

# 68<sup>th</sup> Meeting of the Safeguarding Board for Northern Ireland

Wednesday 17 September 2025

2.30pm– 4.30pm

MS Teams

P u b l i c M i n u t e s

## R E C O R D O F A T T E N D A N C E

Name	Title & Organisation	Present	Apology
Ms Bernie McNally	Independent Chair Safeguarding Board for Northern Ireland	✓	
Dr Tom Cassidy	Director of Women & Children's Services, WHSCT	✓	
Dr Naoimh White	GP representative of N.I. General Practice Committee	✓	
Ms Bronagh Muldoon	NSPCC Head of Services NI		✓
Ms Jenni Boyce	Partnership Manager, NSPCC (deputising OBO Ms Bronagh Muldoon)	✓	
Ms Mary Aughey	Director of Woodlands JJC, YJA	✓	
D/Chief Superintendent Zoe McKee	Detective Chief Superintendent, Public Protection Branch, PSNI		✓
D/Superintendent Jordan Piper	Detective Superintendent, Public Protection Branch, PSNI (deputising OBO D/Chief Superintendent Zoe McKee)	✓	
Ms Amanda Stewart	CEO, Probation Board NI	✓	
Ms Natalie Whelehan	Chief Executive Children in Northern Ireland	✓	
Ms Una Turbitt	Assistant Director of Pupil Wellbeing and Protection, EANI		✓
Ms Nicola Topping	Assistant Senior Education Officer for Pupil Wellbeing Services (deputising OBO Ms Una Turbitt)	✓	
Dr Ciara McKillop	Interim Director of Hospital and Community Care and Social Services, SPPG	✓	

Ms Lyn Preece	Director of Children's Services & Executive Director of Social Work, SEHSCT	✓	
Mr Colm McCafferty	Director of Children & Young People's Services and Executive Director of Social Work, SHSCT	✓	
Dr Joanne McClean	Director of Public Health, PHA		✓
Ms Heather Reid	Interim Director of Nursing, Midwifery and Allied Health Professions, PHA		✓
Ms Emily Roberts	Designated Nurse for Safeguarding Children and Young People, PHA		✓
Ms Alicia Toal	Chief Executive Officer, VOYPIC	✓	
Ms Maura Dargan	Director of Women, Children & Families Division/Executive Director of Social Work, NHSCT		✓
Ms Tracy Magill	Interim Executive Director of Social Work/Director of Children's and Young People's Services (deputising OBO Ms Maura Dargan)	✓	
Ms Michele Janes	Director of Barnardo's NI		✓
Ms Kerrylee Weatherall	Interim Director of Children's Community Services, BHSCT	✓	
Mr Philip O'Hara	Interim Director and DLP, Down & Connor Safeguarding Office representing the SBNI Interfaith Committee	✓	
Ms Edel McKenna	Chief Executive Officer, Children's Court Guardian Agency Northern Ireland		✓
Ms Angela McCann	Director of Environmental Services, Lisburn & Castlereagh City Council	✓	
Ms Sarah Mason	Chief Executive Officer, Women's Aid Federation for Northern Ireland	✓	
Mr Andrew Thomson	Independent Chair of the CMR Panel	✓	
Ms Mary Rafferty	Independent Safeguarding Panel Chair, Western, Northern and South Eastern areas	✓	

Mr David Douglas	Interim Independent Safeguarding Panel Chair, Belfast and Southern areas	✓	
Mr Simon Rogers	Non-Executive (Lay) Member	✓	
Mr Gerard Guckian	Non-Executive (Lay) Member	✓	
<b>In Attendance</b>			
Ms Alex McCoy	Board Secretary SBNI		
Ms Helen McKenzie	Director of Operations SBNI		
Ms Teresa McAllister	Interim Director of Operations SBNI		
Dr Jacqui Montgomery Devlin	Professional Officer SBNI		
Ms Deirdre Grant	Professional Officer SBNI		
Ms Eilis McDaniel	Director of Social Care Reform, DoH		
Ms Sinead Magill	Senior Programme Manager for Maternal and Child Health CORPs & CDPR, PHA		
Ms Lynsey Patterson	Speciality Registrar Public Health Medicine, PHA		

