

NICCY Summary: NI Assembly Written Answers for Week Ending 7th March 2014

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Financially Supported Childcare Places

Mr Agnew asked the First Minister and deputy First Minister for their assessment of

- (i) the total number of financially supported childcare places that are required locally;
- (ii) the number of places that the Government is currently supporting;
- (iii) a forecast of the number that will be required locally in each of the next 3 years; and
- (iv) to detail the number of places that they intend to support in each of the next 3 years.

(AQW 29505/11-15)

Mr P Robinson and Mr M McGuinness:

(i) The number of financially supported childcare places required locally will vary at any given time as it is affected by a range of factors including employment levels, the availability of registered childcare services, and the affordability of childcare services. We have therefore not estimated the number of financially supported childcare places required. Instead, research to date has focused on identifying the types of childcare services where more provision is required and the barriers to using childcare services.

- (ii) At present, Government mainly supports registered childcare places indirectly by
- (a) financially assisting parents to purchase childcare services, eg through the childcare element of Working Tax Credit or
 - (b) by financially assisting childcare providers to sustain their services.

Health and Social Care Trusts fund a number of childcare places for children in need within their locality. The length of time a Trust may fund such a place can vary from a matter of days up to a year. In the year ending 31 March 2013, 765 places were funded by Health and Social Care Trusts in day care facilities.

(iii) We have not estimated the number of places that might be required locally in each of the next 3 years. However, we have identified rural childcare services and school age childcare as categories where additional provision is required. On account of this, the Bright Start key first actions aim to sustain existing school age childcare places, create new school age childcare provision (including in rural areas) and increase childminding provision in rural areas.

(iv) Over a three and a half year period beginning 2014/15, the key first actions of the first phase of the Bright Start Childcare Strategy aim to sustain or create up to 8,000 registered childcare places, the majority of which (up to 7,000) will be school age childcare places. These key first actions and their performance will be kept under review and adapted or extended based on evidence of need. Additional actions will also be considered.

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Equality Legislation for Older People

Mr McKinney asked the First Minister and deputy First Minister for an update on equality legislation for older people.

(AQW 31259/11-15)

Mr P Robinson and Mr M McGuinness: We are currently considering the scope of the legislation and the implications of the various options available to us for taking this forward.

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EU School Milk Subsidy Scheme

Mrs Dobson asked the Minister of Agriculture and Rural Development for her assessment of the EU School Milk Subsidy Scheme.

(AQW 31027/11-15)

Mrs O'Neill: The EU School Milk Subsidy Scheme aims to encourage the consumption of dairy products by making them available to school children at a reduced cost. I welcome this because milk and dairy products are an excellent source of nutrients. I also believe that it is good for children to develop sound eating habits at an early age. That is why, in addition to the mandatory EU subsidy, we also provide a national top-up subsidy from the Executive's budget to help reduce the cost for participating children. In 2012/13 the total EU and national subsidy paid was £319k. I am pleased that this Scheme is available to all school children in the north of Ireland. Each of our five Education and Library Boards participates in delivery of the Scheme and as a result there is a good level of uptake by nursery, primary and special schools. Also, the delivery arrangements are efficient and economical which helps to keep these costs low. Currently pupils in the north enjoy the provision of milk at a cost of 18.8 pence per one-third pint serving compared to the 25 pence per serving charge in Britain, where Cool Milk provides a delivery service for this

Scheme (charge quoted on their website).

Whilst I would like to see every school and every parent of a child at school availing of the benefits of the Scheme, I believe that the information provided above demonstrates that the Scheme is meeting its objectives within the budget available. Also, in view of the promotional activities of the Dairy Council in the north in recent years I would have hoped that even more children would participate but, as you will appreciate, many families and children are facing challenging times.

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Special Educational Needs System

Mr A Maginness asked the Minister of Education what plans he has to revise the special educational needs system so that it retains clear and enforceable rights for children and their parents.

(AQW 31560/11-15)

Mr O’Dowd: Proposals for a revised Special Educational Needs (SEN) policy and the drafting of a SEN Bill were agreed by the Executive in July 2012. The revised SEN framework aims to strengthen the system and end delay in intervention and assessment through a comprehensive range of measures. This includes retaining, and building upon, the existing rights afforded to parents and children. The existing rights of a parent include: to request a statutory assessment of their child’s needs; and a right of appeal to Special Educational Needs and Disability Tribunal (SENDIST) about matters within the SEN framework.

