

INFORMATION  
ANALYSIS  
DIRECTORATE



# Children's Social Care Statistics for Northern Ireland 2017/18



Department of  
**Health**

An Roinn

**Sláinte**

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Statistics and research for the **Department of Health** is provided by the Information and Analysis Directorate (IAD). IAD is responsible for compiling, processing, analysing, interpreting and disseminating a wide range of statistics covering health and social care.

The statisticians within IAD are out posted from the Northern Ireland Statistics & Research Agency (NISRA) and the statistics are produced in accordance with the principles and protocols set out in the [Code of Practice for Official Statistics](#).

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This publication is produced by Community Information Branch.

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- *Provide up-to-date, quality information on children and adult social services and community health;*
- *to disseminate findings widely with a view to stimulating debate, promoting effective decision-making and improvement in service provision; and*
- *be an expert voice on social care information.*

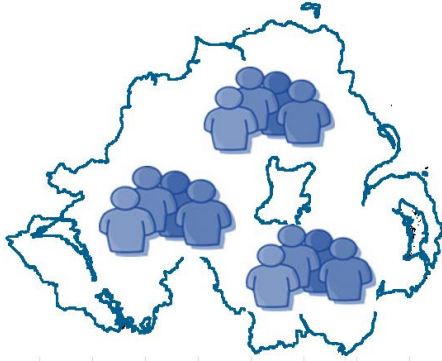
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The purpose of Community Information Branch (CIB) is to promote effective decision making in children and adult social services by providing quality information and analysis.

We collect, analyse, and publish a wide range of community information that is used to help monitor the delivery of personal social services policy. Information collected by CIB is used to assess HSC Trust performance, for corporate monitoring, policy evaluation, and to respond to parliamentary/assembly questions.

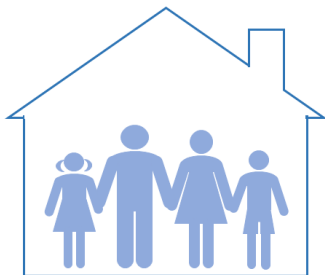
Information is widely disseminated through a number of regular key statistical publications and ad hoc reports, details of which are available online.

# Children's social care 2017/18



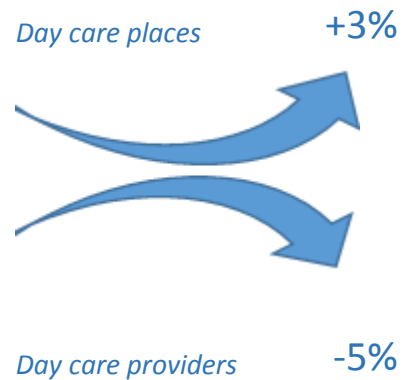
23,510 children in Northern Ireland were known to social services as a **Child in Need**

Physical abuse and neglect accounted for 80% of the reasons why a child was on the **Child Protection Register**



79% of **Children in Care** lived in a foster care placement

Fewer **Children's Day Care Providers** are offering more day care places



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<https://www.health-ni.gov.uk/publications/childrens-social-care-statistics-northern-ireland>

# Introduction

## Children (Northern Ireland) Order 1995

The Children (Northern Ireland) Order 1995 (the Children Order) is the principal statute governing the care, upbringing and protection of children in Northern Ireland. It affects all those who work and care for children, whether parents, paid carers or volunteers. The Children Order emphasises the unique advantages to a child being brought up within his or her own family. In practice, this means that the Children Order sees families as a major way of supporting and helping children. Health and Social Care (HSC) Trusts have the power and in some circumstances the duty, under the Children Order, to help children by providing services to their families.

A child can be referred to Social Services for a variety of reasons. When a child is referred, Social Services undertake an initial assessment to determine if that child is a 'child in need' as defined by the Children Order. If a child is considered to be a child in need, services should be offered to assist the child's parents/carers to meet that identified need. Should there be concerns that a child may be suffering or at risk of suffering 'significant harm', Social Services will conduct an investigation under Article 66 of the Children Order and respond appropriately. A Child Protection Case Conference may be convened and the child's name included on the Child Protection Register and a Child Protection Plan drawn up to safeguard the child. If there are significant concerns that indicate authoritative intervention is required, Social Services may make an application to the Court for a Legal Order to enable them to afford an appropriate level of safeguarding to the child. This may include removing a child from its family and into the care of the HSC Trust.

## Children in Northern Ireland

There are 436,403 children living in Northern Ireland<sup>1</sup>. At 31 March 2018, 23,510 of these were known to Social Services as a child in need. Furthermore, 2,082 were on the Child Protection Register and 3,109 were children in care of the HSC Trusts (a looked after child).

Considerable resources go into safeguarding children. Just under £230m is spent annually on family and child care within Personal Social Services in Northern Ireland<sup>2,3</sup> and some 2,000 Social Service staff employed are specifically graded as Child and Family Care social workers<sup>4</sup>. Many other work groups would also be involved in children's social care, such as managerial and administrative teams, multidisciplinary teams and staff in different residential settings. In addition, the Courts and educational system could also be involved in many aspects of children's social care.

