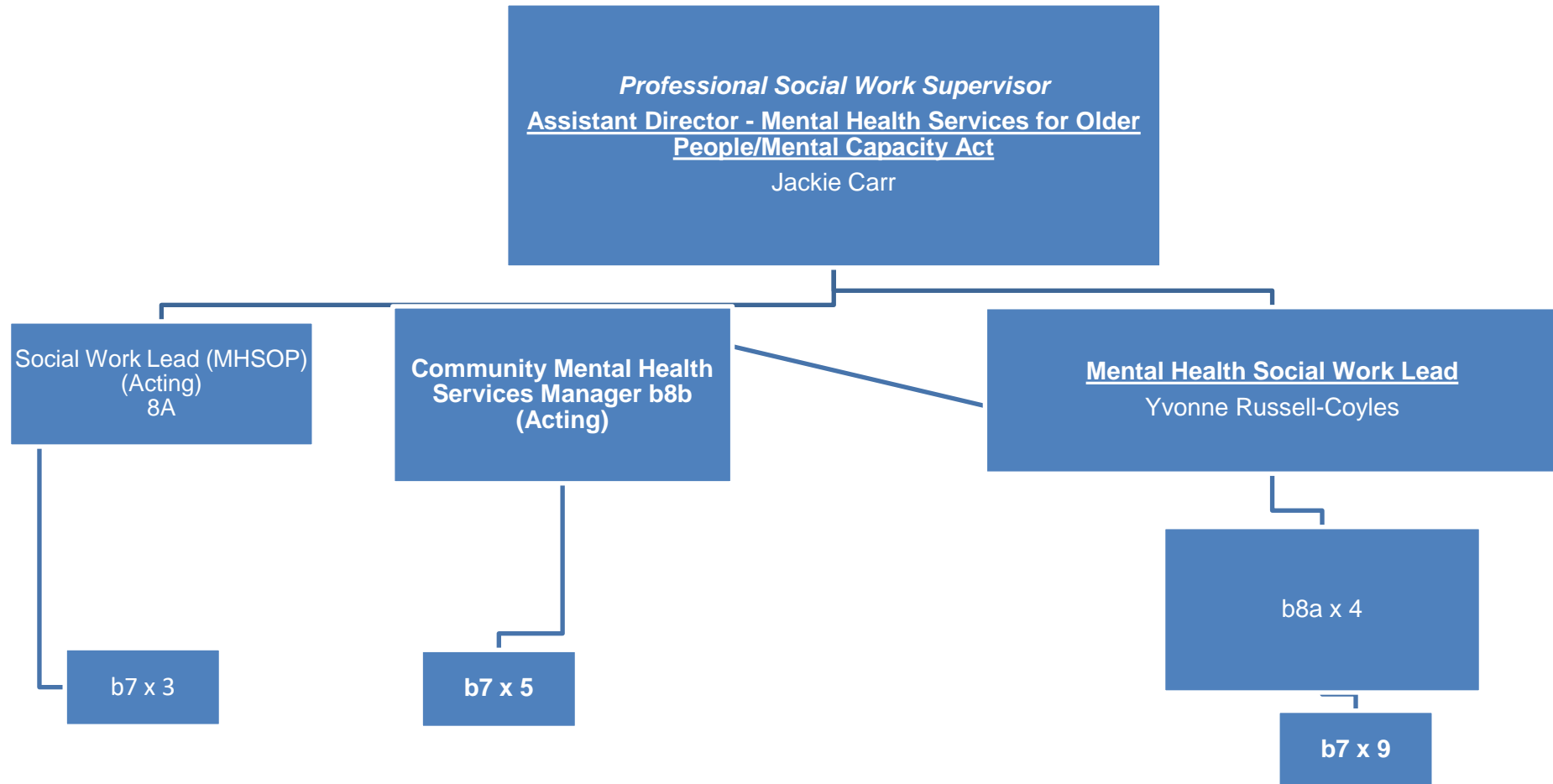
2.6	Summary of areas where the Trust has not adequately discharged their Directed Statutory Functions for this Programme of Care.	Please outline remedial action taken to address this situation and any proposed future action.
	Mental health Issues	
	<p>There continues to be a number of difficulties impacting on the Trust's ability to fulfil their statutory role in relation to ASW role:-</p> <ul style="list-style-type: none"> i. Availability of MH beds – this continues to be a regional difficulty. ii. RESWs are currently engaging in strike action and this is impacting on their availability to take handovers at 5pm. ASW Leads attend daily huddle. iii. ASOSA commenced in the Trust in October 2023. This is ongoing with no identified end date. This has impact on adequate cover on the ASW rota and at times there are no ASWs available to respond. iv. Interface Working – at times there is difficulty accessing PSNI and/or NIAS and there can be challenges fulfilling the conveyancing role. This may put service users, families and ASWs at increased risk. The introduction of RCRP and 	<p>There is an ASW Action Plan which is reviewed and updated every 6 months.</p> <ul style="list-style-type: none"> i. ASW Leads link with bed flow meetings daily to understand bed pressures and prioritise detained patients admissions. ii. In view of strike action, ASOSA and depleted services the Trust engages in daily RESWs huddle to improve communication and discuss possible handovers. iii. ASW Leads have improved consultation with ASWs, Unions representatives and HR. There has been an increased level of support, regular supervision and no lone-working. iv. The Trust Interagency Group has been re-convened. This issue has also been discussed regionally with SPPG and DOH and ASW Leads. ASWs are completing Datix where issues within the wider system occur.

	<p>Cawdrey recommendations continue to influence change.</p> <p>v. Acuity and Complexity – there is ongoing difficulty with increased acuity and the overlap between MCA and MHO. On a number of occasions people assessed under the MHO need medical attention and are brought to the Emergency Department (ED).</p> <p>vi. GP – ongoing challenges accessing GPs. Some areas have no NILES arrangements.</p>	<p>v. Increased links with ED re pathways and best practice. Regular meeting with ASW/MCA team as move towards further implementation of MCA. Identified training needs re MHO/MCA planned with ASWs and community teams.</p> <p>vii. Working with acute staff/ED re guidance re MHO and sharing of protocol re accessing GP</p>
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The following issues have also been carried over from the 2024/25 Action Plan and have been RAG rated through the regular interface meetings between the Trust and the SPPG.

Issue	RAG
Staff Supervision – lack of full compliance with Regional Framework	Yellow
Protracted waits for access to acute mental health bed including timely availability of beds for patients who require admission under MHO.	Red
Thematic review of SAIs highlighted the lack of service for those people with a diagnosis of ADHD.	Yellow

Adult Mental Health Services - Professional Organisational Chart



ADULT PHYSICAL DISABILITY

3.0 Adult Physical Disability Service Nursing, Primary Care and Older People Directorate

3.1 Named Officer responsible for professional Social Work

In this reporting period operational responsibility has transferred between directorates and assistant directors.

Operational responsibility for the service sits with Julie Davidson as Assistant Director. Teresa McKee is the Operations Manager Social Work (b8b).

The named officer responsible for professional social work is Joanna Burns, Assistant Director and Social Work Lead for Primary Care and Older People's Services.

Please see organisational structure on page 25.

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

Physical and sensory disability services utilise the regional recruitment process. The service has 1 vacancy which is in the process of being backfilled.

A robust induction and training programme is in place to support staff retention.

3.3 Supervision arrangements for social workers

The Trust implemented the new Social Work (NI) Supervision Policy in September 2024. The service has a robust supervision plan embracing both group and individual supervision. A supervision audit undertaken in April 2025 for the reporting period evidenced good quality in supporting and developing the practitioner, oversight of governance tasks, clear decision making and reflective practice. Areas for improvement identified in respect of frequency of individual supervision and NISCC registration checks.

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

The Physical Disability Service has continued to rely on manual data collection in this reporting period. There are outstanding issues in relation to regulatory reporting and validation issues with the Encompass system that are being addressed on a regional basis. These issues have resulted in a dual system of data collection for the period 2024/2025, with the aim that Encompass will be utilised in future years for reporting.

Physical disability services has quality assured the data provided that has been gathered manually and cross referenced this with the Encompass system

3.5 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	1
Domestic Homicide Reviews	0
Case Management Reviews	0
Mental Health Review Tribunals	0
Judicial Reviews	0
Audits	1
RQIA Inspections	1
RQIA Enforcement notices – Failure To Comply Notices	0

Serious Adverse Investigation

The findings from the investigation highlighted 2 areas for improvement. These were:

- Information will be shared with staff regarding how to record chronologically on Encompass, including uploading of items via media manager. This will be tested at team level before being shared across adult social care in South Eastern Trust. Team Leads will reinforce in supervision and team meetings to ensure understanding and compliance.
- Development of a standard operating procedure in relation to management and closure of cases where intervention is complete. This will be reinforced through supervision, a shared-learning session, and team meeting.

3.6 Discharge of Directed Statutory Functions

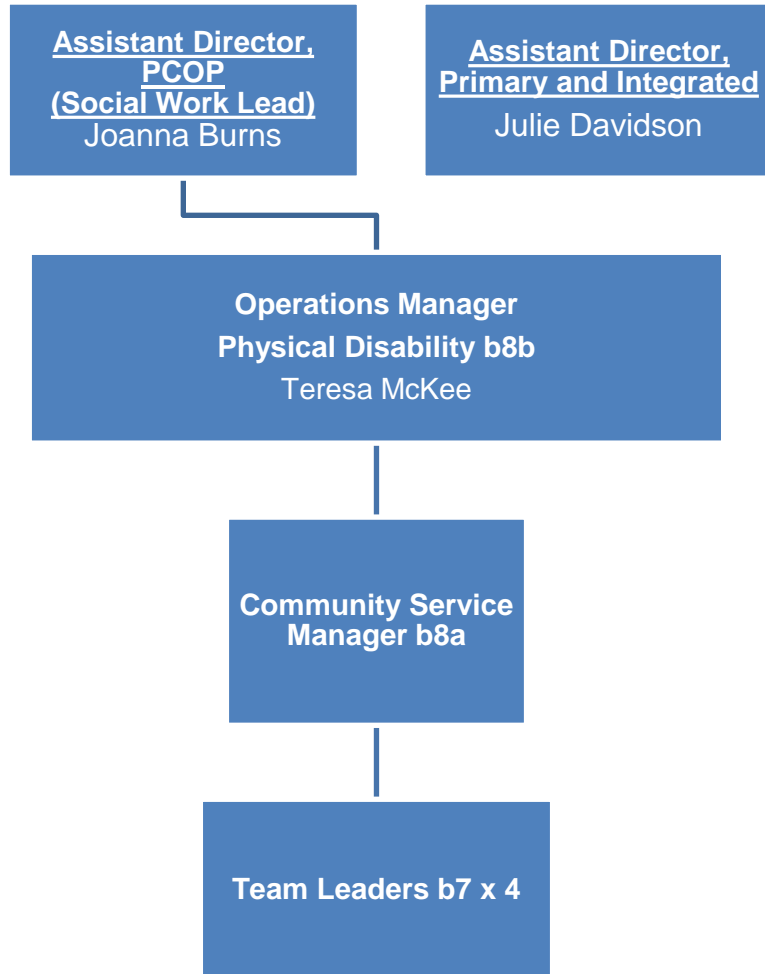
3.6	<p>Summary of areas where the Trust has not adequately discharged their Directed Statutory Functions for this Programme of Care.</p>	<p>Please outline remedial action taken to address this situation and any proposed future action.</p>
	<p>Physical Disability and Sensory Impairment Issues</p>	
	<p><u>Unable to meet the assessed need of service users of physical disability services, including those with complex needs due to lack of appropriate services, including supported living and care home placements.</u></p> <p>Difficulty accessing appropriate placements, particularly those with complex needs including alcohol related brain injury.</p> <p>Physical disability service users continue to have limited choice of living options including domiciliary care, supported living, interim care beds, care home placements.</p> <p>This could impact choice and availability for children transitioning to adult services</p>	<ol style="list-style-type: none"> 1. Raised commissioning requirements regionally and participate in regional planning. 2. Creative approaches to delivering services to meet assessed need e.g. direct award contracts to nursing agencies and scoping of potential options. <ul style="list-style-type: none"> • Use of the self-directed support framework to create bespoke individual plans. • Individual business cases to be completed as and when required. • Partnership and engagement with Children’s social work and nursing team. • Trust Community Care Forum reinstated where issues in relation to demand and capacity are discussed.

<p>Summary of areas where the Trust has not adequately discharged their Directed Statutory Functions for this Programme of Care.</p>	<p>Please outline remedial action taken to address this situation and any proposed future action.</p>
<p><u>Noncompliance completing annual reviews for service users within the physical and sensory disability service area</u> A number of annual reviews have not been completed within the required time scales. The current annual review compliance level for the service is 78%, this has increased from 29% in the last reporting period.</p>	<p>A database is held at team level and is reviewed through the supervision process and also by senior management on a monthly basis. The service is developing a number of key performance indicators to be monitored. This will enable ongoing targeted action to increase compliance.</p>

The following issues have also been carried over from the 2024/25 Action Plan and have been RAG rated through the regular interface meetings between the Trust and the SPPG.

Issue	RAG
Accuracy of Data due to introduction of Encompass	

Adult Physical Disability Services – Professional Organisational Chart



ADULT LEARNING DISABILITY

4.0 Adult Learning Disability Services Adult Services and Prison Healthcare Directorate

4.1 Named Officer responsible for professional Social Work

Clare McStay, Assistant Director is the named officer responsible for professional social work within Learning Disability Services.

There have been no changes to the senior management structure since the last reporting period.

1wte b7 Team Leader post remains vacant following recruitment processes. Further recruitment in process.

Please see organisational structure on page 38.

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

Vacant social work posts have reduced from 9.48wte to 4.8wte within this reporting period. All remaining vacant posts will be included within the Graduate Social Work Recruitment commencing April 2025.

The significant escalation in the acuity of the service users within Learning Disability Services and the increase in statutory functions with the implementation of the Mental Capacity Act, poses ongoing challenges for this workforce. This is further impacted by the initial limitations of the b5 AYE role.

In addition to this, to ensure consistency with the regional transfer process, children will now transition to adult services at 18 years old rather than 19 years, from June 2025. This will have a further impact on workforce capacity. A business case is currently being developed to support the recruitment of a transitions worker.

In this reporting period, 3wte b7 Senior Practitioner posts have been appointed. The implementation of this role has enhanced the knowledge and skills within teams to work directly with more complex service users and support other team members.

However, all teams continue to be reliant on the input of additional bank social work staff to increase compliance with statutory functions.

A full analysis of social work tasks and processes has commenced to support future workforce planning and recruitment.

4.3 Supervision arrangements for social workers

The Learning Disability Service implemented the new Social Work Supervision Policy from September 2024.

The Down and Lisburn Sector is compliant with the new framework

There is partial compliance with the supervision framework within the North Down and Ards Sector. This is as a result of vacancies and long term sick leave in both social work posts and 1 team leader post.

A contingency plan is currently being developed for operational and professional supervision utilising the senior practitioner and other senior managers.

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

The data provided in this report has been collated both from the Encompass system and manual databases.

The Learning Disability Service has completed some of the historical data migration onto Encompass which has increased the reliability of data in those particular areas (1.4). There remains a significant amount of historical data to be migrated into Encompass for Learning Disability Services. Given the competing demands for staff, additional resource will be required to complete this task. An action plan will be completed for the coming year to enable, further manual migration of historical data. This will increase reliability of the data from Encompass in the future.

There continues to be significant areas of anomalies with reporting from Encompass. Due to the complexity of many of the workflows used for statutory functions, end user workflow errors continue to impact on the robustness of the current data. A review of a number of the workflows has identified some build issues which were impacting on reporting. This has enabled liaison with Encompass colleagues to provide additional support and demos for staff and some changes made to the workflows to aid compliance.

A significant amount of remedial work will be required to resolve previous workflow errors, which are impacting on the robustness of the current data. This will require liaison with Trust colleagues and Encompass. Regular meetings are in place to assist in addressing issues.

Learning Disability services also have a plan to complete focused reviews of the relevant workflows with staff to further support compliance.

4.5 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	2
Domestic Homicide Reviews	0
Case Management Reviews	0
Mental Health Review Tribunals	0
Judicial Reviews	1
Audits	3
RQIA Inspections	10
RQIA Enforcement notices – Failure To Comply Notices	0

Serious Adverse Incidents:

Both of the Serious Adverse Incident reviews completed highlighted the ongoing difficulties for service users as a result of the lack of access to specialist inpatient beds. Early Alerts have been completed where relevant.

Both of the reviews highlighted the need for the implementation of the new Learning Disability Service Model as a matter of urgency, to address the current lack of community infrastructure for service users.

One of the reviews also highlighted the inadequacy of the current regional care home contract for service users with complex needs. The recommendation of the recent regional review of the care home contract are required to be implemented at pace.

Judicial Reviews:

Attempts have been made to resolve this without success and the service is awaiting a further date for hearing. The service was granted a Declaratory Order in relation to the same service user, in order to transfer from an Independent Sector residential home to a Trust statutory home in December 2024.

RQIA Inspections:

As a result of the impact of 1 of the SAI's and the declaratory proceedings, there has been increased liaison between the service and RQIA, strengthening the partnership working between the organisations.

RQIA completed an investigation into arrangements for the monitoring of quality, safety and effectiveness of care within residential learning disability services in the South Eastern and Belfast Trusts. The final

report has recently been completed and the Trusts are currently considering its recommendations prior to it being published. A copy of the report has also been submitted to the DoH for consideration.

RQIA have also commenced a Patient Inquiry into the care and treatment of a service user under Article 86 of the Mental Health (Northern Ireland) Order.

The Ombudsman's Office have also been made aware of the situation relating to the Patient Inquiry

4.6 Discharge of Directed Statutory Functions

4.6	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>Inpatient Services</p> <p>The Trust continues to face significant challenges in accessing Inpatient assessment and Treatment for adults with a learning disability (LD) who have Mental Health (MHL) issues.</p> <p>The service has longstanding issues accessing regional MHL beds resulting in patients being placed within mental health and acute wards</p> <p>More recently the service has faced a challenge accessing commissioned LD Psychiatry service into mental health wards, most specifically in relation to a suitable Registered Medical Officer (RMO).</p> <p>This places significant pressure on multi-disciplinary teams who are engaging in increased crisis intervention with clinically unwell service users within community settings.</p> <p>Currently the Trust has 2 delayed discharges – 1 in PICU, Downshire Hospital and 1 in Carrick Ward, Holywell.</p> <p>This issue is currently recorded as catastrophic on the Trust Corporate Risk Register.</p>	<p>Access to 1 inpatient LD bed within Carrick Ward, Holywell, however this is currently blocked by a Trust user due to delayed discharge, as there is no suitable community placement identified.</p> <p>Trust continues to engage in regional work re Inpatient provision linked to Learning Disability Service Model.</p> <p>Trust has submitted business cases re inpatient assessment and treatment and community assessment and treatment unit units to SPPG, but aware of need for regional model to be agreed.</p> <p>Trust continues to work with mental health colleagues to facilitate the admission of individuals with a learning disability where this is in line with assessed needs/risks.</p> <p>Trust continues to work collaboratively regionally to ensure access to inpatient care and treatment, in accordance with assessed need.</p>

<p>Children's Transitions</p> <p>There are continued challenges regarding service provision for individuals with a Learning Disability transitioning from Children's Services requiring bespoke supports and placements.</p> <p>Difficulties noted in relation to children with complex health and social care needs living in residential care and transitioning to adult services and securing placements for individuals with a forensic profile or discharging from the judicial system, requiring accommodation and support in the community.</p> <p>Contingency measures required to provide support to individuals in crisis can significantly impact on Trust ability to continue to provide short break services for other service users.</p> <p>In order to align with the regional processes the Trust will now transition all children into adult services at the age of 18 years rather than when they cease full time education. This will require additional resource and further impact on the capacity of community teams who are already facing significant workload challenges.</p> <p>Currently graded as a high risk level on the Trust Directorate Risk Register.</p>	<p>The Trust continues to work in partnership with the independent sector to provide bespoke placements.</p> <p>The Trust continues to explore local service provision options to enable individuals with a learning disability to live in community settings.</p> <p>The Trust continues to engage in the regional transition work being led by SPPG.</p> <p>The services continue to work in partnership within with colleagues from children's to develop robust internal pathways for children's transitions.</p> <p>Recruitment for 1wte Children's Transition Social Worker is in process. In recognition of the transition age lowering to 18 years. However, given the forecasted numbers for transition this will be insufficient resource.</p> <p>In addition there are some very complex young people transitioning within the next two years – in order to meet their placement needs the service will need to begin the transition process at an earlier stage to ensure a seamless transition.</p> <p>Adult service is not currently resourced to meet this need and this remains an inescapable pressure within the system.</p>
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	<p>Muckamore Abbey (MAH) Resettlement</p> <p>The Trust have 3 remaining service users in MAH.</p> <p>Currently graded as a high risk level on the Trust Directorate Risk Register.</p>	<p>A property has been secured for 2 patients with target for transition in June 2025.</p> <p>A resettlement plan was in place for the remaining patient, however due to presentation issues of a forensic nature this was deemed to no longer be suitable. Alternative options continue to be scoped but proving extremely difficult to commission, highlighting the need for a regional approach to accessing Forensic Services.</p> <p>The Trust continues to provide regular updates to SPPG about resettlements/ discharges via the Resettlement Tracker, CIP and Oversight and Assurance Meetings.</p> <p>The Trust continues to work towards safe discharge/resettlement in line with agreed timeframes.</p>
	<p>Continued increase in the number of adults requiring bespoke supports and placements.</p> <p>These individuals require high staff levels with specialist skills to meet their complex and challenging presentations. Independent Providers are reluctant to engage in this work given the lack of infrastructure to support and sustain placements.</p> <p>This has also resulted in the breakdown of current placements. Placement breakdowns and crisis intervention can result in emergency admission to short break facilities creating potential crisis in other areas. This has a significant</p>	<p>The Trust continues to work with service providers to support service users to remain in their communities and to prevent family/placement breakdowns.</p> <p>The Trust continues to work with colleagues to support growth of community provision aligned to work of the learning disability service model.</p> <p>The Trust is currently investing in its own statutory residential and supported living services to enhance staff skills and support to meet the needs of service users with complex and challenging presentations.</p>

<p>impact on the capacity of community teams, given the level of crisis intervention required.</p> <p>These placements also have a significant financial impact for the Trust, with significantly enhanced rates paid to providers alongside increased support from the Trust's multi-disciplinary team and intensive support services.</p> <p>The Home Office Certificate of Sponsorship Scheme is also increasing recruitment costs for Independent providers, which are passed on to Trusts. This is being curtailed by the inability of Trust's to engage with the Home Office scheme resulting in a reliance on agency staff.</p>	<p>The Trust continues to engage in the High Cost Cases Review and associated work being led by SPPG.</p> <p>The Trust's HR department is currently reviewing this.</p>
<p>Workforce Challenges</p> <p>4.8wte b6 social work posts are currently vacant.</p> <p>1 b7 Team Leader post remains vacant despite recruitment processes.</p> <p>Despite a reduction in the number of vacant posts, the significant escalation in the acuity of the service users within Learning Disability Services, increased crisis intervention as a result of a lack of community infrastructure and the increase in statutory functions with the implementation of the Mental Capacity Act, poses significant, ongoing challenges for the workforce. This is further impacted by the initial limitations of the b5 AYE role.</p>	<p>Remaining vacant posts will be included within the Graduate Social Work Recruitment.</p> <p>Further recruitment for the b7 post is in process.</p> <p>The implementation of the b7 Senior Practitioner role has enhanced the knowledge and skills within teams to work directly with more complex service users and support other team members.</p> <p>All teams continue to be reliant on the input of additional bank social work staff to increase compliance with statutory functions.</p> <p>Recruitment for 1wte Children's Transition Social Worker in process. However, given the forecasted numbers for transition this will be insufficient resource to cover the three sectors of the service.</p>

		A full analysis of social work tasks and processes has commenced to support future workforce planning and recruitment
	<p>Failure to complete care management and annual reviews within expected timeframes.</p> <p>The workforce challenges described above are impacting on the capacity of teams to complete core statutory functions.</p> <p>Currently 42% compliance for annual reviews being completed within required timeframes.</p> <p>The regional decision to implement NISAT within LD services has required the Trust to complete a full NISAT on Encompass at the point of review for all service users, which is slowing progress.</p> <p>Currently graded as an extreme risk level on the Trust Directorate Risk Register.</p>	<p>Noted that review compliance has increased from baseline of 25% at the end of March 2024.</p> <p>An action plan has been implemented (submitted to SPPG) with priority given to complete reviews for service users within placements. Trust continues to focus on the implementation of the action plan to increase compliance.</p> <p>Compliance tracked and reported to senior management team at the monthly Governance and Performance meeting.</p> <p>Additional resource via bank staff have been employed to support.</p>
	<p>Failure to complete reviews of service user finances</p> <p>The reduction in completion of annual reviews has impacted the completion of financial reviews for services users within residential, nursing and supported living placements.</p> <p>This has resulted in a number of service users having savings above the threshold for receipt of benefits, resulting in benefits being stopped and overpayments to be returned. For those within supported living placements this impacts on</p>	<p>Action plan in place for completion of annual reviews, with those in placements given priority.</p> <p>Action plan created in liaison with Trust Finance department.</p> <p>Additional resource via bank staff have been employed to support.</p>