The revised SEN framework proposes greater rights which include:

- a new statutory duty on Boards of Governors to ensure that Personal Learning Plans (PLPs) are put in place for all SEN children in grant-aided schools and a requirement that PLPs would be reviewed regularly in discussion with the parent against the child’s progress and outcomes realised;
- reducing the time frame for statutory assessment from 26 weeks to 20 weeks;
- a new requirement for Boards to set out clearly the range of supports and services they would ordinarily make available to schools, to assist them to support pupils, and to SEN pupils themselves; and

- a revised statutory code emphasising the wider educational rights of the child, including those within the context of the United Nations Convention on the Rights of the Child.

I have also considered a number of associated policy areas including redress for parents, a right of appeal for children and young people to SENDIST and access to mediation. This has been informed by matters raised during the consultation processes within the SEN and Inclusion Review and also by work in other jurisdictions. Once I have finalised my further proposals I intend to present them to my Executive colleagues.

A Summary of Key Policy Areas, published in July 2012, is available on the DE web site:- http://www.deni.gov.uk/summary_of_key_proposals_july_2012.pdf

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Training for Teachers of Children with Autism

Mr A Maginness asked the Minister of Education what steps his Department has in place to ensure that all teachers and classroom assistants who regularly work with children with autism have the appropriate training.

(AQW 31561/11-15)

Mr O'Dowd: The education and library boards (ELBs) are responsible for providing autism-specific training in schools and all boards deliver a range of autism-specific training for school staff. ELBs undertake a needs analysis, on an annual basis, of the training required by schools for the forthcoming academic year. School principals are responsible for determining the training needs of their teachers and school staff and they can avail of the wide range of courses on all aspects of special educational needs, including autism, offered by Boards. In addition, the Middletown Centre for Autism provides a comprehensive range of training opportunities for those supporting children with autistic spectrum disorders (ASDs) across all schools. The training provided by the Centre is tailored to the needs of educational professionals and school staff. A range of sessions are specifically designed to the needs of staff in mainstream schools. In partnership with the inter-board ASD teams, the Centre also provides tailored whole school training for schools upon request.

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Education Bill

Mr Hussey asked the Minister of Education for an update on the progress of the Education Bill.

(AQO 5686/11-15)

Mr O'Dowd: The Education Bill cannot advance to Consideration Stage without the agreement of the Executive. This remains outstanding. In seeking to reach an accommodation I have proposed a number of amendments, in particular measures that will retain and develop school autonomy in employment matters. Without agreement, however, I must soon commit to, and invest in, an alternative future. In particular, local government reform may force the issue as I must have in place by April 2015 new legislation supporting a reconfiguration of Education and Library Board (ELB) territory – simply to align with local government reform.

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Schools: Area Planning

Mr Swann asked the Minister of Education, in relation to the development plans of neighbouring schools under Area Planning, whether he will ensure that no action is taken until all the development plans for schools in that area are completed.

(AQO 5680/11-15)

Mr O'Dowd: Area Planning is about developing a single strategic area plan for each Board area. All the school managing authorities must work together to develop the area plan. The area plan should clearly articulate what is needed in an area and how this will be delivered. Where it is identified that change is needed then development proposals should be consulted upon and published.

I have already outlined in my statement to the Assembly on the East Belfast Proposals on 14 January that area planning is complex and multifaceted, and requires co-ordination, discussion and pragmatism. I have said that planning authorities need to bring forward inter-related and linked proposals that clearly set out for all concerned the overall proposals for any given area. I will therefore expect to see proposals for an area being brought forward simultaneously.

I have already taken difficult decisions and I am sure there will be others. In each case my focus will be on what is best for the young people of the area. When I am not convinced that proposals will deliver high quality sustainable schools then I will require more work to be done.

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Playground Name

Mr Allister asked the Minister of the Environment to outline the steps he has taken following the Equality Commission's finding that Newry and Mourne District Council breached its equality commitments when they named a children's playground after an IRA terrorist.

(AQO 5707/11-15)

Mr Durkan: I should explain that in this matter district councils are independent of central government and are accountable to their local electorate and ratepayers. They are also directly answerable to the Equality Commission in respect of their Section 75 Duties. Under Section 75 of the NI Act 1998, all designated public authorities, including district councils, when carrying out their functions in Northern Ireland, must have due regard to the need to promote equality of opportunity between certain specified individuals and groups, and should encourage and promote good relations within these sectors, regardless of their religious or political persuasion.