**Summary of Actions**

<b>Action No.</b>	<b>Action:</b>	<b>To be completed by:</b>
1	SBNI to consider if there has been an increase in CMR notifications in respect of Looked After Children (LAC).	CMR Panel Chair/Professional Officer for CMR
2	Sudden Infant Death in Childhood (SUDIC) Protocol update presentation to be shared with members.	Ms Alex McCoy
3	EA Elective Home Education (EHE) presentation to be shared with members.	Ms Alex McCoy
4	EA to endeavour to obtain data in respect of the following: <ul style="list-style-type: none"> <li>• The number of 'individual' children who are home educated (HE); as opposed to children within 'family groups', who have elected to HE in respect of the 1099 referenced.</li> <li>• The differentiation of the numbers of children who are home educated in rural as opposed to urban areas.</li> </ul>	Education Authority
5	The Child Protection Committee, to consider whether Trusts, during the Child Protection Case Conference process, where education colleagues are in attendance, have any information in respect of children who are home educated.	Child Protection Committee/Dr Tom Cassidy

BM68-09.25PM

6	The presentation in respect of Screens, Safety and Social Media QUB to be considered at the December Board meeting.	Ms Alex McCoy
7	Comments on the SBNI Annual Report to be sent to <a href="mailto:Alex.McCoy@hscni.net">Alex.McCoy@hscni.net</a> by 26 September 2025.	All Members

BM68-09.25PM

### **Summary of Board Approval**

The minutes from the Board Meeting on 11 June 2025 were approved as an accurate record of the meeting.
The SBNI Declaration of Assurance Mid-Year Statement was approved.
The SBNI Annual Report 2024-2025 was approved, with the agreement that any additional comments will be sent to Ms McCoy by 26 September 2025.

### **Preliminaries: Apologies, Quorum, Conflict of Interest, Complaints**

The chair welcomed SBNI members to the meeting. Apologies were noted from Ms Bronagh Muldoon, D/Chief Superintendent Zoe McKee, Ms Una Turbitt, Dr Joanne McClean, Ms Heather Reid, Ms Emily Roberts, Ms Maura Dargan, Ms Michele Janes and Ms Edel McKenna. The chair noted that Ms Jenni Boyce is deputising on behalf of Ms Bronagh Muldoon, D/Superintendent Jordan Piper is deputising on behalf of D/Chief Superintendent Zoe McKee, Ms Nicola Topping is deputising on behalf of Ms Una Turbitt and Ms Tracy Magill is deputising on behalf of Ms Maura Dargan.

### **Conflict of Interest**

The chair requested that members declare any Conflicts of Interest as and when they arise throughout the meeting.

### **Complaints**

The chair advised that no complaints have been received.

### **Chair's Business**

The chair reminded members that in March 2025, a recruitment process to refresh the voluntary and community representation on the Board commenced. The legislation allows up to five voluntary/community organisations to sit on the membership of the Board, separate from NSPCC, who are included on the membership as part of the statute. The chair advised that this process was successful, and VOYPIC have now been newly appointed with Barnardo's NI and Children in Northern Ireland (CiNI) membership renewed. The chair further welcomed Ms Mason from Women's Aid Federation to the membership of the Board, highlighting the importance of the inclusion of the voice of women and children suffering domestic abuse, given that domestic abuse is a current strategic priority of the SBNI. The chair advised that this leaves one space available for another voluntary agency, which she feels is important to keep available, pending finalisation of the SBNI Strategic Plan 2026-2030, to ensure appropriate membership is included.

### **1 68/25P Previous Minutes**

- 1.1 Members agreed the minutes from the last Board meeting on 11 June 2025 as a factual and accurate representation of the meeting.

## **2 68/25P Matters Arising**

### 2.1 Agenda Item 3

### 2.2 Complete

### 2.3 Complete

2.4 The PSNI has advised that there may be challenges in dissecting the data from referrals generated within 'Operation Encompass' relating to 'child on parent abuse', as it may be difficult to ascertain if the child/parent is a child aged under 18. As Operation Encompass referrals relate to instances where there has been a call out to the home, the challenge arises in that the case is not always categorised as domestic abuse under 18 years of age and so data may not be fully accurate or reflective of the issue.