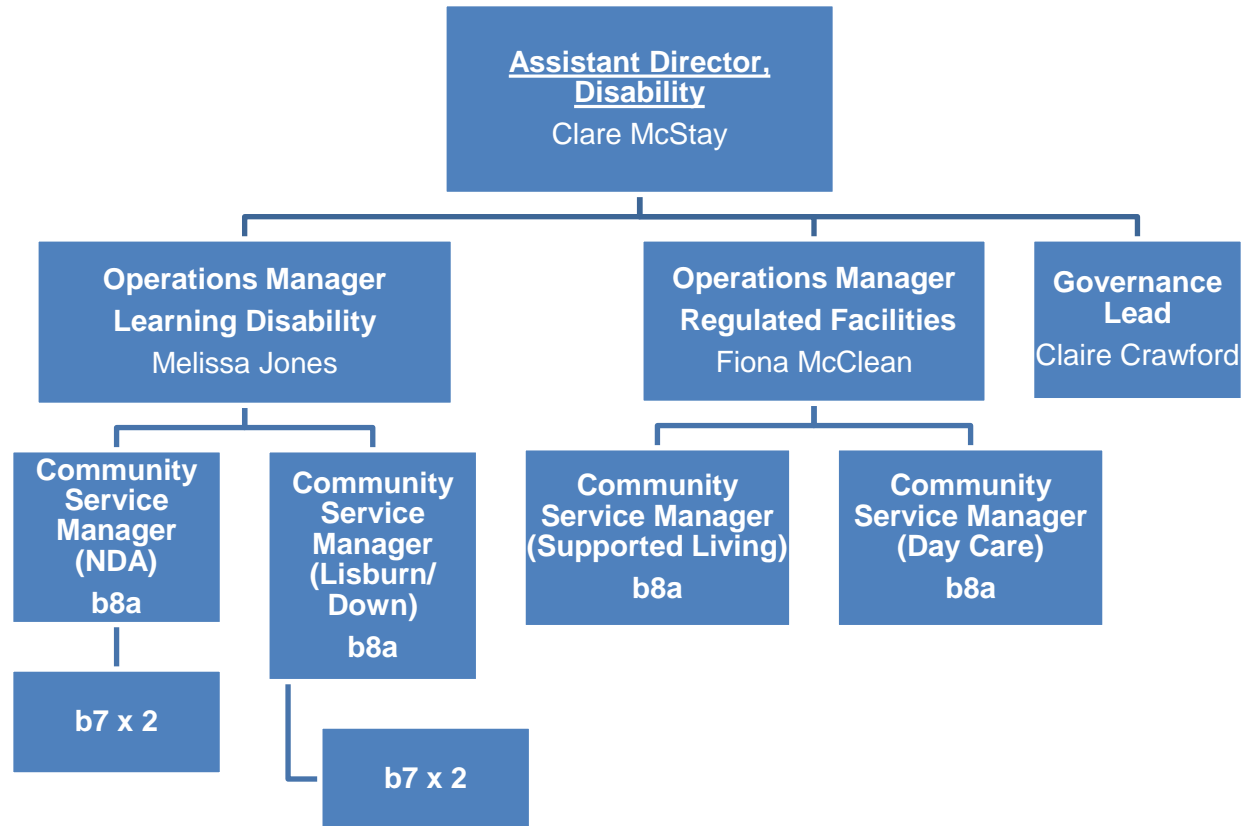
	<p>Housing Benefit and subsequent supporting people funding for the providers.</p> <p>Currently graded as a high risk level on the Trust Directorate Risk Register.</p>	
	<p>Reduction in the Completion of Carers Assessments</p> <p>91% increase (166) in the number of carers assessments offered in this reporting period.</p> <p>Whilst there has been significant progress in the number of Carers Assessments offered, the prioritisation of the completion of Annual Reviews for service users within placements, will continue to impact on capacity to complete the assessments. This is further compounded by the complexity of the Encompass Carer's Workflow, creating difficulties for staff for completion.</p>	<p>Newly appointed Carers Lead currently creating a Carers Database which will provide a baseline of assessments required. This will support the creation of an action plan and the ability to create a tracker for compliance.</p> <p>Additional resource via bank staff have been employed to support.</p> <p>The Trust continues to liaise with Encompass colleagues and staff to streamline the process as far as possible.</p>
	<p>Failure to complete Deprivation of Liberty applications under the Mental Capacity Act in a timely manner.</p> <p>Adult Learning Disability services currently have approximately 100 service users who have an Emergency Protection Template in place and require a full application to be processed.</p> <p>A number of issues have impacted on community teams ability to complete applications:</p>	<p>Full scoping exercise to be completed to collate exact numbers and wait times.</p> <p>Action plan to be developed in order to prioritise applications.</p> <p>Liaison with colleagues within the Trustwide Mental Capacity Act team.</p>

<ol style="list-style-type: none"> 1. Historical and current staff vacancies 2. New staff recruited but unable to fulfil this role due to AYE status or not having the requisite two years experience working with adults who lack capacity 3. Staff sick leave 4. High number of new placements / change of placements requiring new applications 5. Changes in the application of the legislation resulting in current approved applications being discharged and requiring new applications e.g. home addresses not being on the initial application. <p>Currently graded as a high risk level on the Trust Directorate Risk Register.</p>	<p>Scope of additional resource required to complete necessary applications to achieve compliance.</p>
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The following issues have also been carried over from the 2024/25 Action Plan and have been RAG rated through the regular interface meetings between the Trust and the SPPG.

Issue	RAG
Trust advised of significant decisions in relation to SAI, CMR, MHRT and JR	

Adult Learning Disability Services - Professional Organisational Chart



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PRIMARY CARE AND OLDER PEOPLE

5.0 Primary Care and Older People Services Nursing, Primary Care and Older People's Directorate

5.1 Named Officer responsible for professional Social Work

The named officer responsible for professional social work services is Joanna Burns, Assistant Director, Primary Care & Older People's Services.

There remains an unbroken line of professional accountability for social work.

During the reporting period, Hospital Social Work has strengthened senior management, with an additional 8a senior manager appointed in January 2025. This post is dedicated to supporting flow in hospitals across Trust boundaries; having a specific focus on complex delays in external hospitals. A b7 senior practitioner resource has also been reconfigured and temporarily dedicated to assist.

The changes made within the Hospital Social Work management structure has improved accountability and governance arrangements.

Within the Older People's Community Teams a further b8a senior manager post was created to strengthen the management structure and to offer greater oversight, governance and support to the 12 community teams. Additionally, the Trust appointed, at risk, 3.5wte temporary b7 Senior Practitioners. Whilst this has been of benefit, these posts are not permanently funded, and each team does not have an aligned Senior Practitioner.

The Care Home Support Team appointed a b7 team lead in January 2025.

Please see organisational structure on page 47.

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

Social Work Recruitment:

The Regional Recruitment process continues to be utilised to fill vacant social work posts, however, when the regional waiting list is exhausted, teams can face the untenable situation of holding vacant posts until the next recruitment intake.

The Hospital Social Work Teams were in this situation during this reporting period, and approval had to be sought from the Executive Director of Social Work to undertake a bespoke recruitment exercise process. This resulted in the timely recruitment and appointment of staff, filling urgent vacancies.

Recruitment can also be challenging for the Adult Protection Gateway Team. During this reporting period, the team faced recruitment challenges with a vacant Investigating Officer post. EOIs as well as the Regional Social Work waiting list were utilised to try to fill the vacant posts, without success.

In addition to the Regional Recruitment, the services have also made use of the Social Work Graduate recruitment programme whereby final year social work students are matched to vacant posts.

Social Work Vacancies:

As of 31st March 2025:

Service	Vacancy rates
Short Term Assessment Team	7.75%
Community Teams	5%
Adult Protection Gateway Team	14.29%

Social Care Recruitment:

Recruitment & retention of staff within the statutory Care Homes remains challenging. The Trust has developed a bespoke workstream focusing on recruitment, retention and career progression with the aim of addressing the recruitment challenges.

Within the Trust Homecare Service, the Management of Attendance protocol consistently applied to support staff back to work following periods of absence. Routine recruitment continues, focusing on specific localities where the need for Homecare Services is greater. This approach has helped stabilise the workforce and has assisted with maintaining a focus on addressing unmet need.

Social Care Vacancies:

Service	Vacancy Rate
Homecare Service (b3)	7%
Day Care Services	5%
Supported Living	5.48%
Statutory Care Homes	
b3	15%
b5	20%

The Trust Homecare Service remained on the Directorate Risk Register during this reporting period, due to the unmet need, demand and capacity challenges. However, due to further significant improvement in reducing the unmet need, the Homecare Service will be removed from the Directorate Risk Register. At the end of the reporting period, unmet need equated to 98 care packages/886hours.

Workforce Planning:

A number of areas have seen increased demand for services over this reporting period.

Services	Activity
Hospital Social Work referrals	12% increase
Adult Protection referrals	14% increase
MARAC activity	22% increase
Community Teams	11.5% increase

The lack of investment in older people's services is placing teams in an increasingly precarious position and is stalling reform that is needed in order to stabilise the workforce to meet the growing demands within older people's services.

5.3 Supervision arrangements for social workers

The Trust fully implemented the Social Work (NI) Supervision Policy (2024) in September 2024. All older people's services have supervision plans in place for all social workers.

Professional Social Work supervision is being undertaken in accordance with the guidelines for AYE social work staff.

Team	Compliance rate
Short Term Assessment Team	90.75%
Hospital Social Work Teams	88%
Community Teams	80%
Care Home Support Team	90%
Adult Protection Gateway Team	89%

This year greater emphasis will be placed on completing audits of supervision records. This audit activity will be reviewed in accordance with monthly governance reporting.

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

The data provided in this report has been sourced almost entirely from manual databases which have been retained by operational teams. Despite the Encompass system having been implemented across adult services in November 2023, the ability to produce accurate reports remains problematic due to issues with data quality, build issues and end user errors.

Teams have been heavily reliant on manual data collection for accurate information, placing additional administrative pressures on teams and has added to workloads.

Areas that have been particularly affected since the introduction of Encompass include:

- SDS recording and reporting
- Care Management Reviews
- Complex Discharge information
- Service specific Activity and Performance reports
- DAPO
- Carers Activity reports

Trust staff have been working alongside Epic to try to resolve the reporting issues, however, resolution of these issues will take time and are already impacting reporting for 2025/26.

5.5 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	0
Judicial Reviews	0
Audits	0
RQIA Inspections	11
RQIA Enforcement notices – Failure To Comply Notices	0

RQIA Inspections (Statutory Care Homes)

Unannounced Care Inspection (Laurelhill House) identified areas of improvement including audit of action plans, oversight of mandatory training compliance, review of individual assessments and care plans. All areas have been actioned.

Unannounced Care Inspection (Northfield House) identified areas of improvement including mandatory training compliance and audits of care practises and action plans implemented. All areas have been actioned.

Unannounced Care Inspection (Newcroft Lodge) identified an area of improvement in the recording of pre-admission assessments on Encompass, ensuring that residents care plans for DOLs have sufficient detail. All areas have been actioned.

Unannounced care inspection (Ardview House) identified areas of improvement including recording and completion of person centred documentation.

Unannounced Care Inspection (Drumlough House) identified areas of improvement including recording of pre-admission assessment on Encompass, completion and review of individualised risk assessments and ensuring that progress notes are person centred.

RQIA Whistleblowing

In October 2024, the Trust received a referral from RQIA regarding whistleblowing allegations relating to Mount Alexander residential home. An adult protection investigation was undertaken. The majority of allegations were unfounded and other areas for improvement were addressed under the SAI recommendations.

Morbidity & Mortality Meeting undertaken by Women and Acute Child Health

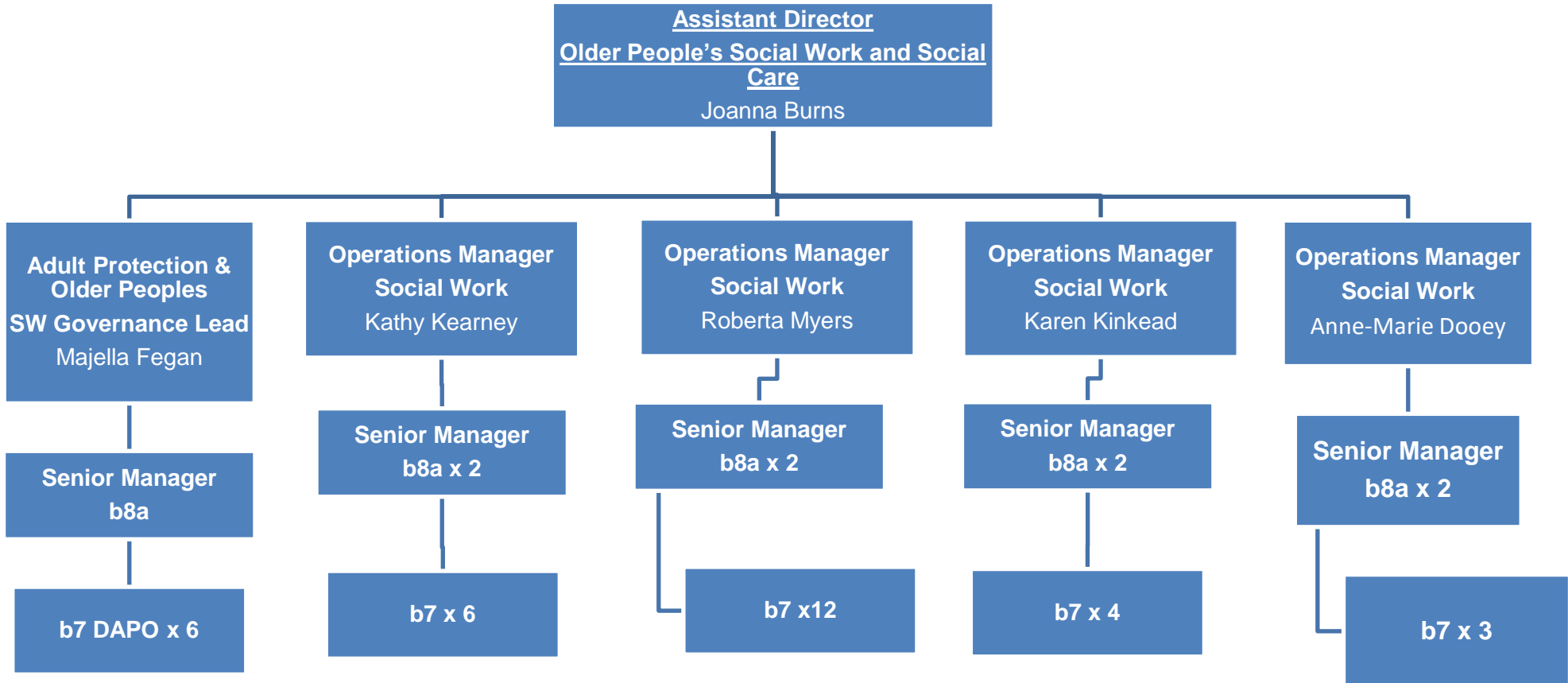
A Morbidity & Mortality Meeting is legally required following a maternal death. The Children's & Maternity Hospital Social Workers were involved in the case which was the subject of the review. . No follow up recommendations were made in relation to Hospital Social Work as the Hospital Social Worker was recognised for their input in the case and for maintaining very good communication

5.6 Discharge of Directed Statutory Functions

5.6	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 Issues		
<p>Annual Care Management Reviews</p> <p>At the end of this reporting period, the Care Home Support Team had achieved 91% compliance with annual care management reviews. This is an 8% increase from March 2024.</p> <p>The Older People's Community Teams achieved 77% compliance with annual care management reviews at the end of this reporting period.</p>		<p>Senior management within the Care Home Support Team are revising the timetable of reviews across the year to ensure a more balanced and consistent approach across the calendar months. In addition the team are developing a caseload weighting model. Both measures, in addition to a fully staffed workforce will endeavour to ensure 100% compliance at year end March 2026.</p> <p>The Older People's Community Teams submitted a business case to SPPG almost 2 years ago, setting out the challenges facing community teams at the time and predicting increasing challenges in the future. A small amount of non-recurrent funding was allocated for use in the community teams prior to the end of this reporting period. This funding has been allocated towards the 'at risk' funding the Trust provided for 3.5wte b7 Senior Practitioner posts. During 2025/26 the Community Teams Operations Manager and Senior Managers aim to take forward an extensive reform programme which has the potential to transform the community teams, providing greater governance and oversight regarding statutory functions and social work practice. The ability to follow through fully with the reform programme will be dependent on the availability of additional funding.</p>

	Statutory Care Home Beds	Due to ongoing staffing challenges not all beds across the Trust are being utilised. To maintain safety and standards, bed numbers have been reduced to reflect staff availability. This remains under constant review. As more staff are recruited, bed occupancy will increase.
	Encompass – data/activity/performance reporting	Operational teams have taken remedial action and have retained manual reports, this however, is unsustainable and the expectation is that once all Trusts are live on Encompass, the Epic Teams will address issues during the Optimisation Phase. Epic are currently providing support via Sprint Sessions to address a number of reporting issues for each Directorate impacted in the Trust.

Primary Care and Older People Services - Professional Organisational Chart



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CHILDREN AND YOUNG PEOPLE CARE SERVICES

6.0 Children and Young People Care Services Children's Services and Social Work Directorate

6.1 Named Officer responsible for professional Social Work

There remains an unbroken line of professional accountability.

The named officers responsible for professional social work are Marie-Louise Sloan and Maurice Largey.

Marie-Louise Sloan continued as Assistant Director for Lakewood Regional Secure Care Centre, Residential and Leaving & Aftercare Services.

Maurice Largey continued as Assistant Director for Children with Disabilities, Fostering, Permanence & Adoption Services.

The Trust appointed a permanent Head of Service to Lakewood and this post commenced in April 2024.

Recruitment is proceeding to fill an Early Years' manager (8a) post.

Please see organisational structures on pages 57 & 58.

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

Recruitment

There have been fluctuating vacancies across all services and the Trust continues to be pro-active in securing additional social work staff through targeted recruitment drives and regional recruitment processes.

Children's Disability Services

The services capacity to deliver upon its statutory functions was significantly impeded in this reporting period by vacancy and sickness rates. The service has developed a new staffing model, introducing a skill mix in the three community teams to address the social work vacancies and reduce the unallocated cases.

In October 2024, the Minister of Health allocated £2.4 million to the Children's Disability Service in the Trust. The Trust has responded to the Regional Business Case detailing the levels of spend across the Children's Disability Framework and its central priorities of Early Help, Residential Short Breaks, Residential Care and Transitions.

The Children's Disability Services has submitted two business cases to the SPPG, seeking funding for Greenhill and Redwood. The Greenhill funding has been secured and the Trust will recruit at risk to Redwood. This staffing model is consistent with the recommendations

of the Regional work stream for residential care. The staffing model has enhanced the minimum banding to b4 support worker, which is commensurate with the needs profile of the children.

A dedicated recruitment campaign was successful in the appointment of 20 staff to enable the opening of a new residential Children's Home (Redwood).

Regional Secure Care Centre (Lakewood)

The social work vacancy across the service at report end is 4%, a 10% reduction from last year. There continues to be a deficit in the skills mix needed to support young people with a diagnosis of learning disability, autism and attention deficit hyperactivity disorder.

The Trust have funded a number of pivotal posts at risk on a temporary basis recruiting 9 permanent posts across the service. Whilst this will stabilise the team and reduce the level of dependency on bank/overtime, additional staffing is still required to meet safe staffing requirements. A financial review is currently underway between the Trust and SPPG.

The Trust has been actively undertaking bespoke recruitment processes for bank staff that will support contingency arrangements for the Centre. This is to meet the challenges in delivering the service due to an increased level of staff sickness as a result of the level of aggression from children to staff and the overall challenge of managing the group dynamics within the centre.

The Senior Management Team worked with SPPG commissioning lead to conclude a service specification for Lakewood which sets out the remit, staffing complement and escalation processes. A business case has been submitted to SPPG for finance review and allocation moving forward.

Residential Services

A workforce paper continues to be considered by Children's Services Reform Board work stream 3.

The residential homes have continued to progress b4 & 5 recruitment in line with delivering a skills mix in residential care. The current vacancy rate across b4 & 5 residential care staff is 28.1%. The vacancy rate has decreased following recruitment activity to recruit against b4 waking night staff in line with move from agency use. The current vacancy rate across Social Work in residential care is 6.8%.

The Trust has continued to deliver an Edge of Residential care outreach support model to deploy crisis support 24/7 to children presented to panel for Residential Care. The staff team is made up of 1x b7, 2x b5 staff and has access to up to 27 bank staff.

Fostering, Permanence and Adoption Service

The Service has benefited from a full staffing complement throughout the reporting period. A service review was carried out and the Intensive Fostering service was amalgamated into the Support and Development and Recruitment and Assessment teams to enhance capacity.

Early Years' Service

The b8a manager has taken a career break and the service is seeking a suitable replacement.

Leaving Care Services

The Leaving Care And Aftercare Service has experienced a vacancy rate across the service of 13% at reporting end. The service has continued to reconfigure vacancies to create a team specifically for UASC, this did address all vacancies at a point however there has been further movement in service.

6.3 Supervision arrangements for social workers

No, the Trust have not been compliant with the regional supervision policy. There is a current compliance rate within this sub-directorate of 84%, an increase of 23% from last reporting period. The compliance rate continues to be impacted by staff vacancies and absence as well as the ongoing pressures across the services.

The implementation of the new Regional Supervision Policy continues to be progressing well across the sub directorate.

An action plan to support continued improvement with supervision compliance is currently being developed. Actions for improvement include; improved assurance mechanisms for tracking supervision frequency. There will also be practical support for managers to increase reflective conversations and recording within supervision.

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

The Trust considers the data provided in this report to be robust, with the data entered into reporting systems being rigorously quality assured by governance leads, senior management and performance colleagues.

The development of the Children's Services Governance, Assurance and Improvement Team (GAIT) across the directorate provides an additional structure to review and quality assure the data. GAIT are focused on developing improved and robust processes for gathering data which provide additional assurances regarding the sub directorate delivering safe and effective care.

A system to track unallocated cases was introduced within children's disability in 2022. Ongoing vacancy issues have impacted in the services ability to respond to all cases, leading to children's disability

having 462 unallocated cases at report end. The numbers impede the full application of the CUP process of regular review. However the database is maintained to enable the cases to be tracked and escalated if necessary. The Service has developed a new staffing model which will significantly increase the allocated total.

6.5 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	7
Domestic Homicide Reviews	0
Case Management Reviews	0
Mental Health Review Tribunals	0
Judicial Reviews	2
Audits	As per CYPSCS audit schedule
RQIA Inspections	10
RQIA Enforcement notices – Failure To Comply Notices	3

Serious Adverse Incidents (SAI)

There is ongoing work to learn through the thematic analysis of Datix incidents to support pre-emptive action to reduce reoccurring themes in SAI's.

A reduction in time taken to complete a SAI report by 74% (n = 45 weeks) ensures that timely learning is shared through a range of mediums to all staff. The improvements and learning within this area are also being shared regionally.

Lakewood and Residential Care:

The themes centre on young people engaging in behaviours which places themselves or others at risk of harm. Identified areas for improvement from SAIs are addressed through training, resources and improved escalation processes being embedded across the service areas.

Disability Services:

Within Children's Disability service there has been one SAI in the reporting period in relation to the management of an incident with a young person. Learning from this incident has focussed ongoing improvements on the management of incidents with young people in residential care.

Judicial Reviews

There were 2 Judicial Reviews within this reporting period in relation to placements within Lakewood, both were dismissed by the High Court.

RQIA Inspections

Children's Residential

In this reporting period RQIA completed unannounced inspections across all 7 residential homes and 3 children's disability homes. The inspections across the homes have identified positive practice and subsequent quality improvement plans to address staffing challenges, and meeting complexity of need.

Throughout this inspection activity; there were 2 residential homes issued with Serious Concerns. There was 1 children's disability home which was issued with 3 Failure to comply notices.

Failure to comply notices were received in relation to issues of leadership, governance, staffing and restrictive practices. RQIA outlined significant deficits in staff induction, training and competency assessments. Restrictive practices were being used contrary to regional guidance and in the absence of governance oversight. In response the Trust have submitted a significant quality improvement plan and have enhanced the front line management within the Home with the addition of an 8a governance lead who has been based in the Home with the aim of improving compliance with regulatory standards.

There have also been recurrent themes noted across all service areas regarding the recording, review and use of restrictive practices. Improvements across this area are currently being progressed by GAIT and the operational teams for improvement.

Lakewood

During this reporting period, Lakewood has had 1 inspection. Areas for improvement included; the ongoing embedding of the healthcare and therapeutic teams within Lakewood, the impact of staffing shortages on the Centre, the recording of significant incidents as well as deficits in training compliance and the mix of training offered to staff.

There is currently ongoing targeted work within Lakewood to address the areas for improvement raised through the inspection activity.

