STATUTORY FUNCTIONS

PERFORMANCE MANAGEMENT AND ASSURANCE REPORT

For Year end 31 March 2026

SOUTH EASTERN HEALTH & SOCIAL CARE TRUST

Draft Awaiting Approval by Trust Board

Contents

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 its statutory functions. Through the Chief Executive, accountability for personal social services rests with the Executive Director of Social Work (EDSW).

During the reporting period, Mrs Lyn Preece retired as EDSW in March 2026, and Mrs Marie-Louise Sloan assumed the role in the same month. Mrs Sloan is a qualified social worker and is registered on Part 1 of the Northern Ireland Social Care Council (NISCC) register.

The EDSW is a member of the Trust Board and is accountable to the Chief Executive for ensuring compliance with legislative requirements. This includes maintaining effective systems, processes and procedures to support the delivery of statutory functions across child care, mental health, disability, community care, and the social work and social care workforce. Mrs Sloan is also the operational Director of Children's Services

The Assistant Director of Social Work, Social care and Learning and Improvement (ADSW) supports the EDSW and is responsible for providing assurances that the Trust has robust arrangements to achieve and maintain high standards of governance in relation to social work and social care. This role oversees and ensures all social work and social care staff are appropriately registered with NISCC and supported to maintain their registration. The Trust has a Professional Social Work and Social Care Executive Forum. This is chaired by the EDSW. Its purpose is to promote professional learning, education, development and provides shared learning opportunities across programmes of care ensuring oversight of professional standards and discharge of statutory functions.

Each directorate delivering statutory functions has a professionally qualified social work lead at Head of Service (band 8b) or above. Services are aligned to a social work Assistant Director, who provides professional oversight and ensures clear accountability arrangements.

The EDSW maintains a clear line of professional accountability from frontline social workers through management structures to the executive level. Managers responsible for the leadership and delivery of statutory functions are professionally qualified social workers.

Social work leads across Trust programmes, together with the ADSW, meet regularly with SPPG representatives to review the action plan arising from the 2025/26 annual review of statutory functions and corporate parenting.

Robust governance arrangements are in place across all directorates to ensure ongoing monitoring and continuous improvement in statutory functions and related regulatory requirements. This includes a robust professional induction programme for newly appointed social work/care staff and a range of development programmes for the workforce beyond AYE and into management and leadership roles

Throughout the reporting period, the Trust has sought to effectively discharge its statutory responsibilities across all directorates. Directorate reports provide detail on performance management and assurance processes.
The Trust has fully cooperated with the Regulation and Quality Improvement Authority (RQIA) in the discharge of its regulatory and inspection functions. This report includes reference to ongoing review and reporting arrangements with RQIA in relation to 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 continues to experience challenges in recruiting qualified social workers, primarily due to ongoing regional workforce supply. These staffing pressures have, at times, impacted the Trust's capacity 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. To strengthen this approach, the Trust has appointed a Senior Social Worker with dedicated responsibility for recruitment and retention. This postholder will lead on key initiatives, including the development of a rolling recruitment programme, the introduction of accelerated pathways to attract final-year social work students into the workforce, and the delivery of targeted, bespoke recruitment campaigns aimed at addressing specific workforce 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 and resolutions need to be developed and implemented to ensure long-data integrity.

Mental Capacity Act:

Challenges continue to affect the Trust's ability to fully meet its statutory obligations under the Mental Capacity Act 2016 (as enacted). These include insufficient staffing capacity, a significant volume of Deprivation of Liberty (DoLS) referrals within community teams and training to support the effective embedding of legislative requirements into practice.

Approved Social Work (ASW):

The ASW role continues to be significantly impacted by a range of challenges during this reporting period. These include protracted waiting times, difficulties in interface working with partner agencies (PSNI and NIAS), issues relating to RESWS handover processes, alongside the impact of action short of strike action, at both Trust and RESWS level. In addition, there has been an increase in both the complexity and acuity of individuals requiring ASW support, further intensifying service pressures.

Adult Services

Physical Disability Services:

The Trust is currently unable to fully meet the assessed needs of individuals using physical disability services, including those with complex needs, due to a shortage of appropriate provision. Access to suitable placements remains particularly challenging for those with complex presentations, including alcohol-related brain injury. Service users continue to experience limited choice across accommodation options, including domiciliary care, supported living, interim care beds and care home placements, which may also impact choice and availability for young people transitioning into adult services. These challenges are further compounded by the absence of a Regional Framework for Delegation of Healthcare Tasks.

Adult Learning Disability Services:

The Trust continues to face significant challenges in accessing appropriate inpatient provision for adults with a learning disability, particularly those with co-occurring mental ill health. Limited availability of regional Mental Health Learning Disability (MHLD) beds has resulted in some individuals being admitted to mental health and acute wards. Difficulties in securing specialist learning disability psychiatry input within mental health wards has increased pressure on community multidisciplinary teams, who are managing higher levels of crisis in the community. At present, this includes 1 delayed discharge

from Carrick Ward, Holywell, and 2 individuals placed in acute mental health inpatient beds.

There is also a growing number of individuals requiring bespoke placements, particularly those transitioning from children's services, with limited provider capacity contributing to instability and placement breakdown.

Workforce pressures continue to impact the timely completion of care management and annual reviews, with compliance improving from 42% to 47% but remaining below expected standards. Increased demand, the introduction of NISAT requirements following Encompass implementation, and rising referrals contribute to ongoing delays.

Audit findings have identified non-compliance in adult safeguarding processes, relating to delays and recording issues, largely due to workforce pressures and absence.

Additionally, delays in progressing Deprivation of Liberty applications persist, with 58 individuals currently subject to emergency provisions awaiting Trust Panel Authorisation, and social work teams continuing to absorb a disproportionate share of assessment responsibilities.

Adult Mental Health:

The challenges relating to the ASW role are outlined above. The Trust continues to implement measures to increase ASW capacity and is working at both local and regional levels to address these issues.

Primary Care and Older Peoples Services

Pressures within the service continue to affect the timely completion of annual care management reviews across community teams and the care home support service; however, action plans are in place to address this.
Ongoing staffing challenges have also limited the utilisation of all statutory care home beds across the Trust. Recruitment efforts are underway, and bed occupancy is expected to improve as workforce capacity increases.

Children's Services

The following issues relate to the Trust's inability to consistently meet its statutory function as outlines in Article 17 (a) assessment of services and Article 18 (a) provision of services as outlined in the Children (Northern Ireland) Order 1995.

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 340 across children's services (Gateway: 107; Safeguarding: 96; Children's Disability: 137), an improvement on the previous reporting period. The reform and restructuring of Children's safeguarding services has moved from a sector-based model to a service delivery model. The introduction of a Family support services will aim to address unallocated cases and will aim to ensure families receive the right support at the earliest opportunity. A similar service has also been introduced into Children with Disabilities and has seen a significant reduction in unallocated cases within the service. A social work led skills mix has been introduced to increase capacity and support the statutory roles.

Statutory Visits by Social Workers (10.3.15)

In this reporting period, 48 children who are looked after did not receive a statutory visit by their allocated social worker within the statutory timescales. All young people received a visit from another social work and assurance systems are in place to monitor these cases.

Separated or unaccompanied asylum-seeking children:

Pressure continues in meeting the needs of separated or unaccompanied asylum-seeking children. The Trust is accommodating 95 such young people at report end, 26 who are under the age of 18 and 69 who are over 18.

The Trust is facing significant pressures in securing suitable and timely accommodation to meet the needs of these young people. It continues to explore all available options to increase accommodation capacity and remains actively engaged in both regional and local initiatives.

Delayed Discharge:

1 young person remains in an inpatient facility despite being fit for discharge, while the Trust seeks an appropriate bespoke placement due to the complexity of need. The SPPG are monitoring this issue through the Support and Intervention Framework (level 3).

Regional Secure Care Centre (Lakewood):

The increased complexity of needs among the young people supported has resulted in reduced bed capacity, alongside a rise in staff absences during this reporting period. The Trust has engaged with SPPG, RQIA, and regional colleagues to address these challenges, developing a comprehensive action plan focused on culture, recruitment, estates, training, and longer-term strategic

priorities for secure care. The safety and quality of care remain under ongoing scrutiny by SPPG under the SIF (Level 3).

Placement provision in fostering:

A total of 177 young people cared for by the Trust are currently in unregulated placements, kinship placements that have not been approved within the required timescales (10.3.3). This is due to workforce pressures and the ongoing increase in demand for kinship placements. Enhanced assurance arrangements are in place, with robust oversight of all unregulated placements. During the reporting period, capacity issues within the Trust led to 13 children who are looked after being accommodated in an inappropriate placement given their assessed needs (10.3.23).

Ongoing pressure to secure appropriate fostering placements has resulted in continued reliance on independent providers, with 129 children currently supported in such placements (10.3.3). The SPPG are monitoring this issue through the Support and Intervention Framework (level 1).

The following issue relates to the Trust's inability to regularly perform its required statutory function in the provision of services to children with a disability outlined in Schedule 2, paragraph 7 of the Children (NI) Order 1995.

Children and Young People with a Disability:(10.3.5)

The provision of short breaks has shown a slight improvement, during this reporting period providing 335 overnight stays for 36 young people. The Trust has also opened an additional facility for children with disabilities, and this will increase the short break provision. SPPG are monitoring this issue through the Support and Intervention Framework (level 2).

Data:

As a result of action short of strike and the resultant non-completion of statistical returns, the Trust is unable to provide information in relation to the following data lines:10.2.16; 10.3.10 a; 10.3.16; 10.3.26 a.

Children's Services has been committed to delivering an Edge of Residential care model over the last 3 years and this has been successful in stemming the growth of children entering the care system. The Trust has engaged Tom Innes in reviewing and systems mapping the continuum of services available to children defined by the LAC Strategy as being on the 'Edge of care'. This has been concluded and a new Intensive Family support model will be implemented in 2026 in line with the Together for Families model. The Trust continues to work closely with the Department of Health (DoH) and the Children's Services Reform Board to implement the recommendations from the Ray Jones Review.

Statutory Functions Action Plans and Support and Intervention Framework (SIF)

Social work leads maintain regular engagement with the SPPG to ensure a shared understanding of progress and expectations. They are actively addressing all areas of concern identified within the Action Plans and SIF supported by clear actions, ongoing monitoring, and a commitment to achieving sustained improvements in service delivery and compliance.

The Trust acknowledges the commitment and dedication of staff and managers across all social work and social care services and is committed to working in partnership with regional and Departmental colleagues to address the various challenges currently presented across all Directorates.

Mrs Marie-Louise Sloan
Executive Director of Social Work and Director of Children's Services
Date 8/5/26

MENTAL HEALTH

2.0 Adult Mental Health Services
Adult Services and Prison Healthcare Directorate

2.1 Named Officer responsible for professional Social Work

Operational responsibility for the service sits with Fiona Dagg, Assistant Director for community mental health services and mental capacity act service (MCA).

Professional accountability for social work lies with Robyn Lennox, Assistant Director

Tracey McVeigh is the Mental Health Social Work Lead and the named officer for professional social work in mental health services.

In this reporting period, the services have completed their restructure and are stabilising under community and acute structures.

Following the retirements of Jackie Carr (AD) and Yvonne Russell-Coyles (SW Lead) the service has filled all the social work senior management posts.

Please see organisational structure for Mental Health/MCA services on page 18.

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

Recruitment

There are 2 social work (b5/6) posts in the recruitment process currently. It is anticipated these will be filled via regional graduate recruitment.

The service has recruited 8 social workers in the last reporting period (4 b5 AYE's and 4 b6).

Mental health teams utilise Trust and regional recruitment processes to manage vacancy levels. The Social Work Lead continues to promote social work as a vital role within the multidisciplinary teams.

The service is in the process of reviewing workforce planning, development, training and induction pathways.

Retention

To support retention within the services, given the current pressures, health and wellbeing remain a priority and are addressed through a wellbeing action plan. Career development pathways are being explored, including the role of senior practitioners.

Exit interviews are completed as part of an ongoing service improvement project to address any issues, learning and opportunities for improvement across services.

Approved Social Work (ASW) Workforce

In this reporting period, the service has recruited an ASW/ Social Work Lead post (8b) focussing on the strategic developments within the service, both locally and regionally.

The ASW service is continuing to be impacted by action short of strike action (ASOSA). This has impacted on a reduction of time on the rota (decrease by 20%) and the requirement of 2 staff to complete community assessments has at times made it difficult for the service to fulfil its statutory role

The service has recruited 3 wte ASW's to increase capacity and stabilise the service. These staff will be in post by May 2026 and will undertake ASW and MCA work as well as developing specialisms in working with families, prison healthcare or training.

The service currently has 56 ASWs (30 wte). 13 are team leaders who complete a reduced number of shifts on the rota per month. 14 staff are not undertaking ASW duties at present due to absence, maternity and work adjustments. These issues are recorded and monitored through Datix and escalated to senior management.

The service is proactive in its recruitment of ASW's and have increased the number of training places available. Development of MHO/MCA interface work continues with MCA staff developing the knowledge and practice experience of MCA processes for our wider ASW workforce.

Specialist Designated Adult Protection Officer (DAPO) role

This specialist role within mental health coordinates adult safeguarding investigations and plans, undertaking early indicator audits within inpatient wards and supported living facilities, staff development, improving quality and having governance oversight of safeguarding processes.

2.3 Supervision arrangements for social workers

The Trust is not fully compliant with the Regional Supervision Policy.

Mental health services have a robust supervision plan embracing individual, group, professional and ASW supervision. The new recording templates and folders are being utilised within social work services, however these need rolled out to multi-disciplinary colleagues to promote standardisation and consistency across teams.

A supervision audit was undertaken in April 2026 for the reporting period and evidenced good quality supervision in supporting and developing practice. there was good compliance in relation to number of supervisions offered per year.

Areas for development include: increased recording of reflection and learning noted, signatures on supervision records and all folders require a learning agreement.

The findings from the supervision audit will be shared through the quarterly social work managers meetings.

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.

Mental health services have continued to rely on manual data for collation of the statutory functions report. The service is actively participating in regional work to improve the Encompass system for data collation.

1.1 – 1.3: The services operate across multi-disciplinary teams making it difficult to extrapolate data on social work referrals and assessments. Information has been gathered and included from assessment centres, community teams, home treatment and care management.

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

	Number
Serious Adverse Incidents	*33*
Domestic Homicide Reviews	*0*
Case Management Reviews	*0*
Mental Health Review Tribunals	*66*
Judicial Reviews	*0*
Audits	*4*
RQIA Inspections	*2*
RQIA Enforcement notices – Failure To Comply Notices	*0*

Serious Adverse Incidents

Senior managers within mental health coordinate the level 1 and 2 SAI's. A monthly recommendation and learning group shares information with teams focussing on reflective discussions and learning for practice.

Mental Health Review Tribunals

In this reporting period, there has been no specific social work learning identified; however, staff continue to engage in multi-disciplinary fora to improve service delivery.

Datix

The ASW service uses the Datix system to scrutinise incidents where service delivery was impacted, for example handover to RESWS, bed pressures and conveyancing.

Audits

The audit for adult mental health care management remains 99% compliant, with a plan in place to increase compliance for MHSOP.

Learning from audits in relation to supervision, Think Family and Early Indicators (Adult Protection) will be shared with social work managers.

RQIA Inspections

There were 2 RQIA audits in supported living which is reported on in this report. The recommendations and learning focus on training, staffing, recording and supervision.

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.**
	There continues to be several issues impacting on the Trust's ability to fulfil their statutory role in relation to the ASW role. These include: i. The regional availability of mental health beds ii. RESWs continue in strike action impacting on their availability to take handovers at 5pm. iii. Ongoing ASOSA in the Trust since October 2023. This has impact on adequate cover on the ASW rota and the Trusts ability 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 Cawdrey recommendations continue to influence change. v. Acuity and Complexity – there is ongoing difficulty with increased acuity and the overlap between MCA and MHO. On occasion this has resulted in people assessed under the MHO being brought to the Emergency Department (ED) under MCA for medical attention.	There is an ASW Action Plan which is reviewed and updated every 6 months. i. ASW Leads link with bed flow meetings daily to understand bed pressures and prioritise detained patient's 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. v. Strengthened links with ED around pathways and best practice. Regular meetings with the ASW/MCA team to support further implementation of the MCA. Training needs relating to MHO/MCA have been identified, with training planned for ASWs and community teams.

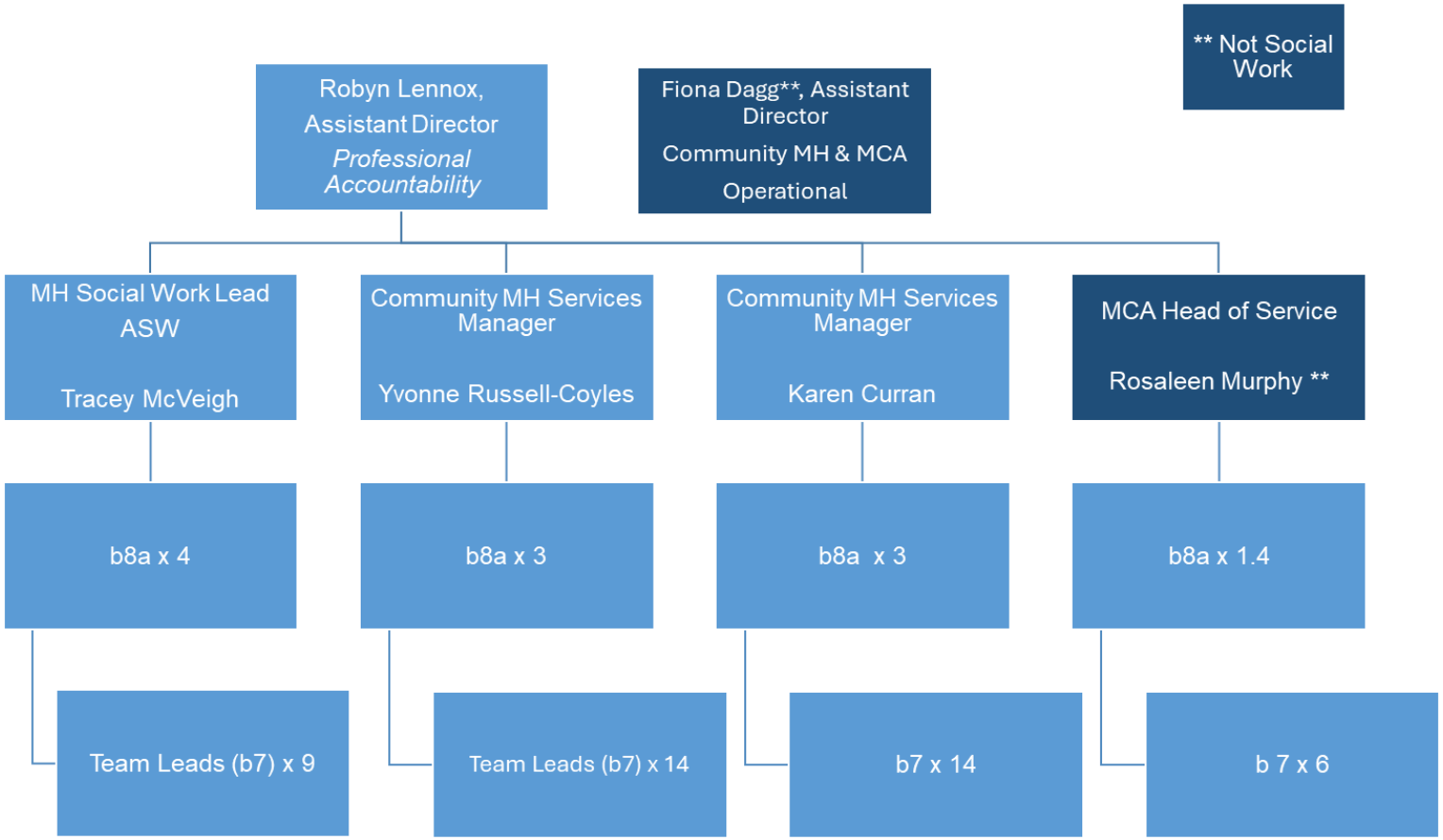
	vi. GP – ongoing challenges accessing GPs. Some areas have no NILES arrangements.	vi. Working with acute staff/ED re guidance re MHO and sharing of protocol re accessing GP
	The Mental Capacity Service (corporate service across all operational directorates sits under Adults Services Directorate) There continues to be several issues impacting on the Trust's ability to fulfil their statutory role in compliance with the Mental Capacity Act 2016 legislation (enacted). These include: i. Insufficient resource to meet legislative compliance given the volume of referrals and meet demand across 3 hospital sites ii. Insufficient resource to meet legislative compliance given the volume of DOLS referrals across community teams iii. During this period approximately 900 unauthorised cases awaiting a DOLS assessment; iv. Insufficient medic resource to meet community demand v. Medics on wards highlighting difficulties in completion of statutory forms in pressurised acute system	Governance around MCA corporate compliance is monitored robustly both internally and externally: • MCA Operational Leadership meetings monthly with escalations to MCA assistant director and MCA Lead Director. • MCA is a continuous agenda item on Trust Clinical Governance Meetings • MCA Regional Implementation Leads Meetings • MCA Regional Trusts & DLS Litigation Meetings • MCA Multi-agency Meetings Recruited 0.6 MCA Consultant to develop medical leadership structure and grow MCA accountability across all medical sub-directorates. There is no funding for this post built into MCA budget however need and risk justified action taken. Use of bank staff and a project management approach to fast-track triage and application of unauthorised DOLS cases has seen a

	vi.	Evolving implementation and embedding legislative practice into service delivery models requires directed training support for workforce and care home partners	reduction to 400 cases – this highlights the difficulties in operational teams to complete MCA DOLS work as “core work” Inequity of funding models across Trusts has been raised with SPPG and DoH. In order to meet full compliance an enhanced specialist staff mix with additional funding is required.