### 2.5 Complete

2.6 By way of update, the chair advised that a meeting was held, on 24 June 2025, between the SBNI, SPPG and Department of Health (DoH) regarding correspondence received in respect of the chief social worker's concerns in relation to repeated thematic recommendations from CMRs. The SBNI assured the DoH of the robustness of the CMR process and emphasised the environmental deficits, particularly in respect of the staffing, recruitment and resource challenges being experienced by all agencies. The chair also reported that she reminded the DOH and the chief social worker of the continual improvement of standards over the decades. The chair also clarified that while the themes continued to recur, this was partly due to the fact that the terms of reference often required authors to focus on these particular areas. Dr McKillop added that she does not feel that there is concern in respect of SBNI processes, but rather that clarification was being sought from the chief social worker on the recurrent themes in CMRs, for example, in relation to information sharing between agencies, and consideration of any more that can be done to improve this. The chair reported that the SBNI emphasised the 'no blame' culture adopted in the management of the CMR process, and that this is intended as a learning

process for agencies. The chair did point out that accountability for performance in child protection services across all agencies lies with the respective government departments. She also highlighted that the SBNI does not have a regulatory role.

Ms Preece emphasised that, whilst she accepts the concerns expressed, and agrees that it is vital to ensure emerging themes are adequately addressed and managed, it is important to note that, even with appropriate resourcing, it is not possible to stop every instance of harm to a child. She assured members that Trusts do share learning appropriately, and that measures are put in place to improve services.

Mr McCafferty added that he feels it is also important to focus on where the system does work effectively, and enquired as to whether any data is held in respect of child deaths and the number of children who are seriously harmed, to enable comparison with the UK, Republic of Ireland and internationally. The chair suggested that this would be data worth examining to give us a picture of where we are in comparison to other jurisdictions.

Dr Cassidy advised that he chairs the SBNI Child Protection Committee which was specifically set up to examine the wider area of child protection, as well as any recurrent themes and issues that arise in cases that are notified. Both Safeguarding Panel chairs now attend the Child Protection Committee to ensure that any issues raised are reflected within the local area Safeguarding Panels. In the Child Protection Committee, a standing agenda item allows the Assistant Directors in each of the Trust areas an opportunity to articulate some of the issues they are experiencing, as well as areas of good practice. He would hope that this committee will be able to identify any issues that need to be brought to the Board for consideration.

Mr Douglas reported that the child protection activity data indicates that, in the majority of cases, the system does work effectively. He advised that the number of children on the child protection register (CPR) who are deregistered because child protection issues have been resolved, is significantly higher than those

children who suffer significant harm or die whilst on the CPR. Dr Cassidy added that he feels it is important to also consider instances whereby a child is removed from the CPR, and then later reinstated on the CPR, and the reasons for this.

Mr McCafferty suggested that, anecdotally, he feels there may have been an increase in the number of Looked After Children (LAC) being notified through the CMR process. He indicated that this is entirely expected, given that the number of LAC has increased significantly over the past 15 years. It was agreed that this will be considered further.

**ACTION 1 – SBNI to consider if there has been an increase in CMR notifications in respect of Looked After Children (LAC).**

**3 68/25P SBNI Strategic Plan 2026-2030 process update (Please refer to Board Paper BM68-09.25P2)**

- 3.1 The chair advised that the SBNI is on track in its development of the SBNI Strategic Plan 2026-2030, and is working towards presenting the final Plan for approval at the Board meeting on 15 April 2026. The consultation with children and young people has now been undertaken by Barnardo's NI and a further public consultation will be undertaken from 10 December 2025 - 23 February 2026.
- 3.2 There were no further comments or queries in respect of the SBNI Strategic Plan 2026-2030.