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<sup>1</sup> Mid-Year Estimate 2017 (NISRA 2018)

<sup>2</sup> Trust Financial Returns (TFR P), 2016/17, Family and Child Care Programme of Care (PoC3)

<sup>3</sup> Children can also be treated under other Programmes of Care e.g. Independent and Statutory Residential Homes for Children with learning disabilities come under the Learning Disability PoC 6

<sup>4</sup> Northern Ireland Health and Social Care Workforce Census (31 March 2018), DoH

	31 March 2018		
	Rate per 10,000 child population		
	Children in Need	Child Protection Register	Looked after children
Belfast HSC Trust	566.7	41.5	100.2
Northern HSC Trust	470.5	43.0	61.7
South Eastern HSC Trust	467.9	41.1	61.4
Southern HSC Trust	483.4	57.5	56.4
Western HSC Trust	762.3	55.7	85.6
Northern Ireland	538.7	47.7	71.2

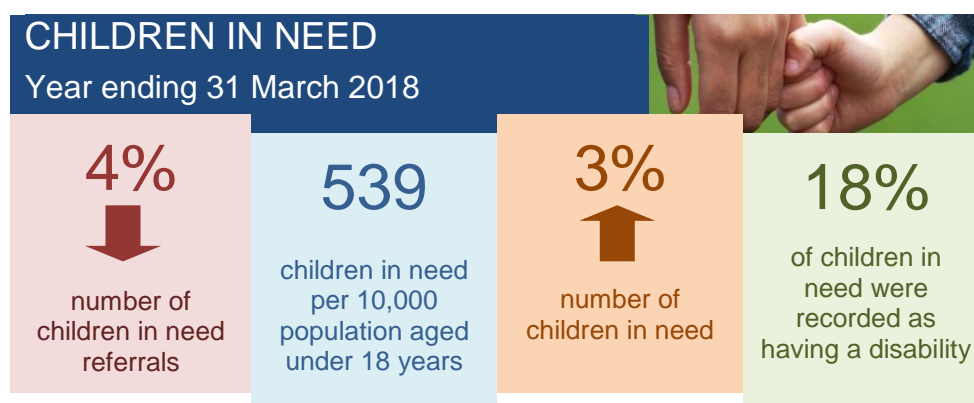
Source: Delegated Statutory Functions / Corporate Parenting Returns  
Mid-Year Estimate 2017 (NISRA 2018)

This annual bulletin presents the latest figures on children in need, the Child Protection Register and looked after children, as well as information on residential homes and day care provision.

# Section One: Children in Need

## Key Findings

- At 31 March 2018, 23,510 children in Northern Ireland were known to Social Services as a child in need;
- Some 36,022 children were referred to Social Services during 2017/18, the largest proportion of these children were referred by the police (31%) followed by Social Services (17%);





# Children in Need in Northern Ireland

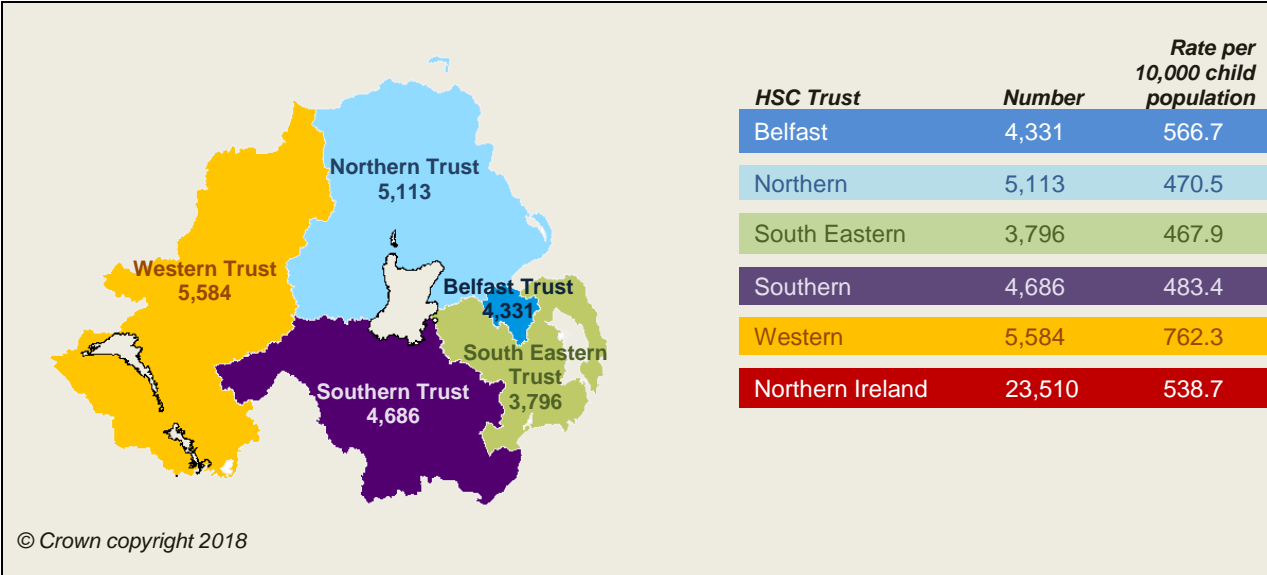
**A Child is in Need if:**

- a) he or she is unlikely to achieve or maintain, or to have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision of services by an authority;
- b) his or her health or development is likely to be significantly impaired, or further impaired without the provision of such services; or
- c) he or she is disabled.

Source: Children (Northern Ireland) Order 1995 – Guidance and Regulations

At 31 March 2018, 23,510 children in Northern Ireland were known to social services as a child in need<sup>5</sup>. This represented 539 children per 10,000 child population<sup>6</sup>. The Western HSC Trust had the largest proportion of the 23,510 children in need. The Western HSC Trust, also, had the highest rate of children in need, followed by the Belfast HSC Trust (see Figure 1.1 for details). A possible contributing factor to the higher rates in these regions could be that the Belfast and Western HSC Trusts contain Northern Ireland’s two biggest cities, Belfast and Londonderry, and these two large urban areas contain some of the most deprived areas within Northern Ireland.