The following issues have also been carried over from the 2025/26 Action Plan and have been RAG rated through the regular interface meetings between the Trust and the SPPG.

Issue	**RAG**
Protracted waits for access to acute mental health beds. This includes timely availability of beds for patients who require admission under the Mental Health (NI) Order (1986).	
Staff Supervision	
Thematic Review of SAIs	
Judicial Reviews (HiP)	

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

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.

Operational responsibility for the service sits within Primary and Integrated Care sub-directorate with Julie Davidson as Assistant Director.

Teresa McKee is the Operations Manager Social Work (b8b).

All team leader posts (b7) are now permanently recruited to.

Please see organisational structure on page 24.

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

Physical and sensory disability services have 2 social work vacancies which will be backfilled via regional recruitment process

There were recent challenges with recruiting into a (team leader b7) post. The vacancy was advertised externally 3 times before securing a permanent postholder. It was disappointing that there was no interest from within our current cohort of eligible social workers.

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

3.3 Supervision arrangements for social workers

A supervision audit completed in March 2026 audited against the service supervision plan. The audit demonstrated 81% compliance with frequency of supervision, an improvement on the previous year.

Supervision levels were impacted by staff vacancy and 1 long term absence at team lead level. It was noted that supervision recording was of a high quality, with clear evidence of case discussions, managing risk and decision making in relation to caseloads.

Identified areas for improvement include ensuring supervision agreements are updated as well as the completion a review of the supervision service plan to reflect current service pressures.

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.

Physical Disability Services has historically relied on manual data collection. The implementation of the Encompass system has resulted in a dual system of data collection for this reporting period. There are outstanding issues in relation to regulatory reporting that are being addressed on a regional basis. It is acknowledged that work that is ongoing will address the reporting issues and the aim is that the system will be used in future years for reporting.

For this report, Physical Disability Services has manually collated and quality assured the data, which has been cross-referenced against Encompass where possible. Sensory services data was taken entirely from Encompass.

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

	Number
Serious Adverse Incidents	1
Domestic Homicide Reviews	0
Case Management Reviews	0
Mental Health Review Tribunals	0
Judicial Reviews	0
Audits	1
RQIA Inspections	2
RQIA Enforcement notices – Failure To Comply Notices	0

Serious Adverse Investigation (SAI)
This related to an individual absconding from an Alcohol Related Brain Injury unit despite proportionate supervision and environmental controls. Variability in how incidents were managed across staff and shifts highlighted the need for consistent operational guidance, including prevention, rapid response and clear escalation pathways.

RQIA inspections
Inspections in the 2 Physical Disability Day Centres were very positive with only 1 area for improvement with regards to recording informal complaints.

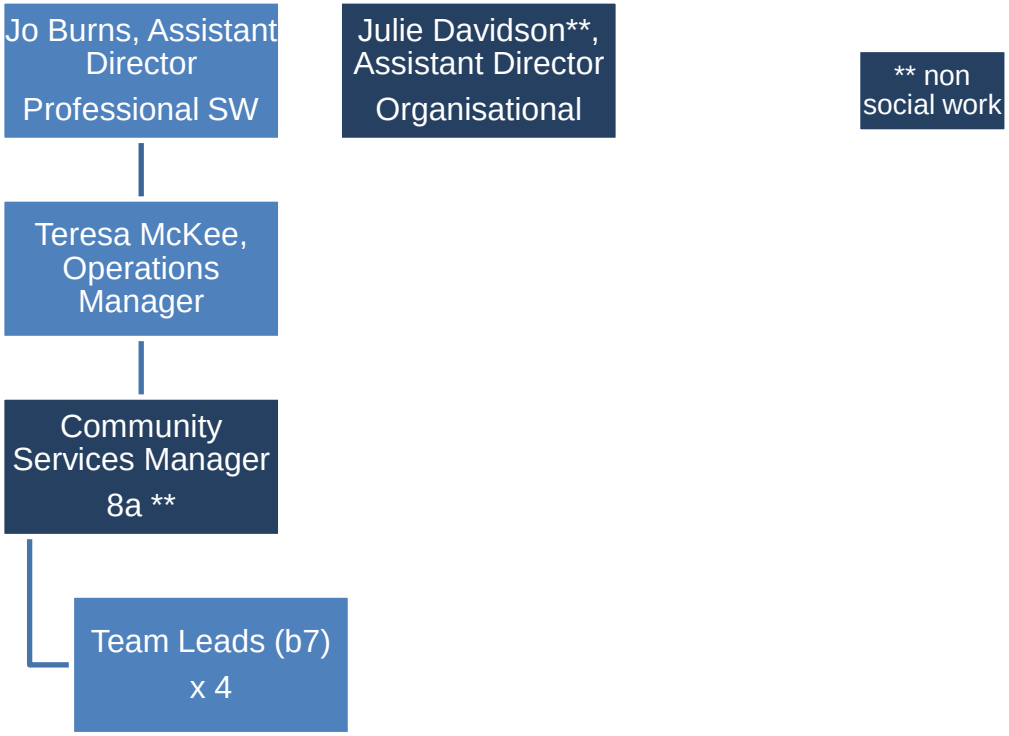
Audit
BSO Internal Audit carried out an audit of self-directed support with a focus on Direct Payments in October /November 2025 across all programmes of care. The Trust has agreed an action plan to implement the audit recommendations.

3.6	**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.**
	<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> Difficulty accessing appropriate placements, particularly those with complex needs including alcohol related brain injury. Physical disability service users continue to have limited choice of living options including domiciliary care, supported living, interim care beds, care home placements. This could impact choice and availability for children transitioning to adult services Absence of a Regional Framework for Delegation of Healthcare Tasks.	• Raised commissioning requirements regionally and hope to participate in regional planning. • Creative approaches to delivering services to meet assessed need e.g. direct award contracts to nursing agencies and scoping of potential options. • 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 Meetings with SPPG and PHA to agree service model for service users with complex clinical needs

The following issues have also been carried over from the 2025/26 Action Plan and have been RAG rated through the regular interface meetings between the Trust and the SPPG.

Issue	**RAG**
Noncompliance completing Annual Reviews for service users within the Physical and Sensory Disability Service Area	Issue remains amber however Trust actions are complete and have been made green

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

Robyn Lennox Assistant Director is the named officer responsible for professional social work within Learning Disability Services.

The following changes have occurred in the senior management structure within the last reporting period.

Robyn Lennox replaced Claire McStay as Assistant Director, from January 2026.

Claire Crawford was appointed to a new Operations Manager post for Regulated Services and Governance from March 2026.

Fiona McClean became Operations Manager – Assessment & Treatment (Linen Lodge), Intensive Support Services and Struell Lodge Residential from January 2026

In addition, the successful recruitment of vacant b7 Team Leader in Community Social Work Team (North Down & Ards) from September 2025.

Please see organisational structure on page 36.

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

Social work vacancies have reduced from 4.8wte to 2.48wte in this reporting period. Recruitment processes are underway for the remaining vacant posts. Whilst this represents an improvement in staffing capacity, teams continue to experience significant pressure due to competing demands, in the discharge of their statutory duties alongside notable staff absence. Teams continue to be reliant on the input of bank social work staff to increase compliance with statutory functions particularly with regards to Mental Capacity assessments.

There has been an increase in the demand for Adult Learning Disability services as evidenced by a 35% increase in new referrals during this reporting period. This increase reflects the service change implemented in June 2025, which lowered the transition age, bringing forward the point at which young people transfer into adult services in line with the rest of the region.

There has been an increase in the number of student social work placements in this reporting period with all 3 sectors providing a student placement.

A full analysis of social work tasks and processes is ongoing to support future workforce planning and recruitment. The Trust is cojoined in the regional artificial intelligence (AI) social work pilot running until Autumn 2026. The purpose of which is to identify admin tasks that AI could support with to allow for greater social work efficiency to complete statutory functions.

4.3 Supervision arrangements for social workers

A supervision audit completed in February 2026 identified areas for improvement, particularly in relation to the frequency and consistency of supervision for social work staff. Compliance in relation to frequency of supervision was 33% for b7 staff and 17% for b6 staff. The audit highlighted that staff absence across all bands had a significant impact on compliance.

The findings have been shared with managers and embedded within service governance and improvement planning. A contingency model is currently being developed to strengthen operational and professional supervision arrangements, including greater utilisation of senior practitioners and other senior managers to ensure continuity.

In addition, a quality improvement project has been initiated to support improved compliance, strengthen recording practices and enhance managerial oversight, with completion due in November 2026.

Progress will be monitored through quarterly audits and routine performance reporting, with clear escalation processes in place to address non-compliance.

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 within this report has been collated using a hybrid model from the Encompass system and established manual data sources. There continues to be several areas which require manual input to support accurate reporting from the Encompass system.

Ongoing analysis has identified a combination of end-user workflow challenges and system build limitations, both of which have impacted the robustness of reported data. Over the past three months, there has been increased participation in regional sub-groups to address these issues and to agree and progress system optimisation actions.

The Adult Learning Disability Service has committed to undertaking focused reviews of key statutory workflows. These will further

strengthen compliance, improve data assurance, and enhance the overall robustness of reporting into the future.

An action plan is being developed to support the continued manual updating of information, with the aim of strengthening data quality and increasing reliance on Encompass as the primary data source.

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

	Number
Serious Adverse Incidents	*3*
Domestic Homicide Reviews	*0*
Case Management Reviews	*0*
Mental Health Review Tribunals	*1*
Judicial Reviews	*2*
Audits	*3*
RQIA Inspections	*16*
RQIA Enforcement notices – Failure To Comply Notices	*0*

Serious Adverse Incidents (SAI):
During the reporting period there were 3 SAI's in relation to choking within Independent Sector nursing homes. Whilst no specific recommendations were made it highlighted the need for on-going education in relation to speech and language recommendations.

Mental Health Review Tribunal (MRHT):
1 MHRT for a service user recently resettled from Muckamore Abbey Hospital.

Audits:
There has been 3 Audits within the period.

Type	**Focus**	**Date**
BSO Audit	Adult Safeguarding	Feb/March 2026
Internal audit	Adult Safeguarding	February 2026
Internal audit	Supervision	February 2026

RQIA Inspections:

There were 2 serious concerns meetings resulting in 2 Quality Improvement Plans (QIP's) and 1 Enhanced Meeting and Feedback. The Service has implemented action plans for each service to address the issues identified. A review inspection for 1 service has highlighted increased compliance.

RQIA completed an investigation into the *"Commissioning Arrangements for Residential Care Learning Disability Services in the South Eastern HSC Trust and the Belfast HSC Trust."* The final report was received in March 2026. There were several recommendations made for the Trusts, DOH/SPPG and RQIA. The service has reviewed this information and developed an action plan to address the recommendations for the Trust.

RQIA have also completed a Patient Inquiry into the care and treatment of a service user known to the service under Article 86 of the Mental Health (Northern Ireland) Order. The Trust is currently awaiting this report. The Ombudsman's Office have also been made aware of the situation relating to the Patient Inquiry.

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.**
	Challenges in accessing inpatient beds for adults with a learning disability: The Trust has not consistently met its statutory duties in relation to timely access to specialist inpatient assessment and treatment for adults with a learning disability and co-occurring mental ill-health. Long-standing limitations in access to regional Mental Health Learning Disability (MHLD) beds have resulted in individuals being admitted to non-specialist mental health and acute wards. This is not aligned with the Learning Disability Service Model (LDSM) principle of admission only where clinically necessary and in the least restrictive environment. There are ongoing difficulties accessing commissioned Learning Disability Psychiatry input within Trust mental health wards, particularly in securing appropriate Registered Medical Officer (RMO) cover. This has placed sustained pressure on multidisciplinary community teams, who are managing increased levels of crisis intervention in community settings rather than through specialist inpatient pathways. **Current position:**	The Trust remains engaged in regional planning and delivery arrangements aligned to the LDSM and Neighbourhood Model. However, it is acknowledged that development within this area is limited without the establishment of appropriate commissioning arrangements by SPPG. The Trust continues to work collaboratively with mental health services and regional partner Trusts to facilitate access to inpatient care where clinically indicated, while ensuring that admissions, length of stay and discharge planning are aligned with assessed risk and the LDSM's emphasis on prevention, early intervention and repatriation to community-based care. The Trust has access to 1 learning disability inpatient bed within Carrick Ward, Holywell; however, this remains unavailable due to a delayed discharge arising from the absence of a suitable community placement. This continues to impact on the Trust's ability to meet expectations regarding timely discharge and effective community-based alternatives. Business cases have been submitted to SPPG for the development of a community-based assessment and treatment model, and implementation work has commenced. The Trust continues to explore options for a learning disability inpatient option. The Trust continues to engage with

	• 1 delayed discharge from Carrick Ward, Holywell • 2 individuals with a learning disability placed in acute mental health inpatient beds	SPPG to identify funding and equitable separation of monies previously joined as part of Belfast Trust's Muckamore Abbey Hospital investments.
	Failure to complete care management and annual reviews within expected timeframes Ongoing workforce pressures continues to negatively impact the ability to complete statutory functions in a timely manner. Compliance with statutory review timescales has improved from 42% to 47% in this reporting period; however, this remains below expected levels. The NISAT tool was not operational in the Adult Learning Disability Teams prior to Encompass Go-Live in November 2023. The necessity to complete a NISAT for all users within the service at the point of review, has impacted timescales for completion. With the increase in demand for services, as reflected in the increase in new referrals in line with lower transition age, there will continue to be pressures for timely completion of assessments. This issue is recorded on the Directorate Risk Register.	A focused action plan is in place with professional oversight. Bank staff have been deployed to support capacity, caseloads are RAG-rated, and telephone reviews are being used where appropriate for low level reviews. Compliance has increased by 5% during the reporting period to 47%, with reduced compliance in 1 sector negatively impacting on the overall compliance figure. This continues to be monitored through monthly Governance and Performance meetings. A review of current social work led interventions is commencing. This will focus particularly on those supporting low-level or preventative need, to determine whether they could be delivered more efficiently and effectively through the community and voluntary sector and through technology-enabled care solutions. Such an approach would promote independence, enabling individuals to better manage their own wellbeing and daily living activities while reducing reliance on statutory services. A regional review of NISAT is being completed to streamline processes and improve efficiency. The Trust is working alongside Children's Services in relation to configuration of funding to support the change in transition age and to reflect the level of complexity and demand on adult services.

	Reduction in the Completion of Carers Assessments In this reporting period the number of carer assessments offered slightly reduced to 155. Of these, 140 assessments were completed, resulting in an improved completion rate of 90.3%. Despite the reduction in overall offers, the proportion of completed assessments increased, evidencing continued improvement in engagement and delivery of carer assessments.	Work is on-going with the Carer Lead in relation to the creation of a Carers database which will provide a baseline of assessments required from which an action plan and tracker will be created. Remedial work has started. This will enable the service to report on compliance. There continues to be Encompass recording and workflow issues which impact on the completion of carer assessments. The Trust will continue to engage with regional colleagues to amend the workflows as required. The Trust believes that compliance in this area is high and would welcome confirmation of a regional compliance rate with regards to Carers Assessments.
	Increase in the number of individuals requiring bespoke supports and placements There continues to be a high number of adults requiring bespoke supports and placements. The Trust has seen an increase in the complexity of those transitioning from Children's services requiring such placements and is reflected in the projections for the next 5 years. Limited provider capacity, workforce shortages, and insufficient specialist infrastructure have reduced market engagement and contributed to placement instability and breakdown. Placement breakdowns often result in the need for statutory contingency plans such as emergency admission	The Trust continues to work proactively with providers and partner agencies to support individuals to remain safely in their communities and to prevent placement or family breakdown. This approach aligns with the LDSM with a focus on prevention, early intervention and community-based support. The Trust has completed a provider engagement event. Work is ongoing with system partners to support the development and expansion of local community provision in line with the LDSM, with the aim of reducing reliance on out of area crisis placements. The service is investing in its own statutory residential and supported living services to strengthen workforce skills and increase capacity to support individuals with complex needs. The Trust is working alongside

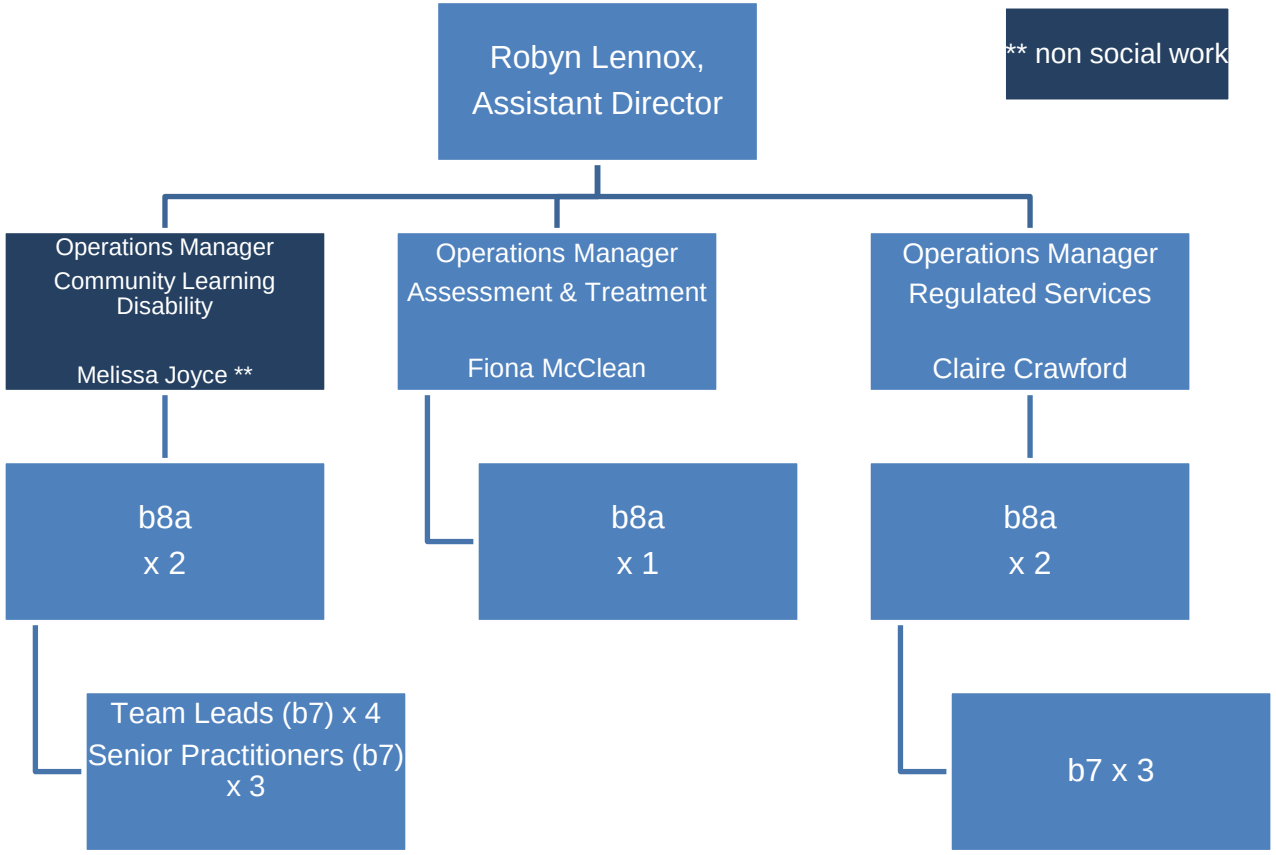
	to short breaks. This has a significant impact service users and carers.	Children's Services in relation to configuration of funding to support the change in transition age and to reflect the level of complexity and demand on bespoke placements. The service has engaged in the high-cost case review process and has commissioned an independent review to inform further service and commissioning improvements. The service is engaging in a pre-market engagement event to establish competition within the market to reduce costs and expand the availability of placements.
	Trust compliance with the regional Adult Safeguarding procedures The Trust continues to audit adult safeguarding processes within the service. An Internal audit completed in February 2026 showed non-compliance around delays at various stages of the investigation process, use of documentation, Encompass work flows and standard of recording. BSO Audit Feb/March 2026 found similar findings and has outlined recommendations.	Audit findings from both BSO audit and internal audit have been shared with the service. Standard Operating Procedures (SOP's) have been shared by the Adult Protection Gateway Team to increase compliance. A further audit to monitor progress is planned for October 2026.
	Limited compliance with Professional Supervision standards impacting on professional oversight of associated statutory functions	Audit has been shared with managers and embedded within service governance and improvement planning. A contingency model is being developed to strengthen operational and professional supervision