**4 68/25P Trauma Informed Practice Transformation Bid (Please refer to Board Paper BM68-09.25P3)**

- 4.1 Mr Rogers advised that the SBNI Trauma Informed Practice (TIP) work is currently funded by the Executive Programme on Tackling Paramilitarism and Organised crime (EPPOC). EPPOC ceases to function in March 2027, therefore its funding of TIP will also end at this stage. However, the Executive has recognised the value and importance of taking a trauma informed approach across systems, operations and policy in Northern Ireland, as is referenced in the current Programme for Government. The SBNI has identified that there are

some limitations in its work on TIP, particularly as it is focused on operational work rather than on strategy and policy, and feel that this work needs to be expanded upon. Therefore, Mr Rogers advised that the SBNI has been working with EPPOC to submit an expression of interest to the Transformation Board in relation to TIP. This proposal was subsequently selected by the Department of Justice (DoJ) as one of its three applicant projects to go forward to submission of a transformation bid to the Transformation Board. The bid proposes to realise the long-term goal of a Trauma Informed Northern Ireland by creating a Trauma Informed Approaches (TIA) Delivery Team within the Northern Ireland Civil Service (NICS). Mr Rogers advised that the SBNI is cautiously optimistic, as the Programme for Government has been supportive of a wider TIA in government, as have Senior Officials and the Head of the NICS. Mr Rogers assured members that he will provide updates in respect of progress of the TIP transformation bid.

- 4.2 The chair commented that it is reassuring that the Head of the NICS is supportive of a TIA, and it would be an excellent opportunity if transformation funding could be secured.
- 4.3 Ms Preece enquired as to the costing associated with the bid. Mr Rogers advised that the TIP team estimate that costing would be around £6 million over the period of 3 years. This is a substantial increase on the funding currently provided by EPPOC, but is reflective of the increase in work provided, and takes into consideration that the programme will be extended widely across all government departments and agencies.
- 4.4 Ms Stewart advised that the Transformation Board is meeting on 22 September 2025. The Probation Board for Northern Ireland (PBNI) have also submitted a proposal, and her discussions with officials have been positive in respect of TIP.
- 4.5 The chair sought clarity as to whether the current SBNI TIP team would transfer over to the new TIA Delivery Team if successful in this bid. Mr Rogers advised that this would need to be considered, but would be the ideal outcome.

**5 68/25P Update on the Sudden Unexpected Death in Childhood (SUDIC) Protocol (Please refer to Board Paper BM68-09.25P4)**

- 5.1 The chair welcomed Ms Sinead Magill and Ms Lynsey Patterson to present an update on the Sudden Unexpected Death in Childhood (SUDIC) Protocol.
- 5.2 Ms Patterson delivered a PowerPoint presentation in respect of the SUDIC Protocol. By way of context, she advised that the PHA has a responsibility to protect and improve the social wellbeing of our population and reduce health inequalities, thus, understanding why children die is an important part of public health work, to prevent 'avoidable' deaths. Ms Patterson reported that, following a recommendation from the Jana CMR, the PHA was required to lead on the development of a regional SUDIC protocol, which was later broadened to include all child deaths. It was advised that there is very limited data in relation to SUDIC deaths in Northern Ireland, and so data has been sourced from England. This indicates that of 3,345 deaths reviewed by Child Death Overview Panels (CDOP), around 8% of these relate to SUDIC, and in Northern Ireland there is an estimated 30-40 SUDIC deaths per year. Of the SUDIC reviews undertaken in England, 75% were caused by modifiable factors. Ms Patterson explained that an interim Northern Ireland protocol has been operational since January 2024, and considers SUDIC deaths up to the age of 2 years, with a focus on the health response within Emergency Departments (ED). The aim of this interim Northern Ireland protocol is to ensure that the information from the child death review process is systematically captured to enable both local and national learning and to inform changes in policy and practice. In addition, the SUDIC Protocol enables highlighting of opportunities to improve the experience of bereaved families, as well as professionals, after the death of a child.
- 5.3 The chair thanked Ms Patterson and Ms Magill for an excellent presentation. She advised that this is an issue in which the SBNI has had an interest for a number of years, and is pleased that it is coming to fruition. The chair requested clarity as to whether the resourcing is available to allow implementation of the SUDIC Protocol in Northern Ireland. Ms Patterson advised that there is no additional funding available for implementation and this is a challenge. However, consideration is ongoing as to how the Protocol can be implemented

within current resourcing structures. The roles associated with SUDIC are not full-time roles, and consideration is being given as to whether these could be amalgamated with current roles. This will be further developed in the implementation stage. Ms Magill added that there are some elements of the protocol which the PHA feel are “quick wins” and can be implemented as soon as possible. The task and finish group, in respect of the SUDIC Protocol, is considering the implementation phase and is developing its next steps.

