

# Consultation Response:

## Independent Review of Children's Social Care Services Consultation

November 2023



# Introduction

Nexus has almost 40 years' experience offering a specialised professional counselling service to people impacted by sexual abuse and abusive relationships. We can provide support to anyone impacted by sexual abuse from age 4 and upwards, availability of children's counselling depends on available funding. We currently also provide support services to adults who are age 18+, identify as male, and who have been impacted by abusive relationships (domestic abuse) as an adult or child. Our Early Intervention and Prevention Training team provide a range of bespoke training and workshops that are available to schools, workplaces, volunteer groups, higher education institutions, individual practitioners, community groups, sports teams, voluntary and charity groups, and businesses.

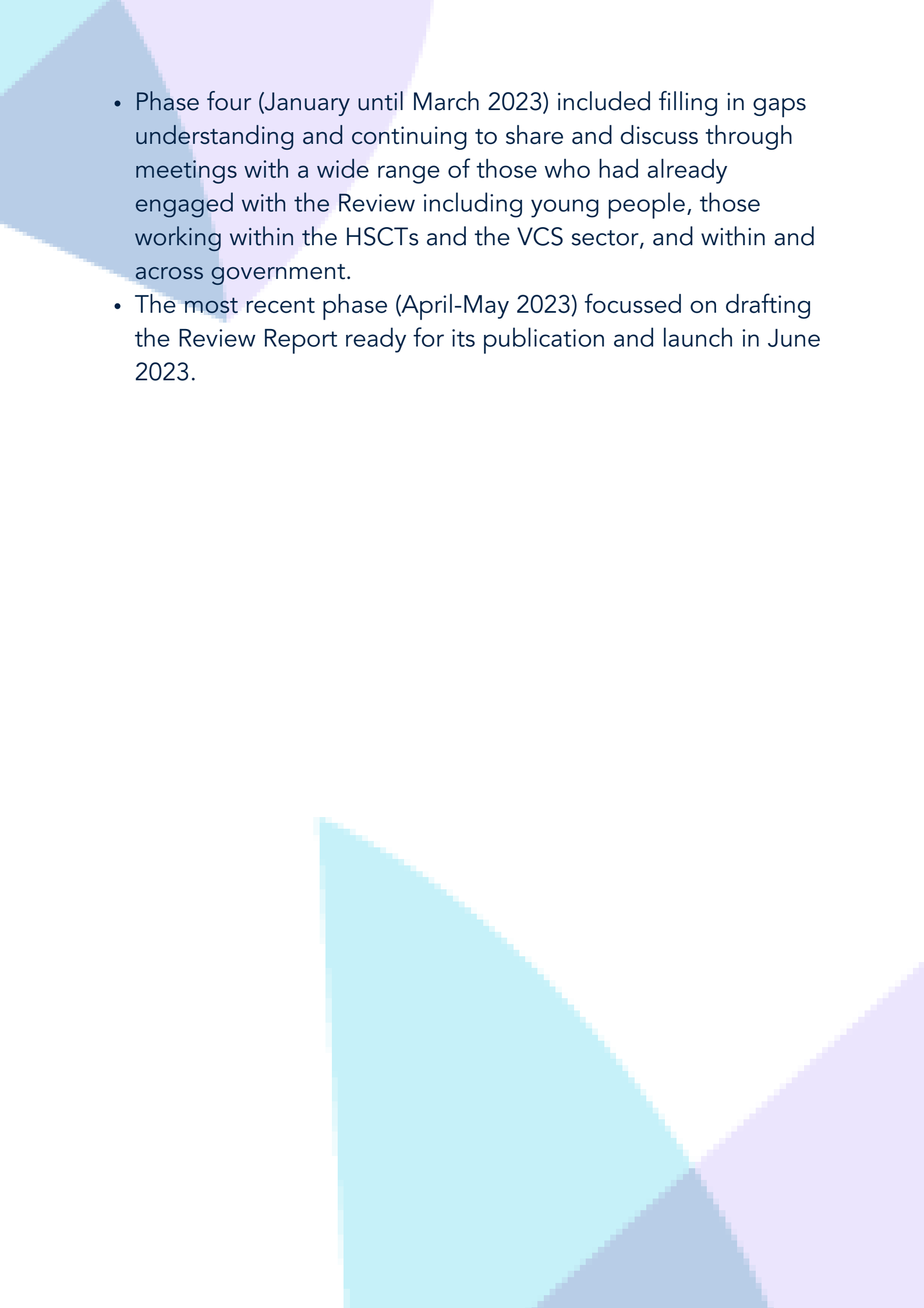
As providers of therapeutic intervention for children and young people impacted by sexual abuse and abusive relationships, Nexus welcomes this comprehensive review of Northern Ireland's Children's Services. Our organisation strongly believes in progressing best practise for the holistic care of children and young people, including system restructuring and evaluation in order to provide support for children, young people, and their families and support systems. Therefore, Nexus welcomes the opportunity to share our knowledge and learning through this Consultation exercise.