Overall, GAIT is working closely with the operational teams across these services to ensure that improvements are spread and scaled to promote consistency across the services. There is also ongoing work to improve Monthly Monitoring arrangements to promote improved assurance mechanisms across the services


Internal Audit

CYPCS have developed an annual audit schedule to provide assurance in key areas of practice. The governance priorities within Children's Services for 2025/26 will focus on a consistent and robust audit schedule across the directorate.

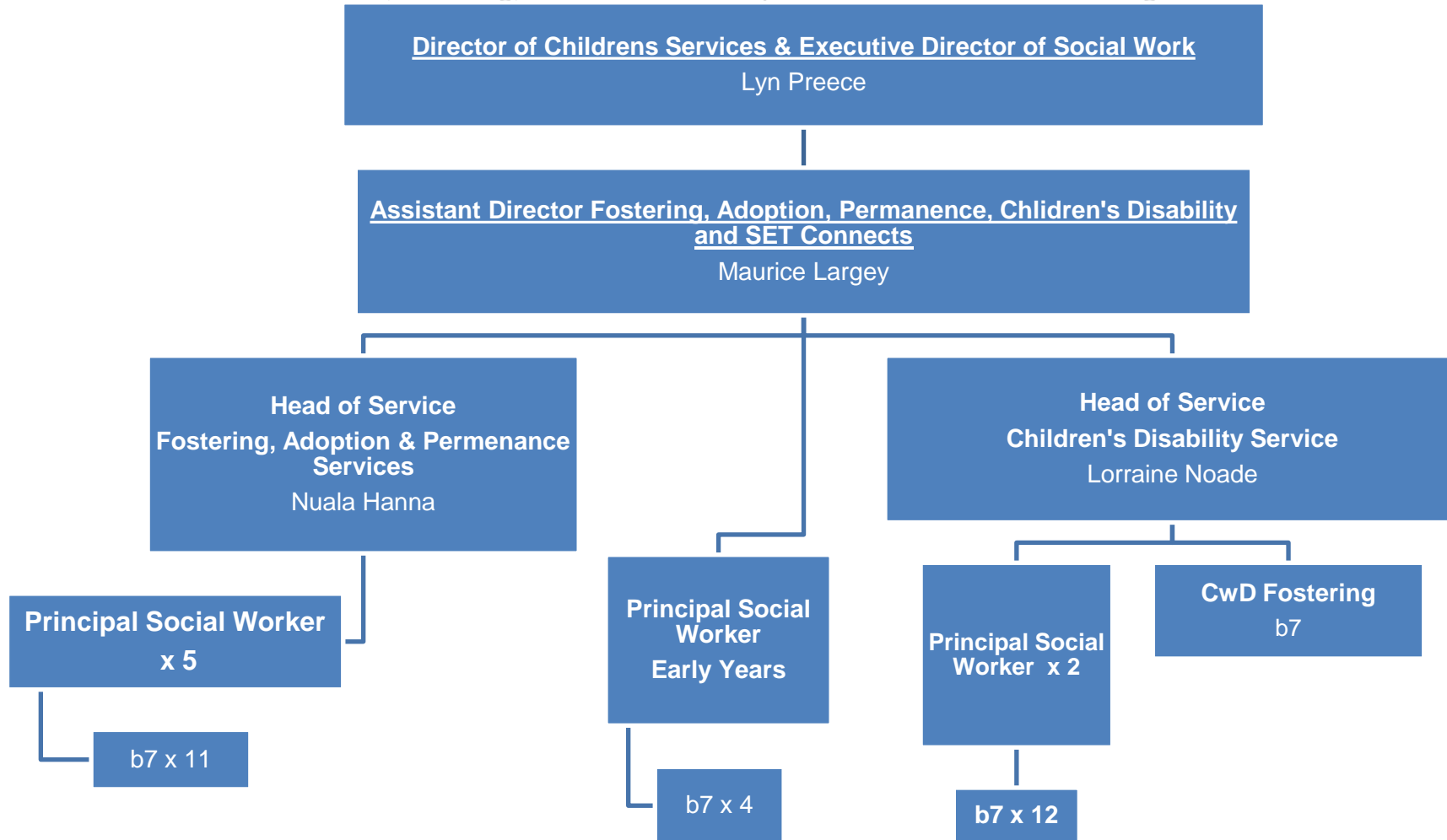
6.6 Discharge of Directed Statutory Functions

6.6	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>Separated Children / Unaccompanied Children</p> <p>Pressure continues in meeting the needs of separated or unaccompanied asylum seeking children. The Trust is accommodating 80 such young people as at 31 March 2025 which is an increase of 24 in this reporting period. There are significant pressures on the Trust to secure appropriate and timely accommodation to meet the needs of these young people.</p>	<p>The Trust has purchased 3 x homeless assessment beds in the Jointly Commissioned Accommodation providers to ensure access to safe accommodation upon entry; with plans to make this a permanent arrangement.</p> <p>The Trust also has a contract with a provider with regards to temporary accommodation for this population more generally.</p> <p>The Trust continues to participate in the regional UASC working group in relation to the expansion of accommodation options.</p>
	<p>Bespoke Placements</p> <p>There are 3 children currently placed outside of NI. There is 1 child placed in England in a high cost arrangement which was previously ECR; they will return to NI by end April 2025. There are 2 children placed in high cost residential placements in Rol and there are 4 young people placed in a high cost residential placements in NI as cost. There are 2 young people leaving care who are in bespoke high cost placements in April 2025.</p>	<p>The Trust's residential strategy considers the needs of all children who require residential care including those requiring bespoke arrangements.</p> <p>The Trust has taken a needs led approach to the procuring of all bespoke arrangements; adhering to the processes for options appraisal and business case development.</p>

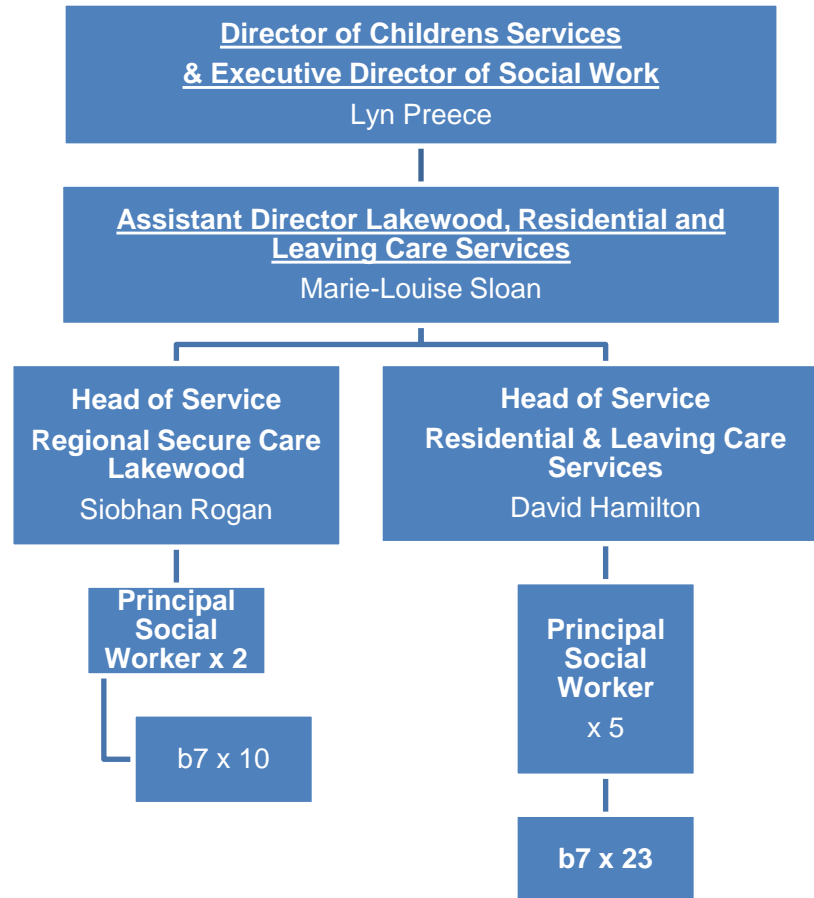
		<p>The Trust continues to deliver improvements in the residential estate and consider potential re-configuration to better meet the needs of this population of children.</p>
	<p>Demand for Lakewood services can't be met due to capacity issues / workforce. Lakewood's ability to meet this need is currently reviewed on the Corporate Risk Register</p> <p>The centre uses a Risk Needs and Dynamics Assessment to provide data on occupancy and complexity of need across the Centre. Occupancy was at 12 at report end.</p> <p>The Senior Management Team worked in partnership with SPPG to finalise a service specification for Lakewood which became operational in December.</p>	<p>The following steps have been taken:</p> <ul style="list-style-type: none"> • A bespoke bank recruitment advert has been released to further enhance the utilisation of bank staff • A 'Reduced Staffing Contingency Plan' has been implemented by Senior Management whilst the deficits in staffing continue. • The Lakewood Management Team have stood down some non-essential governance tasks to improve staff capacity in the day to day running of the Centre. • Additional support has been provided to enable staff to return to and/or remain in work. • To improve the experience for young people in the Centre, the Management team continue to request in reach support from referring Trusts and relevant agencies to ensure young people are accessing community outings and keywork sessions. <p>A business case has been submitted to SPPG in January and is under review. If approved this could provide a more sustainable contingency moving forward.</p>
	<p>Unallocated Cases/ Waiting List</p> <p>The Children's Disability Service continues to experience a high level of unallocated cases.</p>	<p>A corrective action plan is currently in place with governance systems implemented which monitor risk and prioritise need. Additional funding received from DoH will enable the implementation of a new staffing model in the next reporting period.</p>


	<p>Residential Short Breaks</p> <p>The Trust is delivering limited Residential Short Breaks having repurposed the two Short Break Homes to accommodate children with a longer term care plan.</p>	<p>The Trust has plans to open a new longer term Home in September 2025 and to increase the provision of Short Breaks.</p>
	<p>Children's Disability Service</p> <p>The Children's Disability Service is registered on the Directorate and Corporate Risk Registers due to its inability to meet the trajectory of young people requiring services and short breaks.</p>	<p>Action plan progressing and quarterly updates provided to Oversight Committee.</p>
<p>The following issues have also been carried over from the 2024/25 Action Plan and have been RAG rated through the regular interface meetings between the Trust and the SPPG.</p>		
<p>Issue</p>		<p>RAG</p>
<p>Workforce – High vacancy levels across Children's Services</p>		

Children with Disabilities, Fostering, Permanence & Adoption Services.- Professional Organisational Chart



Lakewood Regional Secure Care Centre, Residential and Leaving & Aftercare Services Organisational Chart



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

**CHILDREN'S SERVICES
FAMILY SUPPORT &
SAFEGUARDING**

7.0 Safeguarding & Family Support Children's Services & Social Work

7.1 Named Officer responsible for professional Social Work

The named officer responsible for professional social work is Jason Caldwell, Assistant Director for the Safeguarding & Family Support sub-directorate.

There remains an unbroken line of professional accountability for social work.

Please see organisational structure on pages 66.

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

The Safeguarding sub-directorate has 17 unfilled permanent and temporary social work posts. Vacancies account for 25% of funded social work and social work support staff, with significant social work vacancies in the Ards sector proving difficult to fill.

17 wte b5/6 posts – recruitment underway through regional recruitment processes.

Skills mix is being utilised in the Down and Ards sectors whilst recruitment is ongoing with b4 family support workers, b5 youth workers and additional administration staff temporarily recruited to support teams experiencing chronic social work vacancies. However, there are also currently 5wte b4/5 support staff vacancies as these posts have also proven difficult to recruit and retain.

There are ongoing regional issues with workforce availability and recruitment; the Children's directorate is working in partnership with DoH and OSS in respect of safe staffing/workforce supply.

CORU

There is 1 dual registered social worker within the sub-directorate.

7.3 Supervision arrangements for social workers

No, the Trust have not been compliant with the regional supervision framework. There is a current compliance rate within this sub directorate of 92%, an increase of 4% from the previous reporting period.

An action plan to support continued improvement with supervision compliance is currently being developed.

Actions for improvement include; ongoing implementation of the new supervision policy as well as improved assurance mechanisms for tracking supervision frequency. There will also be practical support for managers to increase reflective conversations and recording within supervision.

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

The Trust considers the data provided in this report to be robust, with the data entered into reporting systems being rigorously quality assured by senior management alongside Trust information performance colleagues.

The development of the Children's Services Governance, Assurance and Improvement Team (GAIT) from October 2023 across the directorate provides an additional system to review and quality assure the data.

An example of good practice; in respect of number of cases on the waiting list for a social work service (unallocated), data is reported weekly by managers on the number of cases on the waiting list across Safeguarding.

This data informs monthly reporting to the Trust's Executive Management Team, Trust Board and SPPG. The governance mechanisms for waiting list data assurance is also overseen by the Children's Services Waiting List Oversight Group chaired by the Assistant Director for Safeguarding which meets monthly.

- 7.5 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>	1
<i>Case Management Reviews</i>	1
<i>Mental Health Review Tribunals</i>	0
<i>Judicial Reviews</i>	0
<i>Audits</i>	1
<i>RQIA Inspections</i>	0
<i>RQIA Enforcement notices – Failure To Comply Notices</i>	0

Domestic Homicide Review (DHR)

DHR C – This DHR remains paused due to criminal proceedings. All actions identified in the Trust’s internal learning review are either completed or underway within the agreed timescale.

Case Management Review (CMR)

N- CMR – This CMR report was received in January 25, there were no specific actions for SET. There was one generic recommendation for the Training & Governance ADs in Trusts regarding the development of enhanced professional curiosity and appreciative training for front line staff and supervisors which is being progressed.

Audits

Safeguarding have a clear audit schedule to provide assurance in key areas of practice. The 2025 PLAC audit is currently underway and the Child Protection Register 2 Years Plus and GAIN audits are scheduled in the coming months; the outcome of these audits will be reported in the next Statutory Functions report. It has been noted that the Supervision audit was completed in March 25 and evidences a further improvement from the last reporting period with an increase of 4% from 2024 to 92% compliance in 2025.

The governance priorities within Children’s Services for 2025 / 2026 will focus on a consistent and robust audit schedule across the Children’s Directorate. This work will be led by GAIT alongside the operational teams.

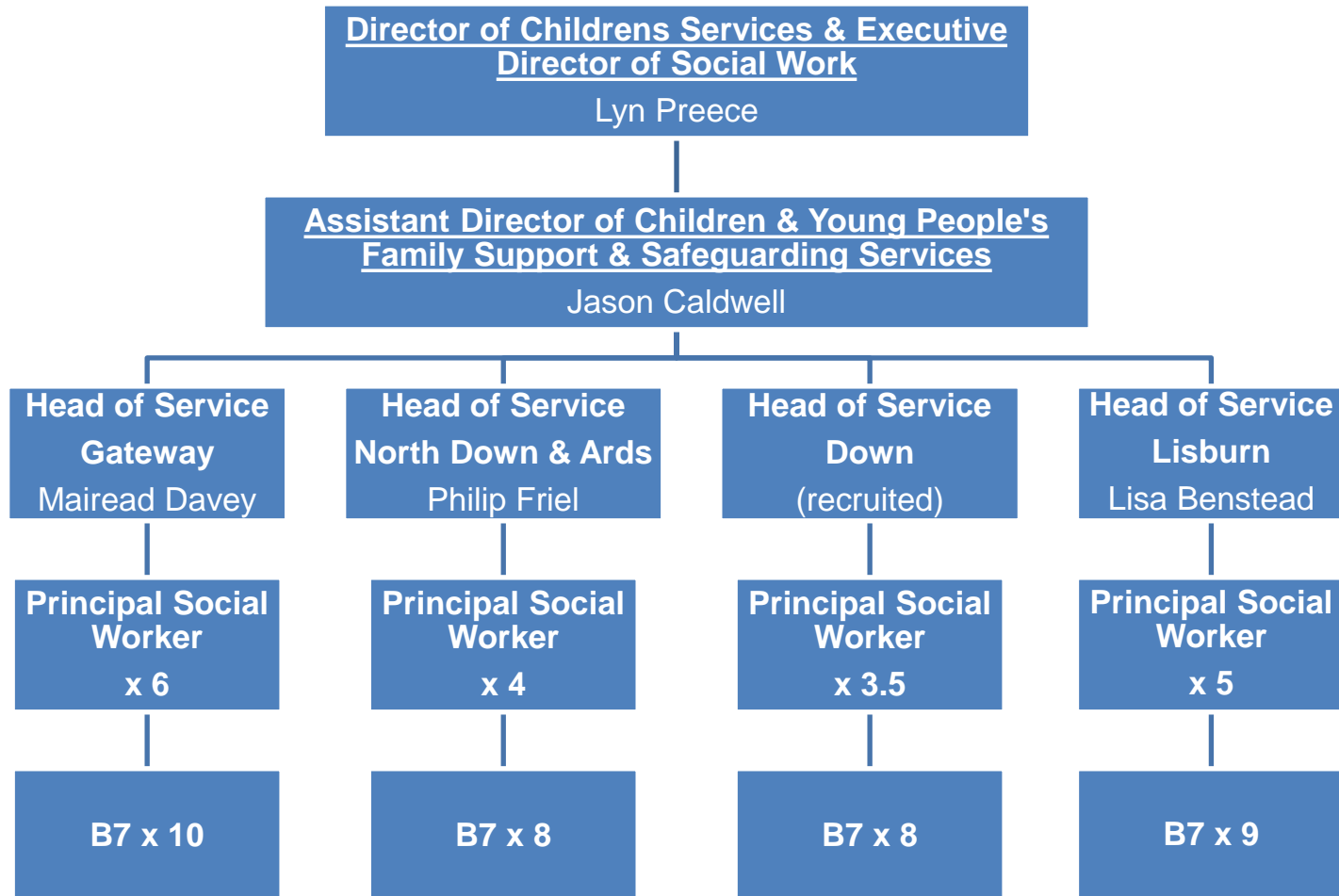
7.6 Discharge of Directed Statutory Functions

7.6	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	
	Cases Waiting for a Social Work Service (Unallocated)	<p>In respect of the management of the waiting list to receive a social work service (unallocated), the Collaborative Unallocated Process (CUP) model is now implemented across all Safeguarding Child & Family Teams to ensure there continues to be both ongoing triage and robust governance in respect of all those children/families on the waiting list.</p> <p>Sustained workforce issues within Safeguarding, Gateway and Children's Disability have resulted in increased numbers of cases awaiting allocation. Despite sustained efforts to recruit and retain social work staff there continues to be over 20% vacancy rate in social work posts resulting in a continuing need to prioritise caseloads to meet the statutory demands.</p> <p>Cases that have been triaged following an initial assessment and reviewed through the CUP process are all assessed to be low risk to remain on the waiting list (Unallocated). The Children's Services Waiting List Group jointly chaired by the Safeguarding and Children's Disability ADs ensures added oversight, monitoring and governance.</p>

The following issues have also been carried over from the 2024/25 Action Plan and have been RAG rated through the regular interface meetings between the Trust and the SPPG.

Issue	RAG
Workforce – High vacancy levels across Children’s Services	
Gateway referrals not recorded on the SOS CARE data system	

Family Support and Safeguarding Services.- Professional Organisational Chart





**CORPORATE PARENTING
REPORT (CC302)**

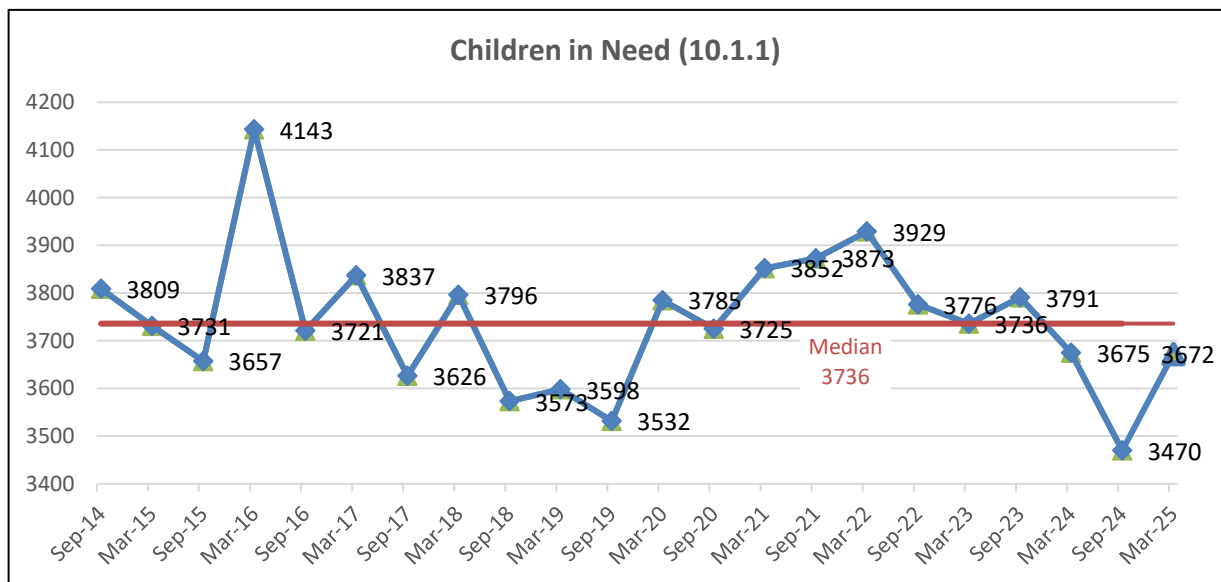
Children (NI) Order 1995 10.1 CHILDREN IN NEED

10.1.1	How many Children in Need are there in your area as at 31st March (exclude children on the caseloads of statutory mental health services)	DSF -Children In Need Spreadsheet
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	<1		1 - 4		5 - 11		12 - 15		16+		Total	
	M	F	M	F	M	F	M	F	M	F	M	F
Children	57	49	280	266	896	695	518	439	267	205	2018	1654
TOTAL	57	49	280	266	896	695	518	439	267	205	2018	1654

<i>Trend analysis and commentary (Trusts must clarify how they arrive at this total figure, and reference any likelihood of double or under representation)</i>	Data Return 10
---	----------------

There are **3672** children in need known to the Trust; this has increased by **202** since the last reporting period. The chart below shows that this change remains within the normal range and can be attributed to common cause variation.



10.1.2	Ethnicity of Children in Need	DSF -Children In Need Spreadsheet
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Ethnicity	<1		1 - 4		5 - 11		12 - 15		16+		Total		Total
	M	F	M	F	M	F	M	F	M	F	M	F	
White	41	34	181	154	566	428	364	298	185	153	1337	1067	2404
Chinese	0	0	0	0	0	1	1	0	0	0	1	1	2
Irish Traveller	0	0	1	0	0	2	0	2	1	0	2	4	6
Roma Traveller	0	0	0	0	0	0	1	1	0	1	1	2	3
Indian	0	0	2	0	1	4	0	1	0	0	3	5	8
Pakistani	0	0	1	1	1	2	0	1	0	0	2	4	6
Bangladeshi	0	0	0	1	3	0	1	0	0	1	4	2	6
Black Caribbean	0	0	1	0	0	0	0	0	0	0	1	0	1
Black African	1	0	0	0	2	0	3	0	22	9	28	9	37
Black Other	0	0	0	0	0	1	0	1	0	1	0	3	3
Mixed Ethnic Group	0	1	0	6	14	10	6	6	6	1	26	24	50
Any Other Ethnic Group	0	0	1	1	3	9	1	4	5	2	10	16	26
Not Stated	15	14	93	103	306	238	141	125	48	37	603	517	1120
TOTAL	57	49	280	266	896	695	518	439	267	205	2018	1654	3672

10.1.3		Religion of Children in Need											DSF -Children In Need Spreadsheet	
Religion	<1		1 - 4		5 - 11		12 - 15		16+		Total		Total	
	M	F	M	F	M	F	M	F	M	F	M	F		
Roman Catholic	12	11	77	50	191	143	131	109	74	61	485	374	859	
Presbyterian	2	5	15	18	65	58	47	47	25	26	154	154	308	
Church of Ireland	0	1	12	4	24	16	27	21	12	16	75	58	133	
Church of England	0	0	0	0	3	0	1	3	3	2	7	5	12	
Methodist	0	0	0	0	5	4	3	6	2	0	10	10	20	
Other Christian	8	7	28	21	62	77	55	46	32	19	185	170	355	
Jewish	0	0	0	0	0	0	0	0	0	0	0	0	0	
Muslim	0	0	2	2	3	6	2	3	26	9	33	20	53	
Other	2	1	2	5	14	16	9	7	4	6	31	35	66	
Not Known	24	19	116	128	447	308	203	164	76	50	866	669	1535	
Not Completed	0	0	0	0	0	0	0	0	0	0	0	0	0	
None	9	5	28	38	81	67	40	32	13	16	171	158	329	
Refused	0	0	0	0	1	0	0	1	0	0	1	1	2	
TOTAL	57	49	280	266	896	695	518	439	267	205	2018	1654	3672	

10.1.4	(a) How many children have been referred for an Assessment of Need during the reporting period i.e. 1 st October – 31st March	DSF -Children In Need Spreadsheet
---------------	--	-----------------------------------

	<1	1 - 4	5 - 11	12 - 15	16+	Total
Referrals closed and awaiting input	<i>Unable to gather this information</i>					2249
Referrals allocated and recorded on SOS CARE	110	281	653	388	140	1572
Total number of Children Referred						3821

The Trust received **3821** referrals in this reporting period.