- 5.4 D/Superintendent Piper advised that she sits on the SUDIC Task and Finish Group. She commended the group for the hard work that has been undertaken, and advised that she is familiar with the protocol from her time working in England. It is an extremely beneficial mechanism, and she is supportive of its implementation in Northern Ireland, as the lack of a functioning Protocol is a recognised gap.
- 5.5 The chair commented that the development of a SUDIC Protocol in Northern Ireland highlights, again, that the lack of a CDOP is a gap. She stated that the use of English data being extrapolated for assistance with the development of a Northern Ireland Protocol is not ideal, and data from Northern Ireland should be held. Ms Magill agreed, but advised that the PHA does have its own data collection methods. However, this is not fully mandated by the DoH, and is not operationalised in the same way as it is in England. For this reason, the PHA is very reluctant to share its own data. However, this can be used in-house to recognise any trends and consequent messaging campaigns that may be required. Ms Magill further enquired as to whether the SBNI has received any response to correspondence it had sent to the DoH in relation to the implementation of a CDOP in Northern Ireland. She advised that the PHA has also sent correspondence to the DoH to stress the importance of its implementation. The chair advised that the SBNI continually raises the issue of a CDOP at the DoH/SBNI Accountability Meetings. At the last of these meetings, Ms Martina Moore was hopeful that there would be some movement, and the SBNI is awaiting an update. The chair assured members that the next DoH/SBNI Accountability Meeting will take place on 23 October, and CDOP is an agenda item for discussion.

- 5.6 The chair thanked Ms Magill and Ms Patterson for an informative presentation.

**ACTION 2 – Sudden Infant Death in Childhood (SUDIC) Protocol update presentation to be shared with members.**

**6 68/25P Education Authority Elective Home Education (EHE) (Please refer to Board Paper BM68-09.25P5)**

- 6.1 The chair welcomed Ms Nicola Topping to present on Elective Home Education (EHE).
- 6.2 Ms Topping delivered a PowerPoint presentation in respect of Elective Home Education (EHE). She advised that in Northern Ireland, each parent has a legal duty to ensure that their child receives an education. However, whilst education is compulsory for every child, attendance at school is not, and a number of parents have decided to educate their children outside of the school system. If a parent chooses to electively home educate, they will receive no funding, nor access to curriculums, resources or examination material. Furthermore, there is no requirement for parents to adhere to the national curriculum. In terms of legislation, Ms Topping noted that the lack of an agreed framework complicates the balance between a child's right to education (Article 45, Education and Libraries NI Order 1986) and a parent's right to choose the form of education (Article 2, Protocol 1 of the European Convention on Human Rights). The number of children who are electively home educated rose significantly in 2020, and has continued to rise consistently. Ms Topping reported that, as of the 15 April 2025, there are 1099 children in Northern Ireland who are electively home educated, compared with only 281 in 2014-2015. Furthermore, the Education Authority (EA) recognises that if a child has never been registered at a school, it is not aware that they are being electively home educated and so, it is estimated that this figure will be much higher and will continue to increase. There are several benefits to EHE, for example, the provision to make learning flexible and integrated with family life. In addition, there is no requirement to follow school hours or terms and, therefore, provision can be coherent and

purposeful. However, Ms Topping outlined a number of challenges which are also prevalent, particularly as there is no statutory guidance detailing what constitutes as a “suitable” education and there is also no mandate giving EA officers the power to enter homes or require evidence of education. Ms Topping reported that the EA has a virtual team comprised of officers with different professional backgrounds who support EHE alongside their full-time roles, but there is no additional funding provided by the Department for Education (DE), and the lack of staffing creates limitations for the operating model. In terms of safeguarding, Ms Topping assured members that the EA is very clear in its statutory safeguarding duties and will respond to all safeguarding concerns in line with these duties. In addition, it will ensure that information on vetting and local safeguarding contacts is provided to all parents. However, the issue arises when children are withdrawn from school or are never registered in education. In these instances, there are concerns that these children may become “invisible” to public services. As the EA has no legal mandate to routinely monitor EHE, it can only engage when it is notified of an educational concern.

