



Committee for Justice

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Email: Kathy.O'Hanlon@niassembly.gov.uk

From: Kathy O'Hanlon, Clerk to the Committee for Justice
Date: 19 February 2026
To: Keith McBride, Clerk to the Committee for Health
Subject: Adult Protection Bill

Dear Keith,

Further to my correspondence of 16 January 2026 in response to seeking the views of Justice partners regarding the provisions in the Adult Protection Bill that may impact their organisations, please see the attached responses from the Public Prosecution Service and the Probation Board for Northern Ireland.

I would be grateful if you could bring this to the attention of your Committee.

Regards,


Kathy O'Hanlon
Clerk to the Justice Committee

Enc.



**Policy and Information Unit
Public Prosecution Service
Belfast Chambers
93 Chichester Street
Belfast BT1 3JR**

Ms Kathy O'Hanlon
Clerk to the Committee for Justice

Email: committee.justice@niassembly.gov.uk

6 February 2026

Subject: PPS Views on the Adult Protection Bill

Dear Kathy,

I am writing in response to the request for information from the Committee for Justice arising from the meeting held on 15 January 2026 regarding the Adult Protection Bill, which is currently being considered by the Committee for Health. This was to seek the PPS's views on the Bill and its potential impact.

In terms of the contents of the Bill, we have been in contact with Department of Justice officials over recent weeks to discuss a number of matters of relevance to us and our criminal justice partners. The only issue where a concern remains relates to clause 2 of the Bill which provides for a definition of 'Adults at Risk'. This appears to be a wide definition which extends beyond vulnerable adults who are resident in institutions, such as Muckamore Abbey Hospital and Dunmurry Manor. We recognise that all vulnerable adults require protection and therefore a broad definition is required. However, it appears to us that there may be a tension here with the application of the criminal law which seeks to create liability for care workers and care providers employed by statutory institutions with specific responsibility for adults at risk. It may be, therefore, that a more narrow definition of adults at risk should be developed and applied *for the purposes of the relevant criminal offences* (i.e. while also retaining the broader definition).

In their response to the Committee, we note that the Department of Justice flagged a specific issue regarding Part 3 of the Bill and the requirement for new offence codes to be added to the Causeway system. The creation of these codes, which is a PPS function, should be a relatively straightforward exercise and will be addressed by us prior to implementation of Part 3.

We note that the Department of Health intends to produce Statutory Guidance to accompany the Bill's provisions. This is important as it will inform the development of the PPS's in-house guidance for prosecutors in a number of key areas, including how the scope and thresholds of the new offences are defined and the handling of cases where publicity orders are required.

Finally, it is anticipated that the number of criminal cases arising from the legislation will be small and therefore the impact on PPS caseloads and resourcing is unlikely to be significant.

If you require any additional information, please let us know.

Yours sincerely,



Head of Policy and Information

Copy:
Director
Deputy Director
SAD Regions
Policy Lead
DALO

Date: 6 February 2026

Kathy O'Hanlon
Clerk to the Committee for Justice
Room 345, Parliament Buildings,
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BELFAST
BT4 3XX

By email: committee.justice@niassembly.gov.uk

Dear Kathy,

PROBATION BOARD FOR NORTHERN IRELAND – IMPLICATIONS OF THE ADULT PROTECTION BILL

Thank you for your correspondence dated 20 January 2026 inviting the Probation Board for Northern Ireland (PBNI) to provide its views on the Department of Health's (DoH) Adult Protection Bill and its potential impact. As PBNI is specifically referenced within the Bill, we welcome the opportunity to outline the implications for our statutory functions. This response sets out our assessment of the Bill's legal, operational, financial and workforce consequences, as well as areas where further clarification would be helpful.

1. New Statutory Duties and Legal Implications for PBNI

The Adult Protection Bill introduces new statutory duties for PBNI, widening our legal responsibilities in relation to safeguarding adults.

- **Duty to Report:** Under Clause 4 of the Bill, PBNI (and other named organisations) must report to the Health and Social Care (HSC) Trust if there is reasonable cause to suspect an individual is an "adult at risk" who may need protection. In practice, this means that Probation Officers and other staff will be legally required to make a report whenever, in the course of their work, they identify a vulnerable adult at risk of harm.
- **Duty to Cooperate:** PBNI is also obligated to cooperate with HSC Trust inquiries into alleged abuse or neglect of adults. This involves sharing information and working

jointly. For example, if a HSC Trust initiates an adult protection investigation, or review, involving a person under probation supervision (either as alleged perpetrator or victim), it is anticipated PBNI will be required to participate actively, attending strategy meetings, providing risk assessments or reports, and assisting in protection planning. This does not currently take place in a way that involves PBNI.