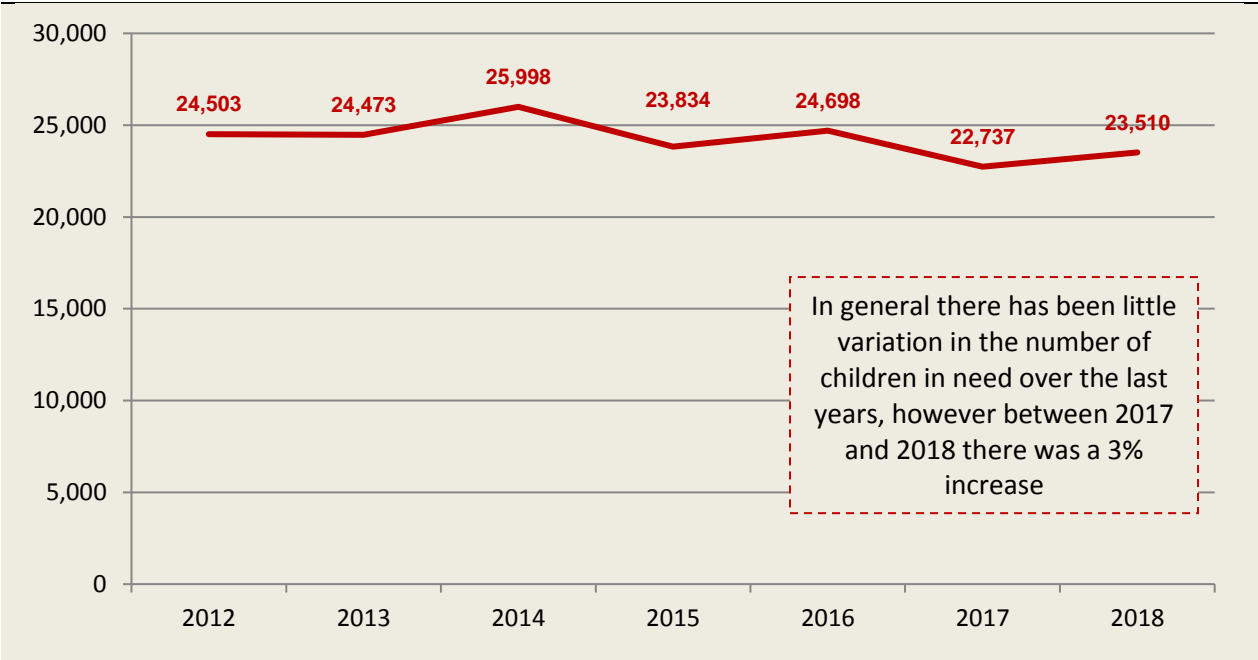
**Figure 1.1. Children in Need by HSC Trust (31 March 2018)**



Source: Delegated Statutory Functions Return 10.1.1  
2017 Mid-Year Population Estimate (NISRA 2018)

<sup>5</sup> Known to social services indicates that social services had an open case file for a child.  
<sup>6</sup> 2017 Mid-Year Population Estimate (NISRA 2018)

**Figure 1.2. Number of Children in Need in Northern Ireland at 31 March (2012 – 2018)**



Source: Delegated Statutory Functions Return 10.1.1

The number of children in need in 2018 was three percent higher than in 2017 when there were 22,737 children in need. This increase was mainly down to a rise of 26% in the number of children in need in the Western HSC Trust. The reason for this increase is not known, however year on year fluctuations in children in need figures, in each HSC Trust area, are not uncommon.

Of the children in need at 31 March 2018, a higher proportion were male than female (54% and 46% respectively). This gap was slightly larger than the gender split in the child population in general, with 51% male and 49% female under 18 years of age<sup>7</sup>. The age profile of the children in need population was similar to that observed in the general Northern Ireland population (see Table 1A).

**Table 1 A: Age distribution of Children in Need and the Northern Ireland Child Population**

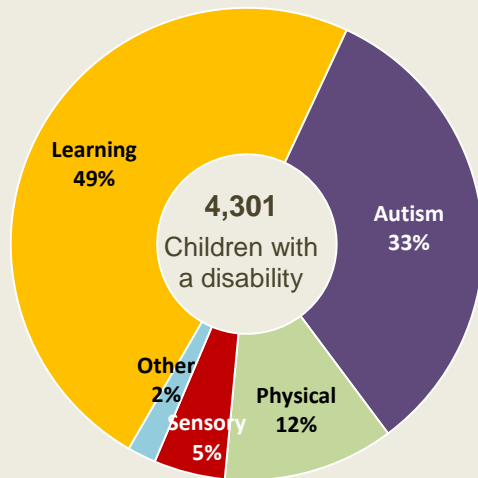
	Age group				
	Under 1	1-4	5-11	12-15	16 & over
Children in Need	4%	20%	42%	23%	11%
Northern Ireland child population	5%	23%	41%	21%	10%

Children in Need had a similar age profile to the general child population in Northern Ireland

Source: Delegated Statutory Functions Return 10.1.1  
2017 Mid-Year Population Estimate (NISRA 2018)

<sup>7</sup> 2017 Mid-Year Population Estimate (NISRA 2018)

### Children in Need with a disability (31 March 2018)



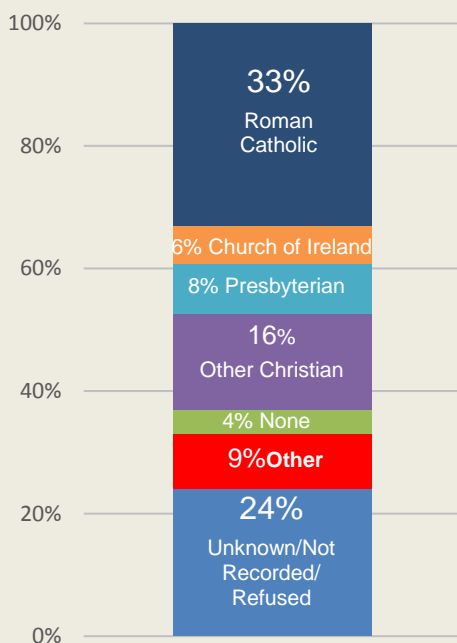
Of the 23,510<sup>8</sup> children in need in Northern Ireland, 18% were recorded as having a disability. Almost half of these had a learning disability.