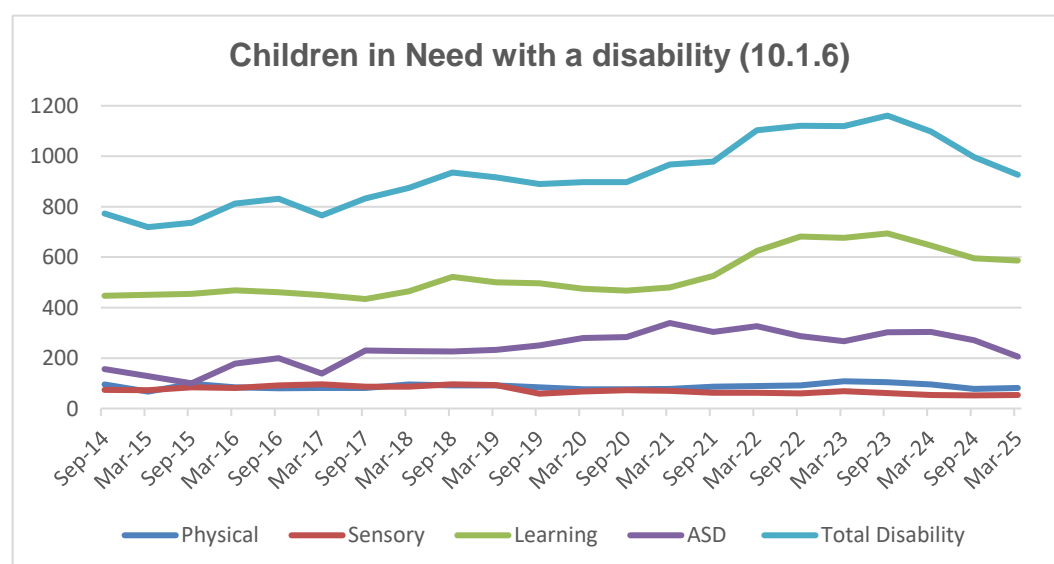
1572 children have been opened to a social worker for assessment/ allocation, while 2249 cases have been opened then closed and are awaiting input onto the SOS CARE system. Additional admin staff have been utilised and are working through a corrective action plan to address the backlog of referrals.

	(b) What was the source of referral for children referred for assessment of need during the reporting period i.e. 1 st October – 31st March	
--	--	--

Referral Source/Agent	No of Children
Police	365
Social Worker	111
Out of Hrs Co-ord	3
Relative	92
Teacher	261
Anonymous	54
Hospital Social Worker	24
GP	44
Hospital Nurse	89
Health Visitor	61
Court	4
Probation Officer	36
Vol. Organisation	0
Self	71
Community Psych. Nurse	70
N.S.P.C.C	5
NIHE	0
Comm. Mental H/C Nurse	0
Educ Welfare Officer	3
Others	278
Total	1572

10.1.6	How many of these Children in Need are Disabled and known to Trust Social Workers (by major category) at 31st March?	DSF -Children In Need Spreadsheet
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Major Disability	<1		0 - 4		5 - 11		12 - 15		16+		Total		Total
	M	F	M	F	M	F	M	F	M	F	M	F	
Physical (Ex. Sensory)	1	1	9	6	19	15	10	6	10	5	49	33	82
Sensory	0	0	5	4	14	18	3	4	4	1	26	27	53
Learning	0	1	6	7	195	86	137	65	65	24	403	183	586
Chronic illness	0	0	0	0	0	0	0	0	0	0	0	0	0
Autism(ASD)/ADHD/Asperger's	0	0	0	0	48	26	53	29	36	14	137	69	206
Other	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL (With Disability)	1	2	20	17	276	145	203	104	115	44	615	312	927
No Disability	56	47	260	249	620	550	315	335	152	161	403	1342	2745
Grand Total	57	49	280	266	896	695	518	439	267	205			3672



There are 927 children with disabilities, a further drop of 69 from the last reporting period.

There is a continued demand for provision for children with disabilities and some reduction in the number of unallocated cases from 538 to 422 at the end of this reporting period. Staff vacancy rates have reduced, this has been supported by the introduction of Senior Practitioners in 2 of the 3 teams, with the recruitment in process for the 3rd post.

10.1.7	Disabled children known to the Trust who left school during the reporting period and the transition plans that are in place.	DSF -Children In Need Spreadsheet
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Age at leaving school	>16 <17		>17 <18		18+		Total		Number with Transitions in place	
Disability Type	M	F	M	F	M	F	M	F	M	F
Physical disability	2	0	0	0	1	1	3	1	2	1
Sensory Impairment	0	0	0	0	0	0	0	0	0	0
Learning disability	2	1	3	3	13	6	18	10	17	9
Chronic illness	0	0	0	0	0	0	0	0	0	0
Autism (ASD)/ADHD/Aspergers	0	0	1	0	1	0	2	0	0	0
Other	0	0	0	0	0	0	0	0	0	0
TOTAL	4	1	4	3	15	7	23	11	19	10

10.1.10	How many of the Children in Need are Young Carers	Data Return 10
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There are 54 Children in Need are young Carers

	Period 1 October 2024 – 31 March 2025
Total Number of Service Users	68
Level 1	0
Level 2	0
Level 3	66
Level 4	2
Assessment Stage	12 to be assessed

10.1.11	How many young people aged 16 and 17 years presented to the Trust as homeless ?	DSF-Children In Need Spreadsheet																				
<table border="1" data-bbox="328 338 1385 616"> <thead> <tr> <th data-bbox="328 338 746 427">Age</th> <th data-bbox="746 338 1385 427">Number of Young People who presented to the Trust as Homeless during the reporting period</th> </tr> </thead> <tbody> <tr> <td data-bbox="328 427 746 490">16</td> <td data-bbox="746 427 1385 490">0</td> </tr> <tr> <td data-bbox="328 490 746 553">17</td> <td data-bbox="746 490 1385 553">6</td> </tr> <tr> <td data-bbox="328 553 746 616">Total</td> <td data-bbox="746 553 1385 616">6</td> </tr> </tbody> </table>			Age	Number of Young People who presented to the Trust as Homeless during the reporting period	16	0	17	6	Total	6												
Age	Number of Young People who presented to the Trust as Homeless during the reporting period																					
16	0																					
17	6																					
Total	6																					
10.1.12	(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 (b) How many of these children have a disability	DSF-Children In Need Spreadsheet																				
<table border="1" data-bbox="370 929 1343 1402"> <thead> <tr> <th data-bbox="370 929 770 1093" rowspan="2">Daycare</th> <th colspan="2" data-bbox="770 929 1343 1037">Number of Purchased Places by Age</th> </tr> <tr> <th data-bbox="770 1037 1015 1093">0 – 4</th> <th data-bbox="1015 1037 1343 1093">5-12</th> </tr> </thead> <tbody> <tr> <td data-bbox="370 1093 770 1149">Day Nursery</td> <td data-bbox="770 1093 1015 1149">36</td> <td data-bbox="1015 1093 1343 1149">4</td> </tr> <tr> <td data-bbox="370 1149 770 1205">Playgroup</td> <td data-bbox="770 1149 1015 1205">0</td> <td data-bbox="1015 1149 1343 1205">0</td> </tr> <tr> <td data-bbox="370 1205 770 1261">Childminder</td> <td data-bbox="770 1205 1015 1261">14</td> <td data-bbox="1015 1205 1343 1261">2</td> </tr> <tr> <td data-bbox="370 1261 770 1317">Out of School hours club</td> <td data-bbox="770 1261 1015 1317">0</td> <td data-bbox="1015 1261 1343 1317">8</td> </tr> <tr> <td data-bbox="370 1317 770 1402">Total</td> <td data-bbox="770 1317 1015 1402">50</td> <td data-bbox="1015 1317 1343 1402">14</td> </tr> </tbody> </table>			Daycare	Number of Purchased Places by Age		0 – 4	5-12	Day Nursery	36	4	Playgroup	0	0	Childminder	14	2	Out of School hours club	0	8	Total	50	14
Daycare	Number of Purchased Places by Age																					
	0 – 4	5-12																				
Day Nursery	36	4																				
Playgroup	0	0																				
Childminder	14	2																				
Out of School hours club	0	8																				
Total	50	14																				
	(b) How many of these children have a disability?	DSF-Children In Need Spreadsheet																				
	How many of these children have a disability?	<table border="1" data-bbox="845 1637 1418 1720"> <tr> <td data-bbox="845 1637 1090 1720">3</td> <td data-bbox="1090 1637 1418 1720">10</td> </tr> </table>	3	10																		
3	10																					

10.1.13	Trust usage of Family Centre Places for interventions					DSF-Children In Need Spreadsheet
Name of Centre	Stat/Vol	Number of Referrals by Primary Reason for Intervention		Completed During Period		On Waiting List at Period End
		Primary Reason	Number of Referrals	Average Wait from Referral to Start of Intervention (Weeks)	Average Length of Intervention (Weeks)	
SET Connects	Stat	Family Support	0	0	0	0
		Child Protection	0	0	0	0
		Looked After	47	4-6 weeks	75-80 weeks	2
Colin Family Centre	Stat	Family Support	1	7 Weeks	12 Weeks	0
		Child Protection	13	7 Weeks	12 Weeks	12
		Looked After	6	7 Weeks	12 Weeks	18
Knocknashinna	Stat	Family Support	0	7 Weeks	12 Weeks	0
		Child Protection	11	7 Weeks	12 Weeks	7
		Looked After	4	7 Weeks	12 Weeks	8
Simpson Family Resource Centre	Vol	Family Support	4	3-4 weeks	10	0
		Child Protection	12	5 weeks	16	2
		Looked After	11	3-4 weeks	16	1

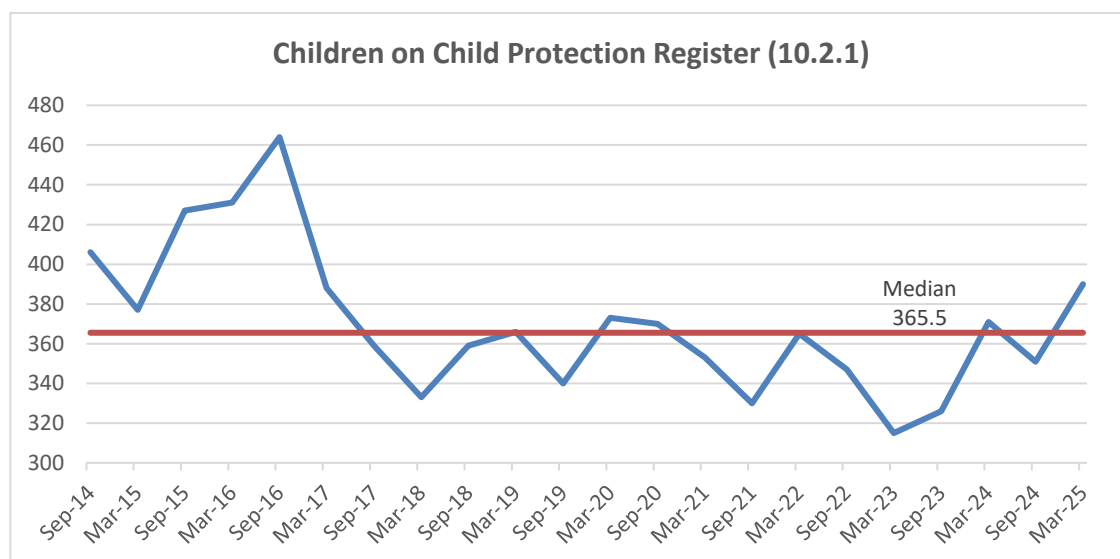
10.2 Children (NI) Order 1995 CHILD PROTECTION

10.2.1

How many children are on the Child Protection Register as 31st March?

Quarterly CP return to SPPG

390 children were on the Children Protection Register as at 31 March 2025. This is an increase of 39 from the last reporting period.

**10.2.2**

How many of these children have a learning disability?

Quarterly CP return to SPPG

7 children have a learning disability.

10.2.3

How many of these children have a physical disability?

Quarterly CP return to SPPG

0 children have a physical disability.

10.2.4		Religion of children on the Child Protection Register											Quarterly CP return to SPPG	
Religion	Male						Female						Overall Total	
	<1	1-4	5-11	12-15	16+	Total	<1	1-4	5-11	12-15	16+	Total		
Roman Catholic	8	19	28	8	9	72	5	9	22	20	5	61	133	
Presbyterian	2	1	6	3	2	14	3	4	8	3	3	21	35	
Church of Ireland	0	2	0	2	1	5	0	0	0	2	2	4	9	
Methodist	0	0	0	0	0	0	0	0	0	0	0	0	0	
Other Denomination	3	4	8	6	1	22	1	7	13	7	2	30	52	
None	3	12	17	3	2	37	3	13	21	9	5	51	88	
Refused	0	0	0	0	0	0	0	0	0	0	0	0	0	
Unknown	2	10	21	6	2	41	5	10	13	2	2	32	73	
TOTAL	18	48	80	28	17	191	17	43	77	43	19	199	390	

10.2.5	Ethnic origin of children on the Child Protection Register	Quarterly CP return to SPPG											
Ethnic Origin	Male						Female						Overall Total
	<1	1-4	5-11	12-15	16+	Total	<1	1-4	5-11	12-15	16+	Total	
White	17	39	57	23	15	151	15	31	61	41	16	164	315
Chinese	0	0	0	0	0	0	0	0	0	0	0	0	0
Irish Traveller	0	0	0	0	0	0	0	0	2	1	0	3	3
Roma Traveller	0	0	0	0	0	0	0	0	0	0	0	0	0
Indian	0	1	0	0	0	1	0	0	1	0	0	1	2
Pakistani	0	1	1	0	0	2	0	0	2	0	0	2	4
Bangladeshi	0	0	1	1	0	2	0	1	0	0	0	1	3
Black Caribbean	0	0	0	0	0	0	0	0	0	0	0	0	0
Black African	1	0	0	0	0	1	0	0	0	0	0	0	1
Black Other	0	0	0	0	0	0	0	0	0	0	0	0	0
Mixed Ethnic Group	0	0	4	0	0	4	1	2	1	0	0	4	8
Any Other Ethnic Group	0	0	0	1	0	1	0	1	3	0	1	5	6
Not Completed	0	0	0	0	0	0	0	0	0	0	0	0	0
Not Stated	0	7	17	3	2	29	1	8	7	1	2	19	48
TOTAL	18	48	80	28	17	191	17	43	77	43	19	199	390
10.2.6	How many registrations have there been during the period?	Quarterly CP return to SPPG/Soscare Reports											
There were 187 registrations during this period.													
10.2.7	How many de-registrations have there been during the period?	Quarterly CP return to SPPG											
There were 150 de-registrations during this period.													

10.2.8	What percentage of registrations are re-registrations?	Quarterly CP return to SPPG
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20.9% (39) of registrations were re-registrations during this reporting period.

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
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Duration		Age Groups					
		Under	1-4	5-11	12-15	16+	TOTAL
		one Year					
1	less than 3 months	23	19	38	14	10	104
2	3 months < 6 months	7	16	28	14	6	71
3	6 months < 1 year	5	19	35	20	6	85
4	1 year < 2 years	0	29	44	19	10	102
5	2 years < 3 years		6	6	3	1	16
6	3 years or more		2	6	1	3	12
	TOTAL	35	91	157	71	36	390

66% of children have been registered on the child protection register for less than 1 year. 3% of children have been registered for 3 years or more.

**10.3 Children (NI) Order 1995
Looked After Children**

10.3.1

Provide the current legal status for all Looked After Children at 31st March? (excluding any who are LAC on that day only by virtue of a short break arrangement)

DSF – LAC
Spreadsheet

Legal status	<1		1 - 4		5 - 11		12 - 15		16+		Total		Total
	M	F	M	F	M	F	M	F	M	F	M	F	
Art 21(1) Accommodated <16	5	4	11	14	29	19	20	14			65	51	116
Art. 21(3) Accommodated 16+									26	19	26	19	45
Art. 21(4) Accommodated	0	2	12	5	13	19	8	7	0	0	33	33	66
Art. 21(5) Accommodated 16+ <21									13	2	13	2	15
Art. 44 (5) Secure	0	0	0	0	0	0	0	1	0	1	0	2	2
Art. 44 (6) Interim Secure	0	0	0	0	0	0	1	0	1	2	2	2	4
Art. 50 (1) (a) Care Order	0	1	12	12	80	58	69	49	33	36	194	156	350
Art. 57 (1) Interim CO	8	9	24	22	18	21	2	9	3	2	55	63	118
Deemed Care Order	0	0	0	0	0	0	0	0	0	0	0	0	0
Emergency Protection Order Art. 63	1	0	2	0	0	0	0	1	0	0	3	1	4
Art. 23(2) Accommodated	0	0	0	0	0	0	0	0	0	0	0	0	0
Other	1	1	13	6	8	3	3	3	3	4	28	17	45
TOTAL	15	17	74	59	148	120	103	84	79	66	419	346	765

Other: Art 17 Freeing Order (18)

10.3.2	Religion and Ethnic origin of Looked After Children (please provide by new list of ethnic minorities)	DSF – LAC Spreadsheet
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Religion	<1		1 - 4		5 - 11		12 - 15		16+		Total		Total
	M	F	M	F	M	F	M	F	M	F	M	F	
Roman Catholic	3	6	35	16	50	39	35	32	20	21	143	114	257
Presbyterian	0	1	9	7	20	29	20	22	14	11	63	70	133
Church of Ireland	0	1	4	2	10	6	16	7	4	10	34	26	60
Church of England	0	0	0	0	3	0	1	0	1	1	5	1	6
Methodist	0	0	0	0	2	1	1	1	0	0	3	2	5
Other Christian	5	5	16	13	19	24	15	15	8	7	63	64	127
Jewish	0	0	0	0	0	0	0	0	0	0	0	0	0
Muslim	0	0	0	0	2	0	0	0	24	8	26	8	34
Other	1	1	1	2	6	4	2	1	1	3	11	11	22
Not Known	0	1	3	5	0	1	0	0	0	0	3	7	10
Not Completed	0	0	0	0	0	0	0	0	0	0	0	0	0
None	6	2	6	14	35	16	13	5	7	5	67	42	109
Refused	0	0	0	0	1	0	0	1	0	0	1	1	2
TOTAL	15	17	74	59	148	120	103	84	79	66	419	346	765

Ethnicity	<1		1 - 4		5 - 11		12 - 15		16+		Total		Total
	M	F	M	F	M	F	M	F	M	F	M	F	
White	15	17	70	53	144	116	99	79	49	55	377	320	697
Chinese	0	0	0	0	0	0	0	0	0	0	0	0	0
Irish Traveller	0	0	1	0	0	0	0	1	0	0	1	1	2
Roma Traveller	0	0	0	0	0	0	1	1	0	1	1	2	3
Indian	0	0	0	0	0	0	0	0	0	0	0	0	0
Pakistani	0	0	0	0	0	0	0	0	0	0	0	0	0
Bangladeshi	0	0	0	0	0	0	0	0	0	0	0	0	0
Black Caribbean	0	0	0	0	0	0	0	0	0	0	0	0	0
Black African	0	0	0	0	0	0	2	0	22	9	24	9	33
Black Other	0	0	0	0	0	0	0	1	0	1	0	2	2
Mixed Ethnic Group	0	0	0	3	4	4	1	1	3	0	8	8	16
Any Other Ethnic Group	0	0	0	0	0	0	0	1	5	0	5	1	6
Not Stated	0	0	3	3	0	0	0	0	0	0	3	3	6
TOTAL	15	17	74	59	148	120	103	84	79	66	419	346	765

10.3.3		Number of Looked After Children (as at 10.3.1) by type of placement at 31 st March?											DSF – LAC Spreadsheet	
All Looked After Children		<1		1-4		5-11		12-15		16+		Total		Total
		M	F	M	F	M	F	M	F	M	F	M	F	
Residential	Statutory*	0	0	0	0	2	0	7	9	10	4	19	13	32
	Voluntary	0	0	0	0	2	0	3	1	2	2	7	3	10
	Private	0	0	0	0	3	0	2	0	2	1	7	1	8
	ECR	0	0	0	0	0	0	0	0	0	0	0	0	0
	Secure	0	0	0	0	0	0	1	1	1	2	2	3	5
	Residential Total	0	0	0	0	7	0	13	11	15	9	35	20	55
Fostering	Foster Carers excluding relatives [Stranger]	6	7	16	9	20	10	18	18	11	7	71	51	122
Kinship Care	Kinship Care In Kinship Placement less than 12 weeks	2	2	3	4	3	6	1	3	0	1	9	16	25
	Kinship Care (Friends/relatives)	1	0	15	14	39	41	21	18	7	12	83	85	168
	Unregulated (In Placement >12 weeks and not yet approved)	2	2	18	18	39	30	29	13	12	7	100	70	170
	Independent Providers	3	5	15	9	30	25	15	15	4	6	67	60	127
	Fostering Total	14	16	67	54	131	112	84	67	34	33	330	282	612
	Placed at Home with Parents	1	1	1	4	3	7	6	6	5	3	11	21	26
	Placed for Adoption (LAC Children, with a Care Order, placed with Adoptive Parents)	0	0	0	3	2	2	2	0	0	0	0	5	4
Other Placements	Jointly Supported Accommodation Projects	0	0	0	0	0	0	0	0	0	0	0	0	0
	Juvenile Justice Centre	0	0	0	0	0	0	0	0	0	0	0	0	0
	Supported Lodgings	0	0	0	0	0	0	0	0	11	4	11	4	15
	Tenancy Arrangement	0	0	0	0	0	0	0	0	0	0	0	0	0
	Unregulated Be-Spoke Arrangement	0	0	0	0	0	0	0	0	0	0	0	0	0
Other		0	0	0	0	1	0	0	1	16	9	17	10	27
Overall TOTAL		15	17	74	59	148	120	103	84	79	66	419	346	765

10.3.4		Age bands and length of time looked after for all Looked After Children at period end											DSF – LAC Spreadsheet	
Length of time Looked After at period end	<1		1 - 4		5 - 11		12 – 15		16+		Total		Total	
	M	F	M	F	M	F	M	F	M	F	M	F		
< 3 months	6	6	5	4	3	6	1	5	6	6	21	27	48	
3 months to <1 year	9	11	17	15	27	19	12	11	20	8	85	64	149	
1 year <3 years	0	0	47	32	43	35	23	19	18	12	131	98	229	
3 years <5 years	0	0	5	8	30	28	17	7	5	11	57	54	111	
5 years <10 years	0	0	0	0	43	30	29	31	18	18	90	79	169	
10+ years	0	0	0	0	2	2	21	11	12	11	35	24	59	
Total	15	17	74	59	148	120	103	84	79	66	419	346	765	

10.3.5	Number of children provided with a short break during the period who become Looked After by virtue of the short break arrangement	DSF – LAC Spreadsheet
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Name of Unit	Children/Young People																	
	<1			1 - 4			5 - 11			12 - 15			16+			Total		
	No. of Ch/YP	Events / Episodes	Total Over night	No. of Ch/YP	Events / Episodes	Total Over night	No. of Ch/YP	Events / Episodes	Total Over night	No. of Ch/YP	Events/ Episodes	Total Over night	No. of Ch/YP	Events / Episodes	Total Over night	No. of Ch/YP	Events / Episodes	Total Over night
Forest Lodge	0	0	0	0	0	0	1	1	1	3	40	59	4	25	48	8	66	108
Greenhill YMCA	0	0	0	0	0	0	0	0	0	8	37	44	3	4	5	11	41	49
Lindsay House	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Short break Fostering	0	0	0	0	0	0	0	0	0	2	11	49	1	5	5	3	16	54
TOTAL	0	0	0	0	0	0	1	1	1	13	88	152	8	34	58	22	123	211

Short break provision has remained at a reduced level in this reporting period providing 211 overnight stays for 22 children.

- Sickness, vacancy and recruitment issues continued to impact on Greenhill provision – targeted recruitment is ongoing
- Lindsay House continued to provide short-term care – opening of Redwood facility will allow Lindsay House to revert to original statement of purpose.
- Beechfield and Glenmore homes are fully utilised and provide long-term care.
- LynC Outreach Service provides vital support to 12 high-risk children, 5 are on the edge of care admission with all continuing to be maintained in their homes. This service will significantly extend with the new investment monies.