The following comments, suggestions, and questions are based on our expertise and experience supporting children, young people, and their families and carers through therapeutic interventions across Northern Ireland.

# Background

The review was formally commissioned by the then Minister for Health Robin Swann in 2021 to help understand the current circumstances and issues for Northern Ireland's children's social care services, and the experience of those who make use of, provide, and work in partnership with the services. The review was led by Professor Ray Jones as the Independent Reviewer, support by an Advisory Panel and a Secretariat from within the Department of Health. This Independent Review is the result of the following Phases:

- Phase One (February-April 2022) included meeting Northern Ireland's regional infrastructure organisations for children's social care, getting out and about across the region into each Health and Social Care Trust and meeting leaders, managers and practitioners, spending evenings in children's residential homes, and visiting regional children's residential facilities
- Phase two (May-July 2022) included meeting lots of children and young people and parents and other family members, foster carers, meeting with Voluntary and Community Services (VCS) and visiting their services and engaging with teachers, the police, public health workers, youth workers, judges, and others working with and alongside children's social care.
- Phase three (August and through Autumn 2022) included continuing visits to services across Northern Ireland, meeting with young people, parents, and practitioners and managers of services, visiting TUSLA, and drilling down into practice. Workshops with key stakeholders were held on the topic of children with a disability and their families; family support; looked after children; the social care workforce; and the organisation and delivery of children's social care.

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- Phase four (January until March 2023) included filling in gaps understanding and continuing to share and discuss through meetings with a wide range of those who had already engaged with the Review including young people, those working within the HSCTs and the VCS sector, and within and across government.
  - The most recent phase (April-May 2023) focussed on drafting the Review Report ready for its publication and launch in June 2023.

# Chapter 1 Summary

This group of recommendations have been categorised as Guiding Principles. They are intended to provide a general steer on how implementation of the Review's recommendations should proceed; one is specific to foster care. There are a total of 8 recommendations in this group as follows: Recommendations 1, 4, 5, 6, 26, 29, 50, 51.

## **Nexus Response:**

We would stress that the Guiding Principles include a commitment to developing partnerships, increasing collaboration, and support co-design measures with a range of stakeholders in order to ensure a cultural, as well as practical, shift towards a community-based, accessible, and destigmatising approach to Children's Services that emphasises the wellbeing of children and young people and works together with caregivers, families, and the wider support network to find solutions that promote safety and security for children.

In accepting and implementing these guiding principles the following matters are integral:

- Article 3 UNCRC and 'best interests' principle.
- Timely provision of appropriate early interventions to effectively support families.
- Inclusive policies, processes and services that effectively consider the needs of all section 75 groups (equality impact screening should be mandated when reviewing and/or implementing policies, processes and services).
- Partnership, collaboration and co-design should underpin the change process and ensure the voices of those with lived experience is central.
- Monitoring and reporting on outcomes to ensure progress is tracked and learning cascaded.