	A supervision audit completed in February 2026 identified areas for improvement, particularly in relation to the frequency and consistency of supervision for both b6 and b7 social work staff. B7 staff compliance in relation to frequency was 33% this was 17% at b6. The audit highlighted that staff absence across all bands had a significant impact on compliance with supervision requirements with no contingency plans in place to support this task.	arrangements, including greater utilisation of senior practitioners and other senior managers to ensure continuity. In addition, a quality improvement project has been initiated to support improved compliance, strengthen recording practices and enhance managerial oversight, with completion due in November 2026. Progress will be monitored through quarterly audits and routine performance reporting, with clear escalation processes in place to address non-compliance.
	Failure to complete Deprivation of Liberty Applications in line with the Mental Capacity Act 2016 in a timely manner The Adult Learning Disability service has 58 service users currently subjected to Emergency provisions awaiting a Trust Panel Authorisation (TPA). MCA assessments continue to fall to social work staff for completion. This is reflective of other services across the Trust and puts greater demand on the social work teams despite other professionals being able to complete these. This issue has been escalated to the MCA team interface meetings and is recorded on the Directorate Risk Register. Teams continue to absorb the number of full assessments required due to the decision to discharge TPA's due to change in location. This has put additional pressure on teams and they continue to work through these.	A full scoping exercise has been completed. An action plan has been developed with operational teams to prioritise statutory applications, with specific focus on individuals in supported living, residential and nursing placements. Regular oversight meetings are in place to monitor progress with operational managers and to agree new changes to the current process. The service continues to rely on bank staff to support the completion of these assessments. Numbers have reduced from 88 to current number of 58 requiring completion. Continued engagement with the MCA Team with oversight governance meetings. A review of current processes in place with a view there will be a reduction in the number of applications required due to Prevention of serious harm (POSH) criteria not being met. It anticipated this will considerably reduce the number of MCAs within teams.

The following issues have also been carried over from the 2025/26 Action Plan and have been RAG rated through the regular interface meetings between the Trust and the SPPG.

Issue	**RAG**
Delay of the resettlement of individual patients from MAH As of, May 2026 the Trust has completed the resettlement of all patients from MAH.	

Professional Organisational Chart – Learning Disability



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 this reporting period, Tiffany Wilkinson replaced Roberta Myers as Operations Manager for Older People's Community Teams.

Please see organisational structure on page 46.

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

Social Work Vacancies:
As of 31st March 2026:

Social Work Service	Vacancy rates	Absence rates
Hospital Social Work	15%	48%
Community OP	10%	7%
STAT	6.45%	6.86%
Adult Protection Gateway Team	0%	3%
Care Home Support Team	27%	13%
GP MDT SW	13%	12%
Social Care Services		
Homecare Service	7.2% (b3 staff)	11.65%
Day Care	0%	5%
Supported Living	16%	10.5%

Mitigating Actions
Workforce pressures have remained throughout this reporting period. Mitigations have included participation in regional social work recruitment exercises, bespoke social work recruitment, temporary contracts, use of bank, adherence to attendance management with HR support.
Please see details below:

Hospital Social Work
2 wte Senior Social Work (b7) posts (covered by a temporary contract and by Hospital Senior Practitioner)
2 wte Hospital Social Work (b5/6) maternity posts in Ulster Hospital (covered by 1 wte temporary social worker)
4 wte Hospital Social Work (b5/6) maternity Posts in Lagan Valley HSW Dept (covered by 1 wte temporary contract & 2 days of bank cover)

Older People's Community Teams
During the reporting period, 4 posts were filled by regional graduate recruitment within the older people's community teams.
Current vacant posts are being filled by 4 wte bank social workers

Short Term Assessment Team (STAT)
2 wte social work vacancies. Caseloads have been distributed amongst the remaining social workers in the team. This is being monitored by the senior social workers to ensure workload pressures are manageable.

Care Home Support Team (CHST)
The CHST current vacancies are due primarily to staff securing promotions. The team is managing the current vacancies and sick absence by use of social work bank.

Bespoke recruitment
Bespoke recruitment was undertaken in December 2025 to address gaps in social work in the Hospital Social Work teams.
A further bespoke recruitment exercise is underway to address vacancies across the older people's community teams, hospital social work and the STAT.

Workforce Challenges During Reporting Period:
Financial Position
Due to the Trust's serious financial situation, and the need to make significant savings, strict vacancy control measures have been put in place during this reporting period. This has led to greater scrutiny of vacant posts and the approval for backfill. Additionally, partial backfill (0.5 wte) for maternity posts has had significant impact on service delivery since such temporary posts are difficult to fill.

Regional Social Work Recruitment
The regional recruitment process continues to be utilised to fill vacant social work posts, and all teams have utilised the social work graduate

recruitment programme. Issues relating to the regional recruitment arise for the service given time delay from appointment to commencement of post. Vacancies arising outside of the bespoke recruitment timeframe creates further strain on operational teams covering vacant caseloads. Use of limited social work bank/temporary cover can further destabilise the workforce.

Absence Levels

Sickness absence has been a further challenge for teams during the reporting period. When posts remain vacant for long periods of time this, alongside the increased caseloads cause high levels of stress for staff. A significant cause of both short- and long-term absence is stress and work-related stress.

Increased Workload

In comparison with the previous reporting period the following caseload increases have been noted:

Services	**Activity**
Hospital Social Work	12% increase
Older People's Community Teams	4% increase
Care Home Support Team (CHST)	12% increase

Workforce planning:

Workforce planning has been a priority within older people's social work teams during the reporting period. Following the analysis of the workforce, in line with the current demands on services the following workforce changes were, and are, being implemented:

Hospital Social Work

The Hospital Social Work Management Team undertook a review of the workforce across all Trust acute hospitals. This review indicated the significant lack of resource available to provide social work cover to 'undesignated hospital beds' on the hospital wards. There is currently a case being made for an increase in Hospital social workers (b5/6) by 12.5wte, plus an additional 1 wte Senior Social Worker (b7), to support the professional management and supervision of these additional staff.

Older People's Community Teams

Evidencing the lack of investment for some years in the Older People's community teams, approval and funding was provided to recruit 6.5wte permanent Senior Practitioners (b7) under the Invest to Save model. The Senior Practitioners will provide support and mentorship with the statutory

functions that social workers provide and will also uphold and strengthen the function of care management and governance structures.

Short Term Assessment Team

Current consideration is being given to the reconfiguration of available funding to support the recruitment of an additional Senior social worker (b7), with the aim of strengthening leadership resilience and maintaining safe and effective service delivery. Significant pressure exists at this level, with current postholders operating beyond safe capacity.

This approach is expected to improve staff retention, morale and wellbeing, reduce burnout risk, and ensure professional leadership is maintained at a safe and consistent level across services.

5.3 Supervision arrangements for social workers

Teams are compliant with the Regional Social Work (NI) Supervision Policy (2024). Service area supervision plans are in place, inclusive of the implementation on the new recording template, frequency of supervision and the supervision file structure is in situ for all staff. Quality of supervision is in accordance with and adheres to the agreed social work agenda in place for the service.

Daily informal supervision is provided via open door policy and daily case discussions by the management team.

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

Team	Compliance rate
Short Term Assessment Team	89%
Hospital Social Work Teams	87%
Community Teams	86%
Care Home Support Team	100%
Adult Protection Gateway Team	90%

Compliance levels under 100% are due to vacancies and sick leave during the reporting period

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 presented within this report is considered fit for purpose, with appropriate assurance processes in place, however, it must be recognised that limitations continue to exist in relation to the use of Encompass for data collection. At present, Encompass does not provide all of the data fields required to fully support operational and governance reporting for social work services. Issues around accuracy, completeness and consistency of data from the system remain. As a result, services continue to be heavily reliant on manual data collection and validation processes.

Regarding adult protection data, the SPPG have temporarily postponed the data return for adult protection due to reporting issues with the Encompass system. This will be reviewed on a monthly basis. A level of manual data is maintained by the service to ensure patterns and trends within Adult Protection are not overlooked. Work continues regionally with Epic, SPPG and the Trusts on the reporting issues.

Ongoing work continues with Encompass colleagues to improve system functionality and alignment with social work reporting requirements, with the aim of reducing reliance on manual processes and strengthening future data assurance. In the interim, the current combination of manual controls, audit oversight, and management review provides assurance that the data included in this report is accurate, transparent, and appropriate for this reporting period.

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

	Number
Serious Adverse Incidents	*6*
Domestic Homicide Reviews	*0*
Case Management Reviews	*0*
Mental Health Review Tribunals	*0*
Judicial Reviews	*0*
Audits	*3* *BSO Internal Audits, Non-Pay Expenditure, Direct Payments, Adult Safeguarding*
RQIA Inspections	*7*
RQIA Enforcement notices – Failure To Comply Notices	*0*

Learning from SAI Investigation

Embedding a standard fire risk screening tool and home environment safety checklist within service user's self-directed support/care plan. Community Teams to ensure that service users who are restricted within their home, are bedbound or have limited mobility have an up-to-date environmental and fire safety risk assessment.

Learning from Audit

The Adult Safeguarding and Protection audit completed in February 2026 by BSO was deemed satisfactory. All recommendations from the audit will be taken forward in 2026.

RQIA Inspections

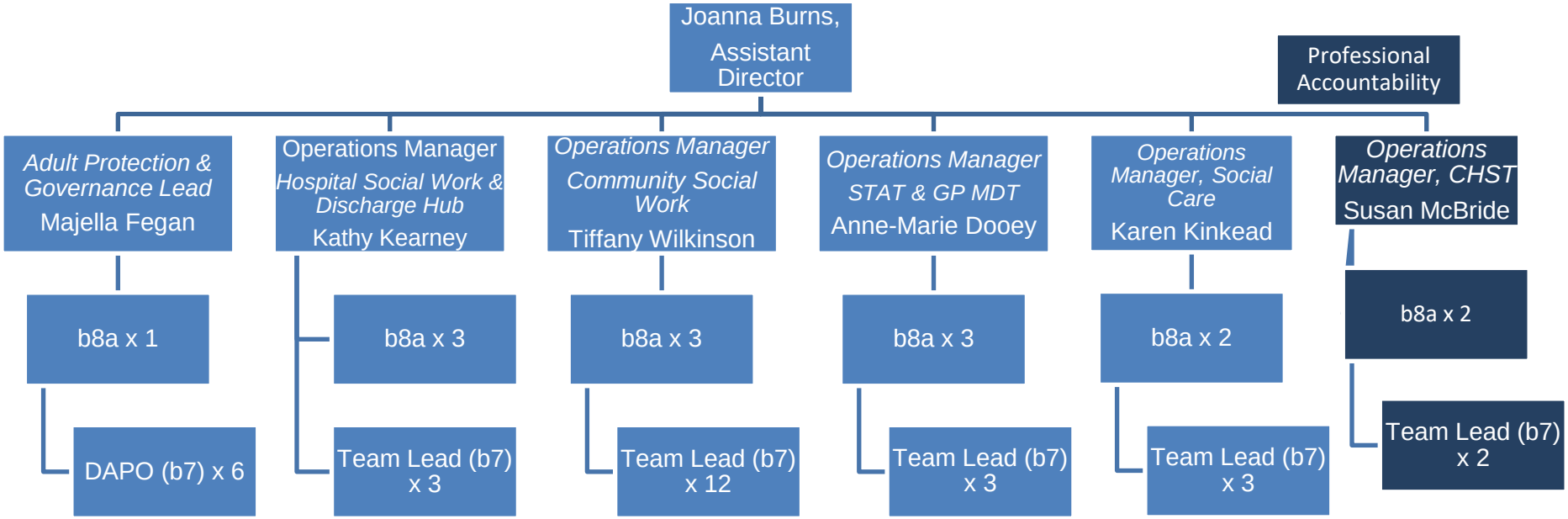
Home Care, Supported Living and Day Care registered offices and facilities have each received one unannounced inspection within this reporting period.

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.**
	i. Care Management Annual Reviews ii. The Older People's Community Teams achieved 75% compliance with annual reviews, this is consistent with the percentage compliance of the previous reporting period. Challenges include a gradual increase in referrals, staff sickness, and vacancies. This is compounded by pressures of social work staff having to manage high caseloads and complex cases in the community. iii. Care Home Support Team - The team achieved 94% compliance with statutory annual reviews, a 3% increase.	i. Improvements continue to be addressed by the use of social work assistants for lower-level annual reviews under the supervision of the Team Leader (b7). ii. There is recruitment in situ to introduce 6.5wte Senior Practitioners to work throughout the service and improve governance and accountability. There have been 3.5wte Senior Practitioner posts funded to support statutory functions, care management performance and savings efforts. There is ongoing review of the independent sector to allow the Trust to be accountable.

The following issues have also been carried over from the 2025/26 Action Plan and have been RAG rated through the regular interface meetings between the Trust and the SPPG.

Issues:	RAG:
Reduction in Statutory Care Home Bed availability	

Primary Care and Older People Services - Professional Organisational Chart



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

6.1 Named Officer responsible for professional Social Work

The named officers responsible for professional social work are Assistant Directors, David Hamilton and Maurice Largey.

There remains an unbroken line of professional accountability.

David Hamilton has been appointed as Assistant Director for Lakewood Regional Secure Care Centre, Residential and Leaving & Aftercare Services in March 2026, following the appointment of Marie-Louise Sloan to Executive Director of Social Work.

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

During this reporting period, the sub directorate has been under review leading to creation of one sub-directorate responsible for all residential care, including that for children with a disability, under David Hamilton.

Please see organisational chart on pages 53 and 54.

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

Children's Disability Services

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 investment has enabled the Children's Disability Service to significantly expand at pace. The service has undertaken 3 dedicated recruitment campaigns to recruit staff for 2 residential homes, Redwood and Greenhill as well as for community services. Within the reporting period the Service has recruited an additional 70 staff. This has enabled the restructuring of the social work teams by introducing a skill mix in the form of additional senior support workers, social work assistants, social workers and Senior Practitioner's.

Regional Secure Care Centre (Lakewood)

In this reporting period Lakewood has experienced significant and protracted challenges in relation to workforce as a result of violence and aggression from children to staff and the challenge in managing complex group dynamics. Environmental constraints due to estates issues has resulted in escalation and capping of beds. While there has been improvement towards the end of the reporting period the overall vacancy rate of 19%, with the addition of other staff out of work for other reasons including sickness this equates to a 33% workforce deficit.

The Trust has worked creatively with the region in relation to meeting the needs of children and young people who require secure care, this has included staff from other Trusts supporting Lakewood.

It will take time to stabilise the team and reduce the level of dependency on bank/overtime, and additional staffing is still required to meet safe staffing requirements. 25% of shifts are currently being covered by bank staff. A financial review is currently underway between the Trust and SPPG.

A service specification is in place for Lakewood and a business case has been submitted to SPPG for finance review and allocation moving forward.

Residential Services

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 8.1%. 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 1.3%.

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.

Leaving Care and Aftercare Services

The service has continued to reconfigure vacancies to create a team specifically for UASC, a business case has been approved a recruitment has been progressed.

6.3 Supervision arrangements for social workers

The Trust is currently not compliant with the regional supervision policy. The compliance rate within the sub-directorate is 79%, representing a 5% decrease from the previous reporting period.

Improving supervision compliance remains a priority. Progress continues to be affected by staff vacancies, sickness absence, and sustained service pressures.

Implementation of the Supervision Policy is ongoing across the sub-directorate. An action plan has been developed to support sustained improvement. Future focus areas include increased use of alternative supervision models and strengthened managerial support to improve reflective supervision and recording quality.

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 presented in this report to be robust. All data entered into reporting systems is subject to rigorous quality assurance by senior management, supported by information and performance colleagues.

Work with the Encompass build team remains ongoing, with a projected go-live in 2027. Children's Services senior managers continue to engage in Encompass build groups to ensure that current data assurance processes are fully embedded within the system.

The Children's Services Governance, Assurance and Improvement Team (GAIT) is strengthening data collection and assurance processes to provide additional confidence that services are delivering safe and effective care.

In 2025, a system to track and manage unallocated cases was implemented within Children with Disabilities Services, resulting in a reduction of over 34% in unallocated cases. 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	*2*
Domestic Homicide Reviews	*0*
Case Management Reviews	*0*
Mental Health Review Tribunals	*0*
Judicial Reviews	*2*
Audits	*2*
RQIA Inspections	*13*
RQIA Enforcement notices – Failure To Comply Notices	*3*

Serious Adverse Incidents (SAI)
2 SAIs were recorded during this reporting period). GAIT continues to work collaboratively with operational teams to deliver thematic analysis of Datix incidents, supporting early identification of risk trends and preventative action.

A strong culture of shared learning from SAIs is embedded across the sub-directorate. This focus has contributed to the sustained reduction in SAIs and recurring themes.

Improvements across Residential and Secure Care reflect effective use of evidence-based learning from Datix analysis, enabling proactive risk reduction.

Children's Disability Services recorded 1 SAI. Improvement activity remains focused on strengthening incident management within residential settings.

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

RQIA Inspections
RQIA completed unannounced inspections across all seven children's residential homes and three children's disability homes. Inspections identified positive practice and informed quality improvement plans addressing staffing challenges and increasing complexity of need.

A children's disability home received 3 Failure to Comply Notices, all of which were lifted following a June 2025 inspection confirming sustained improvement. Serious Concerns were issued in March 2026 in relation to a children's disability home. The Trust is currently engaging in an improvement exercise to ensure improvements are delivered and sustained as required.

Failure to comply notices were received in relation to issues of leadership, governance, staffing and restrictive practices. RQIA outlined significant deficits in governance arrangements, staff practices, staff handovers and competency assessments. There were concerns in relation to multiple vacancies and subsequent impact on deliver of care. There were concerns in relation to staffing, management and leadership. The Trust met with RQIA in relation to these concerns and provided a comprehensive action plan. This was accepted by RQIA and the Trust will deliver the necessary improvements required.

A Patient Inquiry was undertaken by RQIA in this children's disability home in line with RQIA's statutory obligations under the provisions of Article 86 (2) Mental Health (NI) Order 1986 (MHO); the Trust awaits the outcomes of this inquiry.

Common themes across inspections related to the recording, review, and use of restrictive practices. GAIT and operational teams are actively progressing improvement work.

Lakewood

Lakewood received 1 inspection during the reporting period. Pre-existing quality improvement plan actions were closed following assurance of improvement. Ongoing staff sickness and vacancies have resulted in a regionally agreed temporary reduction in bed capacity to nine young people. Targeted improvement activity continues.