- **Governance & Accountability:** The Bill establishes an Adult Protection Board for Northern Ireland, a multi-agency body responsible for oversight, implementation, and strategic direction. As a named organisation, PBNI will likely be represented on the Board and will contribute to its strategic work, including adopting any policies or protocols it develops.
- **Criminal Liability for Failures:** The Bill introduces provisions creating offences where organisations or their officers fail to discharge their safeguarding duties. PBNI is aware that both the body corporate and individual staff members could face criminal liability in cases of serious breach, including *wilful neglect* in protecting an adult at risk. However, there is some ambiguity in this area, as the offences appear to apply to “care workers” and “care providers”, as defined with reference to section 2 of the Health and Social Care (Reform) Act (NI) 2009, so it is not clear if PBNI or its staff fall within this category. However, in any event, the draft Bill reinforces the need for PBNI to maintain robust systems, clear guidance, and comprehensive training to ensure compliance and support staff in meeting their statutory obligations.

PBNI would emphasise the importance of clear and precise definitions such as the threshold for *wilful neglect* and the scope of *persons in public office* to ensure staff fully understand their legal responsibilities. PBNI’s focus will be on strengthening compliance and risk management by embedding the duty to report into practice, formalising cooperative working arrangements with health and social care partners, and implementing governance controls to minimise as far as possible, the risk of any breach that could give rise to any legal liability.

2. Operational Implications for PBNI

Implementing the Bill will have operational and procedural implications for PBNI. As an organisation responsible for supervising offenders and engaging with their families PBNI frequently encounters adults who may be vulnerable. The key operational implications include:

- **Integrating Reporting Processes:** Whilst PBNI already has an Adult Safeguarding Policy and Procedures, however these may require updating to reflect the new mandatory reporting duty. Case management systems and protocols may need to be amended to

ensure that staff can record safeguarding concerns and actions taken, which could incur costs to make changes to our Electronic Case Management System.

- **Case Supervision & Decision-Making:** In practice, PBNI staff supervise individuals who may pose a risk to vulnerable adults - for example, those with a history of elder abuse or domestic violence or who may themselves be at risk (for example, a service user with learning difficulties at risk of exploitation). The Bill's will require enhanced vigilance in such cases, particularly where issues of capacity may arise. For example, when assessing a proposed residence for a person under supervision, Probation Officers will be required to consider whether any adults in that household may be vulnerable and, where appropriate, ensure that safeguarding measures are in place. PBNI has previously highlighted this scenario in its response to the Committee for Health – approving service users' residences where coercive control or questions of consent are present as an area requiring careful risk assessment.
- **Multi-Agency Coordination in Practice:** Operationally, the duty to cooperate means PBNI will participate in multi-disciplinary adult protection meetings convened by HSC Trusts. We anticipate a significant increase in such engagements. PBNI will designate relevant staff to attend strategy discussions, share information (e.g., an offender's risk history or compliance status), and jointly plan protection measures. This mirrors our existing role in Public Protection Arrangements NI (PPANI) for violent or sexual offenders but will extend to a broader set of cases (including, for example, financial abuse of vulnerable adults, neglect cases, etc.). This is likely to have an impact on the workload of PBNI middle and senior managers and adds to the already increased workload caused by processes such as the Domestic Homicide Reviews.
- **Policy and Procedure Updates:** PBNI operational policies will require review and update to align with the new law. This includes our Safeguarding Policy, risk management procedures, Practice Standards, and information-sharing agreements with partner agencies, especially Health Trusts.
- **Increased Workload:** The introduction of mandatory reporting is expected to increase the number of safeguarding referrals made by PBNI. Under the current non-statutory arrangements, staff rely on professional judgment; however, with a legal duty in place, even borderline concerns are likely to be reported. Each referral may generate follow-up actions, meetings, and in some cases, ongoing involvement in protection plans. PBNI must therefore prepare for a higher operational level of safeguarding work, whilst ensuring that core probation functions of rehabilitation and public protection continue to be delivered effectively. Close monitoring of staff caseloads will be essential to manage this increased demand.

3. Resource and Financial Implications

PBNI anticipates resource implications arising from the Adult Protection Bill. While the Department of Health's Explanatory and Financial Memorandum projects *approximately £12 million in new expenditure in the first year and £120.8 million over ten years* to implement the Bill across all agencies, a substantial portion of that investment will be directed to Health and Social Care Trusts, including funding additional safeguarding social workers, training, and the establishment of the Adult Protection Board. This in itself presents a different risk in the context of growing demand for social workers and the need to stabilise social work staffing levels in a range of sectors. In any event, PBNI will require additional resources to discharge its statutory obligations effectively. This includes:

- **Workforce Expansion:** To manage the increased workload arising from the Bill including reporting, multi-agency meetings, inquiries, training delivery, and oversight
- **Training Costs:** Comprehensive training will be required for all PBNI staff on the new legislation and procedures. This will involve upfront costs including the development or procurement of training programmes and staff time spent in training, as well as ongoing costs for refreshing training and to ensure new employees receive appropriate training. PBNI strongly supports a centralised, multi-agency training approach, ideally funded or coordinated by the Department of Health. However, there may still be internal costs where PBNI needs to provide supplementary organisation-specific guidance or scenario-based exercises relevant to probation practice.
- **IT:** Implementing the Bill may require updates to our IT systems (for recording and flagging adult at risk cases, secure information sharing with partners).
- **Collaboration with Voluntary Sector:** PBNI's response to the Health Committee noted that implementation may have implications for contracts with Community and Voluntary Sector (CVS) partners who deliver some services on PBNI's behalf. For example, where PBNI fund a community partner to deliver a programme for service users, we may need to ensure that providers also operate in line with adult protection standards, and that any relevant reporting requirements are reflected in contractual arrangements. While voluntary sector partners may not hold statutory duties directly, PBNI will have to assure itself of their safeguarding standards. We are acutely aware of the challenges that persist within the CVS, and all organisations continue to face significant pressures as operating costs continue to increase, at a time when demand for services and support is growing.