10.3.6	Number of children accommodated for 3 months or more in a hospital	DSF – LAC Spreadsheet
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Facility Name	Age at Placement			Number Resident at Period End
	Under 16	16+	Total	
Iveagh	1	0	0	1
Total	1	0	0	1

10.3.7	Number of children accommodated for 3 months or more in an adult facility. For example Residential Care Home, Nursing Home, Private Hospital	DSF – LAC Spreadsheet
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Facility Name	Age at Placement			Number Resident at Period End
	Under 16	16+	Total	
None	0	0	0	0
Total	0	0	0	0

10.3.8	(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	DSF – LAC Spreadsheet
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Name of Residential Unit	Statutory	Voluntary	Private	No of Beds	No of Beds available to Trust	Trust % occupancy	No of Respite beds	Respite % occupancy
Ardmore	x			2	2	100%	0	0
Ashgrove	x			6	6	86%	0	0
Cuan Court	x			8	8	63%	0	0
Flaxfield	x			8	8	77%	0	0
Marmion	x			8	8	46%	0	0
Oaklands	x			6	6	80%	0	0
William Street	x			8	8	61%	0	0
Safe Places			x	2	1	100%	0	0
Lifestyles Dungiven			x	3	2	100%	0	0
Lifestyles Dromore			x	2	1	100%	0	0
Ardcomm			x	3	1	100%	0	0
BCM Grampian		x		2	1	100%	0	0
BCM Riverside		x		6	6	100%	0	0
Barnards Haywood		x		2	1	100%	0	0
Barnardos Annadale		x		1	1	100%	0	0
MACS Downpatrick		x		4	4	100%	0	0
MACS Lisburn		x		4	4	100%	0	0
MACS Belfast		x		2	2	100%	0	0
Glenmore Cottage	x			4	4	95%	0	0
Beechfield Short to Medium	x			4	4	119%	0	0
Lindsay House short term care	x			2	2	69%	0	0
Facilities providing Short Breaks for Children with a Disability								
Lindsay House short breaks	x			8	0	0%	8	0
Greenhill YMCA	x			0	0	0%	2	100%
Forest Lodge Short Breaks	x			1	1	0%	1	100%
Somerton Road	x			2	2	83%	0	0

	(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)																																																																													
	Number of Foster Carers <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>316</td></tr></table> Number of Approved Places offered <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>339</td></tr></table>	316	339																																																																											
316																																																																														
339																																																																														
10.3.9	How many Looked After Children have had placement moves throughout the period? Trust must provide an explanation of actions taken to reduce placement moves during the period.	DSF – LAC Spreadsheet																																																																												
	<table border="1"> <thead> <tr> <th rowspan="2">Placement changes</th> <th colspan="2">0 - 4</th> <th colspan="2">5 - 11</th> <th colspan="2">12 - 15</th> <th colspan="2">16+</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> <th>M</th> <th>F</th> <th>M</th> <th>F</th> </tr> </thead> <tbody> <tr> <td>Number who moved once</td> <td>6</td> <td>8</td> <td>6</td> <td>8</td> <td>3</td> <td>4</td> <td>2</td> <td>4</td> <td>17</td> <td>24</td> </tr> <tr> <td>Number who moved twice</td> <td>0</td> <td>0</td> <td>1</td> <td>0</td> <td>0</td> <td>2</td> <td>0</td> <td>0</td> <td>1</td> <td>2</td> </tr> <tr> <td>Number who moved 3 times</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> <td>0</td> <td>0</td> </tr> <tr> <td>Number who moved 4 times or more</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> <td>0</td> <td>0</td> </tr> <tr> <td>Total</td> <td>6</td> <td>8</td> <td>7</td> <td>8</td> <td>3</td> <td>6</td> <td>2</td> <td>4</td> <td>18</td> <td>26</td> </tr> </tbody> </table> <p>44 children experienced placement moves during the reporting period.</p> <p>41 children moved placement once and 3 children had 2 placements moves.</p> <p>The Trust continues to monitor all placement moves to ensure the safe and effective care of children and young people during crisis. Support and intervention has been offered to fragile placements to scaffold and stabilise these in order to prevent placement moves. The Trust are developing edge of care provision to further bolster stability in placements and in turn reduce placement moves.</p>		Placement changes	0 - 4		5 - 11		12 - 15		16+		Total		M	F	M	F	M	F	M	F	M	F	Number who moved once	6	8	6	8	3	4	2	4	17	24	Number who moved twice	0	0	1	0	0	2	0	0	1	2	Number who moved 3 times	0	0	0	0	0	0	0	0	0	0	Number who moved 4 times or more	0	0	0	0	0	0	0	0	0	0	Total	6	8	7	8	3	6	2	4	18	26
Placement changes	0 - 4			5 - 11		12 - 15		16+		Total																																																																				
	M	F	M	F	M	F	M	F	M	F																																																																				
Number who moved once	6	8	6	8	3	4	2	4	17	24																																																																				
Number who moved twice	0	0	1	0	0	2	0	0	1	2																																																																				
Number who moved 3 times	0	0	0	0	0	0	0	0	0	0																																																																				
Number who moved 4 times or more	0	0	0	0	0	0	0	0	0	0																																																																				
Total	6	8	7	8	3	6	2	4	18	26																																																																				
10.3.10	(a) How many Looked After Children are awaiting assessment or treatment with child and adolescent mental health services at 31st March?	DSF – LAC Spreadsheet																																																																												

19 young people are awaiting assessment or treatment with CAMHS at report end.

(b) How many Looked After Children have been referred for therapeutic services and their waiting time.

Referrals	Foster Care (non kin/traditional)	Kinship Foster Care	Residential Care	Young People Exiting Care	Post Adoption Support	TOTAL
Total Number of Referrals received this period	23	14	9	0	1	47
Source of these referrals received from						
Child's Social Worker	23	14	9	0	1	47
Carer's Social Worker	0	0	0	0	0	0
Adoptive parents	0	0	0	0	0	0
CAMHS	0	0	0	0	0	0
DAMS	0	0	0	0	0	0
FACTSNI	0	0	0	0	0	0
Other	0	1	0	0	0	0
Number of Referrals Accepted	20	11	9	0	1	41
Number of Referrals deemed inappropriate	0	2	0	0	0	2
Number of referrals signposted to another service						
CAMHS	0	0	0	0	0	0
DAMS	0	0	0	0	0	0
Adult Psychiatry	0	0	0	0	0	0
Adult Psychology Service	0	0	0	0	0	0
Other Post Adoption Service	0	0	0	0	0	0
Other	3	1	0	0	0	4
Children engaged with the Service by substantive placement						
Number of children engaged with the Service at period start date	82	20	32	0	24	158
Number of children seen on a once off basis during the period	0	0	0	0	0	0
Number of children discharged from Service during the period	25	1	11	0	3	40
Number of children transferred to another Service during the period:						
• CAMHS	0	0	0	0	0	0
• DAMS	0	0	0	0	0	0
• Adult Psychiatry	0	0	0	0	0	0
• Adult Psychology Services	0	0	0	0	0	0
• Other Post Adoption Service	0	0	0	0	0	0
• Other	0	0	0	0	0	0

Number of children engaged with the Service at period end date	77	30	30	0	22	159
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Service delivery during the period	
Number of Reviews undertaken	822
Average waiting time for service (weeks)	4 - 6 weeks
Number on waiting list at end of period	2
Numbers of DNAs during the period	8
Number of individual sessions cancelled by the Service during the period	12
For those children discharged from the Service during the period what was the average length of involvement (weeks)	75 - 80 weeks
TOTAL	830

Consultations provided by the Service during the period		
	Number	Number which were repeat
Social worker	423	374
CAMHS	21	0
DAMS	0	0
Teacher	12	0
Psychiatry	0	0
G.P.	0	0
Carers/adoptive parents	237	185
One off'	0	0
Children/ Young People	129	98

(c) Please provide actions taken to reduce waiting time.

Data Return 10

With the exception of Residential referrals that follow a separate pathway of automatic allocation to a clinician, all other referrals are triaged by either the Service Manager, Consultant Lead or Clinical Lead for Fostering in order to allocate effectively and reduce delay. The service may also signpost to other services where appropriate and offer consultation on occasion for non-referred children.

The average waiting time for an appointment during this review period is 4-6 weeks and there have been no breaches to waiting times (PFA target is 13 weeks for Psychological Therapies).

The service aims to offer a consultation within 6 weeks, and where this is not possible, the referrer is notified. All referrals on waiting list at report end have been offered an appointment.

10.3.12	How many Looked After Children are Disabled by major category at period end?	DSF – LAC Spreadsheet
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Major Disability	<1		1 - 4		5 - 11		12 - 15		16+		Total		Total
	M	F	M	F	M	F	M	F	M	F	M	F	
Physical (Ex. Sensory)	0	0	1	0	0	0	1	0	1	0	3	0	3
Sensory	0	0	0	0	0	0	0	0	0	0	0	0	0
Learning	0	0	0	0	10	2	10	11	5	4	25	17	42
Chronic illness	0	0	0	0	0	0	0	0	0	0	0	0	0
Autism(ASD)/ Asperger's/ADHD	0	0	0	1	12	10	25	11	14	7	51	29	80
Other (undefined)	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL Children With Disability	0	0	1	1	22	12	36	22	20	11	79	46	125
No Disability known	15	17	73	58	126	108	67	62	59	55	340	300	640
Total Looked After Children	15	17	74	59	148	120	103	84	79	66	419	346	765

10.3.13	How many Looked After Children have a Statement of Educational Needs (SEN) by school status at period end?	DSF – LAC Spreadsheet
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Statement of Educational Needs	M	F	Total
Primary school	1	0	1
Secondary school	13	2	15
Special School	23	15	38
Total	37	17	54

10.3.14	(a) Has each Looked After Child an allocated a named social worker at period end? No	DSF – LAC Spreadsheet
No, not all children looked after by the Trust had an allocated social worker during this reporting period.		
	(b) If no, give number of children and provide an update in the service summary on current position and actions taken.	DSF – LAC Spreadsheet
<p>43 children who are looked after do not have an allocated social worker.</p> <p>All cases have been risk assessed. All the young people are in settled, long-term placements and continue to receive statutory visits and reviews.</p> <p>The Trust has robust assurance systems, through the Collaborative Unallocated Progress meeting, ensuring monitoring and review of these cases on a monthly basis.</p>		
10.3.15	(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?	DSF – LAC Spreadsheet
This data is not available during this reporting period due to action short of strike within children's services across the Trust and resultant non-completion of statistical returns.		
	(b) If no, give number of children and provide an update in the service summary on current position and actions taken.	DSF – LAC Spreadsheet
This data is not available during this reporting period due to action short of strike within children's services across the Trust and resultant non-completion of statistical returns.		
10.3.16	No. of Looked After Children Reviews held during the period	DSF – LAC Spreadsheet
This data is not available during this reporting period due to action short of strike within children's services across the Trust and resultant non-completion of statistical returns.		

10.3.17	Was the case of each Looked After Child reviewed in line with Statutory requirements?	Data Return 10
<p>This data is not available during this reporting period due to action short of strike within children's services across the Trust and resultant non-completion of statistical returns.</p>		
10.3.20	Is there an adequate supply of placements for children to enable placement choice? <u>No</u>	Data Return 10
<p>No, an inadequate supply of placements within the Trust necessitates the continued use of independent providers (88 households) to support 127 children who are cared for by the Trust, placing considerable fiscal challenges on the Trust.</p> <p>The Trust continues to review, track and monitor placement availability through fortnightly referral meetings which seek to address demand and capacity issues. Potential placements are identified through tracking of foster carers due to be approved at panel, considered alongside open referrals for those children requiring foster placements. Additional capacity is considered and generated where safe and appropriate via over-approval requests.</p> <p>During this reporting period 36 children were deemed to be in an inappropriate placement given their assessed needs.</p>		
10.3.21	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?	DSF – LAC Spreadsheet
<p>3 exceptions were granted in this reporting period.</p> <ul style="list-style-type: none"> • 1 to allow for 5 children from the same family to be placed in a long-term kinship placement; • 2 to allow for emergency short break placements. 		

10.3.23	How many children are deemed to be in an inappropriate placement given their assessed needs? <i>(Please explain)</i>	DSF – LAC Spreadsheet
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36 children were deemed to be in an inappropriate placement given their assessed needs.

- 13 children in residential care required foster placements;
- 6 children accommodated in an unregulated kinship placement required a foster placement;
- 6 children in ECR/specialist provision require foster placement;
- 5 children with parents/family required foster placements;
- 4 children in short term/bridging placement required long term placement;
- 2 children in other arrangements required foster placements.

10.3.24	Please provide the number of restraints carried out by staff on young people within each Home during the period.	DSF – LAC Spreadsheet
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ARDMORE	Primary		Secondar		16+		Total	
Reason for Use of Restraint	M	F	M	F	M	F	M	F
To prevent injury (to self/staff/other young person)	0	0	0	0	0	2	0	2
To prevent serious criminal damage to property	0	0	0	0	0	0	0	0
To prevent young person from leaving Home(due to risk of significant harm)	0	0	0	0	0	0	0	0
Other (please specify)	0	0	0	0	0	0	0	0
Total no. of restraints	0	0	0	0	0	2	0	2

How many individual children does this return refer to	0	0	0	0	0	1	0	1
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ASHGROVE	Primary		Secondar		16+		Total	
Reason for Use of Restraint	M	F	M	F	M	F	M	F
To prevent injury (to self/staff/other young person)	0	0	1	1	0	0	1	1
To prevent serious criminal damage to property	0	0	0	0	0	0	0	0
To prevent young person from leaving Home(due to risk of significant harm)	0	0	0	0	0	0	0	0
Other (please specify)	0	0	0	0	0	0	0	0
Total no. of restraints	0	0	1	1	0	0	1	1

How many individual children does this return refer to	0	0	1	1	0	0	1	1
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BEECHFIELD

Reason for Use of Restraint	M	F	M	F	M	F	M	F
To prevent injury (to self/staff/other young person)	0	0	6	0	4	0	10	0
To prevent serious criminal damage to property	0	0	0	0	0	0	0	0
To prevent young person from leaving Home(due to risk of significant harm)	0	0	0	0	0	0	0	0
Other (please specify)	0	0	0	0	0	0	0	0
Total no. of restraints	0	0	6	0	4	0	10	0

How many individual children does this return refer to	0	0	2	0	1	0	3	0
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Reason for Use of Restraint	Primary		Secondar		16+		Total	
	M	F	M	F	M	F	M	F
To prevent injury (to self/staff/other young person)	0	0	0	0	0	0	0	0
To prevent serious criminal damage to property	0	0	0	0	0	0	0	0
To prevent young person from leaving Home(due to risk of significant harm)	0	0	0	0	0	0	0	0
Other (please specify)	0	0	0	0	0	0	0	0
Total no. of restraints	0	0	0	0	0	0	0	0

How many individual children does this return refer to	0	0	0	0	0	0	0	0
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Reason for Use of Restraint	Primary		Secondar		16+		Total	
	M	F	M	F	M	F	M	F
To prevent injury (to self/staff/other young person)	0	0	5	0	0	0	5	0
To prevent serious criminal damage to property	0	0	0	0	0	0	0	0
To prevent young person from leaving Home(due to risk of significant harm)	0	0	0	0	0	0	0	0
Other (please specify)	0	0	0	0	0	0	0	0
Total no. of restraints	0	0	5	0	0	0	5	0

How many individual children does this return refer to	0	0	2	0	0	0	2	0
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Reason for Use of Restraint	Primary		Secondar		16+		Total	
	M	F	M	F	M	F	M	F
To prevent injury (to self/staff/other young person)	14	0	2	0	0	0	16	0

WILLIAM STREET		Primary		Secondar		16+		Total		
		M	F	M	F	M	F	M	F	
Reason for Use of Restraint										
To prevent injury (to self/staff/other young person)		0	0	1	0	0	0	1	0	
To prevent serious criminal damage to property		0	0	0	0	0	0	0	0	
To prevent young person from leaving Home(due to risk of significant harm)		0	0	0	0	0	0	0	0	
Other (please specify)		0	0	0	0	0	0	0	0	
Total no. of restraints		0	0	1	0	0	0	1	0	
How many individual children does this return refer to		0	0	1	0	0	0	1	0	
LAKWOOD SECURE		Primary		Secondar		16+		Total		
		M	F	M	F	M	F	M	F	
Reason for Use of Restraint										
To prevent injury (to self/staff/other young person)		0	0	0	20	0	4	0	24	
To prevent serious criminal damage to property		0	0	3	2	0	1	3	3	
To prevent young person from leaving Home(due to risk of significant harm)		0	0	0	0	0	2	0	2	
Other (please specify)		0	0	0	0	0	0	0	0	
Total no. of restraints		0	0	3	22	0	7	3	29	
How many individual children does this return refer to		0	0	0	6	0	3	0	9	
To prevent serious criminal damage to property		0	0	0	0	0	0	0	0	
To prevent young person from leaving Home(due to risk of significant harm)		0	0	0	0	0	0	0	0	
Other (please specify)		0	0	0	0	0	0	0	0	
Total no. of restraints		14	0	2	0	0	0	16	0	
How many individual children does this return refer to		1	0	1	0	0	0	2	0	
10.3.25	Do all looked after children have a concurrent plan by the time of their first 3 month statutory LAC Review? Yes/No								Data Return 10	

No, however, all children have a twin-track care plan by 6 months if rehabilitation to birth parents has not been ruled out.

10.3.26 (a) Permanency Planning for Looked After Children at period end

This data is not available during this reporting period due to action short of strike within children's services across the Trust and resultant non-completion of statistical returns.

10.3.26 (B) Looked After Children Care Plan Change from Adoption to Long-Term Fostering.

DSF – LAC Spreadsheet

i) How Many Looked After Children who previously had a care plan of adoption agreed at a Looked After Child Review, had this care plan changed to long term fostering via a Looked After Child review?

	<1		1-4		5-11		16+		Total		Total
	M	F	M	F	M	F	M	F	M	F	
i) Number of Children	0	0	2	1	0	0	0	0	2	1	3

ii) Of this number at 10.3.26 (b), how many care plans were changed to Long term fostering due to no suitable adoptive placement being identified.

	<1		1-4		5-11		16+		Total		Total
	M	F	M	F	M	F	M	F	M	F	
ii) Number of Children	0	0	0	0	0	0	0	0	0	0	0

10.3.29 (a) How many Looked After Children are involved in offending behaviour (are formally cautioned or convicted)

DSF – LAC Spreadsheet

This data is not available during this reporting period due to action short of strike within children's services across the Trust and resultant non-completion of statistical returns.

10.3.34	(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? (This table should be completed for each Residential Facility, it is not required for Foster Carers)	DSF – LAC Spreadsheet
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ARDMORE

Reason	Primary		Secondary		16+		Total	
	No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events
Unauthorised Absence	0	0	0	0	0	0	0	0
Breach of Bail	0	0	0	0	0	0	0	0
Child At Risk	0	0	0	0	1	1	1	1
Criminal Damage within Placement	0	0	0	0	0	0	0	0
Assault within Placement	0	0	0	0	1	2	1	2
Other	0	0	0	0	1	1	1	1
Total	0	0	0	0	3	4	3	4

Total no of individual children this relates to:	0		0		1		1	
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ASHGROVE

Reason	Primary		Secondary		16+		Total	
	No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events
Unauthorised Absence	0	0	2	6	1	1	3	7
Breach of Bail	0	0	0	0	0	0	0	0
Child At Risk	0	0	0	0	0	0	0	0
Criminal Damage within Placement	0	0	2	3	0	0	2	3
Assault within Placement	0	0	2	3	0	0	2	3
Other	0	0	4	9	0	0	4	9
Total	0	0	10	21	1	1	11	22

Total no of individual children this relates to:	0		3		3		6	
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BEECHFIELD

Reason	Primary		Secondary		16+		Total	
	No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events
Unauthorised Absence	1	1	0	0	0	0	1	1
Breach of Bail	0	0	0	0	0	0	0	0
Child At Risk	0	0	0	0	0	0	0	0
Criminal Damage within Placement	0	0	0	0	0	0	0	0
Assault within Placement	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0
Total	1	1	0	0	0	0	1	1

Total no of individual <i>children</i> this relates to:	1		0		0		1	
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CUAN COURT

Reason	Primary		Secondary		16+		Total	
	No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events
Unauthorised Absence	0	0	0	0	0	0	0	0
Breach of Bail	0	0	0	0	0	0	0	0
Child At Risk	0	0	1	1	0	0	1	1
Criminal Damage within Placement	0	0	1	2	0	0	1	2
Assault within Placement	0	0	2	47	0	0	2	47
Other	0	0	2	21	0	0	2	21
Total	0	0	6	71	0	0	6	71

Total no of individual <i>children</i> this relates to:	0		4		0		4	
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FLAXFIELD

Reason	Primary		Secondary		16+		Total	
	No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events
Unauthorised Absence	0	0	3	12	2	4	5	16
Breach of Bail	0	0	0	0	0	0	0	0
Child At Risk	0	0	3	7	1	3	4	10
Criminal Damage within Placement	0	0	1	1	0	0	1	1
Assault within Placement	0	0	1	1	1	1	2	2
Other	0	0	2	6	1	4	3	10
Total	0	0	10	27	5	12	15	39

Total no of individual <i>children</i> this relates to:	0		3		2		5	
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GLENMORE

Reason	Primary		Secondary		16+		Total	
	No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events
Unauthorised Absence	0	0	0	0	0	0	0	0
Breach of Bail	0	0	0	0	0	0	0	0
Child At Risk	0	0	2	8	1	1	3	9
Criminal Damage within Placement	0	0	0	0	0	0	0	0
Assault within Placement	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0
Total	0	0	2	8	1	1	3	9

Total no of individual children this relates to:	0		2		1		3	
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GREENHILL

Reason	Primary		Secondary		16+		Total	
	No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events
Unauthorised Absence	0	0	0	0	0	0	0	0
Breach of Bail	0	0	0	0	0	0	0	0
Child At Risk	0	0	0	0	0	0	0	0
Criminal Damage within Placement	0	0	0	0	0	0	0	0
Assault within Placement	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

Total no of individual children this relates to:	0		0		0		0	
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LINDSAY HOUSE

Reason	Primary		Secondary		16+		Total	
	No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events
Unauthorised Absence	0	0	0	0	0	0	0	0
Breach of Bail	0	0	0	0	0	0	0	0
Child At Risk	0	0	0	0	0	0	0	0
Criminal Damage within Placement	0	0	0	0	0	0	0	0
Assault within Placement	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

Total no of individual children this relates to:	0		0		0		0	
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MARMION

Reason	Primary		Secondary		16+		Total	
	No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events
Unauthorised Absence	0	0	5	53	1	1	6	54
Breach of Bail	0	0	3	18	0	0	3	18
Child At Risk	0	0	0	0	0	0	0	0
Criminal Damage within Placement	0	0	0	0	0	0	0	0
Assault within Placement	0	0	2	22	0	0	2	22
Other	0	0	5	66	0	0	5	66
Total	0	0	15	0	1	1	16	160

Total no of individual children this relates to:	0		5		1		6	
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OAKLANDS

Reason	Primary		Secondary		16+		Total	
	No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events
Unauthorised Absence	0	0	0	0	2	40	2	40
Breach of Bail	0	0	0	0	1	9	1	9
Child At Risk	0	0	0	0	0	0	0	0
Criminal Damage within Placement	0	0	1	1	0	0	1	1
Assault within Placement	0	0	0	0	0	0	0	0
Other	0	0	0	0	1	1	1	1
Total	0	0	1	1	4	50	5	51

Total no of individual children this relates to:	0		1		2		3	
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WILLIAM STREET

Reason	Primary		Secondary		16+		Total	
	No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events
Unauthorised Absence	0	0	4	16	2	4	6	20
Breach of Bail	0	0	1	3	1	1	2	4
Child At Risk	0	0	2	17	2	16	4	33
Criminal Damage within Placement	0	0	0	0	0	0	0	0
Assault within Placement	0	0	1	2	0	0	1	2
Other	0	0	0	0	0	0	0	0
Total	0	0	8	38	5	21	13	59

Total no of individual children this relates to:	0		8		2		10	
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LAKEWOOD SECURE

Reason	Primary		Secondary		16+		Total	
	No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events
Unauthorised Absence	0	0	2	3	0	0	2	3
Breach of Bail	0	0	1	5	0	0	1	5
Child At Risk	0	0	0	15	0	0	0	0
Criminal Damage within Placement	0	0	5	0	1	3	6	18
Assault within Placement	0	0	2	11	1	4	3	15
Other	0	0	1	1	1	1	2	2
Total	0	0	11	35	3	8	14	43

Total no of individual <i>children</i> this relates to:	0		11		3		14	
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10.3.35	Number of children accommodated by ELB for 3 months or more by category	DSF – LAC Spreadsheet
0 children who are looked after have been accommodated by ELB for 3 months or more.		
10.3.36	(a) Number of Sibling groups accommodated: <ul style="list-style-type: none"> • Together • Not accommodation together at period end 	Data Return 10
<p>16 sibling groups (40 children) became looked after by the Trust during this reporting period. 12 sibling groups (29 children) were placed in kinship care and 4 groups (11 children) in non-kinship placements.</p> <p>Kinship placements (placed together)</p> <ul style="list-style-type: none"> • 9 sibling groups (20 children) have been accommodated together (7 sets of 2 siblings, 2 sets of 3 siblings) <p>Non-kinship placements (placed together)</p> <ul style="list-style-type: none"> • 2 sibling groups of 2 (4 children) have been accommodated together. <p>Kinship placements (placed separately)</p> <ul style="list-style-type: none"> • 3 sibling groups (9 children) had been accommodated separately as follows: <ul style="list-style-type: none"> ➤ 1 group of 4 siblings – separated as 1 elder female child (solo placement) & 3 younger male children (together) ➤ 1 group of 3 siblings – separated as 2 elder children (together) and younger child (solo placement) ➤ 1 group of 2 siblings – separated as 2 solo placements <p>Non-kinship placements (placed separately)</p> <ul style="list-style-type: none"> • 2 sibling groups (7 children) have been separated across non-kinship placements as follows: <ul style="list-style-type: none"> ➤ 1 group of 3 siblings – separated as 2 elder children (placed together) and younger child (solo placement) ➤ 1 group of 4 siblings – separated as 2 elder children (placed together) and 2 younger (placed together) ➤ 		