Internal Audit

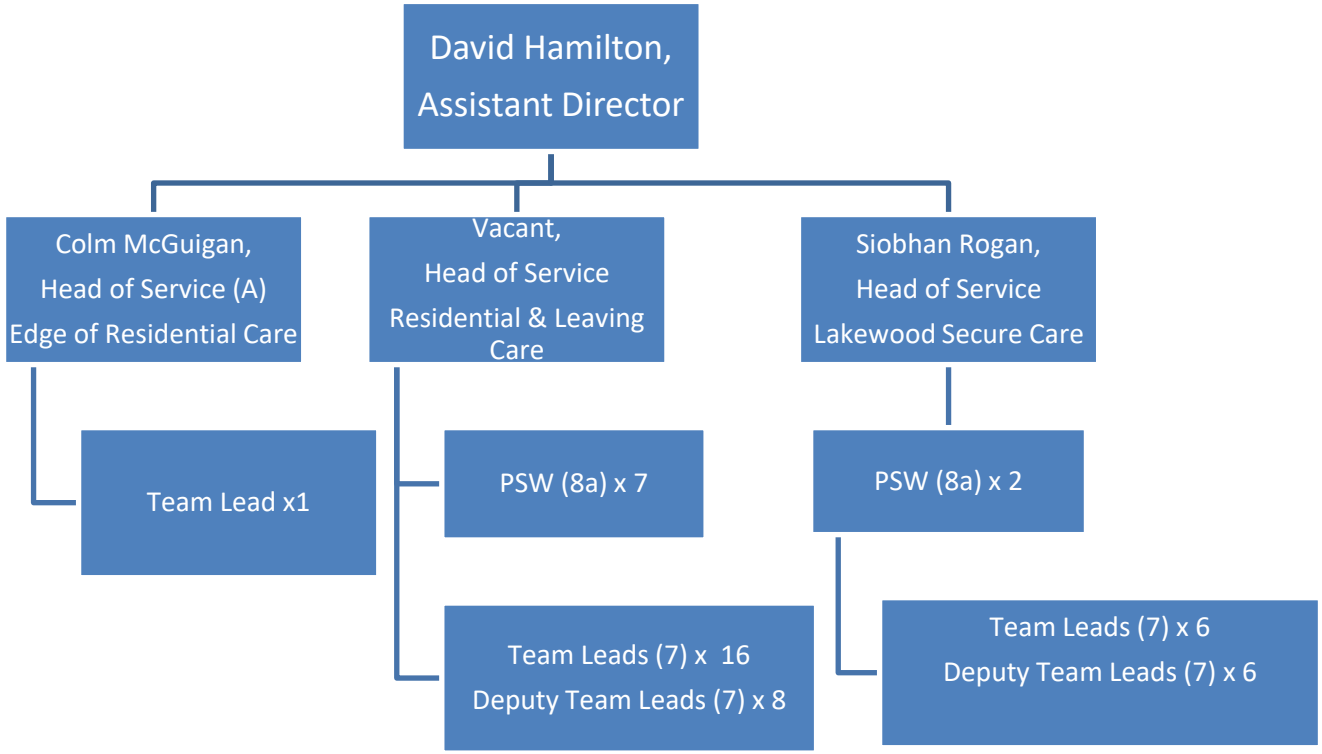
In this reporting period BSO internal audit took place in relation to Unaccompanied Asylum-Seeking Children. The outcome of this audit was that the level of assurance was assessed as 'limited'. This related specifically to the reliance on unregulated accommodation for this population and financial controls. The Trust will action the recommendations made.

6.6	**Summary of areas where the Trust has not adequately discharged their Statutory Functions for this Programme of Care.**	**Please outline remedial action taken to address this situation and any proposed future action.**
	Serious Concerns Meeting and Patient Inquiry in Children's Disability Home. The Trust met with RQIA in relation to these concerns and provided a comprehensive action plan. This was accepted by RQIA and the Trust will deliver the necessary improvements required.	A comprehensive action plan has been developed. The Trust has appointed a temporary Head of Service to lead necessary improvements. The children's disability residential service has now moved into one overall sub-directorate with responsibility for all regulated children's homes.

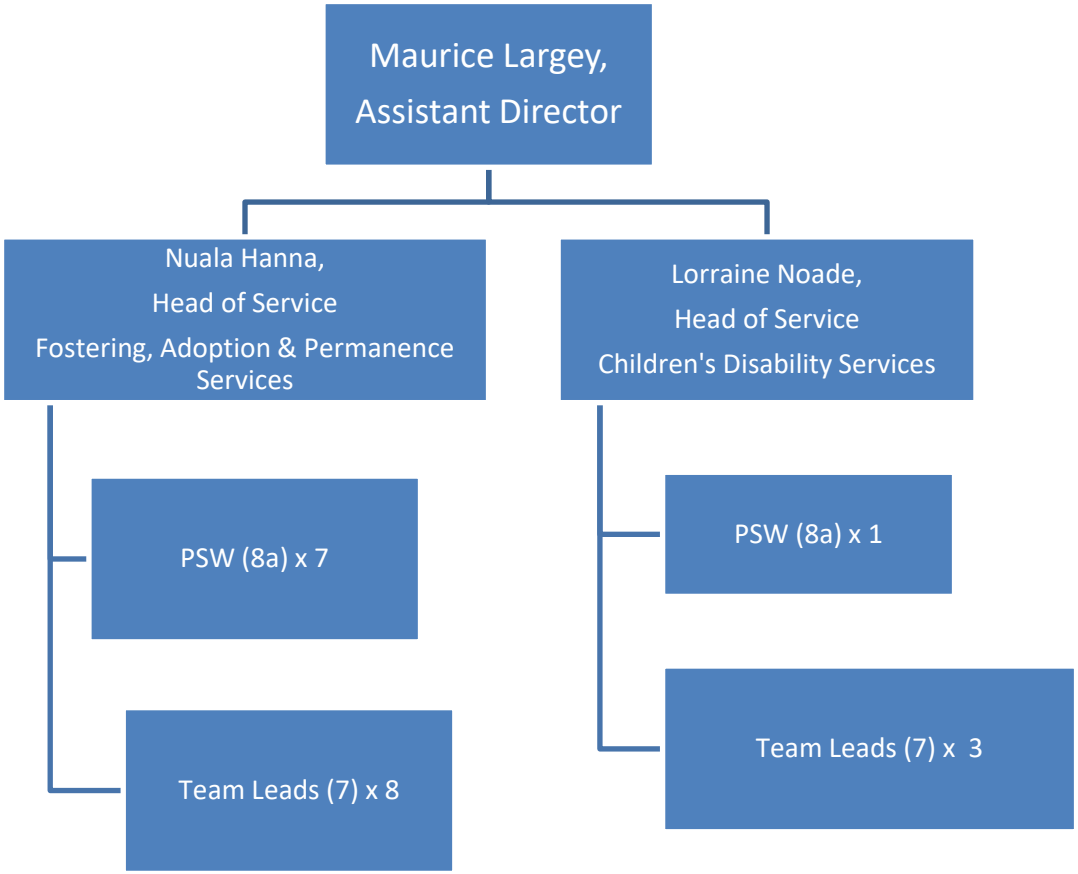
The following issues have been carried over from the 2025/26 Action Plan:

Issue	RAG
Children with a disability - lack of short breaks availability (currently on Support and Intervention Framework)	
Unallocated Cases	
Insufficient placement provision for children in care, including unregulated placements (Use of Independent Providers reviewed under Support and Intervention Framework)	
Workforce – High vacancy levels across Children's Services	
Lack of availability of Adoptive Placements	
Lakewood – (managed via Support and Intervention framework)	

Professional Organisational Chart (Lakewood, Residential and LCAC Services)



Professional Organisational Chart (LAC and Disability Services)



7.0 Safeguarding, Children in Care & Family Support Children's Services and Social Work Directorate

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, Children in Care & Family Support sub-directorate.

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

In this reporting period, the sub-directorate has undertaken a restructuring of frontline social work teams moving from the generic Child & Family Team (CAFT) model organised in three geographic sectors to a Trustwide Safeguarding, Children in Care and Family Support Services.

2 senior managers were recruited to Head of Service posts in this reporting period:
Joanne Garrett, Head of Service for Family Support
Claire Fulton, Head of Service for Children in Care

1 senior manager was confirmed in post:
Lisa Benstead, Head of Service for Safeguarding.

Please see organisational structure on page 60.

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

Recruitment

The Safeguarding, Children in Care & Family Support sub-directorate has 32.62 unfilled permanent and temporary social work posts;

Posts	wte	Actions taken
Admin	6.96	On hold due to vacancy controls within the Trust
Senior Support Officers (b5)	12	Regional process through Healthdaq. All staff anticipated to be in post by 5th May
Social Work	13.66	Regional Graduate recruitment

The Trust has also planned a recruitment for family workers (b4) to replace any staff who have been successful in gaining a senior support officer role.

The Safeguarding, Children in Care & Family Support Services continued to operate under sustained pressure during 2025–26, reflecting rising referrals, increasing complexity and ongoing workforce challenges. Throughout the year, the sub- directorate maintained a strong focus on risk management, prioritisation and governance to ensure timely intervention for children at greatest risk.

To improve responsiveness, the Safeguarding, Children in Care & Family Support sub-directorate progressed a restructuring of teams, strengthening capacity and enabling a more flexible and timely response to demand.

The restructure has resulted in social work vacancies being spread evenly across services which are now better equipped to absorb and respond to vacancies and long-term sickness absence.

7.3 Supervision arrangements for social workers

The Trust is not compliant with the regional supervision policy. The current compliance rate within this sub-directorate is 88%, representing a 4% reduction from the previous reporting period.

Improving supervision compliance remains a priority. Compliance continues to be impacted by staffing vacancies, sickness absence, sustained service pressures, and structural reform which resulted in changes to line management arrangements.

An action plan to support sustained improvement in supervision compliance is in development. Key areas of focus include increased use of alternative supervision models and enhanced practical support for managers to strengthen reflective supervision practice and the quality of recording.

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 are assured the data provided in this report is robust, with rigorous quality assurance by senior managers and colleagues in information performance.

The Governance, Assurance and Improvement Team (GAIT) continues to provide an additional system to review and quality assure the data. GAIT is focused on developing improved and robust processes across the directorate for gathering data which provide additional assurances regarding the sub directorate delivering safe and effective care.

The Trust continues to engage with the Encompass build team ahead of the projected go live in 2027. This engagement includes a focus on effective interfaces between the Trust, Encompass and existing systems such as Soscare and NIECR.

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.

	Number
Serious Adverse Incidents	*1*
Domestic Homicide Reviews	*2*
Case Management Reviews	*2*
Mental Health Review Tribunals	*0*
Judicial Reviews	*0*
Audits	*1*
RQIA Inspections	*0*
RQIA Enforcement notices – Failure to Comply Notices	*0*

Serious Adverse Incidents (SAI)/Case Management Reviews (CMR) /Domestic Homicide Reviews (DHR):

The SAI, DHRs and CMRs are not yet complete. The actions from the DHR Internal Learning Reviews and the learning from one of the CMR Individual Agency Reviews (IAR) are either completed or underway within the agreed timescale. The IAR for the most recent CMR will soon commence.

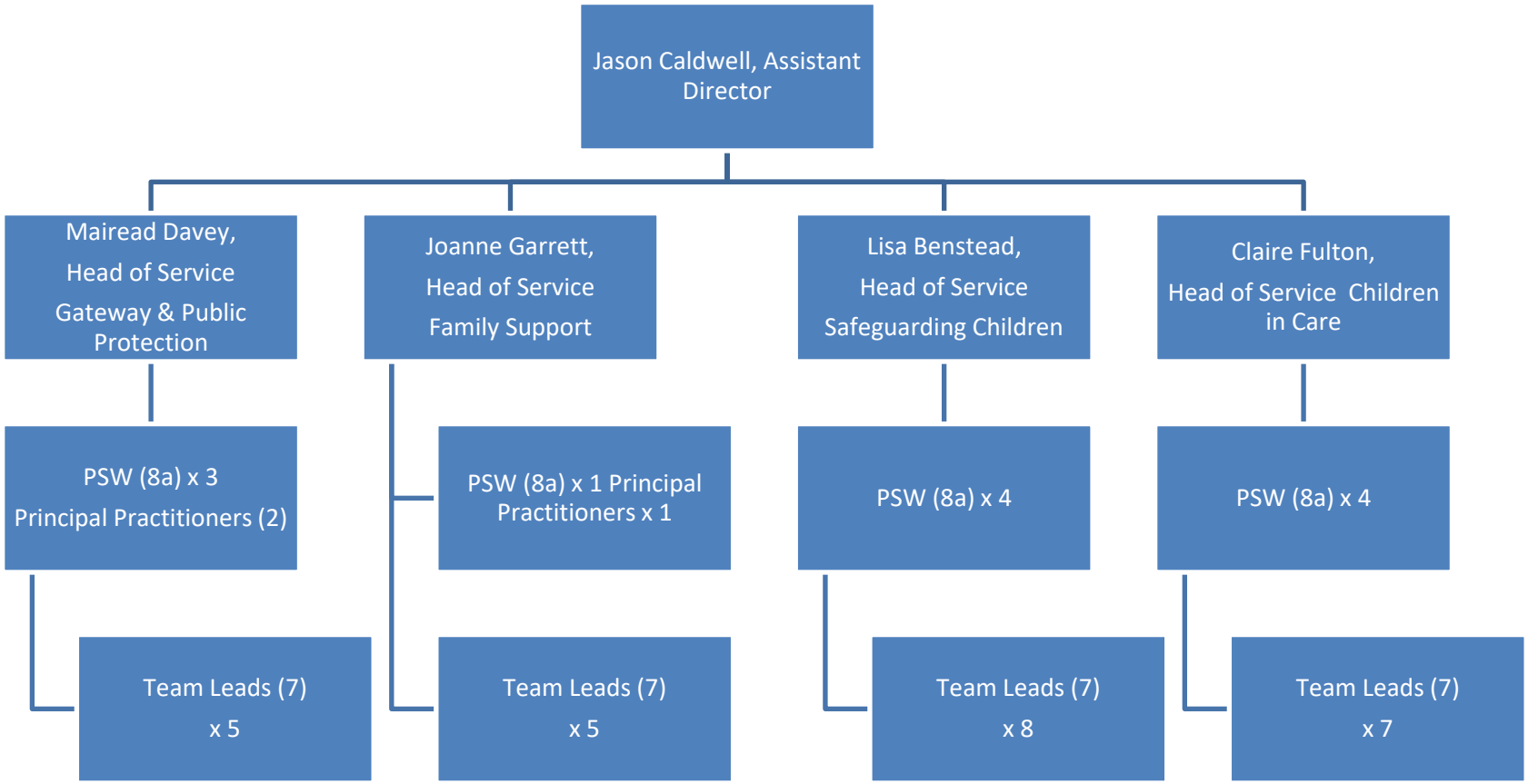
Audits

The Safeguarding, Children in Care and Family Support sub-directorate has a clear audit schedule to provide assurance in key areas of practice. Several audits were deferred in the last reporting period due to the service reform, these have been scheduled for 2026 and include the PLAC audit, the Child Protection Register 2 Years Plus and GAIN audits scheduled in the coming months; the outcome of these audits will be reported in the next report.

The governance priorities within Children's Services for this reporting period will focus on mandatory training and a consistent and robust audit schedule across the Children's Directorate.

7.6	**Summary of areas where the Trust has not adequately discharged their Statutory Functions for this Programme of Care.**	**Please outline remedial action taken to address this situation and any proposed future action.**
	Cases Waiting for a Social Work Service (Unallocated)	Regarding the management of the waiting list for unallocated social work services, the Collaborative Unallocated Process (CUP) model continues to be utilised by Safeguarding, Children in Care, Family Support Teams and Children's Disability fieldwork teams. This ensures ongoing triage and robust governance for children and families awaiting social work intervention. The increase in cases awaiting allocation is attributed to persistent workforce challenges, despite continued efforts to recruit and retain staff, vacancy rates exceed 20%; necessitating continued prioritisation of caseloads to fulfil statutory service requirements. It is important to note that all cases on the unallocated waiting list have undergone initial assessment and subsequent review through the CUP process and are assessed as low risk. Oversight, monitoring, and governance are further enhanced by the Children's Services Waiting List Group, jointly chaired by the Assistant Directors for Safeguarding and Children's Disability.

Organisational Chart - Safeguarding, Children in Care & Family Support



Statutory Functions Data Returns

Data Return 1

	1 GENERAL PROVISIONS	MH Adults		MH Older People		Learning Disability		Phys/Sens Disability		Older People		TOTAL	
		<65	65+	<65	65+	<65	65+	<65	65+	<65	65+	<65	65+
1.1	How many **adults** were referred for assessment of social work or social care need during the period?	1918			407	139	2	609	367		9651	2666	10427
1.2	Of those reported at 1.1 how many adults commenced receipt of social work or social care services during the period?	*Not available*			*Not available*	123	2	536	247		8119	659	8368
1.3	How many adults are in receipt of social work or social care services at 31st March?	1458			336	1568	180	1247	449		8118	4273	9083
1.3a	How many adults are in receipt of social work support only at 31st March (not reported at 1.4)?	1159			121	142	18	122	48		118	1423	305
1.4	How many care packages are in place on 31st March in the following categories:												
	(1) **Residential Home Care**	9			51	115	31	11	3		975	135	1060
	(2) **Nursing Home Care**	42			72	72	38	89	28		2653	203	2791
	(3) **Domiciliary Care** – Include Care and Non-Care Managed Packages.	66			72	123	39	550	75		5215	739	5421
	(4) **Supported Living**	128			9	233	38	23	0		74	384	121

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. Answer **YES**	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y		
1.4b	Annual Reviews – Please provide assurances to the Commissioner that there is professional oversight of the Annual Review process in your Trust. Answer **YES**	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y		
1.6	Number of adults known to the Programme of Care in receipt of Centre based Day Care												
	- Statutory sector	105			11	279	25	59	1	25	142	468	179
	- Independent sector	2200			0	69	1	6	1	0	298	2275	300
1.6a	Number of adults known to the Programme of Care in receipt of Day Opportunities	0			0	629	18	123	10	0	0	752	28
1.7	Of those at **1.6** how many are dementia (EMI)												
	- Statutory sector	0			0	12	2	0	0	0	110	12	112
	- Independent sector	0			0	1	1	1	0	49	49	51	50
1.9	How many of this Programme of Care clients are in HSC Trust funded social care placements outside Northern Ireland?	2			0	6	0	3	2	0	1	11	3

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?	230	1070	6855
1.2	Of those reported at 1.1 how many assessments of need were undertaken during the period? (*assessment is to include screening*).	230	1070	6855
1.3	How many adults or children are on Hospital Social Workers caseloads at 31st March?	3	67	155

1 GENERAL PROVISIONS – ACUTE HOSPITAL (MH)				
		<18	**18-65**	**65+**
1.1	How many adults or children were referred to Hospital Social Workers for assessment during the period?		531	28
1.2	Of those reported at 1.1 how many assessments of need were undertaken during the period? (*assessment is to include screening*).		531	28
1.3	How many adults or children are on Hospital Social Workers caseloads at 31st March?		78	28

Data Return 2

2 CHRONICALLY SICK AND DISABLED PERSONS (NI) ACT 1978;		Mental Health Adults		Mental Health Older People		Learning Disability		Physical/ Sensory Disability		Older People		TOTAL	
		<65	65+	<65	65+	<65	65+	<65	65+	<65	65+	<65	65+
2.2	Number of adults known to the Programme of Care who are:												
	Certified severely sight impaired (Blind)							313	447			313	447
	Certified severely sight impaired (Partially sighted)							210	190			210	190
	Sight Loss							234	554			234	554
2.3	Number of adults known to the Programme of Care who are:												
	Profoundly Deaf Sign Language Users							67	28			67	28
	Profoundly Deaf Oral / Lip Readers							59	31			59	31
	Hard of hearing							270	564			270	564
	Tinnitus							41	17			41	17
2.4	Number of adults known to the Programme of Care who are:												
	Deaf Blind							41	49			41	49

Data Return 3

3 DISABLED PERSONS (NI) ACT 1989		Mental Health Adults	Mental Health Older People	Learning Disability	Physical/ Sensory Disability	Older People	Total
3.1	Number of referrals to **Physical Disability** during the reporting period.			0	454		454
	Number of referrals to **Learning Disability** during the reporting period.			141	0		141
	Number of referrals to **Sensory Disability** during the reporting period.			0	522		522
3.1 a	Number of disabled people known as at 31st March. *Note: adults with a disability on the caseload of social workers.*			1748	1696		3444
3.2	Number of assessments of need carried out during the period end 31st March.			125	783		908
3.3	Number of assessments undertaken of disabled children ceasing full time education.			26	1		27