Having a disability was more prevalent amongst the male children in need, with 23% of males being recorded as having a disability compared with 13% of the female children in need. Furthermore, each of the disability categories had more males than females. This was most evident amongst those recorded as having Autism, where 75% were males. These findings were consistent with those published in *'The Prevalence of Autism (including Asperger's syndrome) in School Age Children in Northern Ireland'*,<sup>9</sup> published on the Department's website.

Source: Delegated Statutory Functions Return 10.1.6

There is no statutory requirement for a child with a disability to be registered with the Social Services; such issues may be dealt with by a GP only and Social Services may never be involved. The figures presented here therefore do not represent the prevalence of children with different disabilities in Northern Ireland but are rather a reflection of the service demand.

### Children in Need – Religion and Ethnicity (31 March 2018)



**Religious affiliation** was not recorded, not known or refused to be disclosed for almost a quarter of all children in need (24%). A third (33%) reported their religion as Roman Catholic, 30% were other Christian faiths and 9% had other religious faiths and 4% had no religious beliefs.

As with religion, **ethnic background** was not recorded for almost a fifth of the children in need (19%), with 75% of the children in need recorded as White, and a further 5% from Ethnic Minorities (including Irish Travellers, Roma Travellers, Asian, Black and those of mixed Ethnicity).

Source: Delegated Statutory Functions Return 10.1.2

<sup>8</sup> Some 711 children were waiting for an assessment at 31 March 2018

<sup>9</sup> <https://www.health-ni.gov.uk/publications/prevalence-autism-including-asperger%E2%80%99s-syndrome-school-age-children-northern-ireland>

## Children in Need Referred

A referral is defined as a request for services to be provided by children's social care and is in respect of a child who is currently not assessed to be in need<sup>10</sup>. A referral may result in an episode of care which may be an initial assessment of the child's needs, the provision of information or advice, referral to another agency or alternatively no further action.

During the year ending 31 March 2018, 36,022 children were referred to HSC Trusts in Northern Ireland<sup>11</sup>, a decrease of 4% on the previous year. The Belfast HSC Trust received the largest amount of referrals accounting for 26% of the overall total whereas the South Eastern HSC Trust, as in the previous year, received the fewest number of referrals amounting to 15% of the overall total<sup>12</sup>. There was an increase of 5% in the number of referrals received by the Southern HSC Trust between 2017 and 2018, in comparison there was a 14% drop in the number of referrals received by the Northern HSC Trust.

The police were the source of the referrals for the largest proportion of children in need referred (31%), followed by Social Services (17%). There was a similar pattern across all of the HSC Trusts<sup>13</sup>. These figures were similar to those recorded last year.

**Figure 1.3. Children Referred by Source Year Ending 31 March**

<b>Referral Source</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>
<i>Police</i>	26%	29%	31%
<i>Social Services</i>	21%	20%	17%
<i>Hospital</i>	8%	7%	7%
<i>School/Educational Welfare Officer</i>	6%	7%	8%
<i>Relative</i>	6%	6%	5%
<i>Court/Probation Officer</i>	5%	5%	4%
<i>Anonymous</i>	4%	4%	4%
<i>General Practitioner</i>	4%	3%	3%
<i>Community Nurse/Health Visitor</i>	3%	3%	3%
<i>Voluntary Organisation</i>	2%	3%	2%
<i>Self</i>	2%	1%	1%
<i>Northern Ireland Housing Executive</i>	<1%	<1%	<1%
<i>Other</i>	13%	11%	14%

Source: Delegated Statutory Functions Return 10.1.4(b)

<sup>10</sup> A referral for a child who is already assessed to be in need is treated as a 'significant event' and in the child's file is not counted as a new referral

<sup>11</sup> Please note that to calculate this figure two half yearly collections are combined, therefore it is possible that some double counting may occur

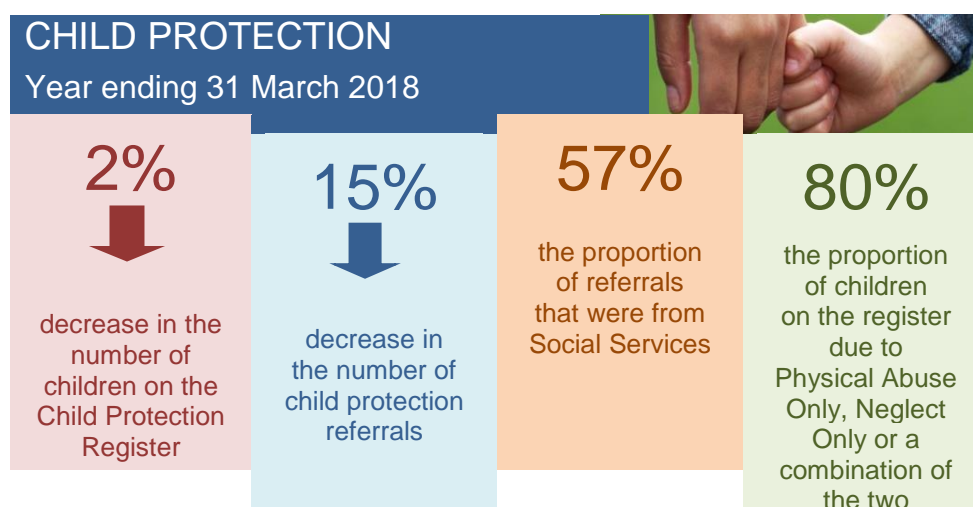
<sup>12</sup> See Tables for further details - <https://www.health-ni.gov.uk/articles/children-need>

<sup>13</sup> Delegated Statutory Functions are collected biannually – The Belfast HSC Trust was only able to provide figures for 1 October 2016 – 31 March 2016. Therefore figures are not directly comparable with following years.