The Equality Commission has advised that presently its consideration of the matter referred to is not yet complete. A draft report has been sent to Newry and Mourne District Council for its comments. The Commission will then consider those points before finalising its investigation. If, following the conclusion of this investigation, the Commission's report outlines a failure by Newry and Mourne District Council to comply with the commitments in its approved Equality Scheme, the Commission can make recommendations to the Council for actions to address the matter. If these recommended actions are not taken within a reasonable time, the Commission may refer the matter to the Secretary of State who may give directions to the Council concerned. When taking this step, the Commission shall also notify the Assembly in writing. The relevant law is contained in paragraph 11 of Schedule 9 of the Northern Ireland Act 1998. Since there is an existing legislative process for the handling of such matters, it would be inappropriate for me, as Minister of the Environment, to intervene.

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Free School Meals: Capital Funding Received by the Northern Ireland Executive

Mr Flanagan asked the Minister of Finance and Personnel how much in total revenue and capital funding will the Northern Executive receive over the next two years, 2014-2016, as a result of Barnett Consequentials from the British Government's policy on free school meals for all infants.

(AQW 31466/11-15)

Mr Hamilton: As a result of the Free School Meals policy announcement in Whitehall, Northern Ireland received a Barnett share amounting to £36.0 million Resource DEL and £2.3 million Capital DEL over the period 2014-2016. This allocation is unhypothecated, which means it is for the Executive to decide how this funding should be allocated in line with local needs and priorities.

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Children: Elective Cardiac Procedures

Mrs Dobson asked the Minister of Health, Social Services and Public Safety whether a child who has previously received elective cardiac procedures in Belfast, and is then sent for treatment to a hospital in England, must then treat the hospital in England as their primary centre of care.

(AQW 31084/11-15)

Mr Poots: A child who has previously received elective cardiac procedures in Belfast and later requires to be transferred to England for paediatric cardiac surgery will, following their surgical recovery, be transferred to Belfast under the care of the Paediatric Cardiologist in the Royal Belfast Hospital for Sick Children (RBHSC). The child's ongoing cardiology care will be provided by the paediatric cardiology service based at RBHSC; this would be the child's primary centre of care. Some children who may require further cardiac surgery will return to the hospital in England where their previous surgery took place, as is clinically appropriate or necessary.

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Paediatric Cardiac Surgery

Mrs Dobson asked the Minister of Health, Social Services and Public Safety to detail any service level agreements which exist between his Department and health departments in other jurisdictions on children's paediatric cardiac surgery.

(AQW 31087/11-15)

Mr Poots: The Health and Social Care Board and Belfast Health and Social Care Trust have been working with health service management and clinicians in the Republic of Ireland and England to ensure that appropriate arrangements are in place to provide support to children's cardiac services in Northern Ireland. Significant progress has been made with regard to the development of Service Level Agreement (SLA) documentation to support the interim arrangements during the period when the expert assessment announced by me on 9 December 2013 is underway. The current position in regard to the three SLAs is as follows:

- An SLA between Belfast Health and Social Care Trust and Our Lady's Children's Hospital, Crumlin, for supporting elective services in Belfast, has been signed off by all parties.
- An SLA between the Health and Social Care Board and Our Lady's Children's Hospital, Crumlin for emergency cases to be undertaken in Dublin, has been agreed by all parties and forwarded to colleagues in Dublin for signature.
- An SLA between the Health and Social Care Board and Evelina Children's Hospital London, for elective and relevant urgent cases, has been signed off by all parties.

A separate SLA is in place with Birmingham Children's Hospital for a range of paediatric services for children from Northern Ireland (including paediatric cardiac surgery). This SLA covers the period to the end of March 2014. The Health and Social Care Board has had separate discussions with Birmingham Children's Hospital regarding a specific SLA for paediatric cardiac surgery and interventional cardiology services provided for children from Northern Ireland. The Board expects this SLA to be finalised over the coming weeks.

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Children Receiving Health Service Funded Specialist Care

Mr Brady asked the Minister of Health, Social Services and Public Safety to detail the number of local children receiving Health Service funded specialist care for

- (i) mental health issues;
- (ii) a learning disability; and
- (iii) brain injury, in another jurisdiction in 2012/13 in a
 - (a) hospital;
 - (b) community; and
 - (c) residential setting.