# Chapter 2 Summary

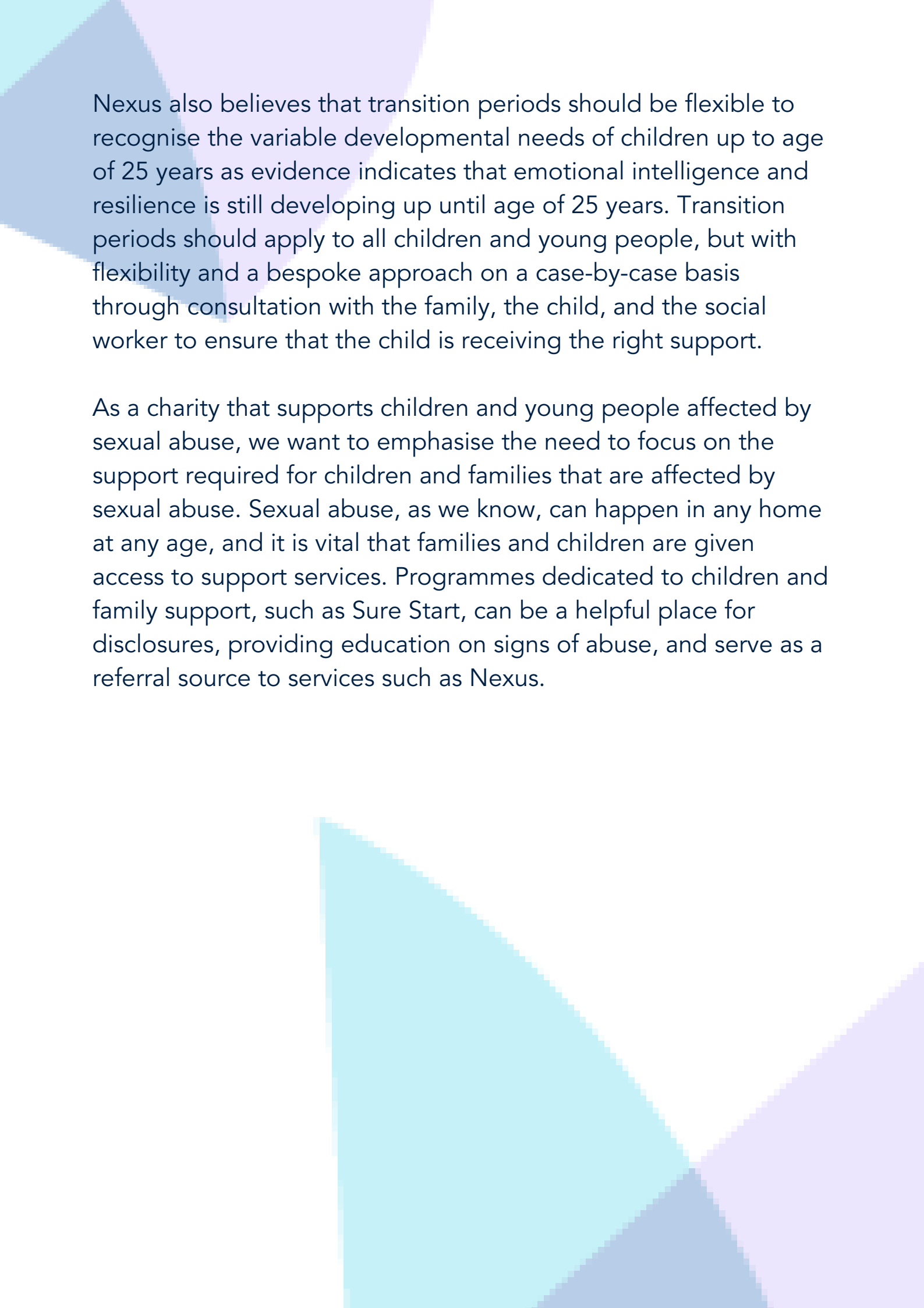
This group of recommendations is intended to deliver more effective social care services for children and families in Northern Ireland. There are 18 recommendations in this group, as follows: Recommendations 2, 22, 23, 25, 27, 28, 31, 32, 33, 34, 35, 36, 37, 42, 43, 44, 49.