# Section Two: Child Protection

## Key Findings

- At 31 March 2018, 2,082 children were listed on the Child Protection Register;
- Neglect and physical abuse were the main reasons for a child being on the Child Protection Register;
- A total of 3,407 child protection referrals were received by HSC Trusts, a 15% decrease on the previous year;
- There were 1,921 new registrations to the Child Protection Register and 1,946 de-registrations during the year.



The figures presented in this section relate to child protection statistics for the year ending 31 March. The Department of Health also publish quarterly child protection information in the statistical tables "*Children's Quarterly Child Protection Statistics*", available from : <http://www.health-ni.gov.uk/articles/child-protection-register>

# The Child Protection Register

*The Child Protection Register is a confidential list of all children in the area who have been identified at a child protection conference as being at significant risk of harm.*

**Source: Children's Legal Centre**

At 31 March 2018, 2,082 children were listed on the Child Protection Register in Northern Ireland. This represented 48 children per 10,000 population under 18 years of age. Of the 2,082 children on the register, 50% were boys and 50% were girls, similar to the gender split in the general children's population. The age distribution on the register did however not mirror the age distribution in the child population in Northern Ireland generally. On the Child Protection Register there were a higher proportion of children aged under 5 compared with the overall child population (38% and 28% respectively). Conversely, the Northern Ireland population had a higher proportion of those aged 12 and over than represented on the register (31% and 25% respectively).

**Table 2 A: Age distribution on the Child Protection Register and the Northern Ireland Child Population**

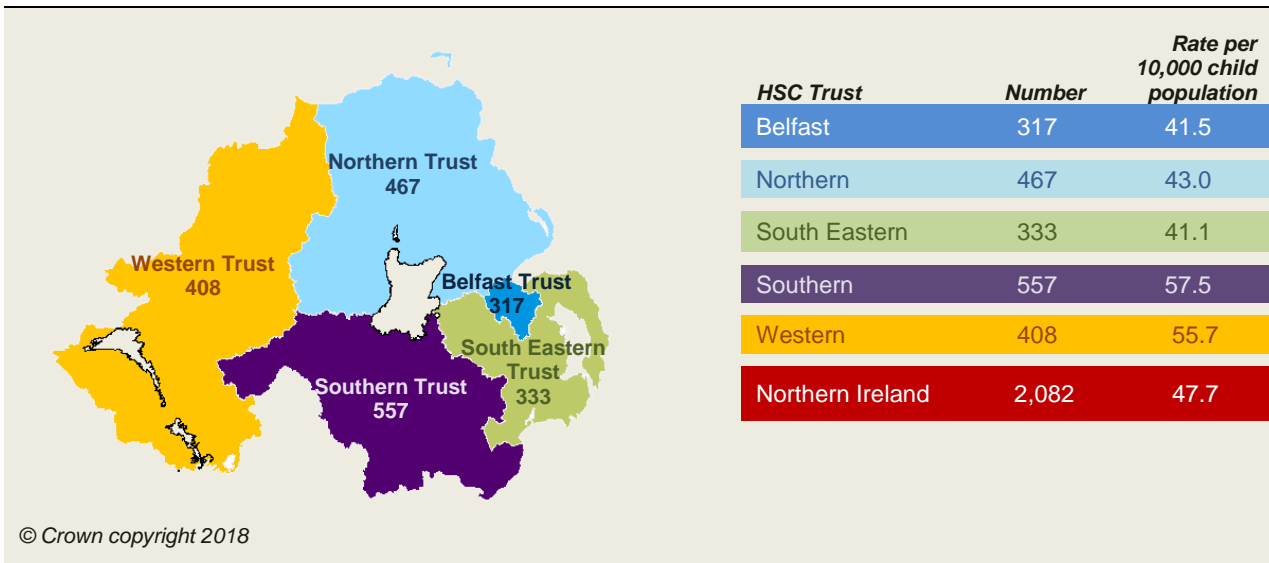
	Age group				
	Under 1	1-4	5-11	12-15	16 & over
Children on the Child Protection Register	11%	27%	37%	19%	6%
Northern Ireland child population	5%	23%	41%	21%	10%

Children on the Child Protection Register had a younger age profile than the general child population in Northern Ireland

Source: Children Order Return CPR1, 31 March 2018  
2017 Mid-Year Population Estimate (NISRA 2018)

The Southern HSC Trust had the largest number of children on their Child Protection Register compared with the other HSC Trusts (27% of the overall number). When taking the Trusts' child populations into account, the Southern HSC Trust also had the highest rate of children on the Child Protection Register (58 children per 10,000 child population). The Belfast HSC Trust had the lowest rate with 42 children per 10,000 population.