- 6.3 The chair thanked Ms Topping for an informative and interesting presentation. She sought clarity as to whether the DE has any plans to amend the legislation. Ms Topping advised that the EA has recently submitted a paper to the DE to highlight the issues and challenges, and is awaiting a response.
- 6.4 D/Superintendent Piper enquired as to whether there are any figures available that would indicate whether children who are home educated are more or less likely to be subject to the child protection system. Ms Topping advised that the EA has very limited data, and whilst anecdotally she believes that the number of safeguarding concerns in respect of home educated children is increasing, there is no definitive data held in relation to this.

<b>ACTION 3 – EA Elective Home Education (EHE) presentation to be shared with members.</b>
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- 6.5 Mr Douglas advised that this issue has been raised at the Safeguarding Panels, and members were concerned from a child protection perspective. They felt

that clarity was required in respect of the point of contact for information gathering if professionals become involved with a home educated child and their family. In addition, Mr Douglas expressed concerns in respect of how paediatricians who see children with specific health needs, can ensure that these needs are met with home educated children, given that often their assessments are informed by observations within the school setting. Furthermore, there is an additional concern that children who are educated at home may miss out on health surveillance and access to immunisations provided within schools. Mr Douglas is particularly concerned about those children who have never been registered in education, and of whom very little may be known. The chair agreed, highlighting that any child protection system requires observation of children, and a lot of this observation occurs in the school setting with schools being one of the primary sources of referrals to Social Services.

- 6.6 Mr McCafferty enquired as to whether data is held in respect of the number of individual children who are electively home educated, in comparison to the number of families where several children may be home educated, as he suggested that this may help to understand the overall prevalence of the issue. In addition, he enquired as to whether data exists to indicate whether more children are home educated in rural or urban areas, as he is concerned that, in rural areas, families may be more isolated and there could be even less oversight on children. Ms Topping agreed to interrogate the data held to endeavour to extrapolate this information.

**ACTION 4 – EA to endeavour to obtain data in respect of the following:**

- **The number of ‘individual’ children who are home educated (HE); as opposed to children within ‘family groups’, who have elected to HE in respect of the 1099 referenced.**
- **The differentiation of the numbers of children who are home educated in rural as opposed to urban areas.**

- 6.7 Ms Whelehan enquired as to whether there is any mechanism to record the reasoning of parents who are removing their children from school. She highlighted that, if this data is not collected, it may be a missed opportunity to address potential failures in other parts of the system, and potential improvements that may be required. Ms Topping advised that this is not formally recorded given resourcing issues. However, if the EA is made aware by the school of the removal of a child and the reasons for this, this is recorded. She accepts that this is a recognised gap, and hopes that the paper submitted to the DE will go some way to helping to resolve some of the associated resourcing issues.
- 6.8 Ms Mason suggested that there may be value in utilising Operation Encompass, where police have attended an incident but no school referral has been made as the child is home-schooled. Ms Topping advised, if there are no issues around data sharing, she would be interested in considering this.
- 6.9 Dr McKillop enquired as to whether the EA has access to child health records, to better understand the number of school age children who are not registered in the education system. Ms Topping advised that she is unsure, and it is her understanding that, unless a child is registered in the education system at some point in their life, the EA will be unaware of the child.
- 6.10 Mr Guckian enquired as to whether Trusts, through the process of Child Protection Case Conferences, where education are in attendance, would have any information in respect of children who are electively home educated. The chair suggested that this could be brought to the Child Protection Committee for consideration.

**ACTION 5 – The Child Protection Committee, to consider whether Trusts, during the Child Protection Case Conference process, where education colleagues are in attendance, have any information in respect of children who are home educated.**

- 6.11 Ms Whelehan reported that the Children's Commissioners Office is undertaking a piece of research on children missing from education. She sits on its Research Advisory Group and feels that this presentation has been useful to inform this group.
- 6.12 The chair thanked Ms Topping for her attendance at the Board and for delivering an interesting and illuminating presentation.