Data Return 4

4 HEALTH AND PERSONAL SOCIAL SERVICES (NI) ORDER 1972; Article 15, Article 36 [as amended by Registered Homes (NI) Order 1992]		Mental Health Adults	Mental Health Older People	Learning Disability	Physical/ Sensory Disability	Older People	FCC/ Children	Total
4.1	Number of Article 15 (HPSS Order) Payments	3	0	8	16	1	0	28
	Total expenditure for the above payments	£682.00	£0.00	£4,148.00	£5,656.98**	£100.00	£0.00	£10,586.98
4.2	Number of TRUST FUNDED people in **residential care**	0	0	141	15	486		642
4.3	Number of TRUST FUNDED people in **nursing care**	2	0	108	113	1071		1294
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)*	0	2	2	6	463		473

** Children open to Sensory Support Team

Data Return 5

5 CARERS AND DIRECT PAYMENTS ACT 2002		Mental Health Adults	Mental Health Older People	Learning Disability		Physical/ Sensory Disability		Older People	FCC/ Children	Total	
		18-64	65+	18-64	65+	18-64	65+	65+	18-64	18-64	65+
5.1 (i)	Number of adult carers **offered** individual **carers assessments** during the period	757	38	96	59	306	91	1222	*No submission due to action short of strike action and resultant non-completion of statistical returns*	**1159**	**1410**
5.2 (i)	Number of adult individual **carers assessments completed** during the period	719	13	83	57	155	76	220		**957**	**366**
5.2a (i)	Number of adult individual **carers assessments declined** during the period and the reasons why	38	25	13	2	151	15	1002		**202**	**1044**
5.3	Of the total at 5.2 (i) and (ii) how many of the assessments were the carers, caring for disabled children?	0	0	0	0	0	0	0	305	**146**	**0**
5.4	Number of adult carers receiving a service @ 31st March	1142	0	243	120	37	4	673	194	**1616**	**797**
5.5	Number of young carers offered individual carers assessments during the period.	3	0	0		1		**0**	31	**35**	

5.6	Number of young carers assessments completed during the period.	3	0	0	1	**0**	25	**29**
5.7	Number of young carers receiving a service @ 31st March	55	0	0	0	**0**	53	**108**
5.8	(a) Number of requests for direct payments during the period 1st April – 31st March	0	0	30	20	**45**	74	**169**
	(b) Number of new approvals for direct payments during the period 1st April – 31st March	0	0	30	20	**31**	35	**116**
	(c) Number of adults receiving direct payments @ 31st March (Source: SPPG PSSID Return)	20	0	290	242	**259**	0	**811**
5.9	Number of children receiving direct payments @ 31st March	0	0	0	0	**0**	239	**239**
5.9 a	Of those at 5.8 how many of these direct payments are being managed by another person acting on behalf of the service user?	0	0	76	11	**2**	35	**124**
5.10	Number of carers receiving direct payments @ 31st March	0	0	172	5	**26**	0	**203**
5.11	Number of one-off Carers Grants made in-year	357	0	122	81	**215**	194	**81**

Data Return 9

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		MH Adults	MH Older People	Learning Disability	Physical/ Sensory Disability	Older People	FCC/ Children	Total
9.1	Total Number of Assessments made by ASWs under the MHO	171	77	3	0	0	10	**261**
9.1.a	Of these how many resulted in an application being made by an ASW under (Article 5.1b)	117	48	2	0	0	6	**173**
9.1.b	How many assessments required the input of a second ASW (Article 5.4a)	4	0	0	0	0	0	**4**
9.1.c	Number of applications made by the nearest relative (Article 5.1.a)	1	0	0	0	0	0	**1**
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.	Y	Y	Y	N/A	N/A	Y	N/A

Use of Doctors Holding Powers (Article 7)		MH Adults	MH Older People	Learning Disability	Physical/ Sensory Disability	Older People	FCC/ Children	Total
9.2	How many times did a hospital doctor use holding powers?	59	0	0	0	0	0	**59**
9.2a	Of these, how many resulted in an application being made?	56	0	0	0	0	0	**56**

ASW Applicant Reports		MH Adults	MH Older People	Learning Disability	Physical/ Sensory Disability	Older People	FCC/ Children	Total
9.3	Number of ASW applicant reports completed	117	48	2	0	0	6	**173**
9.3.a	Confirm if these reports were completed within 5 working days. Answer **YES**	Y	Y	Y	N/A	N/A	Y	N/A

Social Circumstances Reports (Article 5.6)		MH Adults	MH Older People	Learning Disability	Physical/ Sensory Disability	Older People	FCC/ Children	Total
9.4	Total number of Social Circumstances reports completed.	1	0	0	0	0	0	**1**
9.4a	Confirm if these reports were completed within 14 days.	Y	N/A	N/A	N/A	N/A	N/A	N/A

Mental Health Review Tribunal		MH Adults	MH Older People	Learning Disability	Physical/ Sensory Disability	Older People	FCC/ Children	Total
9.5	Number of applications to MHRT in relation to detained patients	66	0	1	0	0	0	**67**

Guardianship (Article 18)		MH Adults	MH Older People	Learning Disability	Physical/ Sensory Disability	Older People	FCC/ Children	Total
9.6	Number of Guardianships in place in Trust at period end	0	0	0	0	0	0	**0**
9.6 a	New applications for Guardianship during period (Article 19 (1))	0	0	0	0	0	0	**0**
9.6 b	How many of these were transfers from detention (Article 28 (5) (b))	0	0	0	0	0	0	**0**

9.6 c	How many were Guardianship Orders made by Court (Article 44)	0	0	0	0	0	0	**0**
9.6 d	Number of new Guardianships accepted during the period (Article 22 (1))	0	0	0	0	0	0	**0**
9.6 e	Number of Guardianships renewed during the reporting period (Article 23)	0	0	0	0	0	0	**0**
9.6 f	Number of Guardianships accepted by a nominated other person	0	0	0	0	0	0	**0**
9.6 g	Number of MHR hearings in respect of people in Guardianship Provide total number	0	0	0	0	0	0	**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	2	0	0	0	0	0	2
	Lapsed	0	0	0	0	0	0	0
	Discharged by MHRT	0	0	0	0	0	0	0
	Discharged by Nearest Relative	0	0	0	0	0	0	0
	Total	2	0	0	0	0	0	2

Approved Social Worker (ASW) Register		**MH Adults**	**MH Older People**	**Learning Disability**	**Physical/ Sensory Disability**	**Older People**	**FCC/ Children**	**Total**
9.7	Number of newly appointed Approved Social Workers during period	3	0	0	0	1	0	**4**
9.7 a	Number of Approved Social Workers removed during period	2	1	0	0	0	0	**3**
9.7 b	Number of Approved Social Workers at period end	45	3	3	0	3	2	**56**
9.7 c	ASW Quality Standards 2021 - **To be completed in the following worksheet "9.7c ASW QUALITY STANDARDS"**							

9.8	Do any of the returns for detention and Guardianship in this section relate to an individual who was under 18 years old?	N	N	N	N	N	N	
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	0	4	8	49	0	**61**

	The Mental Health Order (NI) 1986 as amended by The Criminal Justice (NI) Order 1996.Sarticle 50A (6) Schedule 2A Supervision and Treatment Orders	**MH Adults**	**MH Older People**	**Learning Disability**	**Physical/ Sensory Disability**	**Older People**	**FCC/ Children**	**Total**
9.10	Number of supervision and treatment orders, (where a Trust social worker is the supervising officer) in force at the 31st March	1	0	0	0	0	0	**1**
	Of the Total shown at **9.10** how many have their treatment required as:							
9.11	(a) Treatment as an in-patient	1	0	0	0	0	0	**1**
	(b) Treatment as an out patient		0	0	0	0	0	
	(c) Treatment by a specified medical practitioner	0	0	0	0	0	0	**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	0	0	0	0	0	**0**
9.13	Of the total shown at 9.10 how many of these supervision and treatment orders were **made** during the reporting period.	1	0	0	0	0	0	**1**

9 THE MENTAL CAPACITY (NI) ACT 2016		
PANEL APPLICATIONS (during the year)		
9.14	Total number of Trust Panel Applications	416
9.15	Number of Interim Authorisations	4
9.16	Number of Full authorisations	406
9.17	Number where work has started but not completed	NA
9.18	Total number of cases not yet referred to Attorney General	0
9.19	Do you have sufficient numbers of staff to carry out TP Formal Assessments of Capacity (Form 1)?	NO
	Operational teams are finding it extremely challenging to undertake MCA work against other competing priorities. Workforce challenges and an increase in AYE staff in some teams has resulted in loss of MCA expert knowledge and practice. Complexity and acuity in service user/patient presentation has impacted delivery models in community teams.	
9.2	Do you have sufficient numbers of staff to make TP Best Interests determination (Form 2)?	NO
	Please see response in 9.19	
9.21	Do you have sufficient numbers of medical practitioners to complete TP Medical Reports (Form 6)?	NO
	Although the Trust has made great progress in building an MCA medical leadership line, there is a great demand for sessional medics to undertake community medical assessments.	

TRUST PANELS		
9.22	Do you have sufficient number of Trust Panel members to cover first applications (Form 5)?	YES
9.23	Do you have sufficient number of Trust Panel members to cover Trust panel extension Applications (Form 16)?	YES
EXTENSIONS		
9.24	Total number of Extension Authorisations (during the year)	868
9.25	Number referred to RT	183
9.26	Number Not referred to RT	685
9.27	Number of Cases outstanding	0
9.28	Do you have sufficient number of staff suitably qualified to make responsible person statements (Form 15)?	YES
9.29	Do You have Sufficient number of staff to carry out TP Extension Formal Assessments of Capacity (Form 1)?	YES
9.3	Do you have sufficient number of staff to make TP Extension Best Interests determination (Form 2)?	YES
SHORT TERM DETENTION AUTHORISATIONS		
9.31	Work started but not completed (during the year)	1667
9.32	Total number of short term detention authorisations	564
9.33	Do you have sufficient number of staff to carry out STD Formal Assesments of Capacity (Form 1)?	NO
	Short Term Detention work has seen a dramatic increase in referrals into the core team (2231 referrals received during this period, rising from 258 in the previous reporting period). The current dedicated MCA resource in acute cannot comply fully with an 865% increase in demand for a Short-Term Detention Assessment.	

9.34	Do you have sufficient number of staff to make STD Best Interests determination (Form 2)?	NO
	Please see response in 9.33	
9.35	Do you have sufficient number of staff of medical practitioners to complete STD medical reports (Form 6)?	NO
	Please see response in 9.33	
9.36	Do you have sufficient number of ASWs and appropriate healthcare professionals to authorise STDs (Form 8)?	NO
	Please see response in 9.33	
LIVE CASES (during the year)		
9.37	Total No. Live Trust Panel / Extension Authorisations	874
9.38	Total No. Live Short Term Detention Authorisations	25

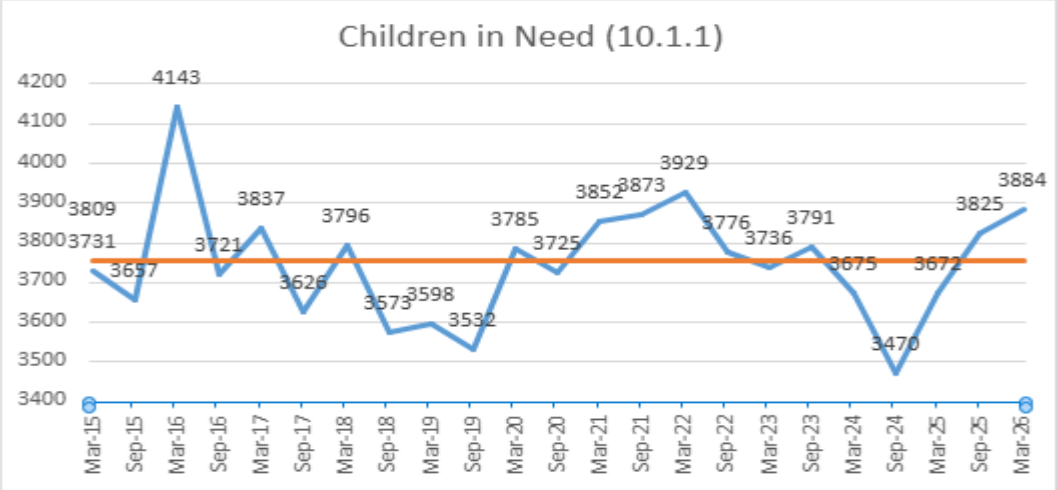
CORPORATE PARENTING RETURNS

10.1 CHILDREN IN NEED

10.1.1 *How many Children in Need are there in your area as at 31st March?*

	<1		1-4		5-11		12-15		16+		Total	
	M	F	M	F	M	F	M	F	M	F	M	F
Children	38	56	309	282	960	756	523	493	268	199	2098	1786
TOTAL	**38**	**56**	**309**	**282**	**960**	**756**	**523**	**493**	**268**	**199**	**2098**	**1786**

There are 3884 children in need known to the Trust; this is a slight increase on the previous reporting period, and showing upward movement since 2024.



10.1.2 *Ethnic Origin of Children in Need*

Ethnicity	<1		1-4		5 - 11		12-15		16+		Total		Total
	M	F	M	F	M	F	M	F	M	F	M	F	
White	20	30	172	154	542	447	335	304	192	140	1261	1075	2336
Chinese	0	0	0	2	0	0	2	1	0	0	2	3	5
Irish Traveller	0	1	1	1	1	0	0	0	0	1	2	3	5
Roma Traveller	0	0	0	0	0	0	1	0	0	1	1	1	2
Indian	0	0	0	1	2	0	0	0	0	1	2	2	4
Pakistani	0	0	0	1	1	1	0	1	0	0	1	3	4
Bangladeshi	0	0	1	2	3	0	0	0	1	1	5	3	8
Black Caribbean	0	0	0	0	0	0	0	0	0	0	0	0	0
Black African	0	0	1	0	1	0	4	0	7	5	13	5	18
Black Other	0	0	0	0	0	1	0	1	1	0	1	2	3
Mixed Ethnic Group	0	1	3	6	19	9	6	5	3	1	31	22	53
Any Other Ethnic	1	1	0	2	2	7	5	6	2	1	10	17	27
Not Stated	17	23	131	113	389	291	170	175	62	48	769	650	1419
TOTAL	**38**	**56**	**309**	**282**	**960**	**756**	**523**	**493**	**268**	**199**	**2098**	**1786**	**3884**

10.1.3 *Religion of Children in Need*

	<1		1-4		5-11		12-15		16+		Total		Total
Religion	**M**	**F**	**M**	**F**	**M**	**F**	**M**	**F**			**M**	**F**	
Roman Catholic	9	6	57	56	191	138	122	99	70	53	449	352	801
Presbyterian	1	2	12	12	55	66	38	47	26	27	132	154	286
Church of I	0	0	6	4	21	17	26	19	16	16	69	56	125
Church of E	0	0	0	0	2	0	1	4	5	1	8	5	13
Methodist	0	0	1	1	5	4	1	4	2	2	9	11	20
Other Christian	1	6	22	27	67	71	47	43	29	17	166	164	330
Jewish	0	0	0	0	0	0	0	0	0	0	0	0	0
Muslim	0	0	0	2	7	6	3	2	12	6	22	16	38
Other	1	1	8	4	16	16	9	6	4	3	38	30	68
Not Known	19	31	176	145	517	364	248	227	85	62	1045	829	1874
Not Completed	0	0	0	0	0	0	0	0	0	0	0	0	0
None	7	9	27	31	78	74	27	41	19	12	158	167	325
Refused	0	1	0	0	1	0	1	1	0	0	2	2	4
TOTAL	38	56	309	282	960	756	523	493	268	199	**2098**	**1786**	**3884**

10.1.4

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

	<1	1-4	5-11	12-15	16+	Total
Number of Children Referred	149	577	1201	790	339	3056

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

Referral Source/Agent	No of Children
Police	1216
Social Worker	157
Out of Hrs Co-ord	7
Relative	122
Teacher	290
Anonymous	67
Hospital Social Worker	25
GP	52
Hospital Nurse	234
Health Visitor	62
Court	4
Probation Officer	150
Vol. Organisation	1
Self	65
Community Psych. Nurse	165
N.S.P.C.C	8
NIHE	3
Comm. Mental H/C Nurse	2
Ed Welfare Officer	6
Others	420
Total	**3056**

10.1.6 *How many of these Children in Need are Disabled and known to Trust Social Workers (by major category) at 31st March?*

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	6	3	18	17	10	8	11	4	46	33	79
Sensory	0	1	6	4	9	15	9	9	5	2	29	31	60
Learning	0	1	7	9	200	92	134	68	62	25	403	195	598
Chronic illness	0	0	0	0	0	0	0	0	0	0	0	0	0
Autism(ASD) /ADHD/ Aspergers	0	0	0	0	14	9	32	15	19	8	65	32	97
Other	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL (With Disability)	**1**	**3**	**19**	**16**	**241**	**133**	**185**	**100**	**97**	**39**	**543**	**291**	834
No Disability	37	53	290	266	719	623	338	393	171	160	**1555**	**1495**	1589
Grand Total	**38**	**56**	**309**	**282**	**960**	**756**	**523**	**493**	**268**	**199**			3884

The numbers of children with disabilities has seen a drop for the 3rd consecutive reporting period in a row, with a reduction of 27 cases and a total of 834. The gender ratio remains predominately male at 543 and the female population 291.

The number of unallocated cases has continued to reduce with the introduction of the Senior Family Support Officers (b5) in a new team model introduced across all the children's disability teams. This have been successful in reducing and sustaining unallocated cases and is resulting in a high level of work product with regard to the completion of assessments and case reviews. The current number of unallocated cases is 160 and is reflective of 5 social work vacancies across the 3 teams. The development of an autism team will be operational in the next reporting period, this should also help see a further reduction in the number of children's disability unallocated cases.

10.1.7 *Disabled children known to the Trust who left school during the reporting period and the transition plans that are in place.*

Age at leaving school	**>16 <17**		**>17 <18**		**18+**		**Total**		**Transitions in place**	
Disability Type	M	F	M	F	M	F	M	F	M	F
Physical disability	4	0	6	3	4	0	14	3	13	2
Sensory Impairment	0	0	0	0	0	0	0	0	0	0
Learning disability	26	11	23	9	7	2	56	22	53	22
Chronic illness	1	0	0	0	0	1	1	1	1	1
Autism (ASD)/ADHD/Aspergers	7	2	12	5	0	0	19	7	9	5
Other	0	0	0	0	0	0	0	0	0	0
TOTAL	**38**	**13**	**41**	**17**	**11**	**3**	**90**	**33**	**76**	**30**

10.1.10 *How many of the Children in Need are Young Carers*

64 children in need are young carers.

	1st October 2025 – 31st March 2026
Total Number of Service Users	64
Level 1	8
Level 2	0
Level 3	54
Level 4	2
Assessment Stage	7 to be assessed

10.1.11 *How many young people aged 16 and 17 years presented to the Trust as homeless?*

Age	**Young People**
16	0
17	3
Total	0

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

Daycare	Number of Purchased Places by Age	
	0 – 4	5-12
Day Nursery	54	3
Playgroup	0	0
Childminder	19	3
Out of School hours club	0	7
Total	**73**	**13**

(b) How many of these children have a disability

0 – 4	5-12
0	8

10.1.13 *Trust usage of Family Centre Places for interventions*

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)	
Colin Family Centre	Stat	FS	0	N/a	N/a	0
		CP	20	14	10	8
		LAC	19	20	13	15
Knocknashinna	Stat	FS	1	N/a	N/a	2
		CP	8	16	11	11
		LAC	11	15	16	9
Simpson Family Centre	Vol	FS	10	2-4 weeks	15 weeks	3
		CP	30	2-4 weeks	15 weeks	1
		LAC	27	2-4 weeks	15 weeks	2

10.1.15 *Please provide the number of children (if any) subject to a Supervision / Interim Supervision Order at period end*

Supervision Orders	<1		1-4		5-11		12-15		16+		Total		Total
	M	F	M	F	M	F	M	F	M	F	M	F	
Art. 50 (1) (b) Supervision Order	0	0	2	1	4	4	2	0	1	0	9	5	14
Art. 57 (1) Interim Supervision Order	0	0	0	0	0	1	0	0	0	0	0	1	1
Total	0	0	2	1	4	5	2	0	1	0	9	6	15

10.1.16 *During the period, please provide the number of children (if any) that became subject of a Supervision / Interim Supervision Order*

This data is not available during this reporting period as it requires a manual count. This is due to action short of strike within children's services and the resultant non-completion of statistical returns.