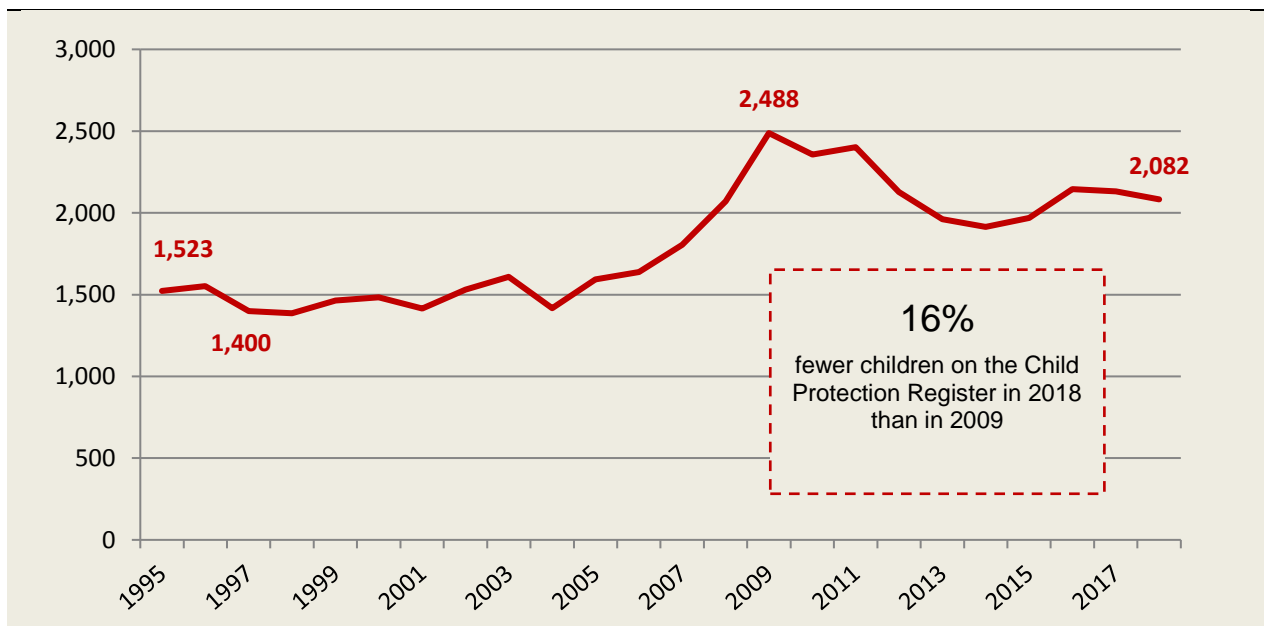
**Figure 2.1. Children on the Child Protection Register by HSC Trust (31 March 2018)**



Source: Children Order Return CPR1  
2017 Mid-Year Population Estimate (NISRA 2018)

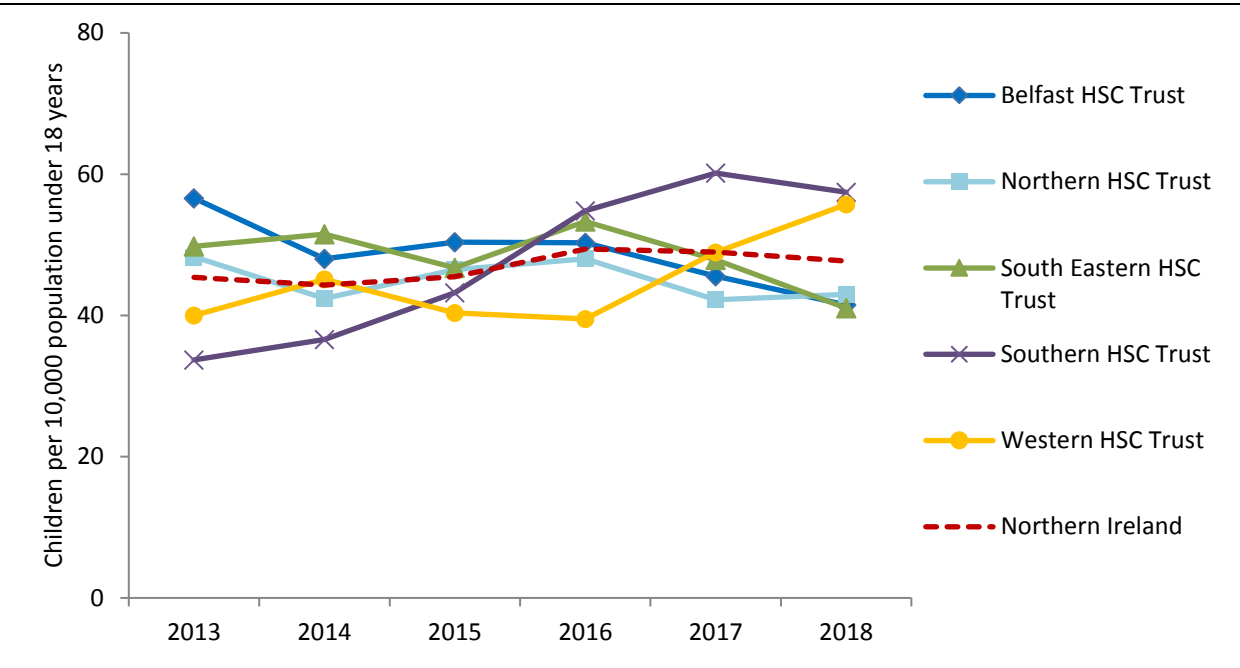
The Child Protection numbers have been relatively stable during the last seven years, with figures around 2,000 children on the Register. The highest number of children registered in recent years occurred in 2009 (2,488), which may have been influenced by several high profile child protection cases covered by the media around this time. The lowest number of children on the register in the past twenty years occurred in 1997, when around 680 fewer children were on the Child Protection Register than in 2018.

**Figure 2.2. Number of Children on the Child Protection Register in Northern Ireland at 31 March (1995 – 2018)**



Source: Children Order Return CPR1

**Figure 2.3. Rate of Children on the Child Protection Register per 10,000 Population under 18 by HSC Trust at 31 March (2013 – 2018)**



Source: Children Order Return CPR1  
2017 Mid-Year Population Estimates (NISRA 2018)

Figure 2.3 sets out the rate of children on the Child Protection Register per 10,000 child population between 2013 and 2018. From 2013 to 2016 the rate rose slightly but has in the last two years remained relatively stable and sat at 31 March 2018 at 48 children per 10,000 population under 18.