## **Nexus Response:**

Children and young people achieve better outcomes when living in safe and caring environments. Family support is integral to the wellbeing of children and therefore requires significant review and investment.

Specifically, there needs to be investment in quality, evidenced based, early support interventions. This will help to ensure families are adequately supported so they can thrive and prevent crisis services becoming overwhelmed resulting in stagnated care and a loss of focus on the family dynamics.

Therefore, it is our position that Sure Start programmes should be accessible to all families as all families regardless of status need support. This is an invaluable early intervention support that all children and their families should benefit from. A new child can bring challenges for anyone, despite their postcode and it's important that families have access to open and assessable support and information when they need it. Expansion of Sure Start programmes would reach more children and families who live in rural areas, isolated areas, and areas of social and economic deprivation. Any expansion of family support services should be co-designed with key stakeholders and take into consideration learning from existing approaches as well as from best practice approaches offered in other jurisdictions.



Nexus also believes that transition periods should be flexible to recognise the variable developmental needs of children up to age of 25 years as evidence indicates that emotional intelligence and resilience is still developing up until age of 25 years. Transition periods should apply to all children and young people, but with flexibility and a bespoke approach on a case-by-case basis through consultation with the family, the child, and the social worker to ensure that the child is receiving the right support.

As a charity that supports children and young people affected by sexual abuse, we want to emphasise the need to focus on the support required for children and families that are affected by sexual abuse. Sexual abuse, as we know, can happen in any home at any age, and it is vital that families and children are given access to support services. Programmes dedicated to children and family support, such as Sure Start, can be a helpful place for disclosures, providing education on signs of abuse, and serve as a referral source to services such as Nexus.

# Chapter 3 Summary

This group of recommendations is intended to deliver organisational arrangements which are focussed on children and young people at all levels, from the Department of Health through to front-line children's social care services. There are 17 recommendations in total in this group as follows:

Recommendations 7, 12, 13, 14, 15, 16, 18, 19, 24, 38, 39, 40, 41, 45, 46, 47, 48.

## **Nexus Response:**

We would like to see an in-depth proposal for funding of a new ALB as well as the proposed Ministerial post; our main concern is whether or not funding will be redirected away from the current service delivery, which would only further hinder the work of these service. We also believe that there must be a clear remit of the ALB to ensure that this doesn't contribute to more siloed workings given that children's lives are already affected by issues dealt with across multiple departments. Further information needs to be provided on the services that will be incorporated into the ALB and those that will sit outside of it and how these will interface to avoid duplication of effort, maximise partnership working, allow safe information sharing to ensure the interests of children and their families are prioritised by all.

Nexus agrees with Recommendation 16 on the further development and deployment of multi-professional and multi-agency frontline teams to support collaborative working in the best interest of children, young people and their families. In order to provide comprehensive care, frontline teams should include professionals from both statutory and VCS organisations and from across all disciplines of health and social care, education, advocacy and guidance, justice and legal.



By having local, community-based teams, there is the opportunity to build relationships with the local early year providers, schools, primary health care services, VCS organisations, etc in order to reduce fragmentation, confusion, and instead promote a more seamless transition for children and families.

We would like to draw attention to lack of reference to the provision of specialist support services that support children, young people and their families to recover from adverse childhood experiences such as sexual abuse.

The Barnahus model originated in Iceland in 1998 and has been implemented across Europe as a 'one-door' system where children and young people who have been sexually abused can receive all the necessary support in one location that has been specifically designed to create a safe, supportive, and welcoming environment for children and their families. The NICCY report titled "Putting the Child at the Centre – Barnahus (Children's House) – a one door approach to supporting children who have been sexually abused in Northern Ireland" ([link](#)) provides further detail on the design, implementation, and recommendations for creating and supporting the child-friendly model that has been championed by the Council of Europe and the UN Committee on the Rights of the Child.