10.3.39	(a) During the period how many children or young people became a Looked After Child by age, gender and first placement	DSF – LAC Spreadsheet																																																																																																																																																																																																																								
<table border="1"> <thead> <tr> <th colspan="2" data-bbox="260 331 732 481" rowspan="2">Placement of new admissions to LAC</th> <th colspan="2" data-bbox="735 331 847 398"><1</th> <th colspan="2" data-bbox="850 331 962 398">1 - 4</th> <th colspan="2" data-bbox="965 331 1077 398">5 - 11</th> <th colspan="2" data-bbox="1080 331 1192 398">12 - 15</th> <th colspan="2" data-bbox="1195 331 1307 398">16+</th> <th colspan="2" data-bbox="1310 331 1422 398">Total</th> <th data-bbox="1425 331 1528 398" rowspan="2">Total</th> </tr> <tr> <th data-bbox="735 400 791 481">M</th> <th data-bbox="794 400 850 481">F</th> <th data-bbox="853 400 909 481">M</th> <th data-bbox="912 400 968 481">F</th> <th data-bbox="971 400 1027 481">M</th> <th data-bbox="1031 400 1086 481">F</th> <th data-bbox="1090 400 1145 481">M</th> <th data-bbox="1149 400 1204 481">F</th> <th data-bbox="1208 400 1264 481">M</th> <th data-bbox="1267 400 1323 481">F</th> <th data-bbox="1326 400 1382 481">M</th> <th data-bbox="1385 400 1441 481">F</th> </tr> </thead> <tbody> <tr> <td data-bbox="260 486 448 860" rowspan="5">Residential</td> <td data-bbox="451 486 732 553">Statutory</td> <td data-bbox="735 486 791 553">0</td> <td data-bbox="794 486 850 553">0</td> <td data-bbox="853 486 909 553">0</td> <td data-bbox="912 486 968 553">0</td> <td data-bbox="971 486 1027 553">0</td> <td data-bbox="1031 486 1086 553">0</td> <td data-bbox="1090 486 1145 553">2</td> <td data-bbox="1149 486 1204 553">0</td> <td data-bbox="1208 486 1264 553">1</td> <td data-bbox="1267 486 1323 553">0</td> <td data-bbox="1326 486 1382 553">3</td> <td data-bbox="1385 486 1441 553">0</td> <td data-bbox="1444 486 1528 553">3</td> </tr> <tr> <td data-bbox="451 557 732 624">Voluntary</td> <td data-bbox="735 557 791 624">0</td> <td data-bbox="794 557 850 624">0</td> <td data-bbox="853 557 909 624">0</td> <td data-bbox="912 557 968 624">0</td> <td data-bbox="971 557 1027 624">0</td> <td data-bbox="1031 557 1086 624">0</td> <td data-bbox="1090 557 1145 624">0</td> <td data-bbox="1149 557 1204 624">0</td> <td data-bbox="1208 557 1264 624">0</td> <td data-bbox="1267 557 1323 624">0</td> <td data-bbox="1326 557 1382 624">0</td> <td data-bbox="1385 557 1441 624">0</td> <td data-bbox="1444 557 1528 624">0</td> </tr> <tr> <td data-bbox="451 629 732 696">Private inc ECR's</td> <td data-bbox="735 629 791 696">0</td> <td data-bbox="794 629 850 696">0</td> <td data-bbox="853 629 909 696">0</td> <td data-bbox="912 629 968 696">0</td> <td data-bbox="971 629 1027 696">0</td> <td data-bbox="1031 629 1086 696">0</td> <td data-bbox="1090 629 1145 696">0</td> <td data-bbox="1149 629 1204 696">0</td> <td data-bbox="1208 629 1264 696">0</td> <td data-bbox="1267 629 1323 696">0</td> <td data-bbox="1326 629 1382 696">0</td> <td data-bbox="1385 629 1441 696">0</td> <td data-bbox="1444 629 1528 696">0</td> </tr> <tr> <td data-bbox="451 701 732 768">Secure</td> <td data-bbox="735 701 791 768">0</td> <td data-bbox="794 701 850 768">0</td> <td data-bbox="853 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data-bbox="1326 1442 1382 1498">5</td> <td data-bbox="1385 1442 1441 1498">6</td> <td data-bbox="1444 1442 1528 1498">110</td> </tr> </tbody> </table>			Placement of new admissions to LAC		<1		1 - 4		5 - 11		12 - 15		16+		Total		Total	M	F	M	F	M	F	M	F	M	F	M	F	Residential	Statutory	0	0	0	0	0	0	2	0	1	0	3	0	3	Voluntary	0	0	0	0	0	0	0	0	0	0	0	0	0	Private inc ECR's	0	0	0	0	0	0	0	0	0	0	0	0	0	Secure	0	0	0	0	0	0	0	0	0	0	0	0	0	Residential Total	0	0	0	0	0	0	2	0	1	0	3	0	3	Fostering	Foster Carers excluding relatives [Stranger]	2	5	1	0	0	2	0	2	0	1	3	10	13	Kinship care	4	4	6	4	15	10	6	7	0	3	1	28	59	Independent Providers	2	1	3	2	2	1	0	0	0	1	7	5	12	Fostering Total	8	10	10	6	17	13	6	9	0	5	4	1	43	84	Placed at Home with Parents		1	1	1	0	1	0	0	0	1	0	0	1	3	Placed for Adoption		0	0	0	0	0	0	0	0	0	0	0	0	0	Other		0	0	0	0	0	0	0	0	11	8	11	8	8	Overall TOTAL		9	11	10	7	17	13	8	10	1	2	5	6	110
Placement of new admissions to LAC		<1			1 - 4		5 - 11		12 - 15		16+		Total		Total																																																																																																																																																																																																											
		M	F	M	F	M	F	M	F	M	F	M	F																																																																																																																																																																																																													
Residential	Statutory	0	0	0	0	0	0	2	0	1	0	3	0	3																																																																																																																																																																																																												
	Voluntary	0	0	0	0	0	0	0	0	0	0	0	0	0																																																																																																																																																																																																												
	Private inc ECR's	0	0	0	0	0	0	0	0	0	0	0	0	0																																																																																																																																																																																																												
	Secure	0	0	0	0	0	0	0	0	0	0	0	0	0																																																																																																																																																																																																												
	Residential Total	0	0	0	0	0	0	2	0	1	0	3	0	3																																																																																																																																																																																																												
Fostering	Foster Carers excluding relatives [Stranger]	2	5	1	0	0	2	0	2	0	1	3	10	13																																																																																																																																																																																																												
	Kinship care	4	4	6	4	15	10	6	7	0	3	1	28	59																																																																																																																																																																																																												
	Independent Providers	2	1	3	2	2	1	0	0	0	1	7	5	12																																																																																																																																																																																																												
	Fostering Total	8	10	10	6	17	13	6	9	0	5	4	1	43	84																																																																																																																																																																																																											
Placed at Home with Parents		1	1	1	0	1	0	0	0	1	0	0	1	3																																																																																																																																																																																																												
Placed for Adoption		0	0	0	0	0	0	0	0	0	0	0	0	0																																																																																																																																																																																																												
Other		0	0	0	0	0	0	0	0	11	8	11	8	8																																																																																																																																																																																																												
Overall TOTAL		9	11	10	7	17	13	8	10	1	2	5	6	110																																																																																																																																																																																																												
	(b) To your knowledge have any of the children admitted during the period been subject to a full Adoption Order																																																																																																																																																																																																																									
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Children Subject to a full Adoption Order	<1			1 - 4		5 - 11		12 - 15		16+		Total		Total																																																																																																																																																																																																												
	M	F	M	F	M	F	M	F	M	F	M	F																																																																																																																																																																																																														
No of Children	0	0	0	0	0	0	0	0	0	0	0	0	0																																																																																																																																																																																																													
	(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																																																				
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Children Previously on the Child Protection Register	<1		1 - 4		5 - 11		12 - 15		16+		Total		Total																																								
	M	F	M	F	M	F	M	F	M	F	M	F																																									
No of Children	6	8	6	4	7	9	3	7	0	3	22	31	53																																								
	(d) Number of Children and Young People who became Looked After during the period had a CLA1 form completed and forwarded to School?																																																				
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CLA1 Form completed and forwarded to school	<1		1 - 4		5 - 11		12 - 15		16+		Total		Total																																								
	M	F	M	F	M	F	M	F	M	F	M	F																																									
No of Children	0	0	0	0	1	1	1	5	0	0	2	2	47																																								
	(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) Yes																																																				
Yes, all admissions to care were properly recorded.																																																					

10.3.40

(a) During the period how many children or young people became a Looked After Child by age, gender and legal status on admission;

DSF – LAC
Spreadsheet

Legal status	<1		1 - 4		5 - 11		12 - 15		16+		Total		Total I
	M	F	M	F	M	F	M	F	M	F	M	F	
Art 21(1) Accommodated <16	2	2	6	2	10	8	7	4	0	0	25	16	41
Art. 21(3) Accommodated 16+	0	0	0	0	0	0	0	0	11	10	11	10	21
Art. 21(4) Accommodated	3	3	2	1	5	2	0	2	1	0	11	8	19
Art. 21(5) Accommodated 16+ <21	0	0	0	0	0	0	0	0	0	1	0	1	1
Art. 44 (5) Secure	0	0	0	0	0	0	0	0	0	0	0	0	0
Art. 44 (6) Interim Secure	0	0	0	0	0	0	0	0	0	0	0	0	0
Art. 50 (1) (a) Care Order	0	1	0	0	0	0	0	0	0	0	0	1	1
Art. 57 (1) Interim CO	2	4	0	1	0	1	0	0	0	0	2	6	8
Emergency Protection Order Art. 63	1	0	2	2	0	2	0	2	0	0	3	6	9
Art. 23(2) Accommodated	0	0	0	0	0	0	0	0	0	0	0	0	0
Other	1	1	0	1	2	0	1	2	0	2	4	6	10
TOTAL	9	11	10	7	17	13	8	10	12	13	56	54	110

	(b) (i) Were these admissions planned, unplanned or emergency;	
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For each of the above totals how many of these were:-	<1		1 - 4		5 - 11		12-15		16+		Total		Total I
	M	F	M	F	M	F	M	F	M	F	M	F	
Planned	4	7	2	1	4	3	3	4	3	4	16	19	35
Unplanned	2	4	4	4	6	4	2	1	1	2	15	15	30
Emergency	3	0	4	2	7	6	3	5	8	7	25	20	45
Total	9	11	10	7	17	13	8	10	12	13	56	54	110

	(b) (ii) Of those that were unplanned or emergency how many were admitted to kinship foster care?	
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41 children were admitted to kinship foster care through an unplanned or emergency admission.

	(b) (iii) Of those unplanned or emergency admissions how many were admitted by RESWS?	
--	---	--

There were **0** unplanned or emergency admission was admitted by RESWS.

10.3.41	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	DSF – LAC Spreadsheet
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Length of time Looked After prior to discharge	<1		1 - 4		5 - 11		12 - 15		16+		Total		Total
	M	F	M	F	M	F	M	F	M	F	M	F	
Under 2 weeks	0	0	0	2	0	0	0	0	0	0	0	2	2
2 weeks < 6 weeks	0	0	0	0	0	0	0	0	0	0	0	0	0
6 weeks < 3 Months	1	0	1	0	0	1	0	0	1	1	3	2	5
3 Months < 6 months	1	0	0	0	0	0	1	0	2	0	4	0	4
6 Months < 1 Year	0	0	0	0	1	2	1	0	4	0	6	2	8
1 yr < 2 yrs	0	0	2	2	1	1	3	0	7	6	13	9	22
2 yrs < 3 yrs	0	0	3	2	0	1	0	0	2	1	5	4	9
3yrs < 5 yrs	0	0	1	2	0	1	0	1	1	0	2	4	6
5 yrs < 10 yrs	0	0	0	0	2	0	0	1	5	7	7	8	15
10+ yrs	0	0	0	0	0	0	0	0	4	5	4	5	9
Total	2	0	7	8	4	6	5	2	26	20	44	36	80

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	DSF – LAC Spreadsheet
----------------	--	-----------------------

Destination	<1		1 - 4		5 - 11		12 - 15		16+		Total		Total
	M	F	M	F	M	F	M	F	M	F	M	F	
Returned to Parents/Siblings	1	0	3	1	4	6	5	2	5	6	18	15	33
Returned to Relatives/friends	1	0	2	0	0	0	0	0	2	1	5	1	6
Adopted	0	0	2	5	2	0	0	0	0	0	4	5	9
Independent living/Tenancy (NIHE/H Assoc./Private etc)									9	3	9	3	12
Foster Carers (GEM)									7	6	7	6	13
Jointly Commissioned Supported Accommodation Projects									2	4	2	4	6
Bed + Breakfast									0	0	0	0	0
Hostel, Foyer									0	0	0	0	0
Supported Board and Lodgings									1	0	1	0	1
Prison, Hospital									0	0	0	0	0
Other	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	2	0	7	6	6	6	5	2	26	20	46	34	80

	(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	
--	--	--

Category	16		17		Total		Total
	M	F	M	F	M	F	
Number entitled to access Leaving Care Services	1	2	25	18	26	20	46
Number not entitled to access Leaving Care Services	0	0	0	0	0	0	0
Total	1	2	25	18	26	20	46

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.	DSF – LAC Spreadsheet
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8 children became subject of a Residence Order during this reporting period.

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

10.4 CHILDREN (LEAVING CARE) ACT (NI) 2002

10.4.1	Number of young people subject to Leaving Care Act by category, age and gender	DSF-16+ Spreadsheet
---------------	--	---------------------

Category	Male						Total	Female						Total	Total
	16	17	18	19	20	21+	Male	16	17	18	19	20	21+	Female	
Eligible	33	46	0	0	0	0	79	27	39	0	0	0	0	66	145
Relevant	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Former Relevant	0	0	44	24	18	11	97	0	0	19	26	17	17	79	176
Qualifying	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	33	46	44	24	18	11	176	27	39	19	26	17	17	145	321

10.4.2	<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>	DSF-16+ Spreadsheet
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Legal Status	16	17	Total
Accommodated (Article 21)	14	47	61
Care order (Art 50 or 59)	36	34	70
Interim Care Order (Art 57)	3	2	5
Deemed Care Order	0	0	0
Other	7	2	9
Total	60	85	145

10.4.6	Of the young people reported at 10.4.1 (a) What are the social worker and personal adviser arrangements in place for each category of young people?	DSF-16+ Spreadsheet
---------------	--	---------------------

Category	Number of Young People with				
	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	20	0	125	0	20
Relevant	0	0	0	0	0
Former Relevant	30	106	40	0	10
Qualifying	0	0	0	0	0

	(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?																																		
<table border="1"> <thead> <tr> <th>Category</th> <th>No. without an Up to Date Pathway Plan</th> </tr> </thead> <tbody> <tr> <td>Eligible</td> <td>0</td> </tr> <tr> <td>Relevant</td> <td>0</td> </tr> <tr> <td>Former Relevant</td> <td>20</td> </tr> <tr> <td>Qualifying</td> <td>0</td> </tr> <tr> <td>Total</td> <td>20</td> </tr> </tbody> </table>			Category	No. without an Up to Date Pathway Plan	Eligible	0	Relevant	0	Former Relevant	20	Qualifying	0	Total	20																					
Category	No. without an Up to Date Pathway Plan																																		
Eligible	0																																		
Relevant	0																																		
Former Relevant	20																																		
Qualifying	0																																		
Total	20																																		
10.4.7	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?	DSF-16+ Spreadsheet																																	
<table border="1"> <thead> <tr> <th rowspan="2">Category</th> <th rowspan="2">No. Without a completed Needs Assessment</th> <th colspan="3">Time Waiting</th> </tr> <tr> <th><3 Months</th> <th>3 - 6 Months</th> <th><1 Year</th> </tr> </thead> <tbody> <tr> <td>Eligible</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Relevant</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Former Relevant</td> <td>20</td> <td>20</td> <td>0</td> <td>0</td> </tr> <tr> <td>Qualifying</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Total</td> <td>20</td> <td>20</td> <td>0</td> <td>0</td> </tr> </tbody> </table>			Category	No. Without a completed Needs Assessment	Time Waiting			<3 Months	3 - 6 Months	<1 Year	Eligible	0	0	0	0	Relevant	0	0	0	0	Former Relevant	20	20	0	0	Qualifying	0	0	0	0	Total	20	20	0	0
Category	No. Without a completed Needs Assessment	Time Waiting																																	
		<3 Months	3 - 6 Months	<1 Year																															
Eligible	0	0	0	0																															
Relevant	0	0	0	0																															
Former Relevant	20	20	0	0																															
Qualifying	0	0	0	0																															
Total	20	20	0	0																															

10.4.8	Summary of failure to comply as detailed in 10.4.6, 10.4.7 at period end.	Data Return 10																																																					
<p>10.4.6(a): 20 young people are awaiting allocation of a personal advisor, some of these young people have not yet transferred to the team and others are due to staff shortages, these young people continue to have an allocated social worker.</p> <p>10.4.7: there are 20 pathway needs assessments that require review for former relevant young people, all are outstanding less than 3 months due to ongoing staffing issues as a result of vacancies and sickness within the service. Young people continue to be visited and supported and the reviews will be prioritised in line with staffing capacity</p>																																																							
10.4.9	Of the young people reported at 10.4.1 what are their living arrangements at period end? Please complete for (a) Eligible;	DSF-16+ Spreadsheet																																																					
<table border="1"> <thead> <tr> <th data-bbox="225 949 1058 1003">Placement Type</th> <th data-bbox="1058 949 1193 1003">16</th> <th data-bbox="1193 949 1329 1003">17</th> <th data-bbox="1329 949 1465 1003">Total</th> </tr> </thead> <tbody> <tr> <td data-bbox="225 1003 1058 1057">Foster Placement (Stranger)</td> <td data-bbox="1058 1003 1193 1057">12</td> <td data-bbox="1193 1003 1329 1057">16</td> <td data-bbox="1329 1003 1465 1057">28</td> </tr> <tr> <td data-bbox="225 1057 1058 1111">Foster Placement (Kinship)</td> <td data-bbox="1058 1057 1193 1111">10</td> <td data-bbox="1193 1057 1329 1111">10</td> <td data-bbox="1329 1057 1465 1111">20</td> </tr> <tr> <td data-bbox="225 1111 1058 1164">At Home In Care</td> <td data-bbox="1058 1111 1193 1164">8</td> <td data-bbox="1193 1111 1329 1164">6</td> <td data-bbox="1329 1111 1465 1164">14</td> </tr> <tr> <td data-bbox="225 1164 1058 1218">Residential Children's Home</td> <td data-bbox="1058 1164 1193 1218">9</td> <td data-bbox="1193 1164 1329 1218">9</td> <td data-bbox="1329 1164 1465 1218">18</td> </tr> <tr> <td data-bbox="225 1218 1058 1272">Secure Care</td> <td data-bbox="1058 1218 1193 1272">1</td> <td data-bbox="1193 1218 1329 1272">1</td> <td data-bbox="1329 1218 1465 1272">2</td> </tr> <tr> <td data-bbox="225 1272 1058 1326">Specialist Residential Placement (NI/UK)</td> <td data-bbox="1058 1272 1193 1326">2</td> <td data-bbox="1193 1272 1329 1326">2</td> <td data-bbox="1329 1272 1465 1326">4</td> </tr> <tr> <td data-bbox="225 1326 1058 1379">Supported Lodgings/STAY</td> <td data-bbox="1058 1326 1193 1379">8</td> <td data-bbox="1193 1326 1329 1379">7</td> <td data-bbox="1329 1326 1465 1379">15</td> </tr> <tr> <td data-bbox="225 1379 1058 1433">Hospital</td> <td data-bbox="1058 1379 1193 1433">0</td> <td data-bbox="1193 1379 1329 1433">0</td> <td data-bbox="1329 1379 1465 1433">0</td> </tr> <tr> <td data-bbox="225 1433 1058 1487">Jointly Commissioned Supported Accommodation Projects</td> <td data-bbox="1058 1433 1193 1487">2</td> <td data-bbox="1193 1433 1329 1487">9</td> <td data-bbox="1329 1433 1465 1487">11</td> </tr> <tr> <td data-bbox="225 1487 1058 1541">Unregulated Placement</td> <td data-bbox="1058 1487 1193 1541">8</td> <td data-bbox="1193 1487 1329 1541">11</td> <td data-bbox="1329 1487 1465 1541">19</td> </tr> <tr> <td data-bbox="225 1541 1058 1594">Other</td> <td data-bbox="1058 1541 1193 1594">0</td> <td data-bbox="1193 1541 1329 1594">14</td> <td data-bbox="1329 1541 1465 1594">14</td> </tr> <tr> <td data-bbox="225 1594 1058 1648">Total</td> <td data-bbox="1058 1594 1193 1648">60</td> <td data-bbox="1193 1594 1329 1648">85</td> <td data-bbox="1329 1594 1465 1648">145</td> </tr> </tbody> </table>				Placement Type	16	17	Total	Foster Placement (Stranger)	12	16	28	Foster Placement (Kinship)	10	10	20	At Home In Care	8	6	14	Residential Children's Home	9	9	18	Secure Care	1	1	2	Specialist Residential Placement (NI/UK)	2	2	4	Supported Lodgings/STAY	8	7	15	Hospital	0	0	0	Jointly Commissioned Supported Accommodation Projects	2	9	11	Unregulated Placement	8	11	19	Other	0	14	14	Total	60	85	145
Placement Type	16	17	Total																																																				
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Other	0	14	14																																																				
Total	60	85	145																																																				

(b) Relevant;

Living Arrangements	16	17	Total
Tenancy (NIHE/Housing Association/Private)	0	0	0
At Home with Parents/Siblings	0	0	0
Jointly Commissioned Supported Accommodation Projects	0	0	0
Relatives/friends	0	0	0
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	0	0

(c) Former Relevant; and

Living Arrangements	18	19	20	21+	Total
Former Foster Carers (GEM)	22	18	9	10	59
Tenancy (NIHE/Housing Association/Private)	20	11	12	8	51
At Home with Parents/Siblings	5	6	6	3	20
Jointly Commissioned Supported Accommodation Projects	6	1	0	0	7
Relatives/friends	3	3	4	2	12
Hostel, B+B, Foyer	4	7	3	3	17
Supported Board and Lodgings	0	0	0	0	0
Halls of residence/Student Accommodation	2	4	1	1	8
Prison	1	0	0	1	2
Other	0	0	0	0	0
Total	63	50	35	28	176

(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	0	0	0
At Home with Parents/Siblings	0	0	0	0	0	0	0
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	0	0	0	0
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	0	0	0
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;						DSF-16+ Spreadsheet
ETE Status	16	17	Total	No. Receiving financial support			
Secondary Level Education	29	31	60	60			
Further Education	19	28	47	47			
Training (Govt. sponsored training)	8	7	15	15			
Pre-Vocational	0	6	6	6			
Employment	0	1	1	1			
ETE Inactive	4	12	16	16			
Training (Non Govt. sponsored training)	0	0	0	0			
Other(Sick/Disabled, Parent, Carer)	0	0	0	0			
Total	60	85	145	145			

(b) Relevant;

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

(c) Former Relevant; and

ETE Status	18	19	20	21+	Total	No. Receiving Financial support
Secondary Level Education	5	0	0	0	5	5
Further Education	26	17	6	6	55	55
Higher Education	10	6	4	5	25	25
Training (Govt. sponsored training)	4	8	3	1	16	16
Pre-Vocational	3	3	3	11	20	20
Employment	9	6	10	0	25	25
ETE Inactive	6	6	6	5	23	23
Training (Non Govt. sponsored training)	0	4	3	0	7	7
Other	0	0	0	0	0	0
Total	63	50	35	28	176	176

(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	0	0	0	0
Higher Education	0	0	0	0	0	0	0	0
Training (Govt. sponsored training)	0	0	0	0	0	0	0	0
Pre-Vocational	0	0	0	0	0	0	0	0
Employment	0	0	0	0	0	0	0	0
ETE Inactive	0	0	0	0	0	0	0	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	0	0	0	0	0
10.4.11	Of the young people reported at 10.4.1 how many were convicted during this reporting period?							DSF16 S/Sheet
Category	Convictions within last 12 months	Number of Care Leavers formally cautioned during the period	Number of Care Leavers formally remanded during the period	Number of Care Leavers formally convicted during the period				
Eligible	Not Required	10	1	1				
Relevant		0	0	0				
Qualifying		0	0	0				
Former Relevant		9	1	0				
Total	0	19	2	1				

10.4.12	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?’	DSF-16+ S/Sheet
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Type of Disability	Male	Female	Total
Physical (Ex. Sensory)	1	0	1
Sensory	0	0	0
Learning	5	4	9
Chronic illness	0	0	0
Autism(ASD)/Aspergers/ADHD	31	13	44
Other (undefined)	0	0	0
No Disability	139	128	267
Total	176	145	321