Among the HSC Trusts there has been variation in the rate of children on the register. Traditionally the Belfast and South Eastern HSC Trusts had higher rates than the other HSC Trusts. However since 2016 we have seen a decline in the rates of children on the register in the Belfast, South Eastern and Northern HSC Trusts, while there has been a steep rise in the rates of children on the register in the Southern and Western HSC Trusts. This has resulted in the Southern HSC Trust having the highest rate of children on the register at 31 March 2018.



# Category of Abuse

The **category of abuse** under which each child is considered to be at risk is decided at the Child Protection Case Conference. When agreement is reached that the child is at risk and protection is necessary, each child is recorded under the category that best reflects the nature of the risk.

The four main categories used are: neglect, physical abuse, sexual abuse and emotional abuse. For more complex cases mixed categories are used e.g. 'neglect and physical abuse' or 'physical and sexual abuse.'

Source: 'Co-operating to Safeguard Children', DHSSP 2003

**Neglect:** The actual or likely persistent or severe neglect of a child, or the failure to protect a child from exposure to any kind of danger, including cold and starvation, or persistent failure to carry out important aspects of care, resulting in significant impairment of the child's health or development, including non-organic failure to thrive.

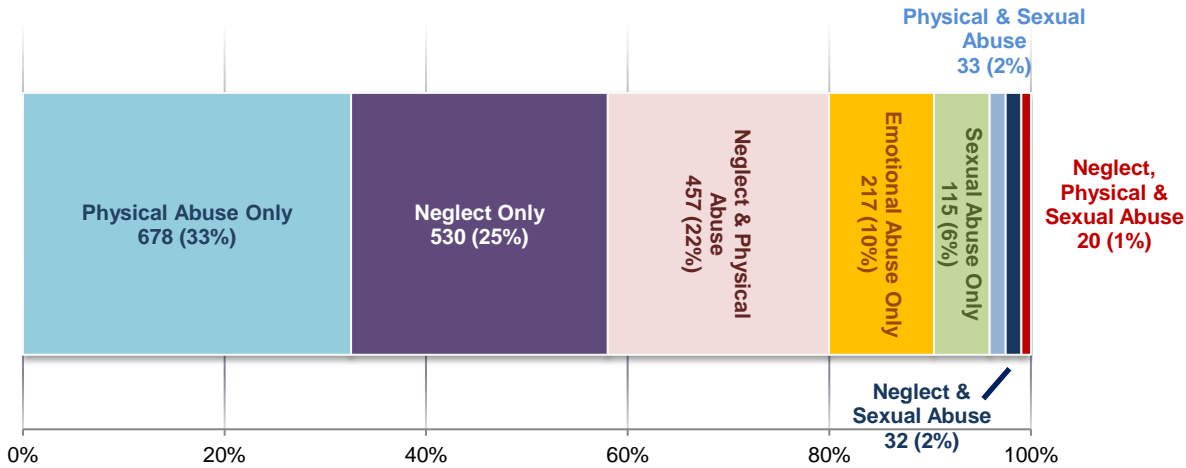
**Physical Abuse:** Actual or likely deliberate physical injury to a child, or wilful or neglectful failure to prevent physical injury or suffering to a child including deliberate poisoning, suffocation or Munchausen syndrome by proxy.

**Sexual Abuse:** Actual or likely exploitation of children or adolescents. The child may be dependent and/or developmentally immature.

**Emotional Abuse:** Actual or likely, persistent or severe emotional ill treatment or rejection resulting in severe adverse effects on the emotional, physical and/or behavioural development of a child. All abuse involves some emotional ill treatment. This category should be used where it is the main or only form of abuse.

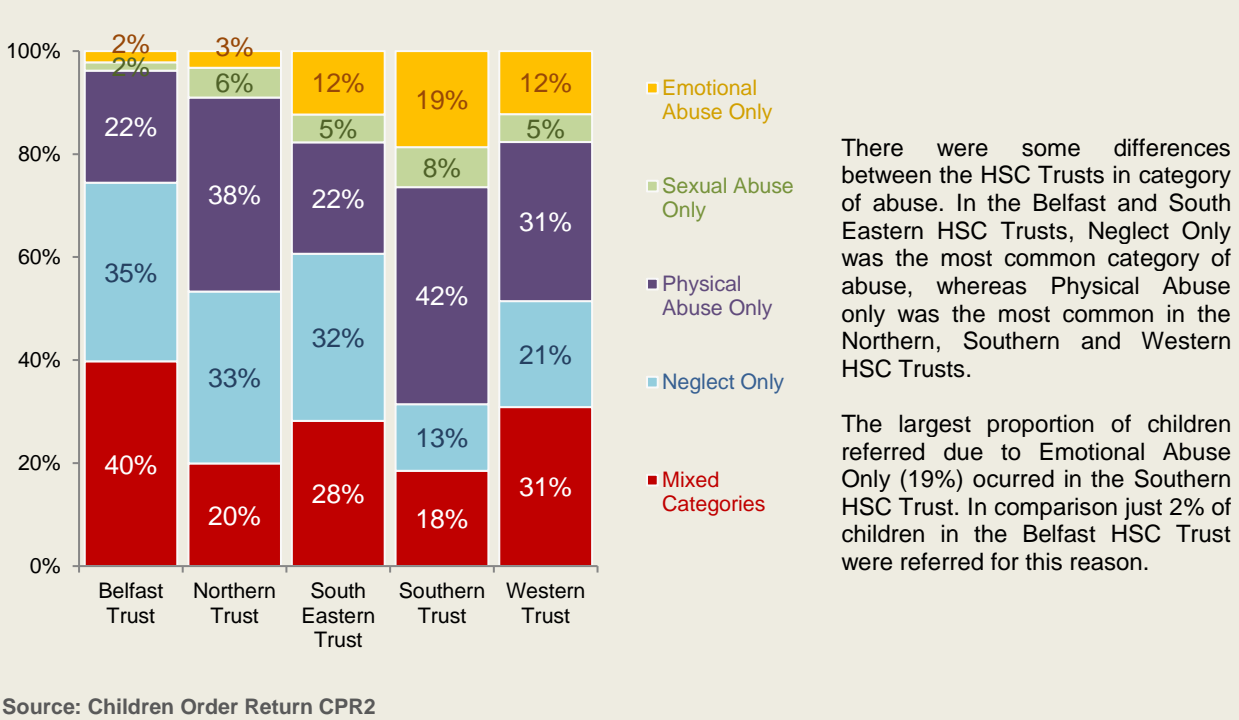
Physical Abuse and Neglect were the main reasons for a child being on the Child Protection Register. The categories Neglect Only, Physical Abuse Only and Neglect and Physical Abuse accounted for four fifths (80%) of all cases on the Child Protection Register at 31 March 2018. Physical Abuse Only was the largest single cause of a child being placed on the register (33%) while the combination of Neglect and Physical (22%) was the most common cause of the mixed categories. Sexual abuse was the least likely single cause of a child being placed on the protection register (6%).

