



Northern Ireland
Assembly

COMMITTEE FOR
HEALTH, SOCIAL SERVICES AND
PUBLIC SAFETY

OFFICIAL REPORT
(Hansard)

**Safeguarding Board Bill: Evidence
Session with Professor Jan Horwath**

30 September 2010

NORTHERN IRELAND ASSEMBLY

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HEALTH, SOCIAL SERVICES
AND PUBLIC SAFETY**

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Members present for all or part of the proceedings:

Mr Jim Wells (Chairperson)
Mrs Michelle O'Neill (Deputy Chairperson)
Mr Mickey Brady
Dr Kieran Deeny
Mr Alex Easton
Mr Tommy Gallagher
Mr Sam Gardiner
Mr Paul Girvan
Mr John McCallister

Witnesses:

Professor Jan Horwath) University of Sheffield

The Chairperson (Mr Wells):

I do not know how long it has been since Professor Horwath was with us last. It must be eight or ten months?

Professor Jan Horwath (University of Sheffield):

Perhaps less.

The Chairperson:

You came in at the initial stages of the process, and we are now taking advantage of the Province's combined knowledge on this important issue. As usual, you will have 10 minutes to make a presentation, after which quite a few questions will come flying in from various members. You will have grasped the tone of our concerns. There is broad consensus throughout the voluntary and statutory sectors, which is good. The concept is good, and we are going in the right direction, but issues about accountability, control and membership seem to come up time and again.

Professor Horwath:

I endorse what you said. The framework in the Bill provides you with an excellent opportunity to develop safeguarding and the promotion of children here in Northern Ireland. In my presentation, I will reflect on various clauses and, in light of experiences in England and Wales, consider some issues that you may wish to tease out further on the operationalisation of the Bill. In doing so, I will concentrate on directions, regulations and additional guidance.

As you said, Chairperson, the notion of independence and what that means for the safeguarding board and, indeed, for what you hope to achieve through the safeguarding board vis-à-vis independence, has already been identified as an issue by the Committee and other witnesses. As I was reading the various clauses, it struck me that there is a tension concerning the extent to which the Bill, as it is set out, would lead to the board's ending up as an arm of the Department, rather than being at arm's length. Consideration must be given to defining what is meant by independence and how the board should sit within that context.

There are also accountability issues to consider. The role of the chairperson was the first issue that struck me. As we have heard today, the chairperson is, ultimately, accountable to the Minister. However, I was not clear on whether he or she will be held to account as an individual for the operation of the board or whether the board will be accountable collectively for its operation and effectiveness and the chairperson will, in effect, report on behalf of the board. There is a difference between those two scenarios. If you hope that board members will engage in the statutory duty to co-operate, all members must take collective responsibility for making the board work, rather than harbouring an expectation that it is up to the chairperson to do so.

That raises a second issue about how individual members of the board can be held to account for the way in which they implement the duty to co-operate. As I understand it, the various agencies are responsible to different Departments and Ministers, in addition to voluntary organisations, and, as is the case in England and Wales, the safeguarding board has no control over the internal operation of any agencies represented on the board. That has serious implications for the board's power to ensure that member agencies discharge their functions. As we discussed when I gave evidence previously, that means that the board acts as a critical friend. However, perhaps the implications of that need to be thought through with regard to how the board can take responsibility for discharging its functions.

On the question of governance, I understand that consideration is already being given to specifying the roles and responsibilities of members of the board. My experience indicates that it must be made clear that members of the board should come from the most senior management level in their organisations.

The Chairperson:

We dealt with that specific point at the previous Committee meeting. We have received an assurance that board members will be at director or assistant director level, which would suffice.

Professor Horwath:

That would give the board the profile that it needs.

One issue that I have come across time and time again in England relates to the nature of the way in which organisations are structured. Often, people at senior management level, particularly those for whom child protection is not their organisation's core business, may not have a professional background in child protection or, indeed, a background in working with children and families. Therefore, it is essential to ensure that members of individual agencies that are represented on the board receive the professional advice that they require from their agency. It should also be considered whether that should be spelled out when clarifying members' roles and responsibilities.

Another issue that arose in England and Wales was that of members' understanding of their role on the board. Members of several boards with which I worked perceived themselves primarily as representatives of their agency, rather than taking a collaborative approach to making

safeguarding work. Any agreements with board members must spell out that not only do they represent their agencies but they have a joint responsibility to make the board work. It is a collaborative leadership role.