(AQW 31136/11-15)

Mr Poots: Table 1 below contains the number of local children receiving Health Service funded specialist care for mental health issues, learning disability and brain injury in another jurisdiction during 2012/13 in either a hospital, community or residential setting.

Table 1

	Hospital	Community	Residential
Mental Health Issues/Learning Disability	5	0	8
Brain Injury	0	0	0
Total	5	0	8

Source: These figures have been provided by the Health and Social Care Board and have not been verified by DHSSPS.

Note: Residential setting includes both Specialist Residential Placements and Specialist Residential School Placements

Note: Figures include some patients that had been admitted prior to 2012/13 and who had remained within their placement during 2012/13. It also includes admissions during the financial year.

Note: Figures also include placements for patients who were admitted during 2012/13 and had funding retrospectively approved during 2013/14.

Note: Due to small numbers and issues of personal disclosure the Mental Health and Learning Disabilities categories have been merged.

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Young People: Consumption of Drugs

Mr Craig asked the Minister of Health, Social Services and Public Safety how many young people of post-primary school age have been admitted to hospitals with illnesses caused by the consumption of drugs, in each of the last three years.

(AQW 31202/11-15)

Mr Poots: Information is provided below on the number of young people of post-primary school age who have been admitted to HSC Hospitals in Northern Ireland with a primary diagnosis of a drug-related condition. Young people of post-primary school age have been defined as those aged 11 to 18 years, inclusive.

Financial Year	Individuals admitted
2010/11	38
2011/12	19
2012/13	19

Source: Hospital Inpatient System

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Vulnerable People in Care and Residential Homes

Lord Morrow asked the Minister of Health, Social Services and Public Safety, in relation to working with vulnerable people in care and residential homes,

- (i) what safeguarding clearance checks are carried out on care staff who do not hold an accreditation or qualification for the specific environment;
- (ii) whether this check requires a declaration from applicants to state any previous convictions or court issues;
- (iii) when was the current safeguarding policy first put in place;
- (iv) when it was last reviewed; and
- (v) whether this policy is universally adopted by the Health and Social Care Trusts, or is each Trust responsible for its own policy.

(AQW 31325/11-15)

Mr Poots:

(i) Legislation requires those employing staff in a residential home or nursing home to carry out a number of checks, irrespective of what qualifications they hold, to ensure, as far as possible, that they are suitable to work with vulnerable adults. These include, an enhanced criminal record check, proof of identity, written references, verification of why any previous employment with vulnerable adults or children ended, details and evidence of relevant qualifications or accredited training, a full employment history and evidence that the person is physically and mentally fit for the work they will be engaged in. In addition, under the Safeguarding Vulnerable Groups (Northern Ireland) Order 2007 it is an offence for an employer to knowingly engage a barred person to work in regulated activity with vulnerable adults.

(ii) The Minimum Standards for Residential Care Homes and the Minimum Standards for Nursing Homes require care homes and nursing homes to comply with my Department's guidance in relation to the recruitment of staff. My Department also commissioned and supported the development of standards and guidance in relation to safeguarding vulnerable adults ('Safeguarding Vulnerable Adults – A Shared Responsibility') for use by organisations across the voluntary, community and independent sectors. Standard 2 is specifically relevant to the recruitment of staff and volunteers. The criteria for meeting the standard includes that all applicants should be asked to sign a declaration and consent form and declare any past (including 'spent') criminal convictions, cautions and bind-over orders and cases pending against them.

(iii) Current residential care homes regulations and nursing home regulations were made in 2005. The Safeguarding Vulnerable Groups (Northern Ireland) Order was made in 2007. The Minimum Standards for Residential Care Homes were published in February 2008, the Minimum Standards for Nursing Homes in January 2008 and Safeguarding Vulnerable Adults – A Shared Responsibility was published in 2010.

(iv) The Minimum Standards for Residential Care Homes were updated in August 2011. The vetting and barring scheme under the Safeguarding Vulnerable Groups (Northern Ireland) Order 2007 was reviewed in 2010 and replaced by new disclosure and barring arrangements introduced by changes to the Safeguarding Vulnerable Groups (Northern Ireland) Order 2007 by the Protection of Freedoms Act 2012. Safeguarding Vulnerable Adults – A Shared Responsibility was updated in August 2013.

