

Response to DoH Public Consultation: Independent Review of Children's Social Care Services, Initial Consultation on Recommendations

December 2023

Your Voice, Our Journey

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About the PCC

The Patient and Client Council (PCC) is an Arms-Length Body (ALB) of the Department of Health. Established as part of the 2009 reform of Health and Social Care (HSC), we are tasked with providing a powerful, independent voice for the public on health and social care issues across Northern Ireland.

Our vision is for a Health and Social Care Service, actively shaped by the needs and experience of patients, clients, carers and communities.

With respect to health and social care services, the PCC:

- Represents the interests of the public;
- Promotes the public's involvement;
- Assists people who are making a complaint about HSC services;
- Promotes the provision by HSC bodies of advice and information to the public about the design, commissioning and delivery of services
- Undertakes research into the best methods and practices for consulting and engaging the public.

Scope of Consultation Response

The PCC will provide a response, as an organisation, to a public consultation of the Department of Health or HSC organisations when the content of the proposals is relevant to; our statutory objectives, our obligations under the HSC Framework document, and our strategic objectives.

Link to Consultation on Recommendations of Independent Review of Children's Social Care Services in Northern Ireland: Click here

We have therefore focused our consultation response to the areas and questions outlined below.

This response was considered and approved by the Council of the PCC on Thursday 7th December 2023.

Chapter two: More Effective Family and Children's Services

Recommendation 32: Introduce a regions-wide transitions and advice advocacy service

Recommendation 36: An independent parent-led organisation(s) should be funded

to pro	vide sup	pport a	nd adv	ocacy for p	parents engag	ed with	n children's social car	е
servic	es.							
Q18.		menda	-		implementati	on of	recommendation 32	2 with
Q23.	Is there	e scope	e to co	mbine imp	lementation of	f recon	nmendation 36 with	
	recomi	menda	tion 32	?				
	Yes							
	No		\boxtimes					
	Unde	cided						
PCC's	s Respo	onse						
There	is not s	scope to	o comb	ine impler	nentation of th	ese tw	o recommendations.	These
recom	menda	tions a	re aime	ed at differ	ent groups of	service	e users and require di	fferent
areas	of spec	cialist kı	nowled	lge and dif	ferent types o	f exper	tise. These services	should
be de	veloped	and co	ommis	sioned sep	arately from e	ach ot	her.	
Q16.	Do you	u agree	e that	a transitio	ns advice and	d advo	cacy service is requi	ired in
	Northe	ern Irela	ınd? (F	Recommen	dation 32)			
	Yes		\boxtimes					
	No							
	Unde	cided						

Q17.	How do yo	u suggest	the	advice	and	advocacy	service	is	provided?
(Reco	mmendation 3	32)							
(See I	below)								
Q21.	Do you agree	e that improv	/eme	nts are r	neces	sary in how	parents	who	are
	engaged with	n children's s	socia	l care se	rvices	are suppo	rted, inclu	ıdin	g through
	advocacy su	pport? (Rec	ommo	endation	36)				
	Yes	\boxtimes							
	No								
	Undecided								
Q22.	Do you agree	e that greate	r sup	port, inc	luding	advocacy	support,	nee	ds to be
	delivered by	way of an in	depe	ndent or	ganis	ation? (Re	commend	datio	on 36)
	Yes	\boxtimes							
	No								
	Undecided								

If yes, please specify. If no, do other mechanisms currently exist which we can draw and build on?