In the same way that members of the board must be clear about their roles and responsibilities, clarity is required on the roles and responsibilities of members of the various panels, particularly the safeguarding panels that operate at a local level. Arising out of that are issues of communication, to which you referred. Based on my experience, if there is no effective communication between the main board and the local panels, the latter may work in a vacuum. The panels must balance local need with general issues that are brought to their attention by the safeguarding board, and they must feed information back to the board.

In many ways, the panels operationalise the strategic plan of the boards: they are the engine room. Therefore, although they must be given clear guidance on their remit and priorities, they must balance that with local need. That raises tensions and issues, particularly for the chairpersons of those panels. It is commendable that the chairpersons are independent. However, the requirement for those who chair the panels is the same as that for those who chair the safeguarding boards in England. They require exceptional knowledge and skills, or, in the Chairperson's words, the judgement of Solomon and the wisdom of Einstein. It will be difficult to find people who are not so entrenched in local issues that their independence is compromised.

It is worth thinking about what the board or the Health Committee can do should there be a lack of confidence in the chairperson of the board. That has become an issue for two boards with which I have worked in England. Systems must be in place to address those issues. I guess that that would also apply at panel level.

In England and Wales, the management of the interface between the safeguarding board and children's services planning is another issue. Again, systems must be in place to ensure that the work of the board and of those who work on the children's plan complement each other. They must avoid duplication but leave no gaps. Bullying, for example, may be of concern to the safeguarding board, but those whose remit is planning children's services may already address it. How will the board be made aware of that? To what extent does the board hold children's services planners to account for what they deliver on safeguarding issues, and so forth? The governance arrangements between the safeguarding board and children's services planning

require clarification.

In England and Wales, many directors who sit on the board are also involved in children's services planning through the 10-year strategy, and so forth. Clarity is required on which hat the directors wear when sitting on different boards and partnerships. Are they clear about the interface between the two?

As far as the board's two objectives are concerned, experience in England and Wales, and the evidence that we heard from Bradford, reinforce the point that safeguarding is a general term that covers all sorts of activities. A clear definition of safeguarding and guidance on how the board should prioritise its activities would be helpful. A key finding of the Loughborough University study was that the most effective boards were those that were realistic about what they could achieve. They prioritised their safeguarding activities rather than spreading the butter too thinly across the bread.

Another objective in ensuring effectiveness is one of the biggest challenges faced by boards in England and Wales: how is effectiveness measured? The ultimate measure is improved outcomes for children. However, that is a long-term measure. In the interim, boards must think about how to demonstrate that they make a difference. I have been involved with work in Wales that highlights the conditions that are necessary for a safeguarding board to be in a position to promote better outcomes for children. That work also examined how to measure annually the extent to which the board works towards those conditions or whether those conditions exist.

Another crucial part of measuring effectiveness is determining whether the board understands what is going on at the front line. It is crucial that that be measured, whether that is through its panels and subcommittees or through forums with front-line practitioners and managers. My work shows that senior managers think that they understand what is going on at the front line, but the front-line practitioners' experience paints a different picture. Therefore, how does the board know whether it is effective in making a difference to staff on the front line?

I wish to make two points about the functions of the safeguarding board, the first of which concerns the case management review (CMR). As Paul Hill highlighted earlier, as much can be learnt from cases that have gone well as from tragic cases. The tragic cases are those that are high risk and low probability. However, much can be learned from cases that work well, such as

the ways in which to improve effectiveness. It is worth considering the extent to which a case management review process should facilitate the routine consideration of those kinds of cases.

My second point is about whether the safeguarding board should have the additional function of inter-agency training. Inter-agency training is considered an effective vehicle for promoting inter-agency practice, and a recently completed study in England reinforced that. One of the most effective ways of getting practitioners to work together is to train them together. Therefore, the board could play a role in specifying who should receive training and what kind of training that should be. As part of measuring effectiveness, the quality of that training should also be measured.

Clause 3(7) demonstrates that the Bill is keen for children and young people to be involved in informing the activities of the safeguarding board. That has been done successfully by a couple of safeguarding boards in England. However, it is becoming clear that that is incredibly challenging. I am completing a study across Europe on what is required to encourage young people who have been abused and experienced violence to engage in decision-making bodies, such as a safeguarding board. My briefing paper lists the key factors, as identified by young people that must be in place if they are to engage in active decision-making or in informing activities such as those undertaken by the safeguarding board.