These services are not currently funded by central government and yet are integral to supporting children, young people and their families to process and recover from such experiences. When left unprocessed trauma becomes complex and entrenched and results in significant mental and physical health difficulties being experienced, which then often require acute treatment and support services.

# Chapter 4 Summary

This group of recommendations is intended to address the workforce challenges within children's social care services, particularly in relation to the recruitment and retention of staff. There are a total of 8 recommendations in this group as follows: Recommendations 3, 8, 9, 10, 11, 17, 20, 21.

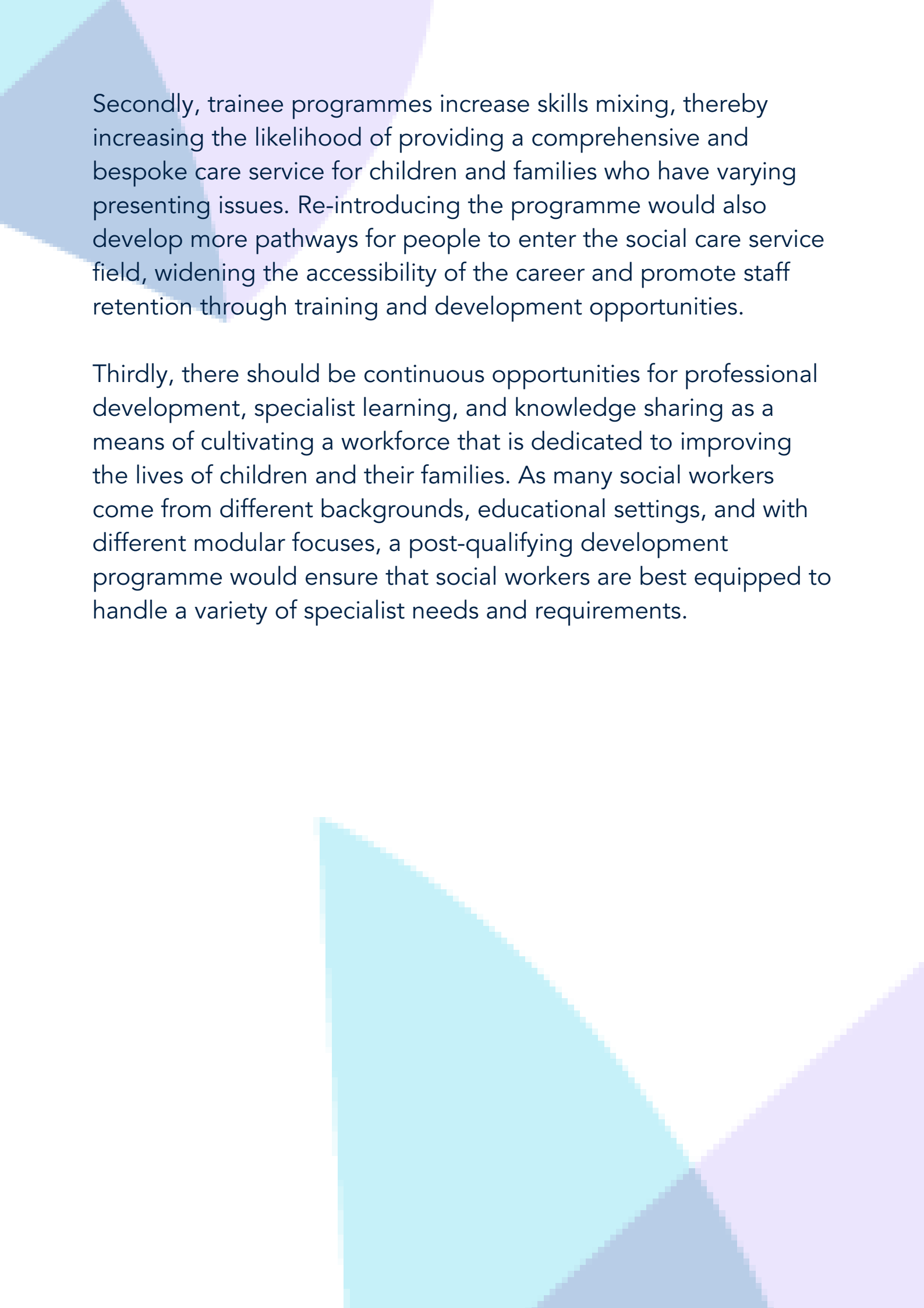
## **Nexus Response:**

Firstly, We would like to highlight the role of VCS organisations in the children's social care workforce. Community and voluntary staff and volunteers have worked hard to support statutory services despite their limited budgets and nonprofit model. As a charity, we are acutely aware of the struggles of statutory services but also the work that charities have done to plug the gaps and provide services locally and directly.

At its core, the current relationship between statutory funders of services and VCS sector is transactional with little recognition given to the quality, expertise and skills that VSC organisations deliver. A new approach needs to be underpinned by guiding principles of partnership and collaboration. In addition, it needs to be recognised that annual contracts prohibit VCS organisations to deliver consistent levels of service and retain the expertise of staff. Nexus welcomes the reviews findings that:

“The impact in April 2023 of no Executive to set budgets has been widely reported, with its clear and dramatic consequences” (Review Report, para 17.5).

“VCS contracts should be for no less than three years but with the norm being five years” (Review Report, para 17.11).



Secondly, trainee programmes increase skills mixing, thereby increasing the likelihood of providing a comprehensive and bespoke care service for children and families who have varying presenting issues. Re-introducing the programme would also develop more pathways for people to enter the social care service field, widening the accessibility of the career and promote staff retention through training and development opportunities.

Thirdly, there should be continuous opportunities for professional development, specialist learning, and knowledge sharing as a means of cultivating a workforce that is dedicated to improving the lives of children and their families. As many social workers come from different backgrounds, educational settings, and with different modular focuses, a post-qualifying development programme would ensure that social workers are best equipped to handle a variety of specialist needs and requirements.