PCC's Response

Both of these services should be commissioned as regional services and provided independently of HSC Trusts/the proposed new regional Arm's Length Body. The services should be commissioned independently of HSC Trusts/the new regional body and be commissioned on the basis of agreed standards which include addressing the role of these advocacy services in dealing with complaints and concerns raised by clients and responding to safeguarding issues. The service specification for the providers commissioned to provide both of these advocacy services should specify how these service providers relate to the Patient and Client Council in the discharge of its statutory roles. The same specification should specify a minimum data set to be collected by the service provider both for the purposes of monitoring the providers performance and for the purpose of identifying issues of

service quality and safety with children's social care services provided by HSC Trusts/the proposed new regional body. Access to these advocacy services should be client led and not dependent on a referral by HSC Trust/new regional body staff. The PCC further considers that part of the role of the service providers for these two advocacy services should include the development of information packs for clients, and potential clients, which explain to them roles and responsibilities, their rights and identify to service users' other bodies where they can access support. It is also the view of PCC that the Department place both of these advocacy services on a statutory footing at the earliest possible opportunity. Given PCC's current statutory remit, functions and current delivery model, the PCC is open to exploring with the Department how PCC might support the design, delivery and oversight of any future model.

Chapter three: Operational/Organisational Effectiveness and Efficiency

Recommendation 7: There is a clear and firm recommendation for a region-wide Children and Families Arm's-Length Body. So much which follows is likely to be dependent for its impact on having a regional ALB.

Recommendation 12: Statutory children's and families' social care services need to be located within an organisation where this is the primary focus of the organisation.

Recommendation 13: Future arrangements need to allow the leaders of statutory children's social services to focus on the services without the allocation of other roles and responsibilities.

Recommendation 14: The relationship with the Department of Health should be reset in line with the intentions of the 2022 Health and Social Care Act (Northern Ireland).

Recommendation 38: A decision should be taken to introduce a region-wide Children's and Families Arm's-Length Body which includes current HSCTs' statutory children's social care services along with other allied services and professions closely related to children's social care.

Recommendation 40: Within the context of developing a region-wide Children and Families ALB there should be the development of a Regional Care and Justice Centre within the Woodlands site.

Recommendation 41: The Lakewood site could then be available for repurposing to provide within-region services as an alternative to young people being placed within services outside of Northern Ireland.

Recommendation 45: The regional children's ALB should develop its own quality assurance and development processes and with independent participation within the processes.

Q33.	Are you cont	ent for recommendation 14 to be considered as part of ongoing				
	internal orga	nisational re-design work within the Department of Health?				
	Yes					
	No					
	Undecided					
Q40.	Do you agree	e that a Children and Families ALB should be able to develop and				
	operate its own quality assurance and development processes?					
	(Recommend	dations 7,12,13,38,45 and associated recommendations 40 and				
	41)					
	Yes					
	No					
	Undecided					

Q41. If you answered yes to Q40, how would these processes replace or supplement existing quality assurance arrangements, for example those managed by RQIA or statutory functions reporting to the Department of Health?

(Recommendations 7,12,13,38,45 and associated recommendations 40 and

(Recommendations 7,12,13,38,45 and associated recommendations 40 and 41)

PCC's Response

In developing any new Children and Families Arms-Length Body, due consideration should be given to establishing a robust and appropriate assurance and regulatory framework and regime, and how this would fit in with established practices and legislative requirements across the HSC. The PCC considers that the operationally independent inspection and regulatory role of the RQIA should be maintained or bolstered with regard to any new ALB in relation to quality standards and service delivery.

Similarly, consideration should be given to ensuring robust and appropriate governance and assurance mechanisms are in place within any new ALB and between the ALB and DoH, reflecting on the changes within the 2022 Health and Social Care Act (Northern Ireland).

Co-production Feedback

Q54.	Do you have any further comments on how family and children's social care
	services should be organised to address the range of issues identified in the
	Review Report?
	Yes □
	No 🗆

PCC's Response

Reflecting on the PCC's statutory functions and obligations, particularly with regard to our role in representing the interests, and promoting the involvement, of the public, we are keen to understand how the Department intends to engage with the public, service users and interested stakeholders in developing the recommendations after this public consultation.

We are happy to comment on and assist with any involvement and engagement strategy developed for this work, with a view to delivering a co-produced final proposal.

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