The same is true of lay members. In the past couple of years, people expected safeguarding boards in England to include lay members, but that has proven to be a challenge. It has turned out to be crucial that those lay members receive comprehensive training and are well prepared before sitting on a board. It is also a challenge to find the right people. Some boards seem to have recruited lay members as an act of pure tokenism, so that they can tick a box. Others recruited ex-professionals, some of whom have been unable to take off their professional hats. That issue must, therefore, be thought through.

The Chairperson:

Thank you, Professor Horwath. You have, yet again, come up with some extremely interesting material. We appreciate your coming over from Sheffield, because it is good to hear an academic view as well as the views of those who practise. You heard the discussion with the previous witnesses about the chairperson, but I must raise it again with you. The chairperson requires the wisdom of Solomon, the brains of Einstein and, I suspect, the negotiating skills of Kissinger.

With those as the requirements, we now have the initial advertisement for the job. It is advertised as being for two to three days a week and is pitched at £17,000 a year. I do not want to get wrapped up in the money; my concern is about the status that that reflects. From your experience in GB, is that an appropriate salary for someone whose board will cover five health and social care trusts and 1.7 million people?

Professor Horwath:

No. I concur with what the representatives from Bradford said: the rate in England and Wales is £500 or more a day. I do not know who would be attracted by the salary that has been advertised here. Perhaps someone who is extremely committed to that kind of work may be prepared to take up the post.

The Chairperson:

An academic will hardly leave his or her department for a couple of days a week to —

Professor Horwath:

No.

The Chairperson:

That was my initial view. When I read it, I thought that there was a zero missing or that the post was for two or three days a month. I was a bit surprised, and we will take that up with the Department.

In GB, there are two modes of investigation. The panels are reactive, and they step in and investigate when something goes wrong. I understand that, in England, some safeguarding boards initiate their own research and investigations. They may decide to investigate, for example, childcare in relation to drug and alcohol abuse and how social services and the voluntary sector deal with that in their district. Safeguarding boards in England have been up and running for four years. Have many boards started their own investigations as opposed to simply reacting to cases that have been referred to them?

Professor Horwath:

Yes. The Sheffield Safeguarding Children Board, for example, has appointed a research officer to undertake research on any particular issue that it feels is pertinent, so that it can be more

proactive than reactive in its response.

The Chairperson:

Has that led to changes in social services? What effect does that have on changing policy?

Professor Horwath:

That has an impact in so far as practitioners may read a research report about practice elsewhere and decide that it is not relevant to them. However, if they know that the research was local and involved their staff and that the findings relate to practice in their board area, there is no way that they can ignore those findings.

The Chairperson;

Concern about the independence of the chairperson and the board in general is a recurring theme in all the evidence. We are slightly concerned by the reference to the fact that publications must be referred to the Department for approval. However, we may be worrying about something that, in effect, does not occur. More than 150 safeguarding boards have been operating in GB for four years. Has your research uncovered any examples of attempts to suppress, curtail or cover up critical reports and investigations by boards, or has there been freedom, in which case we are getting too worried about the legislation?

Professor Horwath:

Interestingly, the focus of the annual report has changed. The most recent edition of the guidance to safeguarding boards, which came out this year, made it clear that the annual report must be an honest, critical reflection on safeguarding activities in a board's area. Previously, many annual reports were pretty factual documents without any critical analysis. Although some were excellent and did include such analysis, by and large, many simply provided data, such as the number of people that a board had subjected to various categories of multidisciplinary child protection plans. Those figures might have been followed by a comment on the trend and something about areas that caused concern and thus led to a new training provision. Reports of that type were much more factual accounts of what had happened. We have yet to see what the new set of much more self-critical annual reports will be like.

The Chairperson:

You also raised the intriguing issue of the board's losing confidence in the chairperson. Under

present GB legislation, how would one get rid of the chairperson in that situation?

Professor Horwath:

That has proved to be a challenge. Two boards with which I worked had no confidence in their chairperson, but both realised that their contractual arrangement with the chairperson meant that it was extremely difficult to get rid of him or her. You need to think about that. Although it is a rare occurrence, it can happen.

The Chairperson:

There are two models of appointment. The first is that the chairperson is appointed by the Minister — in England and Wales, it would be the council — after the post has been advertised. In the second model, the safeguarding board is constituted and then makes the appointment. Which is better?