10.4.13	Of the young people reported at 10.4.1 what is their parental status at period end?’	DSF-16+ S/Sheet
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Parental Status	No of Young People
Parent	9
Lone Parent	6

10.5 FOSTERING

10.5.1	(a) How many foster carers are registered with the Trust at period end? How many of the carers above also provide a GEM placement? Of the carers above how many are Prospective adopters dually approved as foster carers? Of the Prospective Adopters/Dually Approved carers above how many are Concurrent Foster/Adoptive Carers?	DSF-Foster care Spreadsheet
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Type of approval	No. of Carers	Non-Kinship (Respite only)	Non Kinship Short-term Only	Non-Kinship (Medium-Long term only)	Non-Kinship (Multi-approved)
Foster Care (kinship) < 12 weeks not yet approved by panel	7				
Foster Care (kinship) >12 wks but not panel approved by 16 wks	4				
Kinship Foster Carers not approved within 12 weeks, but within 16 weeks during the period	23				
Panel Approved kinship carer	121*				
Panel Approved Foster Carer (Non-kinship)	85	40	33	4	8
Specialist Foster Carers (Fee Paid carers) NOTE Amended definition below	76	13	20	27	16
Total	316	53	53	31	24
How many of the Carers above also provide a GEM Placement*	23**				
Of the carers above how many are Prospective	14				

Adopters dually approved as foster carers					
Of the Prospective Adopters/Dually Approved carers above how many are Concurrent Foster/Adoptive Carers	1				

* 18 Kinship households in receipt of a fee

23 De-registered GEMS only carers – 20 + 9 with Independent Providers = **Total 52 GEMS placements

(b) Please give the number of other foster carers;	
--	--

Other Foster carers	No. of Carers
Independent Provider Foster Carers	88
Carers providing care only to children with a disability and who are not available to provide care for Looked After Children	0
Total	88

	(c) Please give a breakdown of the number of foster carers de-registered during the period and the reason;																																									
<table border="1"> <thead> <tr> <th>No. of Foster Carers de-registered during the period*, by reason.</th> <th>Kinship Carers</th> <th>Non Kinship Carers</th> <th>No. of Carers De-registered</th> <th>Total no places de-registered</th> </tr> </thead> <tbody> <tr> <td>Carer has adopted or been granted a residence order</td> <td>1</td> <td>3</td> <td>4</td> <td>5</td> </tr> <tr> <td>No longer wishing to foster</td> <td>0</td> <td>4</td> <td>4</td> <td>5</td> </tr> <tr> <td>Retired/phased out</td> <td>2</td> <td>0</td> <td>2</td> <td>2</td> </tr> <tr> <td>Deregistered following concerns re: care of child/ren</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>De-registered by Trust following complaints/allegations</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Opted to be GEM Carer Only</td> <td>5</td> <td>2</td> <td>7</td> <td>7</td> </tr> <tr> <td>Total</td> <td>8</td> <td>9</td> <td>17</td> <td>19</td> </tr> </tbody> </table>			No. of Foster Carers de-registered during the period*, by reason.	Kinship Carers	Non Kinship Carers	No. of Carers De-registered	Total no places de-registered	Carer has adopted or been granted a residence order	1	3	4	5	No longer wishing to foster	0	4	4	5	Retired/phased out	2	0	2	2	Deregistered following concerns re: care of child/ren	0	0	0	0	De-registered by Trust following complaints/allegations	0	0	0	0	Opted to be GEM Carer Only	5	2	7	7	Total	8	9	17	19
No. of Foster Carers de-registered during the period*, by reason.	Kinship Carers	Non Kinship Carers	No. of Carers De-registered	Total no places de-registered																																						
Carer has adopted or been granted a residence order	1	3	4	5																																						
No longer wishing to foster	0	4	4	5																																						
Retired/phased out	2	0	2	2																																						
Deregistered following concerns re: care of child/ren	0	0	0	0																																						
De-registered by Trust following complaints/allegations	0	0	0	0																																						
Opted to be GEM Carer Only	5	2	7	7																																						
Total	8	9	17	19																																						
	(d) Please advise of the recruitment process activity during the period;																																									
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Specialist Foster Carers (Fee Paid carers)	78	0	0	Places have a range of fees levels depending on complexity & foster carers situation.
Total	339	5	5	
Prospective Adopters dually approved as foster carers	14	8		2 households to be de-registered, 3 households newly approved end of March 2025 and 3 with plans to place
Total	14	8		
10.5.3	How many foster carers have annual reviews outstanding?			Data return 10
	Please provide the number of viability visits undertaken during the reporting period. (moved from 10.5.1f)			DSF-Foster care Spreadsheet
49 Foster Carer Annual reviews are outstanding				
Viability Visits	Joint Visits	Visits completed by Child's Social Worker	Visits Completed by Supervising Social Worker	
Number of Visits	54	0	9	
10.5.4	Please provide specific actions being taken by the Trust to ensure outstanding reviews are completed			Data return 10
Annual reviews continued to be monitored and tracked via internal processes.				
49 annual reviews were out of timescale for the following reasons:				
<ul style="list-style-type: none"> • 12 were delayed due to staff absence • 11 de-registrations required (scheduled/to be scheduled for Fostering Panel) • 9 awaiting medical and/or Access NI checks • 6 foster carers are on a break • 5 fostering households are undergoing top up assessment • 4 foster carers are booked into panel for April and May 				

- 1 foster carer is transferring to STAY project April 2025
- 1 delayed due to an allegation/ongoing investigation, no child in placement

Delayed annual reviews continue to be prioritised across the service.

Staff absence contributed to a high number of outstanding reviews and a backlog of required de-registrations. Attempts were made to secure temporary staff to prevent this backlog but were unsuccessful. Additional Fostering Panels are being considered to help reduce the backlog. Staff members have been working additional hours to address this also.

Different methods of tracking annual reviews are being considered, including forecasting and arranging annual reviews 12 months in advance, and a centralised tracking system for statutory checks to prevent delay

10.5.5

What action is being taken to maintain and increase the range, diversity and supply of foster care places

Data return 10

The Trust have two Recruitment and Assessment Fostering Teams, which continue to engage with the Regional Recruitment working group and contribute toward the Recruitment Strategy to maintain and increase the range, diversity and supply of foster care placements. As well as social work staff, the Fostering Service also has a cohort of Foster Carers who participate in recruitment work. This co-production work is hugely important and provides a perspective from people who are making a difference in the lives of foster children and young people.

During the above period, the Trust fostering service has pursued strategies to recruit foster carers by having a presence at a diverse range of community events. This reflects a commitment to reaching potential carers from all backgrounds, ensuring inclusivity and diversity in the fostering community.

A number of recruitment events have taken place within the reporting period including:

- Range of Pop-up stands embedded in local communities such as Trust hospital sites, Leisure Centres, Shopping Centres & Libraries
- Down GAA Football and Hurling County Finals @ Pairc Esler
- Lisburn Twilight Nights
- Bangor Christmas Light Switch On
- Kirkistown Christmas Fair
- Christmas Event at Trinity Presbyterian Church in Cloughy and Greyabbey
- Belfast Christmas Market
- Montalto Twilight Christmas Market
- St Georges Market in Belfast
- Head Teachers Annual Conference @ Slieve Donard Hotel
- Love Your Home Exhibition at the Eikon Centre, Lisburn

- Sexual Health and Domestic Abuse Conference @ Lisburn Island Centre

The Fostering Service has continued to work in partnership with the Down GAA Club who have once again shared flyers and information with all 48 affiliated clubs in the local area. Staff and Foster Carers also attended the two County finals at Pairc Esler in November where they had the opportunity to engage with the crowds attending the matches.

The teams have also engaged with faith communities through partnerships with religious institutions. One example of this was an event at two Presbyterian Churches during Sunday service where the church members were provided with a presentation on Foster Care followed by an opportunity to chat and ask questions. The existing partnership work with the Catholic Church has also continued with the sharing of fostering flyers on church bulletins/Facebook pages asking people to consider fostering.

The fostering service also continues to make concerted efforts to reach other communities. A new working relationship has been established with LGBTQ+ charities (HERE NI and Rainbow Project) which emphasises a commitment to encouraging people to consider fostering. Electronic flyers have been provided to be shared on their Facebook Pages and there are plans in place for further activity in the coming months, including an online information session delivered by a social worker and foster carer.

As always, staff and foster carers continue to give clear messaging to dispel common misconceptions about fostering. They give out "myth-busting" flyers that encourage enquiries from same-sex couples, people with disabilities and health issues, people from any socioeconomic background, individuals who rent or own their homes, single or married and those who are employed or unemployed. This approach underscores the fostering service's inclusive ethos and its determination to recruit carers from all lifestyles.

The service holds monthly recruitment meetings with colleagues from STAY, Disability Fostering and the two Recruitment and Assessment Teams and most importantly Foster Carer who assist us to look at new initiatives and shared ideas and to ensure the Trust continue to develop initiatives that include having direct contact with a diverse range people who will be able to meet the needs of our children.

In addition to the above community based activities, the Fostering Service have also made significant efforts to raise the profile of fostering with all Trust staff which has resulted in a number of employees becoming approved foster carers. Various methods have been implemented such as all user emails, the Trust desktop advert and virtual information sessions.

Over the last few months the Fostering Service have begun making connections with various employers, charities and community organisations to explore opportunities for partnership working with the aim of increasing the profile of fostering with their staff, volunteers and customers/service users. This strategy is in the early stages but has already resulted in the sharing of information with their social media followings, virtual information sessions and

access to staff/volunteers at training events etc. The following groups are committed to working together:

- NI Childminders Association (NICMA)
- Lisburn Feile
- Via Wings (Community Non-Profit Organisation)
- SPAR/Hendersons Group
- St John's
- RFCA (Reserve Forces and Cadets Association)
- Kilcooley Women's Centre (Bangor)
- Women's Aid NI

10.6	(a) Please provide the number of Allegations made against Foster carers during 30/9/24 - 1/4/25	
There were 4 Allegations made against Foster carers during the reporting period.		
	(b) Please provide the number of Complaints made against Foster carers during the period 30/9/24 - 1/4/25	
There were 0 Complaints made against Foster carers during the reporting period		

10.5 PRIVATE FOSTERING The Children Order (NI) 1995 - Part X <i>NB Advice from DLS is that the 28day period should be continuous.</i>		
10.5.6	What steps has the Trust taken to encourage notifications?	DSF-Foster care Spreadsheet
<p>There is an ongoing regional need to promote and raise awareness of private fostering as there is a lack of notifications received. This is an issue for all Trusts despite leaflets being distributed.</p>		
10.5.7	How many Private Fostering Arrangements under Article 106 are in place within the Trust as at the 31 st March?	0
10.5.8	How many Private Fostering notifications under Article 106 has the Trust received during the period?	0
10.5.9	Please provide DOB and Date notification was received in respect of each child/young person reported at 10.5.8	Not applicable
10.5.10	Of the notifications received (10.5.8) how many has the Trust accepted?	Not applicable
10.5.11	Of those notifications not accepted please summarise reasons and action taken by the Trust	Not applicable
10.5.12	Number of appeals made during the year under Article 113	0
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
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. Intercountry Adoption within the period.	0
	Please specify the child's DOB and the date the Trust received each notification	Not applicable

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	(a) Number of enquiries, by type, received by the Trust and what prompted their initial approach?	DSF-Adoption Spreadsheet
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Source of Enquiries	Domestic	Inter-Country
Central Regional Team (e.g. Website)	27	0
Newspaper advertisement	0	0
Radio advertisement	0	0
Word of mouth	5	0
Trust Website	0	0
Specific local campaign	0	0
Total	32	0

	(b) Please provide the waiting time from initial inquiry to commencement of training	
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Time waiting	Domestic	Inter-Country
Less than 1 month	0	0
More than 1 month less than 3 months	2	0
More than 3 months less than 6 months	0	0
More than 6 months less than 12 months	4	0
1 year or more	0	0
Total	6	0

10.6.2	Number of domestic applications for assessment received by the Trust by civil status of applicant	DSF-Adoption Spreadsheet
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Household type	No.
Single carer	0
Cohabiting heterosexual couple (where this is a joint application)	0
Cohabiting same sex couple (where this is a joint application)	1
Married	6
Total	7

10.6.3	Number of Prospective Domestic Adopters awaiting assessment at period end, length of time waiting, and reason waiting	DSF-Adoption Spreadsheet
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Time waiting	Reason waiting				
	No Social Worker Available to commence assessment	Unlikely that child waiting at this time fits their criteria	Applicant not ready to proceed	Other(please specify below)	Total
Less than 1 month	0	0	0	0	0
More than 1 month less than 3 months	0	0	0	0	0
More than 3 months less than 6 months	0	0	0	0	0
More than 6 months less than 12 months	0	0	0	0	0
1 year or more	0	0	0	0	0
Total	0	0	0	0	0

10.6.6	Of all adoption assessments (both domestic and inter country) completed during the period please give details of the outcomes	DSF-Adoption Spreadsheet
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Outcome of assessment	No. of Domestic Assessments
Counselled out in Assessment Process	0
Went to Panel and Refused	0
Households approved as Adoptive carers	0
Households approved as Dual carers/Concurrent Carers	8
Households where previous Foster Carers have been approved as Adoptive carers for their LAC	1
Total	9

10.6.7	Number of looked after children freed for adoption and not yet placed with their prospective adopters as at 31 st March; and duration of wait since freeing order as granted	DSF-Adoption Spreadsheet
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Length of time awaiting placement form the granting of the Freeing Order	<1		1 - 4		5 - 9		10 - 15		16+ years		Total	
	M	F	M	F	M	F	M	F	M	F	M	F
Less than 1 month	0	0	2	0	0	0	0	0	0	0	2	0
More than 1 month less than 3 months	0	0	2	2	0	0	0	0	0	0	2	2
More than 3 months less than 6 months	0	0	3	0	0	0	0	0	0	0	3	0
More than 6 month less than 12 months	0	0	2	2	0	0	0	0	0	0	2	2
1 year or more	0	0	0	0	0	0	0	0	0	0	0	0
Total	0	0	9	4	0	0	0	0	0	0	9	4

	(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.	
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Length of Time	0-<6 Months	6 months - <1 year	1-<2 years	2-<3 years	3-<5 years	5+ years	Total
No. of Children	3	1	4	0	1	0	9

10.6.9	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	DSF-Adoption Spreadsheet
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Children who have received a best interest decision and have not been placed with approved adopter.	<1		1 - 4		5 - 9		10 - 15		16+ years		Total	
	M	F	M	F	M	F	M	F	M	F	M	F
Less than 1 month	0	0	0	0	1	0	0	0	0	0	1	0
More than 1 month less than 3 months	0	0	0	0	0	1	0	0	0	0	0	1
More than 3 months less than 6 months	0	0	3	0	1	0	0	0	0	0	4	0
More than 6 month less than 12 months	0	0	6	5	1	1	0	0	0	0	7	6
1 year or more	0	0	5	3	0	1	0	0	0	0	5	4
Total	0	0	14	8	3	3	0	0	0	0	17	11

10.6.10	How many children are in receipt of an Adoption Allowance at 31st March and how many households is this?	DSF-Adoption Spreadsheet
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Adoption Allowances	<1		1 - 2		3 - 4		5 - 9		10 - 15		16+ years		Total	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F
No. of Adoption Allowances paid in respect of children at 31 st March 2025	0	0	1	0	2	1	15	10	10	16	8	4	36	31

55 households are in receipt of adoption allowance at 31st March 2025.

10.6.11	Of the number at 10.6.10 how many commenced during the period and how many households is this?	DSF-Adoption Spreadsheet
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	<1		1 - 2		3 - 4		5 - 9		10 - 15		16+ years		Total	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F
No. of Adoption allowances reported above, that commenced during the period?	0	0	1	0	0	0	0	0	0	0	0	0	1	0

1 household commenced receipt of adoption allowance in this reporting period.

10.6.12	Details of recruitment, assessment, training, support for prospective adopters	Data Return 10
<p>Recruitment- A steady rate of enquiries to adopt has continued in this reporting period. On average 16-20 sets of applicants remained in the preliminary phase for checks and attended training in this period.</p> <p>A Preparation to Adopt course was held over 3 days in October 2024. This was facilitated by the Adoption team and included guest speakers, a clinical child psychologist and adoptive parents. 14 individuals attended, all of whom applied to progress to a full adoption assessment.</p> <p>At period end 13 assessments were being undertaken by the team of adoption Social workers.</p> <p>Transitions in placement training was delivered by the clinical psychologist and an adoption social worker in November 2024 to foster carers and prospective adopters.</p> <p>The Adoption staff continue to avail of the monthly clinic with the Clinical Psychologist within the adoption service to discuss the resilience and mental health of applicants.</p> <p>The Trust's Pre linking Panel is held monthly and has considered the matching needs of 29 children in this reporting period. This included 9 sets of siblings. These children range in age from infants to 6 + years old.</p> <p>Prospective adopters have continued to receive social work support in this period as they navigate meeting the complex needs of the children placed in their care through the delivery of therapeutic parenting. Placement support is delivered in conjunction with Permanence team staff and Clinical Psychology.</p> <p>The Adoption team operate within the Access to Records guidance for adult adopted people. The number of individuals requesting their files has continued to increase and a waiting list has now been created. No additional resources were received to undertake this highly sensitive and time consuming work. A regional review of the implementation of the guidance took place in November 2024.</p> <p>The Trust's Adoption panel meets twice a month to consider best interests recommendations, matching proposals and adoptive applicants for approval. In this period, 9 new approvals were recommended for adoption. This was a total of 18 newly approved prospective adopters for the year which is a new high.</p> <p>Support and training post approval is the target area in 2025 with a task and finish group drawn from permanence and adoption staff formulating the plans for delivery of a pilot group of approved adopters awaiting a match. The team have introduced a buddying/mentoring scheme to support those in assessment post approval and placement which is being taken forward by 1 social worker.</p>		

10.6.13	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	Data Return 10
<p>During the reporting period the Trust supported 55 families via the post adoption and permanence service. The Trust on average facilitated 7 direct post adoption contacts per month and 8 indirect contacts.</p> <p>The Trust have continued to be creative in its response to the Adoptive families during this period</p> <p>Families have continued to be supported by the social workers who have carried out joint pieces of work, accompanied when required by the Lead clinical psychologist for the service.</p> <p>Counselling sessions with a freelance post adoption specialist have been offered to 10 adoptive families during this period.</p> <p>All social workers in the service are trained in a mixture of Theraplay and DDP which has meant they could offer more practical, hands on, assistance in the home with the children within their adoptive placements. 2 staff members are about to undergo the level 2 training in DDP thus bringing most specialist skills to the service.</p> <p>Play therapy and other therapies such as Filial therapy or Art therapy were also part funded where required.</p> <p>There were no breakdowns of those in their adoptive placements.</p> <p>The Trust has continued to run the well-attended attachment based swimming course. As in previous years, this group targeted adoptive parents with pre-school aged children and ran over a course of 6 weeks.</p> <p>This year the post adoption team ran a Pumpfest at Halloween which proved very popular and was attended by 75 people in total.</p> <p>The most exciting change to the post adoption service over this period however was the creation of the new post adoption team which came into place in March .This saw a separation of the two previously mixed permanence and post adoption teams into 2 separate, distinct teams with 1 focusing on legal permanence and the associated court work and the latter, the post adoption team, looking to establish more groups and more services for the adoptive families throughout their adopted child's journey to adulthood. A newly appointed senior came into post at the close of March to bring this forward.</p>		

EARLY YEARS

10.7.1	Please provide the current early years provision / places, registrations and de-registrations Include Number of Approved Home Child Carers					DSF-Early Years Spreadsheet
Sector	Current Provision		Registrations/Deregistrations/Voluntary Ceased			
	Total Number of Services	Number of Places	Number New Registrations During period	De-registrations		
				Number Deregistered by the Trust during period	No Voluntary Ceased during the period	
Day Nursery	64	3610	1	0	0	
Out of School within Day Nursery	47	1591				
<i>Total Day Nursery Places</i>		5201				
Crèche	2	47	0	0	0	
Playgroup	66	2410	0	0	0	
Stand-Alone Out of School	40	1452	1	0	1	
Childminder	378	2257	6	0	17	
Approved Home Child Carers	24	0	0	0	5	
Holiday Scheme	2	96	0	0	0	
Two year old Programme.	10	120	0	0	1	
Total	633	11583	8	0	24	

10.7.2	Registration issues and commentary as at period end <i>(If any challenges or issues please provide a brief analysis)</i>	Data Return 10
<p>10.7.1 The number of childminders continues to steadily decline, with more leaving the role than applying. This is significantly reducing the childcare services available to families projecting a concerning picture for children in need. The Trust is struggling to source childcare for children in need as a result and with a childcare an increasing part of a family support/child protection plan is it alarming that the figures for childminders continue to drop. This may also illuminate a potential rise in un-registered childminding however currently this is under-reported in the Trust in comparison to other Trusts.</p> <p>10.7.3 There is a total of 1 SFDC setting that has not been inspected which is overdue by 0-3 months.</p> <p>There are 11 overdue childminders all in the 0-3 month range. 5 of which closed within the reporting period so not pending inspection.</p> <p>Under the 'Two year old programmes' that were due for inspection 1 is not accounted for as a current pending inspection as it closed in December 2024.</p> <p>Overdue inspections are largely caused by sick leave. Despite this the number of overdue inspections is considered low and this may have been helped by the implementation of the inspection pilot across the service. The pilot is a more streamlined process and it is hoped will increase capacity in the teams.</p> <p>A small number of delays are as a result of personal circumstances which had led the provider to seeking a delay which has been agreed. Overdue inspections are prioritized.</p> <p>Pressures in the sector continue to create challenges with regard to staffing of childcare settings and much of the work of the teams is taken up with exploring ways to adhere to registration requirements, approving easements within the regulations and assessing an increasing amount of vetting issues. High turn-over of staff generally across the sector has increased the team workload in this regard.</p> <p>10.7.4 Delays in allocating new applications are due to staff shortages</p> <p>10.7.5 Delays with prospective childminders have been caused by the applicant/s themselves, unexpected family matters that arose during assessment period. SFDC approved at earliest Panel date which still met statutory requirements.</p>		

10.7.4	Number of outstanding applications for each of the above categories as at 31 st March?	DSF-Early Years Spreadsheet
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Sector	No. of Applications not Allocated	Length of Time Unallocated from receipt of Application				
		0 - 3 months	4 - 6 months	7 - 9 months	10 - 12 months	12+ months
Day Nursery	2	2	0	0	0	0
Crèche	0	0	0	0	0	0
Playgroup	1	1	0	0	0	0
Out of School	1	1	0	0	0	0
Childminder	15	14	1	0	0	0
Holiday Scheme	0	0	0	0	0	0
Two year old Programme	0	0	0	0	0	0
Total	19	18	1	0	0	0

10.7.5	Number of current applications being assessed at period end and duration of assessment.	DSF-Early Years Spreadsheet
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Sector	Number in Progress	Length of Time that applications have been in progress				
		0 - 3 months	4 - 6 months	7 - 9 months	10 - 12 months	12+ months
Day Nursery	1	1	0	0	0	0
Crèche	0	0	0	0	0	0
Playgroup	0	0	0	0	0	0
Out of School	0	0	0	0	0	0
Childminder	2	1	0	1	0	0
Holiday Scheme	0	0	0	0	0	0
Two year old Programme	0	0	0	0	0	0
Total	3	2	0	1	0	0

10.8 Complaints & Representation		
10.8.1	Does the Trust have an appropriately authorised and experienced children’s complaints officer? Yes/No	Data Return 10
<p>The Trust has a complaints manager who undertakes the role of the designated complaints officer under the Children’s Order complaints procedure, with expert advice from a sector manager (social work lead) for safeguarding children.</p>		
10.8.2	Does the Trust have an independent advocacy service for children and their families? Yes/No	Data Return 10
<p>The Trust has a contract with Voice of Young People in Care (VOYPIC) to provide an independent advocacy service to children who are looked after by the Trust. Other independent advocacy services are provided by the Law Centre, the Children’s Law Centre and the NI Commission for Children and Young People.</p> <p>Within the Regional Secure Care Centre, NIACRO provide an independent representation service directly to the young people.</p>		
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?	Data Return 10
<p>The Trust has a comprehensive complaints procedure, which is available and accessible for children and their families. Information leaflets on how to make a complaint or representation under the Children’s Order requirements is provided for children and families.</p> <p>Children and families receive information on how to make complaints about the services they receive. All complaints are referred to the Trust’s Complaints department who record and monitor themes, trends, issues and timescales of responsibilities to complaints.</p> <p>The Children’s Lessons Learned group reviews the themes and learning emerging from complaints and identifies improvement plans as necessary. This is a sub group of the Children’s Safeguarding Committee. It is constituted from senior managers, principal practitioners, social care governance and learning, development and research staff.</p>		
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?	Data Return 10
<p>The Trust has a whistle blowing policy, which outlines how staff can raise concerns.</p>		

Statutory Functions Data Returns

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Mental Health

Adults Mental Health and Mental Health Older People

1 GENERAL PROVISIONS			
		<65	65+
1.1	How many adults were referred for assessment of social work or social care need during the period?	4809	356
1.2	Of those reported at 1.1 how many adults commenced receipt of social work or social care services during the period?	1488	279
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>	2820	345
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>	2444	129
1.4	How many care packages are in place on 31 st March in the following categories:		
	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.	17	61
	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.	29	122
	iii. 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.	94	106
	iv. Supported Living	112	17
	v. Shared Lives –Adult Family Placements (long term placement)		
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 oversight of the Annual Review process in your Trust	Yes	

1.6	Number of adults known to the Programme of Care in receipt of Centre based Day Care		
	- Statutory sector	93	3
	- Independent sector	1090	6
1.6a	Number of adults known to the Programme of Care in receipt of Day Opportunities (Recovery College)	501	3
1.7	Of those at 1.6 how many are dementia (EMI)		
	- Statutory sector	0	0
	- Independent sector	0	2
1.9	How many of this Programme of Care clients are in HSC Trust funded social care placements outside Northern Ireland?	0	0

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?	0	412	35
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	0	412	35
1.3	How many adults or children are on Hospital Social Workers caseloads at 31 st March?	Encompass unable to collate data. Caseloads may vary across the different wards.		