# Chapter 5 Summary

In making the recommendations, Professor Jones placed a strong emphasis on implementation by setting a specific timetable for decision-making and framing recommendations around the need for pace. He was also concerned that children and families continued to have a voice in implementation in keeping with the process of the Review. There are two report recommendations which have been categorised as 'making and tracking progress'- Recommendations 52 and 53. Views are being sought on recommendation 53 only.

## **Nexus Response:**

Nexus agrees with the recommendation to host a conference in Autumn 2024 that emphasises the voices and experiences of children, young people, and their support networks in order to provide valuable insight, track progress, and feedback on support services.

# Conclusion

We would like to see a further commitment to developing partnerships with VCS organisations as part of a strategy to engage with local communities and strengthen already existing support mechanisms. As a charity, we value the support and input from our volunteers, community partners, and fellow charity organisations that work across Northern Ireland, and we believe that the network of groups of experts and service users is a vital forum for discussing new projects, evaluating current work, and progressing awareness and support.

As an organisation that provides training and workshop opportunities to a wide range of sectors, we emphasise the need for increased avenues for developing career pathways and continuous learning opportunities. As noted in our submission, burnout and financial burdens are barriers to cultivating a supported and incentivised workforce, which is why we would like to see a strong commitment to supporting not only the pre-existing workforce, but also the students and trainees who are on their professional journey or are considering a career in Children's Services.

Most notably, there was an absence of discussion around implementing a Barnahus Model in Northern Ireland to support children who have been sexually abused. Sir John Gillen, in his 2018 Report on into the law and procedures in serious sexual offences in NI, recommended that "the Department of Justice should give serious consideration to introducing the Barnahus system of child investigation and treatment" (Rec. 12, pg. 30, [link](#)). We would like to see this model given serious consideration by the Department of Health and Department of Justice in partnership with children's rights agencies, specialist sexual abuse organisations, and charities who have long supported children and young people impacted by sexual abuse and abusive relationships.

# Further Information



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