10.2 CHILD PROTECTION

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

There are **358** children on the child protection register.

10.2.2 *How many of these children have a learning disability?*

10 children on the register have a learning disability.

10.2.3 *How many of these children have a physical disability?*

3 children on the register have a physical disability.

10.2.4 *Religion of children on the Child Protection Register*

	Male						Female						Overall
Religion	**<1**	**1-4**	**5-11**	**12-15**	**16+**	**Total**	**<1**	**1-4**	**5-11**	**12-15**	**16+**	**Total**	**Total**
Roman Catholic	3	11	19	3	4	**40**	4	11	22	12	6	**55**	**95**
Presbyterian	1	2	7	4	2	**16**	1	3	11	7	3	**25**	**41**
Church of I	0	1	1	1	0	**3**	0	1	1	2	2	**6**	**9**
Methodist	0	0	0	0	0	**0**	0	1	0	1	1	**3**	**3**
Other	1	3	12	8	2	**26**	3	3	11	9	3	**29**	**55**
None	2	10	12	4	3	**31**	2	12	20	11	5	**50**	**81**
Refused	0	0	0	0	0	**0**	0	0	0	0	0	**0**	**0**
Unknown	2	12	20	6	0	**40**	2	12	15	5	0	**34**	**74**
Total	**9**	**39**	**71**	**26**	**11**	**156**	**12**	**43**	**80**	**47**	**20**	**202**	**358**

10.2.5 *Ethnic origin of children on the Child Protection Register*

	Male						Female						Overall
Ethnic Origin	**<1**	**1-4**	**5-11**	**12-15**	**16+**	**Total**	**<1**	**1-4**	**5-11**	**12-15**	**16+**	**Total**	**Total**
White	8	32	56	23	11	**130**	10	32	70	44	17	**173**	**303**
Chinese	0	0	0	0	0	**0**	0	0	0	0	0	**0**	**0**
IrishTraveller	0	0	0	0	0	**0**	0	0	0	0	1	**1**	**1**
RomaTraveller	0	0	0	0	0	**0**	0	0	0	0	0	**0**	**0**
Indian	0	0	0	0	0	**0**	0	1	0	0	1	**2**	**2**
Pakistani	0	0	1	0	0	**1**	0	0	1	0	0	**1**	**2**
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**	0	0	0	0	0	**0**	**0**
Black Other	0	0	0	0	0	**0**	0	0	0	0	0	**0**	**0**
Mixed Ethnic	0	1	2	1	0	**4**	0	2	1	0	0	**3**	**7**
Other Ethnic	0	0	0	0	0	**0**	0	1	2	0	1	**4**	**4**
Not completed	0	0	0	0	0	**0**	0	0	0	0	0	**0**	**0**
Not Stated	1	6	12	2	0	**21**	2	7	6	3	0	**18**	**39**
Total	**9**	**39**	**71**	**26**	**11**	**156**	**12**	**43**	**80**	**47**	**20**	**202**	**358**

10.2.6 *How many registrations have there been during the period?*

There have been **173** children registered on the child protection register.

10.2.7 *How many de-registrations have there been during the period?*

There have been **182** children de-registered from the child protection register.

10.2.8 *What percentage of registrations are re-registrations?*

27.7% (48) of the registrations are re-registrations.

10.2.10 *For children on the register, how long have they spent on the Register?*

	Duration	**Age Groups**					
		Under one Year	**1-4**	**5-11**	**12-15**	**16+**	**TOTAL**
1	less than 3 months	7	17	24	11	4	63
2	3 months < 6 months	10	11	35	21	9	86
3	6 months < 1 year	4	21	32	17	5	79
4	1 year < 2 years	0	29	47	17	9	102
5	2 years < 3 years		2	7	6	3	18
6	3 years or more		2	6	1	1	10
	TOTAL	21	82	151	73	31	358

10.3 Children Looked After

10.3.1 *Provide the current legal status for all Children Looked After at 31st March*

	<1		1-4		5-11		12-15		16+		Total		
Legal status	**M**	**F**	**M**	**F**	**M**	**F**	**M**	**F**	**M**	**F**	**M**	**F**	**Total**
Art 21(1) Accomm <16	3	6	15	10	27	32	16	23			61	71	132
Art. 21(3) Accomm 16+									30	15	30	15	45
Art. 21(4) Accomm	3	2	7	9	10	15	4	9	0	0	24	35	59
Art. 21(5) Accomm 16+ <21									6	6	6	6	12
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	0	19	16	97	69	67	47	37	36	220	168	388
Art. 57 (1) Interim CO	2	4	22	20	21	19	4	10	3	3	52	56	108
Deemed Care	0	0	0	0	0	0	0	0	0	0	0	0	0
Emergency Protection Art. 63	0	0	0	0	0	0	1	1	0	0	1	1	2
Art. 23(2) Accomm	0	0	0	0	0	0	0	0	0	0	0	0	0
Other	0	0	8	11	5	3	1	2	3	4	17	20	37
TOTAL	**8**	**12**	**71**	**66**	**160**	**138**	**93**	**92**	**79**	**64**	**411**	**372**	**783**

10.3.2 *Religion and Ethnic origin of Children Looked After*

	<1		1-4		5-11		12-15		16+		Total		
Religion	**M**	**F**	**M**	**F**	**M**	**F**	**M**	**F**			**M**	**F**	**Total**
R Catholic	3	1	28	24	54	39	26	32	28	19	139	115	254
Presbyterian	0	1	8	3	25	34	18	20	14	15	65	73	138
C of I	0	0	3	2	9	7	16	8	6	9	34	26	60
C of E	0	0	0	0	2	0	1	1	1	0	4	1	5
Methodist	0	0	1	0	2	0	0	1	1	1	4	2	6
Other Christ	0	3	15	19	22	25	16	15	10	7	63	69	132
Jewish	0	0	0	0	0	0	0	0	0	0	0	0	0
Muslim	0	0	0	0	3	1	1	0	9	6	13	7	20
Other	0	0	1	3	5	2	1	0	1	1	8	6	14
Not Known	2	3	6	3	6	8	3	4	8	2	25	20	45
Not Complete	0	0	0	0	0	0	0	0	0	0	0	0	0
None	3	3	9	12	32	22	10	10	1	4	55	51	106
Refused	0	1	0	0	0	0	1	1	0	0	1	2	3
TOTAL	8	12	71	66	160	138	93	92	79	64	411	372	**783**

	<1		1-4		5 - 11		12-15		16+		Total		
Ethnicity	**M**	**F**	**M**	**F**	**M**	**F**	**M**	**F**	**M**	**F**	**M**	**F**	**Total**
White	6	10	65	63	152	126	86	87	58	54	367	340	707
Chinese	0	0	0	0	0	0	0	0	0	0	0	0	0
Irish Traveller	0	1	1	1	0	0	0	0	0	1	1	3	4
Roma Traveller	0	0	0	0	0	0	1	0	0	1	1	1	2
Indian	0	0	0	0	0	0	0	0	0	0	0	0	0
Pakistani	0	0	0	0	1	1	0	0	0	0	1	1	2
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	3	0	8	5	11	5	16
Black Other	0	0	0	0	0	0	0	1	1	0	1	1	2
Mixed Ethnic	0	0	0	2	4	3	1	1	2	1	7	7	14
Any Other	0	0	0	0	0	0	1	1	3	0	4	1	5
Not Stated	2	1	5	0	3	8	1	2	7	2	18	13	31
TOTAL	**8**	**12**	**71**	**66**	**160**	**138**	**93**	**92**	**79**	**64**	**411**	**372**	**783**

10.3.3 *Number of Children Looked After (as at 10.3.1) by type of placement at 31st March*

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	
Res.	Statutory*	0	0	0	0	1	1	9	11	7	8	17	20	37
	Voluntary	0	0	0	0	1	0	3	4	4	2	8	6	14
	Private	0	0	0	0	3	0	0	0	3	1	6	1	7
	ECR	0	0	0	0	0	0	0	0	0	0	0	0	0
	Secure	0	0	0	0	0	0	0	0	0	1	0	1	1
	ResTotal	**0**	**0**	**0**	**0**	**5**	**1**	**12**	**15**	**14**	**12**	**31**	**28**	59
Fost.	Foster Carers **Stranger**	5	5	17	12	18	9	15	17	7	8	62	51	113
Kinship Care	**Kinship** Care < 12 weeks	0	1	2	1	6	5	2	3	0	3	10	13	23
	Kinship Care (Friends/ relatives)	0	2	14	11	51	47	18	18	9	7	92	85	177
	Unregulated (>12 w not yet approved)	3	0	18	22	33	40	20	14	17	10	91	86	177
	Indpt Providers	0	4	12	13	33	24	14	18	5	6	64	65	129
	Fostering Total	**8**	**12**	**63**	**59**	**141**	**125**	**69**	**70**	**38**	**34**	**319**	**300**	619
Placed at Home with Parents		0	0	6	4	10	10	12	7	8	7	36	28	64
Placed for Adoption		0	0	2	3	2	1	0	0	0	0	4	4	8
Other Placements	Jointly Supported	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	0	0
	Juvenile Justice	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**
	Supported Lodgings	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**1**	**1**	**1**	**1**	**2**
	Tenancy	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**
	Unregulated Be-Spoke	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**
Other		0	0	0	0	2	1	0	0	18	10	20	11	31
Overall TOTAL		8	12	71	66	160	138	93	92	79	64	411	372	783

10.3.4 *Age bands and length of time looked after for all Children Looked After at period end*

Length of time Looked After	<1		1-4		5-11		12-15		16+		Total		Total
	M	F	M	F	M	F	M	F	M	F	M	F	
< 3 months	1	2	4	2	6	7	4	4	3	4	**18**	**19**	**37**
3 m < 1 year	7	10	16	14	21	23	6	15	20	12	**70**	**74**	**144**
1 < 3 years	0	0	42	41	52	35	21	21	12	13	**127**	**110**	**237**
3 < 5years	0	0	9	9	42	40	15	10	7	6	**73**	**65**	**138**
5 < 10 years	0	0	0	0	38	29	28	30	17	21	**83**	**80**	**163**
10+ years	0	0	0	0	1	4	19	12	20	8	**40**	**24**	**64**
Total	**8**	**12**	**71**	**66**	**160**	**138**	**93**	**92**	**79**	**64**	**411**	**372**	**783**

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*

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	2	29	29	12	88	107	8	12	17	22	129	153
Short Break Fostering	1	6	12	1	4	4	3	24	48	1	5	10	0	0	0	6	39	74
Total	**1**	**6**	**12**	**1**	**4**	**4**	**6**	**54**	**78**	**16**	**133**	**176**	**12**	**37**	**65**	**36**	**234**	**335**

Greenhill overnight short break provision continues to operate 6 nights per week, showing sustained development over the past 9 months. Lindsay House continues to be re-purposed and is providing care to 2 young people, this will reduce to 1 in the next reporting period as the other young person will move to Redwood House, a new 2-bedded facility for children with disabilities which opened in January 2026. There remains a continued commitment to return Lindsay House to provide overnight short breaks as appropriate.

Beechfield and Glenmore Children's homes continue to be fully utilised and provide long-term care for children with learning disability.

10.3.6 *Number of children accommodated for 3 months or more in a hospital*

Facility Name	Age at Placement			Number Resident at Period End
	Under 16	16+	Total	
Iveagh	0	1	1	1
Total	**0**	**1**	**1**	**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*

0 children were accommodated for 3 months of more in an adult facility in this reporting period.

10.3.8

(a) What facilities – statutory, voluntary and private are available to care for these Children Looked After i.e. how many places in residential homes, foster care placements

Name	Stat	Vol	Priv	No. Beds	No of Beds to Trust	Trust % occupancy	No of Respite beds	Respite % occupancy
Ardmore	X			2	2	51.34	0	0
Ashgrove	X			6	6	94.67	0	0
Cuan Court	X			6	8	80.1	0	0
Flaxfield	X			6	8	73.32	0	0
Marmion	X			6	8	66.64	0	0
Oaklands	X			6	6	100	0	0
William Street	x			6	8	83.38	0	0
MACS Lisburn		X		4	4	100	0	0
MACS D'patrick		X		4	4	100	0	0
MACS Belfast		X		2	2	100	0	0
BCM Riverside		X		2	2	100	0	0
BCM Grampian		X		1	1	100	0	0
Barnardos Annadale		X		1	1	100	0	0
Barnardos Haywood		x		1	1	100	0	0
Ardcomm House			X	1	1	100	0	0
Lifestyles Meadowview			X	2	1	50	0	0
Lifestyles Oakdale			X	2	2	67	0	0
Safeplaces Loughlin Island			X	2	1	50	0	0
Glenmore Cottage	X			4	4	95	0	0
Beechfield	X			5	4	119	0	0
Lindsay House	x			2	2	69	0	0
Short Breaks Facilities								
Lindsay House	X			8	0	0	0	0
Greenhill YMCA	X			0	0	0	2	100
Forest Lodge	X			3	1	83	1	100
Somerton Road	x			6	0	0	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	334
Number of Approved Places Offered	366

10.3.9 *How many Children Looked After have had placement moves throughout the period?*

Placement changes	0-4		5-11		12-15		16+		Total	
	M	F	M	F	M	F	M	F	M	F
1 move	5	7	1	3	2	2	8	3	**16**	**15**
2 moves	2	0	1	2	1	0	1	1	**5**	**3**
3 moves	0	0	0	0	0	1	0	0	**0**	**1**
4 moves or more	0	0	0	0	0	0	0	0	**0**	**0**
Total	**7**	**7**	**2**	**5**	**3**	**3**	**9**	**4**	**21**	**19**

40 children experienced placement moves during the reporting period, a decrease of 24 from the last reporting period.

31 children moved placement once during this reporting period. 8 children had 2 placements moves. 1 child had 3 placement moves.

10.3.10	*(a) How many Children Looked After are awaiting assessment or treatment with child and adolescent mental health services at 31st March?* 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.

10.3.12 *How many Children Looked After are Disabled by major category at period end?*

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	0	0	1	0	0	1	2	0	3	1	4
Sensory	0	0	0	0	0	0	0	0	0	0	0	0	0
Learning	0	0	0	0	7	4	10	11	7	6	24	21	45
Chronic illness	0	0	0	0	0	0	0	0	0	0	0	0	0
Autism(ASD)/Aspergers/ADHD	0	0	0	0	5	5	13	8	8	7	26	20	46
Other (undefined)	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL Children With Disability	**0**	**0**	**0**	**0**	**13**	**9**	**23**	**20**	**17**	**13**	**53**	**42**	**95**
No Disability known	8	12	71	66	147	129	70	72	62	51	358	330	688
Total Looked After Children	**8**	**12**	**71**	**66**	**160**	**138**	**93**	**92**	**79**	**64**	**411**	**372**	783

The Trust is unable to cross check any new children with an Autism diagnosis due to Encompass.

10.3.13 *How many Children Looked After have a Statement of Educational Needs (SEN) by school status at period end?*

Statement of Educational Needs	M	F	Total
Primary school	29	18	**47**
Secondary school	25	11	**36**
Special School	16	14	**30**
Total	**70**	**43**	**113**

10.3.14 *(a) Has each child looked after an allocated a named social worker at period end?* **No**

48 children who are looked after do not have an allocated social worker at the end of this reporting period. All children have been visited by another member of the team, a bank social worker or a senior social worker.

10.3.15	*(a) Did each child looked after receive a statutory visit by their allocated and named social worker at least once a month during the period* **No** No, each child who is looked after by the Trust did not receive a statutory visit by their allocated social worker in this reporting period. No children were visited by social care staff. All children were visited by another social worker from the team, the bank or by a senior social worker.
10.3.16	*No. of Children Looked After Reviews held during the period* 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 child looked after reviewed in line with Statutory requirements?* 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.
10.3.20	*Is there an adequate supply of placements for children to enable placement choice?* **No** No, an inadequate supply of placements within the Trust necessitates the continued use of independent providers (90 households) to support 129 children who are cared for by the Trust, placing considerable fiscal challenges on the Trust. The Trust continues to review, track and monitor placement availability through weekly placement availability panels and monthly 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.

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?* 2 exceptions were made to the normal fostering limit during this reporting period 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?* 13 children are deemed to be in an inappropriate placement given their assessed needs: 6 children in short term/bridging placements require an alternative foster placement; 3 children in residential care require a foster placement; 2 siblings are split, 1 with unregulated kinship and 1 with Trust carers, they require a sibling placement; 1 is in custody requiring a foster placement; 1 child accommodated in an unregulated kinship placement requires an alternative foster placement.

10.3.24 *Please provide the number of restraints carried out by staff on young people within **each** Home during the period.*

Name of Home: Ardmore								
	Primary		**Secondary**		**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	7	0	0	0	7	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**	**7**	**0**	**0**	**0**	**7**	**0**
How many individual children does this return refer to	0	0	1	0	0	0	1	0

Name of Home: Ashgrove								
	Primary		**Secondary**		**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	1	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**	**0**	**0**	**1**	**0**	**1**	**0**
How many individual children does this return refer to	0	0	0	0	1	0	1	0

Name of Home: Cuan Court								
	Primary		**Secondary**		**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	1	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**	**0**	**0**	**1**	**0**	**1**	**0**
How many individual children does this return refer to	0	0	0	0	1	0	1	0

Name of Home: Flaxfield								
	Primary		Secondary		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	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

Name of Home: Marmion								
	Primary		Secondary		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	5	0	5	0
To prevent serious criminal damage to property	0	0	0	0	1	0	1	0
To prevent young person from leaving Home(due to risk of significant harm)	0	0	0	0	3	0	3	0
Other (please specify)	0	0	0	0	5	0	5	0
Total no. of restraints	**0**	**0**	**0**	**0**	**14**	**0**	**14**	**0**
How many individual children does this return refer to	0	0	0	0	1	0	1	0

Name of Home: Oaklands								
	Primary		Secondary		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	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

Name of Home: William Street								
	Primary		Secondary		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	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

LAKEWOOD SECURE								
	Primary		Secondary		16+		Total	
Reason for Use of Restraint	**M**	**F**	**M**	**F**	**M**	**F**	**M**	**F**
To prevent injury (to self/staff/other young person)	1	0	1	0	2	7	4	7
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	**1**	**0**	**1**	**0**	**2**	**7**	**4**	**7**
How many individual children does this return refer to	1	0	1	0	1	3	3	3

Name of Home: Glenmore Cottage								
	Primary		Secondary		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	2	2	11	0	13	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**	**2**	**2**	**11**	**0**	**13**	**2**
How many individual children does this return refer to	0	0	1	2	1	0	2	2

Name of Home: Lindsay House								
	Primary		Secondary		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	7	0	0	0	7	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	7	**0**	**0**	**0**	**7**	**0**
How many individual children does this return refer to	0	0	1	0	0	0	1	0

Name of Home: Beechfield								
	Primary		Secondary		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	10	1	0	0	10	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**	**10**	**1**	**0**	**0**	**10**	**1**
How many individual children does this return refer to	0	0	2	1	0	0	2	1

Name of Home: Greenhill YMCA								
	Primary		Secondary		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	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

10.3.25 *Do all Children Looked After have a concurrent plan by the time of their first 3 month statutory CLA Review?*

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 *Permanency Planning for Children Looked After 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.