Professor Horwath:

That is difficult to answer. I have worked in Northern Ireland for more than 15 years, and I know that it is a very small world. It would be difficult for members of the board to appoint a chairperson because it is likely that the candidates would be people whom they know well.

The Chairperson:

They are absolutely bound to know them.

Professor Horwath:

Perhaps the public appointments process creates a little distance. That said, the members of the board should be consulted about what they want and expect from a chairperson, and that should inform the process. However, in the Northern Ireland context, I have reservations about the board appointing a chairperson.

Dr Deeny:

My question is of a practical nature. Our population of less than 1.8 million is small. You mentioned the relationships between the board and, for example, front-line health professionals. GPs, nurses and other health professionals take their concerns to social workers. I presume that the same happens with schools and that they have a channel through which they raise concerns.

Is there anything that you do, or that you think that we should do, as far as the general public are concerned? England is different in that it has more big cities. People in cities here and in Dublin will say that, often, they do not know what their next-door neighbours are doing. People feel that what happens next door is neither their business nor their concern. However, if one watches soap operas, and I have to admit that I watch 'Coronation Street', one would think that everybody knows what everybody else is doing. However, that does not seem to be the case.

We do not want any children to slip through the net because people think that what is happening to them is none of their business. Paul Hill mentioned the importance of including adult behaviour and its associated problems. However, if, for example, a family or an individual were concerned about the welfare of children next door or a couple of doors up the road, what could they do? They may feel that it is none of their business. Should we advertise a confidential telephone line that people can contact? People approach their GP only when they are 100% sure of their facts. However, even a suspicion that a child is at risk is reason enough for that to at least be reported.

Professor Horwath:

The issue is how we convey to the general public in various communities that child protection, or safeguarding, is everybody's business. Several safeguarding boards in the UK have used lay members to great effect. However, I also talked about the danger of their representation being merely tokenistic.

A few safeguarding boards set up a subcommittee to focus on communication strategies. That subcommittee examines how it can engage with the general public, particular religious and ethnic groups, and so forth, within the community. The lay members on the main board are part of that subcommittee, and they played a significant role in providing an informed approach to engaging with various groups in the community. As a result, some boards developed specific communication strategies to convey to local groups that safeguarding is their responsibility and to outline what they should do.

Dr Deeny:

Has the message that safeguarding children is everybody's business got through to the public across the water?

Professor Horwath:

It is a slow process, but people are becoming increasingly aware.

The Chairperson:

John McCallister wants to come in on this subject, but I have a question on a similar point. You mentioned the chairpersons of the panels. Do you envisage those appointments being trawled externally?

Professor Horwath:

The legislation refers to the chairperson's independence —

The Chairperson:

The chairpersons are independent, but do you envisage the panels and subcommittees simply being drawn from the board?

Professor Horwath:

I presume that they will be drawn from agencies that are part of the safeguarding board. Are you asking whether members of the board will sit on the subcommittees?

The Chairperson:

Will the panels and subcommittees be chaired by somebody who also sits on the board or by members of the agencies that are represented on the board, but not necessarily by the same individuals who sit on the board? If Mrs Smith, for example, represents the NSPCC on the board, could Mrs Jones, who does not sit on the board, represent that group as chairperson of a panel or subcommittee?

Professor Horwath:

No, I thought that the independent chairpersons would be independent paid appointments in the same way as the chairperson of the main safeguarding board, but that might be my misunderstanding. Again, the issue is what "independent" means.

The Chairperson:

You believe, therefore, that the independence must extend down to the next level, which would mean that the chairpersons of the panels would be public appointments?

Professor Horwath:

Not necessarily. The key issue at that next level is that a direct line of communication must be established between the local safeguarding panels and the board. If you are saying that members of the board would chair those panels, that would provide direct communication.

Mr McCallister:

The follow-on from that discussion is how we link everything. Have you seen a huge difference in England between the boards that involve the community and voluntary sector and try to influence the policy agenda by making changes to suit different youth groups, as opposed to those that do not? Is there a huge difference in England between the boards that engage will and those that do not engage at all with such groups?

Professor Horwath:

I am able to give you only my impression, because I do not work with all 150 boards.

Mr McCallister:

OK. Will you give us an average?

Professor Horwath:

The boards that work most effectively are those that have a good relationship with the children's services planners. Often, the planners and the children's services plan have already brought community and voluntary groups on board. Therefore, there is a route via which the safeguarding boards can promote safeguarding activities, engage actively with those groups and avoid the duplication that I mentioned earlier. The boards that have a genuine understanding of the difficult child protection issues are those whose members have made an effort to find out about front-line practice.