(v) The legislation and minimum standards apply to all nursing homes and residential care homes, including those run by Health and Social Care Trusts. Provisions under the Safeguarding Vulnerable Groups (Northern Ireland) Order 2007 apply to the Trusts where they are engaging individuals to work in regulated activity and the Order also makes provisions that apply to Trusts as Health and Social Care Bodies, including a power to refer to the Disclosure and Barring Service information where it thinks that a person has committed an offence, engaged in conduct or may engage in conduct likely to harm a child or vulnerable adult. 'Safeguarding Vulnerable Adults – A Shared Responsibility' was developed in consultation with the Trusts.

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Child Mortality Rates

Mr Copeland asked the Minister of Health, Social Services and Public Safety for his assessment of child mortality rates compared with

- (i) the Republic of Ireland;
- (ii) England;
- (iii) Scotland;
- (iv) Wales; and
- (v) Europe.

(AQW 31396/11-15)

Mr Poots: Comparison of child mortality rates across Europe based on the World Health Organisation data shows that for children from birth to 15th birthday mortality rates range from England with 23 deaths/100,000 population aged 0-14 to Ukraine with 101 deaths/100,000 population aged 0-14. Northern Ireland has a child mortality rate from birth to 15th birthday of 36.7 per 100,000. This is similar to Scotland at 36.3 and The Republic of Ireland at 38.5 but higher than England at 23 and Wales at 22.2.

The recent overview of child deaths in the four UK countries showed that overall child deaths had reduced by between 50% and 70% from 1980 to 2010. While deaths in Northern Ireland have decreased during this time the rate of deaths including injury related deaths here is higher than in England. My Department continues to work to reduce child death including the development of the current consultation on paediatric services and strategies to reduce suicides and home accidents including cord blind related deaths in young children.

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Family Proceedings Case Involving the Placement of Children

Mr Weir asked the Minister of Justice to detail why issues of domestic and sexual violence are not investigated and resolved at the start of a family proceedings case involving the placement of children.

(AQW 31093/11-15)

Mr Ford: The conduct of a family proceedings case is a matter for the presiding Judge and it would not be appropriate for me to comment. However, I understand that the application process under the Children (Northern Ireland) Order provides the opportunity for either party or their legal representatives to raise any such issues at the earliest possible stage.

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Children (Northern Ireland) Order 1995

Mr Weir asked the Minister of Justice how the recommendations made by the Family Justice Council (2007), in relation to the Children (Northern Ireland) Order 1995, influence judicial decisions in family proceedings.

(AQW 31098/11-15)

Mr Ford: I cannot comment on how judges arrive at their decisions. The Children Order Advisory Committee (COAC) provides a similar role to the Family Justice Council in England and Wales. Guidance on child contact and residence cases involving domestic violence is included in COAC's best practice guidance. The Children (Northern Ireland) Order 1995 requires family courts to ensure that the welfare of the child is the paramount consideration.

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Children Order Advisory Committee

Mr Weir asked the Minister of Justice what status the guidelines from the Children Order Advisory Committee have in family proceedings decisions.

(AQW 31168/11-15)

Mr Ford: The Judiciary have access to the Children Order Advisory Committee Best Practice Guidance and may take account of it. However, it is not legally binding.

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Child Maintenance Charging

Mr Cree asked the Minister for Social Development to outline the current position on child maintenance charging; and whether any changes are planned.

(AQW 31387/11-15)

Mr McCausland: Child Maintenance fees are designed to act as an incentive for parents to consider their options and, where possible, work together to make a family based arrangement. It is however fair and in line with the principles of parental responsibility to ask parents to contribute to the cost of processing/administering ongoing maintenance payments where they choose to use the collect and pay service. There is no fee to pay if parents make a family based arrangement or use Direct Pay.

On the 20th of September 2013, as part of the ongoing reform of child maintenance, I announced the introduction of collection fees as a way of encouraging separated families to consider making their own arrangements from the outset. The level of collection fees I have set will minimise the impact on the amount of money flowing to children, while providing an incentive to ensure parents seriously consider their responsibilities and the options available to them before opting into the Child Maintenance Collect and Pay service. In addition, I have decided that unlike in Great Britain there will be no £20 application fee for Northern Ireland residents. This should ensure that the child maintenance statutory service remains accessible to those who need it. I must emphasise that there is no fee to pay if parents make their own family based arrangements or use the Child Maintenance Direct Pay Service.

No further changes are planned to this policy and these reforms are likely to be introduced from the summer of this year, when the new scheme has been fully phased in and is working well.

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