### **7 68/25P Children's Reform Board Update**

- 7.1 The chair welcomed Ms Eilis McDaniel to present on the work of the Children's Reform Board.
- 7.2 Ms McDaniel advised that the Reform Programme has been operational since April 2023, and was established by the DoH in advance of the publication of the Review of Children's Social Care Services undertaken by Professor Ray Jones. The Senior Responsible Officer (SRO) in charge of the Reform Board is Mr Peter Toogood, Deputy Secretary, Social care and Public Health Policy within the DoH.
- 7.3 Ms McDaniel reported that, initially, the Reform Board established 9 workstreams to address the range of issues within the system, including waiting lists, residential care, foster care, children with a disability, reducing unnecessary bureaucracy, legislation, relationships with the voluntary/community sector, and family support. A number of the recommendations made within the Review of Children's Social Care Services were assigned to these workstreams for progression. Ms McDaniel reported that a lot of excellent work has been undertaken by these workstreams and a number of key products are now coming to fruition, with a Strategic Plan for Children's Residential Care developed, and soon to be published. Furthermore, Mr McCafferty chairs the workstream for Fostering, and a Strategic Plan will be produced for this area. Ms McDaniel further reported that work is ongoing in respect of workforce, and work has also been undertaken to develop a multiagency "front door" to services. The term "front door" refers to the initial point of contact for concerns about a child's safety and well-being.

- 7.4 The Reform Board is now in the process of resetting as, although it is a strategic programme, it does not yet have an overarching Strategic Plan. The Reform Board is in the process of developing a 5-year Strategic Plan, which identifies 5 key strategic priorities, with a number of 'strategic commitments' associated. In broad terms, Ms McDaniel explained that these strategic priorities are in relation to supporting families, improving services for children in care, supporting carers, valuing the workforce and developing sustainable systems. The plan has now been drafted, and is in the process of being finalised. A workshop was carried out in June 2025 in respect of the development of this Strategic Plan, and a further workshop was undertaken on 17 September 2025, which was exceedingly beneficial. Ms McDaniel highlighted that there is also a need to develop a Delivery Plan which will underpin the Strategic Plan, and clearly identify actions and who is responsible for these, as well as timelines for delivery. This work is underway.
- 7.5 Ms McDaniel advised that the plan going forward is to stand down the current 9 workstreams. Whilst it has not yet been decided what structure will be implemented in place of the workstreams, it was advised that the aim is to be more focused and as streamlined as possible.
- 7.6 Ms McDaniel further advised that in April 2025 the Reform Board submitted a family support transformation bid. This bid has the support, in principle, of both the DE and Department of Justice (DoJ). The bid is underpinned by the family support model which aims to ensure that provision and a family's access to services is as seamless as possible across the continuum of need. The bids are still being considered, with a meeting of the Transformation Board to be held later in September 2025. It is hoped that by October the Reform Board will receive a decision as to whether or not its bid has been successful.
- 7.7 Ms McDaniel reminded members that another recommendation, made by Professor Jones in his Review of Children's Social Care Services, was in relation to the development of an Arm's Length Body (ALB) for children's social care with the capacity to integrate other agencies' services. The Health and

Justice Ministers have now determined that they wish to pursue the establishment of an ALB that will incorporate children in care and justice services. This intention has now been conveyed to the Executive in a paper which was submitted on 08 September 2025. It is indicated, within this paper, that the Ministers for Health and Justice will now work together to identify the steps necessary to implement a Regional Children and Families Authority. There is further potential that this will be expanded to include education, as recommended by Professor Jones, and Ms McDaniel confirmed that DE will be included in the design of the new authority from the outset. In terms of the impact of the development of an ALB on the SBNI, Ms McDaniel advised that the statutory functions of the SBNI will not be affected. However, membership may be impacted as the SBNI would be working with one single authority as opposed to five separate Trusts, and membership may require that only this authority is represented. This may also have membership implications for other members of the SBNI such as YJA and EA. Work has commenced to set out the steps required to develop an ALB, although it is clear that this will not be completed in the current Assembly mandate, given the limited timeframe to operationalise.