(Data refers to Mental Health Inpatient Unit Ward 27 Ulster Hospital, Mental Health Inpatient Unit Downe Hospital, Mental Health Inpatient Unit, Ward 12 Lagan Valley Hospital and Psychiatric Intensive Care Unit Ward 27 Downshire Hospital + Dementia Assessment and Treatment Unit in Downe Hospital, and Ward 11, Lagan Valley Hospital (Dementia and Functional Mental Illness in patients aged 65 years and over)

DATA RETURN 2 – NIL RETURN

DATA RETURN 3 – NIL RETURN

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	0
	Total expenditure for the above payments	£0
4.2	Number of TRUST FUNDED people in residential care	26
4.3	Number of TRUST FUNDED people in nursing care	52
4.4	How many of those at 4.3 received only the £100 nursing care allowance?	0



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)	0	466	0
5.2	Number of adult individual carers assessments completed during the period (Source: SPPG PSSID Return)	0	505	156
5.2a	Number of adult individual carers assessments declined during the period and the reasons why (Source: SPPG PSSID Return)	0	30	0
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	0	714	141
5.5	Number of young carers offered individual carers assessments during the period.	20		
5.6	Number of young carers assessments completed during the period	6		
5.7	Number of young carers receiving a service @ 31 st March	73		
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	21		
5.9	Number of children receiving direct payments @ 31 st March	0		
5.9.a	Of those at 5.8 how many of these payments are 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.	448		

DATA RETURN 6 – NIL RETURN

DATA RETURN 8 – NIL RETURN

9 The Mental Health (NI) Order 1986			
Admission for Assessment Process Article 4 and 5		TRUST ASW	RESWS ASW
9.1	Total Number of Assessments made by ASWs under the MHO	139	33
9.1.a	Of these how many resulted in an application being made by an ASW under (Article 5.1b)	111	27
9.1.b	How many assessments required the input of a second ASW (Article 5.4a)	3	0
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	
Use of Doctors Holding Powers (Article 7)			
9.2	How many times did a hospital doctor use holding powers?	64	
9.2a	Of these, how many resulted in an application being made?	55	
ASW Applicant reports			
9.3	Number of ASW applicant reports completed	219	
9.3.a	<i>Confirm if these reports were completed within 5 working days</i>	YES	
Social Circumstances Reports (Article 5.6)			
9.4	Total number of Social Circumstances reports completed.	0	
9.4.a	Confirm if these reports were completed within 14 days?	N/A	
Mental Health Review Tribunal			
9.5	Number of applications to MHRT in relation to detained patients	34	
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)	2
	Discharges as a result of an agreed multi-disciplinary care plan	2
	Lapsed	0
	Discharged by MHRT	0
	Discharged by Nearest Relative	0
	Total	2

Approved Social Worker (ASW) Register		
9.7	Number of newly appointed Approved Social Workers during period	7
9.7.a	Number of Approved Social Workers removed during period	0
9.7.b	Number of Approved Social Workers at period end (who have fulfilled requirements consistent with quality standards)	55
9.7c	<p>Please provide assurance of HSCT progress in relation to implementation of the ASW Quality Standards 2021. Please include progress as per standards on;</p> <p>Workforce Planning and Management ASW Governance ASW Training ASW Supervision and Support</p> <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border: 1px solid black; padding: 5px; text-align: center;">  ASW QUALITY STANDARDS DSF AD </div> <div style="border: 1px solid black; padding: 5px; text-align: center;">  ASW Workforce Paper 2025.docx </div> </div>	
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>In this reporting period there were 10 assessments required for young people under the age of 18, leading to 6 detentions.</p> <p>Beds for young people with a learning disability, complexity of needs and transitions between children's and adult services and a younger age profile of young people being assessed have been raised as issues in this reporting period.</p>	6

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.	
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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	1
9.11	Of the Total shown at 9.10 how many have their treatment required as:	0
	(a) Treatment as an in-patient	1
	(b) Treatment as an out patient	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)		
9.19	<p data-bbox="295 1420 1351 1494">Do you have sufficient numbers of staff to carry out TP Formal Assessments of Capacity (Form 1)?</p> <p data-bbox="295 1536 1351 1899">The MCA Service has worked hard to maximise resource and staffing levels, including via the use of bank and agency staff, there has been no additional funding from the initial MCA 'go live' date, despite an increase in complexity, and required processes. Funding to Trusts for MCA activity has not been equitable, and the Trust has been unable to implement a central MCA Team model to date. Currently, applications for DoLs in the community are taken forward by the relevant community team, across a number of Directorates, and Emergency Provisions have been used, where relevant. These service areas have been subject to insufficient/short-staffing levels and competing demands.</p> <p data-bbox="295 1942 1351 2045">The MCA Service, supported by colleagues in the acute hospitals, has been able to increase the numbers of staff there who are carrying out formal Assessments of Capacity.</p>	No

	<p>Action taken:</p> <ul style="list-style-type: none"> • MCA Service scoping and engagement with Directorates/Programmes of Care to highlight MCA requirements and agree remedial actions • Additional bank staff support • Manual database in situ to have oversight and manage same across all Localities. Focus on vacant caseloads and most outstanding applications within Teams by location. • Reminders for refresher MCA training for staff (supervisions and team meetings) and staff linking with MCA Team and MCA helpline regarding complexities and advice. • Emergency Provisions DOLS Team to be established (Retire and Return – but additional medical resource will also be required) • Plan for MCA Team to take on all DoLs applications in future - (Business Case being drafted as additional resource required. Matter discussed at EMT/SMT) • MCA to be placed on relevant Directorate Risk Registers to ensure high level ongoing scrutiny. • 3 new ASW staff recruited – working across MHO and MCA. • Implementation of an MCA Pilot Project to improve patient flow in acute hospital, ensure that the full assessment of a DOL is completed in a timely manner and is done in the best environment to support the service user. 	
9.20	<p>Do you have sufficient numbers of staff to make TP Best Interests determination (Form 2)?</p> <p>Same issues and remedial actions apply, as above.</p> <p>MCA service has implemented an Emergency Department (ED) Unscheduled Care Working Group to bring together other services such as ASW service, ED Clinical Leads, Frailty Team etc. to improve pathways, patient flow and processes in the patients' best interests</p>	No
9.21	<p>Do you have sufficient numbers of medical practitioners to complete TP medical reports (Form 6)?</p> <p>The MCA Service has appointed an interim Consultant Psychiatrist on a temporary basis to provide leadership and maximise medical buy-in and engagement across acute and community services. Funding has been reconfigured to allow this post to be recruited substantially but this has been delayed due to external factors. Recruitment has re-commenced for this post.</p> <p>MCA Service has been able to secure sessional input from a range of locum medical practitioners, however the fact that the Belfast Trust pays a higher rate has impacted on this role. This matter has been raised at a regional level.</p> <p>The MCA Service is in the process of drafting a Business Case to highlight the staffing model and investment required to deliver on statutory functions.</p>	No

	Engagement with medical staff in the acute sector has resulted in an increase in the number of medical practitioners completing TP Medical forms.	
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Trust Panels		
9.22	Do you have sufficient numbers of Trust Panel members to cover first applications (Form 5)? Number of Panels required is likely to need to increase as number of cases increase/Emergency Provisions cases progress to formal DOLs.	Yes
9.23	Do you have sufficient number of Trust Panel members to cover Trust Panel Extension applications (Form 16)?	Yes

Extensions		
9.28	Do you have sufficient number of staff suitably qualified to make responsible person statements (Form 15)? A Business Case is being progressed to identify the resource required to fully deliver on the completion of Form 15s. Currently this function is being met via the extensive use of overtime and bank staff, and practitioners going 'above and beyond' to meet statutory deadlines and requirements	No
9.29	Do You have Sufficient number of staff to carry out TP Extension Formal Assessments of Capacity (Form 1): As above.	No
9.30	Do you have sufficient number of staff to make TP Extension Best Interests determination (Form 2)? As above.	No

Short Term Detention Authorisations		
9.33	Do you have sufficient numbers of staff to carry out STD Formal Assessments of Capacity (Form 1)? The MCA Service has focussed work in this area, including engaging with staff in the acute sector. While this has increased the use of STD across all Trust acute sites, this remains an area where growth is needed and it is likely that staffing resource across the range of disciplines will need to be increased to meet this requirement. 3 new full time ASWs have been recruited to support the completion of STD forms. This will bring the total of ASWs currently completing these functions to 6. Specific training for ASW in the completion of extension reports and STDA is currently being rolled out.	Yes

	MCA Service engagement has been ongoing with NIAS, GP Federations and GP out of hours service to ensure awareness of roles and responsibilities and completion of mandatory and bespoke training to support these stake holders.	
9.34	Do you have sufficient number of staff to make STD Best Interests determination (Form 2)? As above.	Yes
9.35	Do you have sufficient numbers of medical practitioners to complete STD medical reports (Form 6)? Ongoing medical leadership to maximise engagement and involvement in same. Training sessions organised with new medical recruits	Yes
9.36	Do you have sufficient number of ASWs and appropriate healthcare professionals to authorise STDs (Form 8)? While numbers of ASWs have improved, there remains a challenge in ensuring that all relevant healthcare professionals view MCA activity as their 'business'. As case numbers continue to grow, so staffing will be required to be increased.	Yes

Training

9.39	Do you have sufficient number of staff trained to operate DoLs? Briefing Papers/Presentations on MCA have been brought to EMT/SMT to ensure that all relevant staff/service areas are aware of their training requirements. The MCA Service maintains a register of all trained medical staff and shares this with medical leadership to ensure compliance and engagement with training. MCA training discussed/delivered by MCA Service at relevant professional forums and with relevant agencies, eg NIAS/ED/GP Federation.	Yes
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Trust Panels

9.40	Do you have sufficient number of Trust Panel members to cover first applications (Form 5)?	Yes
9.41	Do you have sufficient number of Trust Panel members to cover Trust?	Yes

Rule 6 reports and participation at hearings when required		
9.42	<p>Do you have sufficient number of staff to meet the Review Tribunal deadlines for Rule 6 requests?</p> <p>There is unpredictability in number of responses, Rule 6 reports and interface work with Review tribunal (RT) and Attorney General (AG) Office.</p> <p>MCA Service has established a Courts and Governance team to establish working relationships with RT and AG office to improve notifications, pathways and response times to requests. Governance manager and two senior practitioners ensure compliance with requests and liaison with DLS, coordinate responses and organise oral hearings.</p> <p>The MCA Service continues to engage with RT and AG office on at least a monthly basis to remain abreast of legislative changes and requirements, recognising the growth in complexity and acuity in presenting cases.</p> <p>Robust Governance arrangements are in place to ensure risks and challenges are monitored and appropriate actions taken to mitigate against risks. The MCA Acute workstream and the MCA Community workstream groups continue to meet quarterly, with representation from all programmes of care and medics.</p>	No
9.43	<p>(Section 3) MCA section 50 – Do you have sufficient number of staff to ensure all one year extensions are referred to the Attorney General?</p> <p>As above, there has been an increase in competing demands as new elements of MCA are enacted, eg. Restraint. This will increase recording requirements and highlights the need for additional resource.</p>	No
9.44	<p>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?</p> <p>For the reasons outlined in 9.19, a growing number of Emergency Provisions have not progressed to DOLS authorisations, despite this being flagged to service areas by the MCA team on a monthly basis. This matter is further complicated by the fact that there is no set time limit within the MCA on how long a situation can be deemed an emergency.</p> <p>Analysis of the unauthorised DoL statistics held by the MCA Team and programmes of care asked to detail rationale and action plans for all relevant cases.</p>	No

	Plans in place as per section 9.19 of this form.	
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Please outline any other risks or issues with regard to compliance with the Mental Capacity Act?

Acuity and Complexity – there is ongoing difficulty with increased acuity and the overlap between MCA and MHO. On a number of occasions people assessed under the MHO have subsequently been identified as requiring medical attention, examination and treatment and have been brought to the Emergency Department (ED) under Short term detention, Emergency provisions. Additionally the use of warrants under MCA for the safe transfer of patients into hospital has become a more frequent occurrence.

Interpretations of Cawdery and Right Care/Right Person have complicated the roll out and implementation of the Mental Capacity Act, and the lack of consistent and equitable funding/the varying appetite for risk and additional spend across the region has proved to be problematic in terms of service delivery.

There is a concern that there will be a lack of formal investment to roll out further phases of MCA and that the additional ask will be put upon already stretched service areas.

Adult Physical Disability

Adult Physical Disability

1 GENERAL PROVISIONS			
		<65	65+
1.1	How many adults were referred for assessment of social work or social care need during the period?	575	374
1.2	Of those reported at 1.1 how many adults commenced receipt of social work or social care services during the period?	480	355
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>	1226	280
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>	131	44
1.4	How many care packages are in place on 31 st March in the following categories:		
	1 Residential Home Care (Source: DoH return)	16	0
	2 Nursing Home Care (Source: DoH return)	79	21
	3 Domiciliary Care – Include Care and Non-Care Managed Packages. (Source: SPPG PSSID return)	642	74
	4 Supported Living	21	1
	5 Shared Lives –Adult Family Placements (long term placement)		
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 oversight of the Annual Review process in your Trust	YES	

1.6	Number of adults known to the Programme of Care in receipt of Centre based Day Care		
	Statutory sector	53	4
	Independent sector	1	1
1.6a	Number of adults known to the Programme of Care in receipt of Day Opportunities	152	19
1.7	Of those at 1.6 how many are EMI / dementia		
	- Statutory sector	0	0
	- Independent sector	0	0
1.9	How many of this Programme of Care clients are in HSC Trust funded social care placements outside Northern Ireland?	3	1

DATA RETURN 1 – NIL RETURN

2 CHRONICALLY SICK AND DISABLED PERSONS (NI) ACT 1978;			
		<65	65+
2.2	Number of adults known to the Programme of Care who are:		
	Certified severely sight impaired (Blind)	275	435
	Certified severely sight impaired (Partially sighted)	185	177
	Sight Loss	168	672
2.3	Number of adults known to the Programme of Care who are:		
	Profoundly Deaf sign language users	47	23
	Profoundly Deaf Oral / Lip Readers	35	21
	Hard of hearing	103	317
	Tinnitus (New)	28	6
2.4	Number of adults known to the Programme of Care who are:		
	Deaf Blind	12	21

3 DISABLED PERSONS (NI) ACT 1989		
3.1	Number of referrals to Physical/ Sensory Disability during the reporting period.	PD: 442
		SD:507
	Number of Disabled people known as at 31 st March. <i>Note: adults with a disability on the caseload of social workers.</i>	1506
3.2	Number of assessments of need carried out during period end 31 st March.	835
3.3	Number of assessments undertaken of disabled children ceasing full time education.	0

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	0
	Total expenditure for the above payments	£0
4.2	Number of TRUST FUNDED people in residential care	16
4.3	Number of TRUST FUNDED people in nursing care	89
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)	11

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)	2	415	117
5.2	Number of adult individual carers assessments completed during the period (Source: SPPG PSSID Return)	2	124	54
5.2a	Number of adult individual carers assessments declined during the period and the reasons why (Source: SPPG PSSID Return)	0	291	63
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	0	32	8
5.5	Number of young carers offered individual carers assessments during the period.			0
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			23
	(b) Number of new approvals for direct payments during the period 1 st April – 31 st March			23
	(c) Number of adults receiving direct payments @ 31 st March			286
5.9	Number of children receiving direct payments @ 31 st March			0
5.9.a	Of those at 5.8 how many of these payments are in respect of another person?			7
5.10	Number of carers receiving direct payments @ 31 st March			11
5.11	Number of one off Carers Grants made in-year.			98

DATA RETURN 6 – NIL RETURN

DATA RETURN 8 – NIL RETURN

DATA RETURN 9 – NIL RETURN

Adult Learning Disability

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?	90	2
1.2	Of those reported at 1.1 how many adults commenced receipt of social work or social care services during the period?	65	0
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>	1453	185
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>	164	10
1.4	How many care packages are in place on 31 st March in the following categories:		
	• Residential Home Care (Source: DoH return)	120	29
	• Nursing Home Care (Source: DoH return)	74	44
	• Domiciliary Care – Include Care and Non-Care Managed Packages. (Source: SPPG PSSID return)	117	31
	• Supported Living	205	31
	• Shared Lives –Adult Family Placements (long term placement)		
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 oversight of the Annual Review process in your Trust	YES	
1.6	Number of adults known to the Programme of Care in receipt of Centre based Day Care		
	- Statutory sector	467	29
	- Independent sector	85	21

1.6a	Number of adults known to the Programme of Care in receipt of Day Opportunities	442	7
1.7	Of those at 1.6 how many are dementia (EMI)		
	- Statutory sector	10	0
	- Independent sector	3	1
1.9	How many of this Programme of Care clients are in HSC Trust funded social care placements outside Northern Ireland?	6	0

1 GENERAL PROVISIONS – ACUTE HOSPITAL (GENERAL SETTING) THOMPSON HOUSE HOSPITAL				
Thompson House Hospital provides services to people with a physical disability, however due to restructuring has remained in the Learning Disability Services remit until further restructuring occurs.				
		<18	18-65	65+
1.1	How many adults or children were referred to Hospital Social Workers for assessment during the period?	3	14	5
1.2	Of those reported at 1.1 how many assessments of need were undertaken during the period? (assessment is to include screening).	3	14	5
1.3	How many adults or children are on Hospital Social Workers caseloads at 31 st March?	0	15	7

DATA RETURN 2 – NIL RETURN

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 <u>Learning</u> Disability during the reporting period.	92
	Number of Disabled people known as at 31 st March. <i>Note: adults with a disability on the caseload of social workers.</i>	1638
3.2	Number of assessments of need carried out during period end 31 st March.	65
3.3	Number of assessments undertaken of disabled children ceasing full time education.	42

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	3
	Total expenditure for the above payments	£924.37
4.2	Number of TRUST FUNDED people in residential care	143
4.3	Number of TRUST FUNDED people in nursing care	115
4.4	How many of those at 4.3 received only the £100 nursing care allowance?	3

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)	0	99	67
5.2	Number of adult individual carers assessments completed during the period (Source: SPPG PSSID Return)	0	93	55
5.2a	Number of adult individual carers assessments declined during the period and the reasons why (Source: SPPG PSSID Return)	0	6	12
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	0	231	116
5.5	Number of young carers offered individual carers assessments during the period.	0		
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	48		
	(b) Number of new approvals for direct payments during the period 1 st April – 31 st March	48		
	(c) Number of adults receiving direct payments @ 31 st March (Source: SPPG PSSID Return)	263		
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?	68		
5.10	Number of carers receiving direct payments @ 31 st March	149		
5.11	Number of one off Carers Grants made in-year.	149		

9 The Mental Health (NI) Order 1986			
Admission for Assessment Process Article 4 and 5		TRUST ASW	RESWS ASW
9.1	Total Number of Assessments made by ASWs under the MHO	2	0
9.1.a	Of these how many resulted in an application being made by an ASW under (Article 5.1b)	2	0
9.1.b	How many assessments required the input of a second ASW (Article 5.4a)	0	0
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	
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	2	
9.3.a	<i>Confirm if these reports were completed within 5 working days</i>	YES	
Social Circumstances Reports (Article 5.6)			
9.4	Total number of Social Circumstances reports completed.	0	
9.4.a	Confirm if these reports were completed within 14 days?	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	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)	
	Discharges as a result of an agreed multi-disciplinary care plan	
	Lapsed	0
	Discharged by MHRT	0
	Discharged by Nearest Relative	0
	Total	2
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.	12

Primary Care & Older People

Primary Care & Older Peoples 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?	0	7801
1.2	Of those reported at 1.1 how many adults commenced receipt of social work or social care services during the period?	0	6690
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>	0	7849
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>	0	192
1.4	How many care packages are in place on 31 st March in the following categories:		
	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.	0	1077
	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.	0	2610
	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.	0	5465
	Supported Living	2	69
	Shared Lives –Adult Family Placements (long term placement)		
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 oversight of the Annual Review process in your Trust	Yes	
1.6	Number of adults known to the Programme of Care in receipt of Centre based Day Care		

	- Statutory sector	21	146
	- Independent sector –	0	338
1.6a	Number of adults known to the Programme of Care in receipt of Day Opportunities	0	1
1.7	Of those at 1.6 how many are dementia (EMI)		
	- Statutory sector	1	44
	- Independent sector	0	105
1.9	How many of this Programme of Care clients are in HSC Trust funded social care placements outside Northern Ireland?	0	2

DATA RETURN 1 – Acute Hospital (general setting)

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?	220	1048	6893
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	220	1048	6893
1.3	How many adults or children are on Hospital Social Workers caseloads at 31 st March?	10	122	145

DATA RETURN 2 – NIL RETURN

DATA RETURN 3 – NIL RETURN

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	5
	Total expenditure for the above payments	£140
4.2	Number of TRUST FUNDED people in residential care	456
4.3	Number of TRUST FUNDED people in nursing care	1095
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)	481

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	0	3423	
5.2	Number of adult individual carers assessments completed during the period	0	516	
5.2a	Number of adult individual carers assessments declined during the period and the reasons why	0	2907	
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	0	0	454
5.5	Number of young carers offered individual carers assessments during the period.			0
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			166
	(b) Number of new approvals for direct payments during the period 1 st April – 31 st March			235
	(c) Number of adults receiving direct payments @ 31 st March			261
5.9	Number of children receiving direct payments @ 31 st March			0
5.9.a	Of those at 5.8 how many of these payments are in respect of another person?			75
5.10	Number of carers receiving direct payments @ 31 st March			46
5.11	Number of one off Carers Grants made in-year.			280

9 The Mental Health (NI) Order 1986			
Admission for Assessment Process Article 4 and 5		TRUST ASW	RESWS ASW
9.1	Total Number of Assessments made by ASWs under the MHO	98	7
9.1.a	Of these how many resulted in an application being made by an ASW under (Article 5.1b)	69	6
9.1.b	How many assessments required the input of a second ASW (Article 5.4a)	0	0
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	
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	75	
9.3.a	<i>Confirm if these reports were completed within 5 working days</i>	YE	
Social Circumstances Reports (Article 5.6)			
9.4	Total number of Social Circumstances reports completed.	0	
9.4.a	Confirm if these reports were completed within 14 days?	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	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

Children's Services

DATA RETURN 1 – NIL RETURN

DATA RETURN 2 – NIL RETURN

DATA RETURN 3 – NIL RETURN

DATA RETURN 4 – NIL RETURN

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	No submission due to action short of strike action and resultant non-completion of statistical returns		
5.2	Number of adult individual carers assessments completed during the period			
5.2a	Number of adult individual carers assessments declined during the period and the reasons why			
5.3	Of the total at 5.2 in how many of the assessments were the carers, caring for disabled children?			
5.4	Number of adult carers receiving a service @ 31 st March			
5.5	Number of young carers offered individual carers assessments during the period.	21		
5.6	Number of young carers assessments completed during the period	23		
5.7	Number of young carers receiving a service @ 31 st March	54		
5.8	(a) Number of requests for direct payments during the period 1 st April – 31 st March	52		
	(b) Number of new approvals for direct payments during the period 1 st April – 31 st March	39		
	(c) Number of adults receiving direct payments @ 31 st March	N/A		
5.9	Number of children receiving direct payments @ 31 st March	290		
5.9.a	Of those at 5.8 how many of these payments are in respect of another person?	290		
5.10	Number of carers receiving direct payments @ 31 st March	0		
5.11	Number of one off Carers Grants made in-year.	0		

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	9	2
9.1.a	Of these how many resulted in an application being made by an ASW under (Article 5.1b)	5	1
9.1.b	How many assessments required the input of a second ASW (Article 5.4a)	0	0
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 / NO <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?	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	5	
9.3.a	Confirm if these reports were completed within 5 working days YES / NO <i>If no, please explain</i>	YES	
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?	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	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
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>In this reporting period there were 10 assessments required for young people under the age of 18, leading to 6 detentions.</p> <p>Beds for young people with a learning disability, complexity of needs and transitions between children's and adult services and a younger age profile of young people being assessed have been raised as issues in this reporting period.</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.	0	