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

	5-11		12-15		16		17		TOTAL		
Age	M	F	M	F	M	F	M	F	M	F	Total
Cautioned	0	0	0	0	0	0	2	1	2	1	**3**
Remanded	0	0	0	0	0	0	1	0	1	0	**1**
Convicted	0	0	0	0	0	0	0	0	0	0	**0**
Total	**0**	**0**	**0**	**0**	**0**	**0**	**3**	**1**	**3**	**1**	**4**

10.3.34 *(b) How many Children Looked After have been reported to the Police for reasons **other** than having gone missing for 24 hours or more during the period?*

Lakewood

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**	**1**	4	**0**	0	**1**	**4**
Breach of Bail	0	0	2	2	1	1	**3**	**3**
Child At Risk	0	0	1	5	0	0	**1**	**5**
Criminal Damage	0	0	4	7	1	9	**5**	**16**
Assault within Placement	0	0	4	10	2	3	**6**	**13**
Other	0	0	0	0	1	1	**1**	**1**
Total	**0**	**0**	**12**	**28**	**5**	**14**	**17**	**42**

Total no of individual ***children*** this relates to:	0		4		2		**6**	

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	**0**	**0**	**0**	**0**
Criminal Damage within Placement	0	0	0	0	**0**	**0**	**0**	**0**
Assault within Placement	0	0	1	1	**0**	**0**	**1**	**1**
Other	0	0	0	0	**0**	**0**	**0**	**0**
Total	**0**	**0**	**1**	**1**	**0**	**0**	**1**	**1**

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

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**		**1**	1	**3**	7	**4**	**8**
Breach of Bail	0	0	2	4	0	0	**2**	**4**
Child At Risk	0	0	1	1	2	19	**3**	**20**
Criminal Damage within Placement	0	0	1	1	0	0	**1**	**1**
Assault within Placement	0	0	1	2	2	3	**3**	**5**
Other	0	0	3	5	2	3	**5**	**8**
Total	**0**	**0**	**9**	**14**	**9**	**32**	**18**	**46**

Total no of individual ***children*** this relates to:	0		4		2		**6**	

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	**3**	23	**3**	**23**
Breach of Bail	0	0	0	0	1	1	**1**	**1**
Child At Risk	0	0	0	0	2	2	**2**	**2**
Criminal Damage within Placement	0	0	0	0	3	0	**3**	**0**
Assault within Placement	0	0	0	0	0	0	**0**	**0**
Other	0	0	2	1	3	4	**5**	**5**
Total	**0**	**0**	**2**	**1**	**12**	**30**	**14**	**31**

Total no of individual ***children*** this relates to:	0		2		3		**5**	

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**	**0**	0	**4**	20	**4**	**20**
Breach of Bail	**0**	**0**	0	0	0	0	**0**	**0**
Child At Risk	**0**	**0**	0	0	4	10	**4**	**10**
Criminal Damage within Placement	**0**	**0**	0	0	4	7	**4**	**7**
Assault within Placement	**0**	**0**	1	5	3	6	**4**	**11**
Other	**0**	**0**	0	0	2	10	**2**	**10**
Total	**0**	**0**	**1**	**5**	**17**	**53**	**18**	**58**

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

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**	37	**1**	7	**6**	**44**
Breach of Bail	0	0	0	1	0	0	**0**	**1**
Child At Risk	0	0	1	1	0	0	**1**	**1**
Criminal Damage within Placement	0	0	1	3	1	1	**2**	**4**
Assault within Placement	0	0	1	0	0	0	**1**	**0**
Other	0	0	2	10	0	0	**2**	**10**
Total	**0**	**0**	**10**	**52**	**2**	**8**	**12**	**60**

Total no of individual ***children*** this relates to:	0		4		5		**9**	

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	**1**	29	**1**	**29**
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**	**1**	**29**	**1**	**29**

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

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	**3**	17	**3**	3	**6**	**20**
Breach of Bail	0	0	0	0	0	0	**0**	**0**
Child At Risk	0	0	2	8	3	4	**5**	**12**
Criminal Damage within Placement	0	0	0	0	1	3	**1**	**3**
Assault within Placement	0	0	2	1	1	1	**3**	**2**
Other	0	0	3	6	2	4	**5**	**10**
Total	**0**	**0**	**10**	**32**	**10**	**15**	**20**	**47**

Total no of individual ***children*** this relates to:			5		4		**9**	

Glenmore Cottage

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	2	1	1	**3**	**3**
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**	**2**	**1**	**1**	**3**	**3**

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

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	1	6	1	2	**2**	**8**
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**	**1**	**6**	**1**	**2**	**2**	**8**

Total no of individual ***children*** this relates to:			1		1		**2**	

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	**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**	

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**	

10.3.35	*Number of children accommodated by ELB for 3 months or more by category*

	There have been **0** children looked after by the Trust who have been accommodated by the ELB in this reporting period.
10.3.36	*How many sibling groups became Looked After during the period ?* 18 sibling groups (44 children) became looked after by the Trust during this reporting period. 12 sibling groups (30 children) were placed in kinship care and 6 sibling groups (14 children) were placed in non-kinship placements. **Kinship placements (placed together)** 11 sibling groups were accommodated together within kinship placements as follows: 8 sibling groups of 2 children 1 sibling group of 3 children 1 sibling group of 4 children 1 sibling group of 5 children **Non-kinship placements (placed together)** 3 sets of 2 siblings (6 children) have been placed together in non-kinship placements **Kinship placements (placed separately)** 1 sibling group of 2 children were accommodated apart due to the kinship carers' capacity to accommodate the siblings **Non-kinship placements (placed separately)** 3 sets of siblings (8 children) have been separated across non-kinship placements as follows: 2 sets of 2 siblings – separated as solo placements 1 set of 4 siblings – 2 placed separately and 2 remained at home as no foster placements available.

10.3.39 *(a)During the period how many children or young people became a Child looked after by age, gender and first placement*

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	4	4	1	1	5	5	**10**
	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**	**4**	**4**	**1**	**1**	**5**	**5**	**10**
Fostering	Foster Carers **[Stranger]**	2	2	3	2	2	1	1	1	0	1	8	7	**15**
	Kinship care	4	3	9	6	11	9	4	6	2	1	30	25	**55**
	Independent Providers	0	2	0	0	1	0	0	1	0	0	1	3	**4**
	Fostering Total	**6**	**7**	**12**	**8**	**14**	**10**	**5**	**8**	**2**	**2**	**39**	**35**	**74**
Placed at Home with Parents		0	0	0	0	0	0	0	0	0	0	0	0	**0**
Placed for Adoption		0	0	0	0	0	0	0	0	0	0	0	0	**0**
Other		0	0	0	0	1	1	0	0	4	4	5	5	**10**
Overall TOTAL		**6**	**7**	**12**	**8**	**15**	**11**	**9**	**12**	**7**	**7**	**49**	**45**	**94**

(b)To your knowledge have any of the children admitted during the period been subject to a full Adoption Order

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

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	5	6	3	6	9	1	2	5	0	3	19	19	40

(d)Number of Children and Young People who became Looked After during the period had a CLA1 form completed and forwarded to School?

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	6	3	6	14	3	5	3	1	18	26	44

(d.)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**

10.3.40 *(a) During the period how many children or young people became a child looked after by age, gender and legal status on admission;*

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	2	3	6	2	9	6	6	10	0	0	**23**	**21**	**44**
Art. 21(3) Accommodated 16+	0	0	0	0	0	0	0	0	6	5	**6**	**5**	**11**
Art. 21(4) Accommodated	3	1	6	6	2	4	1	2	0	0	**12**	**13**	**25**
Art. 21(5) Accommodated 16+ <21	0	0	0	0	0	0	0	0	1	1	**1**	**1**	**2**
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	0	0	0	0	0	0	0	0	0	**0**	**0**	**0**
Art. 57 (1) Interim CO	1	3	0	0	1	1	0	0	0	1	**2**	**4**	**6**
Emergency Protection Order Art. 63	0	0	0	0	1	0	2	0	0	0	**3**	**0**	**3**
Art. 23(2) Accommodated	0	0	0	0	0	0	0	0	0	0	**0**	**0**	**0**
Other	0	0	0	0	2	0	0	0	0	1	**2**	**1**	**3**
TOTAL	**6**	**7**	**12**	**8**	**15**	**11**	**9**	**12**	**7**	**7**	**48**	**46**	**94**

(b) (i) Were these admissions planned, unplanned or emergency;

For each of the above totals how many of these were:-	<1		1-4		5-11		12-15		16+		Total		Total
	M	F	M	F	M	F	M	F	M	F	M	F	
Planned	4	5	0	0	2	2	1	2	1	1	**8**	**10**	**18**
Unplanned	1	1	9	4	8	4	4	6	0	2	**22**	**17**	**39**
Emergency	1	1	3	4	5	5	4	4	6	4	**19**	**18**	**37**
Total	**6**	**7**	**12**	**8**	**15**	**11**	**9**	**12**	**7**	**7**	**49**	**45**	**94**

(ii) Of those that were unplanned or emergency how many were admitted to kinship foster care?

47 children were admitted to kinship foster care through an unplanned or emergency admission.

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

0 unplanned or emergency admissions were 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*

Length of time LA prior to discharge	**<1**		**1-4**		**5-11**		**12-15**		**16+**		**Total**		
	M	**F**	**M**	**F**	**M**	**F**	**M**	**F**	**M**	**F**	**M**	**F**	**Total**
Under 2 weeks	0	0	1	0	0	1	0	0	0	0	1	1	2
2 weeks < 6 weeks	0	0	0	0	0	0	0	0	0	1	0	1	1
6 weeks < 3 Months	0	0	0	0	0	0	0	0	0	0	0	0	0
3 M < 6 months	0	0	0	0	0	0	0	0	2	1	2	1	3
6 M < 1 Year	0	0	0	0	1	0	2	0	6	1	9	1	10
1 yr < 2 yrs	0	0	0	0	0	0	0	0	10	8	10	8	18
2 yrs < 3 yrs	0	0	3	1	1	0	0	1	0	3	4	5	9
3yrs < 5 yrs	0	0	3	2	1	2	2	0	0	2	6	6	12
5 yrs < 10 yrs	0	0	0	0	1	0	0	0	7	7	8	7	15
10+ yrs	0	0	0	0	0	0	0	0	2	5	2	5	7
Total	**0**	**0**	**7**	**3**	**4**	**3**	**4**	**1**	**27**	**28**	**42**	**35**	77

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

	<1		**1-4**		**5-11**		**12-15**		**16+**		**Total**		
Destination	**M**	**F**	**M**	**F**	**M**	**F**	**M**	**F**	**M**	**F**	**M**	**F**	**Total**
Returned to Parents/Siblings	0	0	2	0	2	1	4	1	5	5	**13**	**7**	**20**
Returned to Relatives/friends	0	0	0	0	1	0	0	0	0	1	**1**	**1**	**2**
Adopted	0	0	5	3	0	2	0	0	0	0	**5**	**5**	**10**
Independent living/Tenancy (NIHE/H Assoc./Private etc)									16	11	**16**	**11**	**27**
Foster Carers (GEM)									5	8	**5**	**8**	**13**
Jointly Commissioned Supported Accommodation									1	3	**1**	**3**	**4**
Bed + Breakfast									0	0	**0**	**0**	**0**
Hostel, Foyer									0	0	**0**	**0**	**0**
Supported Board and Lodgings									0	0	**0**	**0**	**0**
Prison, Hospital									0	0	**0**	**0**	**0**
Other	0	0	0	0	1	0	0	0	0	0	**1**	**0**	**1**
Total	**0**	**0**	**7**	**3**	**4**	**3**	**4**	**1**	**27**	**28**	**42**	**35**	**77**

(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

	16		17		Total		
Category	**M**	**F**	**M**	**F**	**M**	**F**	**Total**
Number entitled to access Leaving Care Services	1	0	26	28	27	28	55
Number not entitled to access Leaving Care Services	0	0	0	0	0	0	0
Total	**1**	**0**	**26**	**28**	**27**	**28**	**55**

10.3.44

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

0 children have become subject of a residence order in this reporting period.

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

174 Residence Orders are in place at report end.

10.3.45 *Number of Children or Young People who died during the current reporting period and were Looked After by the Trust by cause/age*

Cause	**<1**		**1 - 4**		**5 - 11**		**12 - 15**		**16 - 17**		**Total**	
	M	**F**	**M**	**F**	**M**	**F**	**M**	**F**	**M**	**F**	**M**	**F**
Natural Causes	0	0	0	0	0	0	0	0	0	0	**0**	**0**
Accident	0	0	0	0	0	0	0	0	0	0	**0**	**0**
Suicide	0	0	0	0	0	0	0	0	0	0	**0**	**0**
Other	0	0	0	0	0	0	0	0	0	0	**0**	**0**
Total	0	0	0	0	0	0	0	0	0	0	**0**	**0**

10.4 CHILDREN (LEAVING CARE) ACT

10.4.1
Number of young people subject to Leaving Care Act by category, age and gender

	Male						Total	Female						Total	
Category	**16**	**17**	**18**	**19**	**20**	**21 +**	**M**	**16**	**17**	**18**	**19**	**20**	**21+**	**F**	Total
Eligible	31	48					79	28	36					64	**143**
Relevant	0	0					0	0	0					0	**0**
Former Relevant			48	35	26	8	117			48	24	20	12	104	**221**
Qualifying	0	0	1	0	0	0	1	0	0	2	1	0	0	3	**4**
Total	31	48	49	35	26	8	197	28	36	50	25	20	12	171	**368**

10.4.2 *Of those eligible young people reported at 10.4.1 give the Children Order Legal Status at period end.*

Legal Status	**16**	**17**	**Total**
Accommodated (Article 21)	18	39	57
Care Order (Art 50 or 59)	35	38	73
Interim Care Order (Art 57)	3	3	6
Deemed Care Order	0	0	0
Other	3	4	7
Total	59	84	143

10.4.6 *Of the young people reported at 10.4.1*

(a) What are the social worker and personal advise arrangements in place for each category of young people?

Category	**Named Social Worker only**	**Named Personal Adviser only**	**Named Social Worker and Personal Adviser**	**Awaiting allocation of a social worker**	**Awaiting allocation of a personal adviser**
Eligible	40	0	103	0	40
Relevant	0	0	0	0	0
Former Relevant	24	142	55	0	0
Qualifying	0	2	2	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?

Category	No. without an Up-to-Date Pathway Plan
Eligible	16
Relevant	0
Former Relevant	14
Qualifying	0
Total	30

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?*

Category	No. Without a completed Needs Assessment	Time Waiting			
		<3 Months	3-6 Months	7-12 Months	<1 Year
Eligible	16	16	0	0	0
Relevant	0	0	0	0	0
Former Relevant	14	14	0	0	0
Qualifying	0	0	0	0	0
Total	30	30	0	0	0

10.4.8 *Summary of failure to comply as detailed in 10.4.6, 10.4.7 at period end.*

10.4.6(a): 40 young people are awaiting allocation of a personal advisor, some of these young people have not yet transferred to the team and other delays are due to staff shortages, these young people continue to have an allocated social worker.

10.4.7: There are 30 pathway needs assessments that require review for former relevant young people, all are outstanding less than 3 months due to ongoing staffing issues within the service because of vacancies and sickness within the teams. Young people continue to be visited and supported. The reviews will be prioritised in line with staffing capacity.

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;

Placement Type	**16**	**17**	**Total**
Foster Placement (Stranger)	9	17	26
Foster Placement (Kinship)	8	11	19
At Home In Care	7	8	15
Residential Children's Home	12	13	25
Secure Care	0	1	1
Specialist Residential Placement (NI/UK)	0	0	0
Supported Lodgings/STAY	0	1	1
Hospital	0	0	0
Jointly Commissioned Supported Accommodation Projects	0	1	1
Unregulated Placement	23	32	55
Other	0	0	0
Total	**59**	**84**	**143**

(b) Relevant;

Living Arrangements	16	17	**Total**
Tenancy (NIHE/H Assoc/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)	17	16	17	10	60
Tenancy (NIHE/H Assoc/Private)	32	10	15	7	64
At Home with Parents/Siblings	10	8	5	0	23
Jointly Commissioned Supported Accommodation Projects	7	6	0	0	13
Relatives/friends	10	8	4	0	22
Hostel, B+B, Foyer	17	8	3	0	28
Supported Board and Lodgings	0	0	0	0	0
Halls of residence/Student Accommodation	2	2	1	3	8
Prison	0	1	0	0	1
Other	1	0	1	0	2
Total	**96**	**59**	**46**	**20**	**221**

(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	2	1	0	0	3
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	1	0	0	0	1
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	3	1	0	0	4

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?'*

(a) Eligible;

ETE Status	16	17	Total	No. Receiving financial support
Secondary Level Education	24	30	54	54
Further Education	23	33	56	56
Training (Govt. sponsored training)	2	4	6	6
Pre-Vocational	1	4	5	5
Employment	0	0	0	0
ETE Inactive	9	13	22	22
Training (Non Govt. sponsored training)	0	0	0	0
Other(Sick/Disabled, Parent, Carer)	**0**	**0**	0	0
Total	59	84	143	**143**

(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	6	0	0	0	6	6
Further Education	45	22	16	17	100	100
Higher Education	2	2	1	3	8	8
Training (Govt. sponsored training)	14	12	10	0	36	36
Pre-Vocational	10	8	8	0	26	26
Employment	6	6	5	0	17	17
ETE Inactive	10	8	6	0	24	24
Training (Non Govt. sponsored training)	3	1	0	0	4	4
Other	**0**	**0**	**0**	**0**	0	**0**
Total	96	59	46	20	221	**221**

(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	3	1	0	0	4	4
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**	**3**	**1**	**0**	**0**	**4**	**4**

10.4.11 *Of the young people reported at 10.4.1 how many were convicted during this reporting period?*

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	6	0	2
Relevant		0	0	0
Qualifying		0	0	0
Former Relevant		7	1	4
Total	**0**	13	1	6

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?'*

Type of Disability	Male	Female	Total
Physical (Ex. Sensory)	2	0	**2**
Sensory	0	0	**0**
Learning	7	6	**13**
Chronic illness	0	0	**0**
Autism(ASD)/Aspergers/ADHD	29	12	**41**
Other (undefined)	**0**	0	**0**
No Disability	**159**	153	**312**
Total	**197**	**171**	**368**

10.4.13 *Of the young people reported at 10.4.1 what is their parental status at period end?'*

Parental Status	No of Young People
Parent	10
Lone Parent	4

10.4.14 *'Of the young people reported at 10.4.1 how many are receiving treatment for mental health issues at period end? Of these, how many were new referrals to mental health services during the period?*

Mental Health Concerns	No. of Young People waiting for or receiving Mental Health interventions/services	Number of new referrals to mental health intervention/services during period (1.10.25 – 31.3.26).
Mental Health Concerns	60	20
Self-Harm	38	20

10.4.15 *Number of Young People who are no longer Looked After but who died during the current reporting period and were in receipt of aftercare services by cause/age.*

Cause	16-17		18+		Total	
	M	**F**	**M**	**F**	**M**	**F**
Natural Causes	0	0	0	0	**0**	**0**
Accident	0	0	0	0	**0**	**0**
Suicide	0	0	0	0	**0**	**0**
Other	0	0	0	0	**0**	**0**
Total	**0**	**0**	**0**	**0**	**0**	**0**

10.5 FOSTERING

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

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	**19**				
Foster Care (kinship) >12 wks but not panel approved by 16 wks	**9**				
Kinship Foster Carers not approved within 12 weeks, but within 16 weeks during the period	**33**				
Panel Approved kinship carer	**127**				
Panel Approved Foster Carer (Non-kinship)	**83**	36	34	4	9
Specialist Foster Carers (Fee Paid carers)	**63**	9	16	23	15
Total	**334**	**45**	**50**	**27**	**24**

How many of the Carers above also provide a GEM Placement*	**22**				
Of the carers above how many are Prospective Adopters dually approved as foster carers	**12**				
Of the Prospective Adopters/Dually Approved carers above how many are Concurrent Foster/Adoptive Carers	**2**				
No of Fee paid Foster Carers now in receipt of enhanced adoption allowance?	**0**				

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

Other Foster carers	No. of Carers
Independent Provider Foster Carers	90
Carers providing care only to children with a disability and who are not available to provide care for Looked After Children	0
Total	**90**

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

No. of Foster Carers de-registered during the period*, by reason.	Kinship Carers	Non Kinship Carers	No. of Carers De-registered	Total no of places de-registered
Carer has adopted or been granted a residence order	1	6	7	7
No longer wishing to foster	0	4	4	5
Retired/phased out	5	9	14	17
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	3	1	4	5
Total	**9**	**20**	**29**	**34**

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

Recruitment Process Activity during the period*		No. of Carers
Number of Initial Home Visits	Kinship	**63**
	Non-Kinship	**40**
Number of Households attending Skills to Foster course / kinship pre approval training course	Kinship	**10**
	Non-Kinship	**12**
Number of Completed Assessments during the period	Kinship	***10**
	Non-Kinship	**11**
Of the number of completed assessments (above), how many were approved at Fostering Panel?	Kinship	**9**
	Non-Kinship	**11**
Number of these assessments that were already approved as Adopters.	Kinship	**0**
	Non-Kinship	**4**

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

Enquiries forwarded from RAFS	No of Carers
Total No. of Regional Enquirers referred from the Regional Team(RAFS)	**65**
Number of RAFS enquirers Approved as foster carers within the reporting period*?	**3**
No. of enquiries progressed to assessment but have not yet to Panel within the reporting period*?	**8**

10.5.2 *For the foster carers return at 10.5.1 how many **places** are they registered for and the number of vacant places at period end. Please also provide the number of fostering households that have no child placed with them at period end.*

Type of approval	Total places	Vacant at period end	Fostering Households with no child placed at the period end	NOTE
Foster Care (kinship) < 12 weeks not yet approved by panel	**21**	0	0	
Foster Care (kinship) >12 wks but not panel approved by 16 wks	**15**	0	0	
Kinship Foster Carers not approved within 12 weeks, but within 16 weeks during the period	**40**	0	0	
Panel Approved kinship carer's	**177**	0	**4**	*4 Kinship Households to be de-registered child left placement*
Panel Approved Foster Carer (Non-kinship)	**32**	0	**9**	*5 non-kinship households to De-register & 4 households taking a break due to health, maternity leave and child recent move to Adoption*
Specialist Foster Carers (Fee Paid carers)	**81**	0	0	*36 children living with 20 Kinship households also in receipt of a fee*
Total	**366**	**0**	**13**	

Prospective Adopters dually approved as foster carers	12	9
Total	12	9

10.5.3*How many foster carers have annual reviews outstanding?*

40 annual reviews for foster carers are outstanding at report end.