- 7.8 The chair enquired as to the funding that has been requested as part of the transformation bid submitted by the Reform Board. Ms McDaniel advised that this is in the region of £57 million.
- 7.9 There were no further comments or queries in respect of the work of the Reform Board.
- 7.10 The chair thanked Ms McDaniel for attending the Board and for the thorough update provided.

**8 68/25P SBNI Declaration of Assurance Mid-Year Statement (Please refer to Board Paper BM68-09.25P6)**

- 8.1 The chair drew members attention to the SBNI Declaration of Assurance Mid-Year Statement which was circulated in advance of the meeting, noting that there were no divergences that required to be addressed.

8.2 There were no further comments or queries in respect of the SBNI Declaration of Assurance Mid-Year Statement.

8.3 The SBNI Declaration of Assurance Mid-Year Statement was approved.

**9 68/25P Risk Register – Management of Risk and Issues Update Report (Please refer to Board Paper BM68-09.25P7A, BM68-09.25P7B & BM68-09.25P7C)**

9.1 Mr Guckian reported that a new risk has been added to the Risk Register, in respect of the appointment of the Independent Chair and Non-Executive members. He explained that a delay in these public appointments could result in both the Independent Chair and two Non-Executive members of the Board not being in place, in line with the need for existing appointments, resulting in an inability for the Board to function as per its statutory duties and unable to fulfil its statutory objective. In terms of mitigation, Mr Guckian reported that the process to recruit an Independent Chair has now commenced, and the DoH is engaged with the Public Appointments Unit (PAU) in respect of the Non-Executive members. The chair added that an email was sent to members in relation to the appointment process of the Independent Chair. The closing date for applications was 16 September 2025, and it is proposed that interviews will be carried out in October 2025. However, this process requires Ministerial approval which can cause delays. There is, however, more of a risk associated with the appointment of Non-Executive members as these appointments end in February 2026. The chair further reported that appointment of a Safeguarding Panel Chair has not yet commenced, but Mr Douglas is bridging this gap on an interim basis.

9.2 There were no further comments or queries in relation to the Risk Register.

**10 68/25P Screens, Safety and Social Media Report QUB Launch (Please refer to Board Paper BM68-09.25P8)**

10.1 Ms McAllister advised that the Online Safety Coordinator is off work at present. Therefore, it was agreed that this agenda item will be carried forward to the next meeting of the SBNI Board on 03 December 2025.

**ACTION 6 – The presentation in respect of Screens, Safety and Social Media QUB to be considered at the December Board meeting.**

**11 68/25P SBNI Annual Report 2024-2025 (Please refer to Board Paper BM68-09.25P9A and BM68-09.25P9B)**

- 11.1 The chair drew members attention to the Microsoft Word version of the SBNI Annual Report which was circulated to members in advance of the meeting. She advised that all photographs, appendices and hyperlinks will be added when the report is sent to the publisher following members approval.
- 11.2 There were no further comments or queries in respect of the SBNI Annual Report 2024-2025
- 11.3 The SBNI Annual Report 2024-2025 was approved, with members asked to send any further comments they may have to Ms McCoy by 26 September 2025.

**ACTION 7 – Comments on the SBNI Annual Report to be sent to [Alex.McCoy@hscni.net](mailto:Alex.McCoy@hscni.net) by 26 September 2025.**

**12 68/25P Equality Update**

- **Equality Commission NI Annual Progress Report 2024-2025 (Please refer to Board Paper BM68-09.25P10A, BM68-09.25P10B, BM68-09.25P10C, BM68-09.25P10D & BM68-09.25P10E)**
- 12.1 The chair drew members attention to papers circulated to members in advance of the meeting. She highlighted that these are produced on an annual basis, and are commended to the Board for noting. The Equality Commission Northern Ireland (ECNI) Annual Progress Report 2024-2025 will now be sent to the Equality Unit for their review and feedback. The chair further thanked the SBNI Central Support Team (CST) for the hard work that goes into developing the ECNI Annual Progress Report.

BM68-09.25PM

12.2 There were no further comments or queries in respect of the ECNI Annual Progress Report 2024-2025.

**13 68/25P AOB**

13.1 There was no further business raised.

13.2 The chair closed the Public section of the meeting at 4.30pm and thanked members for their attendance.

**Bernie McNally**

**Independent Chair SBNI**