4. PBNI's Position on the Bill and Recommendations

Areas of Support:

Statutory Framework:

PBNI supports the introduction of a statutory framework for Adult Protection in NI. This will address a longstanding gap by providing a legislative foundation comparable to that which exists for child protection, strengthening consistency, authority and accountability in response to adult harm.

Multi-Agency Emphasis:

We welcome the Bill's strong emphasis on multi-agency cooperation and the establishment of an Adult Protection Board, which will provide strategic oversight and support coordinated practice across agencies

Principles of Intervention:

PBNI endorses the principles set out in the Bill, including minimal intervention and respect for the adult's wishes. These principles align with social work values and a person-centred approach.

Preventative Approach:

We also support the Bill's focus on early identification of risk. The introduction of a statutory duty to report will help ensure concerns are brought forward at an earlier stage, enabling timely inquiries and reducing the likelihood of harm escalating.

Areas for Further Clarification

While broadly supportive of the Bill, PBNI has identified areas where further clarity would support effective implementation.

Scope of Organisations Covered:

We recommend the Bill expand or clarify the list of 'relevant organisations' under the duty to report and cooperate. PBNI is explicitly named, but other justice partners are not, and a number of public-facing bodies could also fall within scope. As listing every organisation is not feasible, a more general provision (for example, "any public body exercising public functions that in course of those functions encounters an adult at risk") would ensure appropriate coverage.

Clarity on Definitions and Thresholds:

Clear and consistent definitions of key terms such as “*adult at risk*”, “*harm*”, and the criteria for intervention are essential. Any ambiguity may lead to inconsistent application across and within agencies. Similarly, terms relating to offences such as what constitutes a “gross breach” by an organisation, should be unambiguous.

Criminal Liability and Staff Protection:

PBNI notes the proposed introduction of criminal liability for organisations and potentially for individual staff members. While we understand the policy intent of strengthening accountability, it will be important to ensure the provisions do not inadvertently create a culture of fear or risk aversion among practitioners. There is ambiguity in the legislation as to whether PBNI would fall within the scope of offences in Part 3 of the new Bill.

Resource Commitments:

It is essential that the new statutory duties are fully supported by the resources required to deliver them effectively. We therefore ask that the Committee seek clear assurances from the Department of Health, and from the Department of Justice in respect of its arm’s-length bodies, that sufficient funding will be provided to meet the associated demands – including training, system changes and any additional staffing needed to fulfil these duties responsibly.

Interaction with Existing Orders:

Further clarity is required on how Adult Protection Orders such as removal or barring orders will interact with existing orders including probation conditions. This will need careful consideration to avoid operational conflicts or gaps.

Conclusion

In conclusion, PBNI reaffirms its strong commitment to the protection of adults at risk of harm and its support for the objectives of the Adult Protection Bill. We believe the Bill will provide an essential statutory foundation for adult safeguarding in Northern Ireland, comparable to the well-established framework for child protection. We also recognise that effective implementation will rely on robust inter-agency cooperation, sufficient resourcing, and careful planning.

We welcome the opportunity to provide evidence to the Justice Committee. PBNI remains fully committed to working in partnership to ensure the Bill delivers its intended outcomes – enhancing public safety and protecting those who are most vulnerable.

If you require any further information, please do not hesitate to contact me.

Yours sincerely,

[Redacted Signature]

[Redacted Name]

Chief Executive



**Northern Ireland Assembly
Committee for Justice**

██████████
Probation Board for Northern Ireland
80-90 North Street,
Belfast
BT1 1LD

20 January 2026

Adult Protection Bill

Dear ██████████

At its meeting on 15 January 2026, the Committee for Justice considered correspondence from the Department of Justice regarding the Adult Protection Bill, which is currently being considered by the Committee for Health.

The Committee had sought the view of the Department of Justice on the provisions in the Bill which the Committee for Health had drawn attention to as being potentially relevant to the Department of Justice.

In their response, the Department indicated that “some of the provisions within the Bill impact those operationally independent of the Department” and recommended the Committee seek views from these organisations.

The Committee therefore agreed to copy the correspondence from the Committee for Health and the response from the Department of Justice to the Probation Board to seek your views on the Adult Protection Bill and the potential impact on your organisation.

I should be grateful for a response by 6 February 2026.

Yours sincerely

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Kathy O'Hanlon
Clerk to the Committee for Justice

Enc: Letter from the Committee for Health to the Committee for Justice

Response from the Department of Justice

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