Please provide the number of viability visits undertaken during the reporting period.

63 viability visits were completed.

Viability Visits	Joint Visits	Visits completed by Child's Social Worker	Visits Completed by Supervising Social Worker
Number of Visits	**59**	**0**	**4**

10.5.4	*Please provide specific actions being taken by the Trust to ensure outstanding reviews are completed* **40** annual reviews were out of timescale for the following reasons: **22** were delayed due to staff absence **6** foster carer reviews are booked into panel for April **3** foster carers are on a break **3** de-registrations required (to be scheduled for Fostering Panel) **2** fostering households are undergoing top up assessment **2** awaiting medical and/or Access NI checks **2** delayed due to an allegation/complaint Delayed annual reviews continue to be prioritised across the service. The progress of this has been hindered during this reporting period due to higher than usual levels of staff absence. Different methods of tracking annual reviews are being implemented, including forecasting and arranging annual reviews 12 months in advance, and a centralised tracking system for statutory checks to prevent delay. During the next reporting period additional Fostering Panels will be considered to help reduce the backlog where required.
10.5.5	*What action is being taken to maintain and increase the range, diversity and supply of foster care places* During this reporting period, the Fostering Service continued to implement a comprehensive range of recruitment, engagement, and retention activities aimed at maintaining and increasing the range, diversity, and supply of foster care placements. Work was undertaken locally and in partnership with the regional recruitment working group to ensure a coordinated, strategic approach. **1. Strategic Recruitment Approach** **Regional and Local Collaboration** All 3 recruitment and assessment teams contributed to the regional recruitment working group. Regular Trust-wide recruitment meetings involved representatives from: • Recruitment and Assessment Teams • STAY/Supported Lodgings • Step Up Step Down • Disability Fostering Short Breaks These meetings supported the sharing of ideas, development of regional and local initiatives, and ongoing engagement with diverse communities. **2. Foster Carer Involvement and Co-Production** The Trust continued to benefit from the involvement of committed foster carers who participated in recruitment activity. This co-production model is currently

	being strengthened by the introduction of Fostering Ambassadors, a regional initiative supporting new applicants from initial enquiry to panel. **3. In-Person Recruitment Activity** The Trust maintained a highly visible presence at a wide range of community events. Activities included: **Information Stands** at hospital sites, leisure centres, shopping centres, job fairs and Neuro Cafes. **Attendance at Community Events** at Lisburn Light Festival; Halloween, Christmas and St Patrick's events, Ulster rugby and Down GAA events. **Care Day Celebration:** A celebratory event at Laganview Farm attended by 30 foster children and their carers. The Trust communications team captured the event for a press release and social media post, helping generate positive public stories—an important driver of word-of-mouth recruitment and foster carer retention. **4. Online and Digital Recruitment Activity** Key online activities included: virtual information sessions; child-specific recruitment campaigns and a video featuring the fostering journey of a newly approved couple was shared online and used for press purposes. **5. Regional Child-Specific Webinars** The Trust participated in 2 regional child-specific pilot webinars: • Each Trust presented 1 child or sibling group. • Attendance remained small but highly targeted, with encouraging outcomes. **November 2025 Event:** The Trust presented a sibling group of 2. A couple who attended have since been approved as foster carers, and transition planning is underway. **March 2026 Event:** Another couple currently in the middle of a fostering assessment expressed interest in a sibling group. **6. Myth-Busting and Inclusive Messaging** Recruitment staff and foster carers continued to address common misconceptions about who can foster. This work supports the Trust's commitment to inclusivity and to recruiting carers who reflect the communities they serve. **7. Community Engagement and Partnerships** In line with regional priorities, the Trust has continued to highlight the benefits of fostering particularly the focus on local support, training, and keeping children within their communities. Key partnership work included engagement with: • Local councils • North Down Community Network • Careers Service • Kilcooley Women's Centre

	• Down GAA • Bryson Pathways/Resurgam • Locality Planning Groups These partnerships enabled information sharing through social media, virtual sessions, and in-person drop-in events. **8. New Initiatives** Fostering Friendly Employer Policy (Launched October 2025) This policy demonstrates the Trust's commitment to fostering by providing 5 days of paid leave per year for staff who foster (pro-rata for part-time staff). **Recommend a Friend Scheme** A regional incentive offering £150 to approved Trust foster carers who refer someone who progresses to the assessment stage.

10.5 PRIVATE FOSTERING

10.5.6	*What steps has the Trust taken to encourage notifications?* 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.	
10.5.7	*How many Private Fostering Arrangements under Article 106 are in place within the Trust as at the 31st 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*	**N/A**
10.5.10	*Of the notifications received (10.5.8) how many has the Trust accepted?*	**N/A**
10.5.11	*Of those notifications not accepted please summarise reasons and action taken by the Trust*	**N/A**
10.5.12	*Number of appeals made during the year under Article 113*	**N/A**
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.*	**N/A**
Notifications under Private Arrangements for Fostering		
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.*	**N/A**
	Please specify the child's DOB and the date the Trust received each notification	**N/A**
10.5.15 (a)	*Please provide the number of Allegations made against Foster carers.*	**4**
10.5.15 (b)	*Please provide the number of Complaints made against Foster carers*	**1**

10.6 Adoption

10.6.1 *(a) Number of enquiries, by type, received by the Trust and what prompted their initial approach?*

Source of Enquires	Domestic	Inter-Country
Central Regional Team (e.g. Website)	37	0
Newspaper advertisement	0	0
Radio advertisement	0	0
Word of mouth	2	0
Trust Website	0	0
Specific local campaign	0	0
Total	39	0

(b)Please provide the waiting time from initial inquiry to commencement of training

Time waiting	Domestic	Inter-Country
Less than 1 month	0	0
More than 1 month less than 3 months	1	0
More than 3 months less than 6 months	6	0
More than 6 month less than 12 months	0	0
1 year or more	2	0
Total	9	0

10.6.2 *Number of domestic applications for assessment received by the Trust by civil status of applicant*

Household type	No.
Single carer	0
Cohabitating heterosexual couple (where this is a joint application)	0
Cohabitating 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*

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**
< 1 month	0	0	1	0	1
> 1 month < 3 months	0	0	0	0	0
> 3 months < 6 months	0	0	0	0	0
> 6 month < 12 months	0	0	0	0	0
> 1 year	0	0	0	0	0
Total	0	0	1	0	1

10.6.6 *Of all adoption assessments (both domestic and inter country) completed during the period please give details of the outcomes*

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	5
Households where previous Foster Carers have been approved as Adoptive carers for their LAC	4
Total	9

10.6.7 *Number of Children Looked After freed for adoption and not yet placed with their prospective adopters as at 31st March; and duration of wait since freeing order as granted*

Length of time awaiting placement from 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
< 1 month	0	0	0	0	0	0	0	0	0	0	0	0
> 1 month < 3 months	0	0	0	1	0	0	0	0	0	0	0	1
> 3 months < 6 months	0	0	1	3	0	0	0	0	0	0	1	3
> 6 month < 12 months	0	0	0	0	0	0	0	0	0	0	0	0
>1 year	0	0	0	0	0	0	0	0	0	0	0	0
Total	0	0	1	4	0	0	0	0	0	0	1	4

10.6.8 (a*) Activity under the Adoption (NI) Order 1987 during the period; Of the number above please give the number who were adopted in a Hague designated country and therefore not through the Courts in NI and have had their Article 23 reports completed in the time period; Please provide the number of Freeing Orders made during the reporting period;*

Type of Order	**<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
Adoption Orders Article 12 (1)														
Previously Looked After	0	0	1	1	4	2	0	2	0	0	0	0	5	5
Step Parent	0	0	0	1	0	0	0	0	0	0	0	1	0	2
Inter-country	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	0	0	1	2	4	2	0	2	0	0	0	1	5	7

(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.

Length of Time	**0<6 Months**	**6m <1 year**	**1<2 years**	**2<3 years**	**3<5 years**	**5+ years**	**Total**
No. of Children	1	1	2	5	1	0	10

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*

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
<1 month	0	0	2	1	0	0	0	0	0	0	2	1
> 1 month < 3 months	0	0	1	0	0	0	0	0	0	0	1	0
> 3 months < 6 months	0	0	3	1	0	1	0	0	0	0	3	2
> 6 month < 12 months	0	0	1	0	0	0	0	0	0	0	1	0
>1 year	0	0	0	0	0	0	0	0	0	0	0	0
Total	0	0	7	2	0	1	0	0	0	0	7	3

10.6.10 *How many children are in receipt of an Adoption Allowance at 31st March and how many households is this?*

49 households receive adoption allowance at period end.

	<1		**1-2**		**3-4**		**5-9**		**10-15**		**16+ years**		Total	
Adoption Allowances	**M**	**F**	**M**	**F**	**M**	**F**	**M**	**F**	**M**	**F**	**M**	**F**	M	F
No. of Adoption Allowances paid in respect of children at 31st March 2025?	0	0	0	0	1	1	12	6	12	16	6	4	31	27

10.6.11 *Of the number at 10.6.10 how many commenced during the period and how many households is this?*

	<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	0	0	0	0	0	1	0	0	0	0	**0**	**1**

10.6.12	*Details of recruitment, assessment, training, support for prospective adopters* There has been an increase in the number of enquiries to adopt in this reporting period. The Trust continues to work hard to translate these enquiries into adoption assessments, as initial checks and training commences. Transition training was delivered to a group of prospective adopters and foster carers in November 2025. A Preparation to Adopt course was facilitated in November. This was attended by 9 households, 7 of whom progressed to applying for a full adoption assessment. 12 assessments were being undertaken by the service. 4 are child specific assessments. A further 5 stepparent adoption cases are being assessed for the courts. Adoption services delivered a new support group in February specifically for approved adopters who are awaiting placement. This was attended by 7 adults. Feedback on this group was positive and therefore will be delivered as determined by need. A Buddying scheme is operating within the service to link experienced adopters with those adopters at an earlier stage in their journey through adoption. This provides valuable insights into adoptive parenting and the challenges that can be associated with meeting the need of adopted children, many of whom have experienced trauma. Prospective adopters have been in receipt of 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 the clinical psychologist. There are currently 12 children in adoptive placements receiving support. 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 the waiting list has grown. No additional resource was received to undertake this highly sensitive and time-intensive work.

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* During the reporting period the Trust offered direct support to 115 adoptive families. The Post Adoption Team also facilitated 41 post adoption direct contacts and 31 indirect contacts with birth families. An Adoption Newsletter was also circulated in December 2025 to adoptive families advising of local supports, events and training. 3 young people experienced a potential adoptive disruption but these were averted with additional support going into the family including Edge of care services, Extern, CAMHS, Family Meeting Service and Clinical Psychology team. The Trust organised several events during this period, including a Sound Bath experience, 2 seasonal wreath making mornings for parents, a Pumpkinfest day for families and an attachment swimming course for parents and young children. Feedback from Forest School - 'We made lovely connections with other adoptive parents.' 100% of parents reported that their child's confidence in trying new things increased and 80% reported feeling more connected to other adopted parents than before attending. Feedback from Pumpkinfest - 'I love these days out, it's so natural for the children to spend the day together with their families and friends.' Feedback from Attachment Swimming – 'The classes were so special for me and my little one. It gave us time out of our busy week to simply be together, having lots of fun and cuddles…we are so grateful to have had this opportunity.' The Trust have continued to be creative in its response to the adoptive families during this time period: 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. During this period Psychology services and Post Adoption Services have also co-led the Foundations for Attachment course twice for a cohort of new adoptive parents. Counselling sessions with a freelance counsellor who specialises in adoption related issues has been offered to 8 adoptive parents during this period. 2 staff members have been trained in DDP Level 2 and 2 staff members are trained in Theraplay. 1 staff also has reflexology qualifications which enables the team to respond holistically to the adoptive families within the Trust area. The reflexology feedback has been very positive with parents noticing an improvement in their stress levels and overall wellbeing between sessions and an increased ability to deal with the day to day of parenting. Post Adoption staff are also currently undertaking direct life story/therapeutic narrative work with individual children of varying ages. Play therapy and other therapies such as Filial therapy, Art therapy and Family Therapy were also funded when assessed as required.

10.6.14	***(a)****How many children were subject to a Best Interests decision and placed in a prospective adoptive placement during this reporting period experienced a Placement disruption pre- adoption?* **0** children experienced placement disruption pre-adoption. ***(b)*** *How many children who were subject to an Adoption Order during the reporting period experienced a disruption post adoption?* **0** children experienced placement disruption post-adoption.

10.7 EARLY YEARS

10.7.1
Please provide the current early years provision / places, registrations and de-registrations

Sector	Current Provision		Registrations/Deregistrations/ Voluntary Ceased		
				De-registrations	
	Total Number of Services	Number of Places	Number New Registrations During period	Number Deregistered by the Trust during period	No Voluntary Ceased during the period
Day Nursery	65	3171	1	0	0
Out of School within Day Nursery	47	1462			
Total Day Nursery Places		4633			
Creche	2	47	0	0	0
Playgroup	61	2295	0	0	1
Stand-Alone Out of School	40	1428	0	0	1
Childminder	360	2162	6	0	12
Approved Home Childcarers	29	0	5	0	0
Holiday Scheme	0	0	0	0	2
Two year old Prog.	10	120	0	0	0
Total	**614**	**10685**	**12**	**0**	16

10.7.2 *Registration issues and commentary as at period end*

The figures for this period continue to reflect the ongoing trend of a steady decline in the number of childminders with more leaving than applying. This trend continues to reduce the childcare services available to families. The Trust at times experiences challenges to source childcare for children in need and with childcare being an increasing part of a family support/child protection plans it is significant that the figures for childminders continue to drop. It is not known if a rise in unregistered childminding is a factor as the Trust continue to receive minimal reports of this compared to other Trusts.

10.7.3
Plans are in place to complete all outstanding inspections, with most being scheduled for April.

Day Nurseries: 1 inspection is outstanding and became overdue by 2 months..

Playgroups: 2 inspections due within the period but not completed, 1 remains outstanding, becoming overdue by 1 month as 1 playgroup closed.

	Out of Schools: 4 inspections due within the period but not completed, only 3 remain outstanding due to 1 out of schools' provider closing and a further anticipating closure from June. Childminders: 17 inspections due, 13 are outstanding and pending an inspection with 11 overdue by 0-3 months and 2 by 4-6 months. 4 closures and 2 suspensions are the reason for this. In relation to the 12 closures noted in 10.7.1, this includes the 4 mentioned above. Out of the remaining 8, most closed in the period but their inspections were not due within the period, the others were on suspension, could not contract families and subsequently closed. Overdue inspections have largely been caused by staff absence within the service, a mix of both long-term and short-term staff sick leave and Provider circumstances. The Trust continues to ensure that overdue inspections are prioritized. The service has 1 social work vacancy. Pressures in the Early Years sector remain and continue to create challenges with regard to the staffing of childcare settings. Much of the work of the EY teams is taken up with exploring ways to support settings to adhere to registration requirements/compliance, considering and approving easements within the regulations and assessing an increasing amount of complex vetting issues. The high turn-over of staff generally across the sector has increased the EY teams' workload in this regard in addition to continuing to deal with high levels of safeguarding issues. 10.7.4 Delays experienced regarding applications are due to issues at the prospective childminders end, including outstanding vetting paperwork, delay AccessNI applications/issues, change in personal circumstances and awaiting evidence/documentation. 10.7.5 1 childminding assessment is within the target window for registration with 3 impacted due to delays at the childminders end along with staffing issues when became ready for allocation. The out of school's assessment, reflected in the above number experienced significant delay nominating Registered Persons. Once this was resolved, it was allocated and is on track to meet required timescales and will be considered at the earliest Panel date.

10.7.3 *Total number of annual Inspections required, number carried out, number outstanding and time outstanding as at 31st March*

	6 months Data			
Sector	Number **Requiring Inspection** during the period (1.10.25 – 31.3.26)	Number of **Inspections carried out** during the period (1.10.25 – 31.3.26)	Number of the inspections carried out **remotely only (subset of the number of inspections carried out) (1.10.24 – 31.3.25)**	Total **Inspections still to be completed this year (as at 31.3.26)**
Day Nursery	19	18	0	1
Creche	2	2	0	0
Playgroup	40	38	0	1
Out of School	21	17	0	3
Childminder	175	156	0	13
Holiday Scheme	0	0	0	0
Two-year-old Prog.	5	5	0	0
Total	**262**	**236**	**0**	**18**

	Time Outstanding								
No. of Overdue Inspections i.e. havent been inspected at 31.3.26	0-3mths	4-6mths	7-9mths	10-12mths	13-18mths	19-24mths	2-3 years	3-4 years	5 yrs +
1	1	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0
1	1	0	0	0	0	0	0	0	0
3	3	0	0	0	0	0	0	0	0
13	11	2	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0
18	16	2	0	0	0	0	0	0	0

10.7.4

Number of outstanding applications for each of the above categories as at 31st March?

		Length of Time Unallocated from receipt of Application				
Sector	No. of Applications not Allocated	0-3 Months	4-6mths	7-9mths	10-12mths	12+ Mths
Day Nursery	0	0	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	10	6	3	1	0	0
Holiday Scheme	0	0	0	0	0	0
Two year old Prog.	0	0	0	0	0	0
Total	10	6	3	1	0	0

10.7.5

Number of current applications being assessed at period end and duration of assessment

		Length of Time that applications have been in progress				
Sector	Number in Progress	0-3mths	4-6mths	7-9mths	10-12mths	12+ mths
Day Nursery	0	0	0	0	0	0
Creche	0	0	0	0	0	0
Playgroup	0	0	0	0	0	0
Out of School	1	0	1	0	0	0
Childminder	4	1	0	0	3	0
Holiday Scheme	0	0	0	0	0	0
Two-year-old Prog.	0	0	0	0	0	0
Total	**5**	**1**	**1**	**0**	**3**	**0**

10.8 Complaints & Representation

10.8.1	*Does the Trust have an appropriately authorised and experienced children's complaints officer?* **Yes** 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 Head of Service for safeguarding children.
10.8.2	*Does the Trust have an independent advocacy service for children and their families?* ***Yes*** 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. Within the Regional Secure Care Centre, NIACRO provide an independent representation service directly to the young people.
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?* 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. 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. The Children's Lessons Learned group reviews the themes and learning emerging from complaints and identifies improvement plans as necessary. This is a subgroup of the Children's Safeguarding Committee. It is constituted from senior managers, principal practitioners, social care governance and learning, development and research staff.
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?* The Trust has a whistle blowing policy, which outlines how staff can raise concerns.