Mr McCallister:

Presumably, the closest thing that we have to children's services planners is the Children's Commissioner, who is sitting a few feet behind you and is due to give evidence next. You have had a fair involvement in Northern Ireland over the past 15 years. Do you regard the Children's Commissioner as our point of contact with the safeguarding board? Could we use her office as our equivalent of the children's services planners in England?

Professor Horwath:

Is the Children's Commissioner responsible for the children and young people's strategy?

Mr McCallister:

I am told by the Children's Commissioner that she is not.

The Chairperson:

The Office of the First and deputy First Minister is responsible for that plan, which means that it must be right.

Mr McCallister:

You mean that no one is responsible? As OFMDFM leads on the strategy, should it have links to the board, and must we ensure that those links are created?

Professor Horwath:

Yes; I think so.

Mr McCallister:

The Committee has not yet heard evidence on the Bill from OFMDFM. We may need to consider doing so.

Professor Horwath:

Yes. There have been issues in GB about how to manage the interface and avoid duplication. The other issue is how to prevent children from falling between the gaps when each of two different bodies presumes that the other is working with a particular group.

The Chairperson:

I am conscious of the fact that the Deputy Chairperson has not yet had a chance to ask a question. Do you have any questions, Michelle?

Mrs O'Neill:

I liked Professor Horwath's line that the board appeared to be an arm of the Department, rather than at arm's-length. That issue may come up again.

You said that communication must be strengthened, which brings us back to the point about some subcommittees in England working in a vacuum. Should we legislate to ensure that there must be a minimum level of communication between the local safeguarding panels, the subcommittees and the board?

Professor Horwath:

I do not know whether that would come under the legislation or under the directions and guidance to the board.

Mrs O'Neill:

It may be in regulations.

Professor Horwath:

The Bill states that each local panel must provide an annual report, but more is required. One way to achieve that is to be more explicit about the role and responsibility of members of the board who chair the various subcommittees and panels and to state more explicitly that they must act as the conduit for communication.

The Chairperson:

Subordinate regulations could be brought in to stipulate that relationship. Therefore, it may not be necessary to include it in the Bill. The regulations enable us to decide later on the exact linkages.

I want to ask you the same difficult, but necessary, question that I asked of the previous witnesses. The whole idea is wonderful, and it seems that we will achieve some form of co-operation and establish a common cause of child protection. We all support that. However, does it actually work? We will put a great deal of time and effort into the safeguarding board, albeit not much money for the chairperson. However, is there any evidence that the first four years of operation of the 150 safeguarding boards in England have produced better policies and better child protection? To some extent, we may have the veneer of doing the right thing, but can we point to various boards in England and say that practice has improved dramatically as a result of scrutiny by the safeguarding boards?

Professor Horwath:

That is the 10 million dollar question. I refer members to Wales rather than England. The Care and Social Services Inspectorate Wales introduced the self-assessment and improvement tool to which my written evidence referred. Recently, it completed its first audit of all the safeguarding boards in Wales. In doing so, it used as a benchmark the different criteria in that audit tool. I am told that they believe that there has been an improvement in the quality of co-operation between agencies and an improvement in the conditions that are necessary to promote collaborative working. To that extent, there have been improvements. I do not know whether the boards have made a difference to outcomes for children; that is the one element that we have not measured effectively.

The Chairperson:

Are the statistics for the number of gateway referrals of children who are on the child protection register beginning to show any difference or is the situation merely worsening more slowly?

Professor Horwath:

It is difficult. Previously, we tended to focus on service output and examine that kind of quantifiable data, but what does that tell us? If the number of referrals goes up, it could be that the community or professionals take safeguarding much more seriously and make more referrals. Does that mean that the safeguarding board is working effectively because it has raised the awareness of issues? It is difficult to take such data in isolation and state that we want a drop in the number of referrals in certain areas, because that is not necessarily the case. Rather, we want the right children to receive the right services, and to measure the extent to which that is happening requires a much more qualitative study.

The Chairperson:

Thank you very much, Professor Horwath. Today's session has been extremely useful, as have all the evidence sessions on this important issue. The next witness is the Children's Commissioner; you are welcome to stay on to hear the evidence from Patricia Lewsley and her team.