Figure 2.4. Children on the Child Protection Register by Category of Abuse at 31 March 2018



Source: Children Order Return CPR2

**Figure 2.5. Children on the Child Protection Register by Category of Abuse and HSC Trust at 31 March 2018**



Despite there being some fluctuation year on year in category of abuse at Trust level (see above), the regional figures have stayed relatively stable. The proportion of children on the register in each category of abuse has only seen small percentage point changes over the years 2013 to 2018.

**Legal Status**

The Child Protection Register identifies any children for whom there are serious concerns, and as such, the children on the register do not need to have a specific legal status. Those children on the register with a legal status are in a number of cases likely to be crossovers with looked after children.

The majority, 91%, of children on the Child Protection Register at 31 March 2018 had no recorded legal status, 4% were Accommodated (Article 21), 4% had Interim Care Orders, less than 1% had Interim Supervision Orders, Care Orders and Emergency Protection Orders, while 1% had Other legal statuses<sup>14</sup>. These figures were similar to those recorded in previous years.

There was some variation between the Trusts, with 12% of children registered in the South Eastern and Western HSC Trusts having a legal status compared with 5% in the Southern HSC Trusts. Of those children with a legal status, the largest proportions in the Belfast and Western HSC Trusts had an Interim Care Order, while children in the Northern, South Eastern and Southern HSC Trusts were more likely to be Accommodated (Article 21).

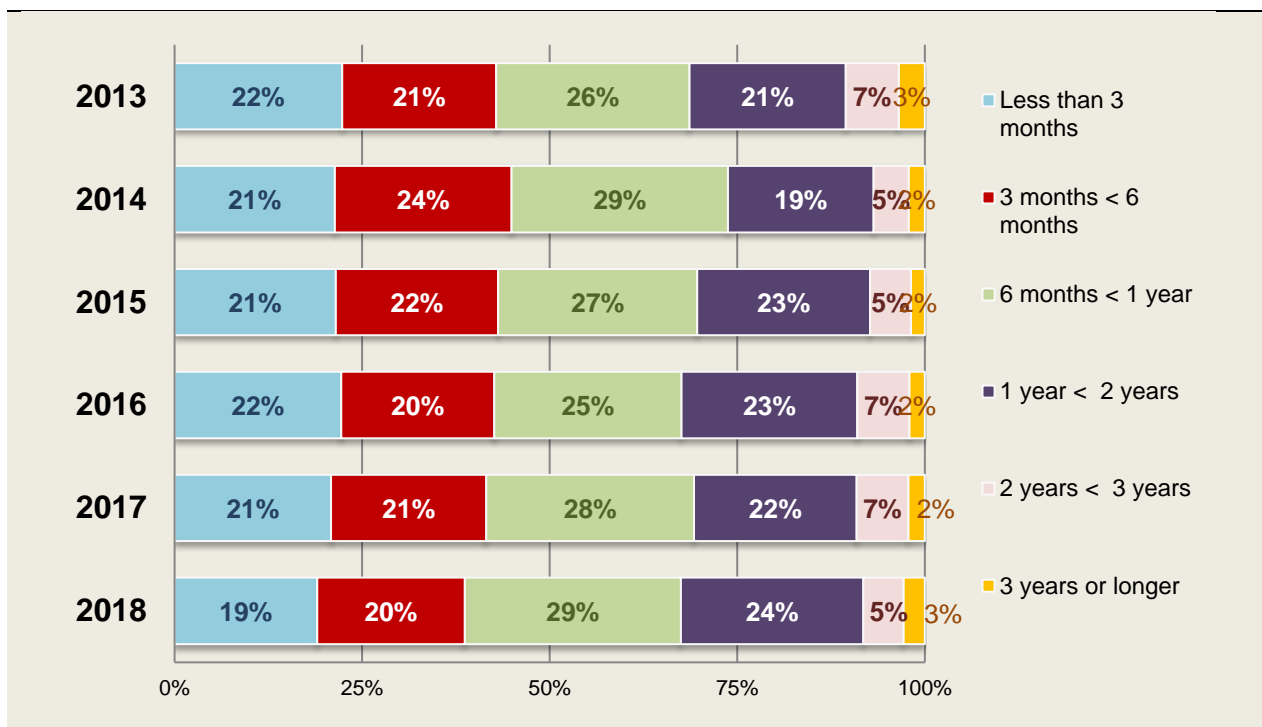
<sup>14</sup> Please see Appendix B for definitions of different legal statuses

## Duration on the Register

Of the 2,082 children on the Child Protection Register at 31 March 2018, 67% had been on the register for less than one year. The largest number of children had been on the register for between six months and one year (29%) and the lowest number had been on the register for three years or longer (3%).

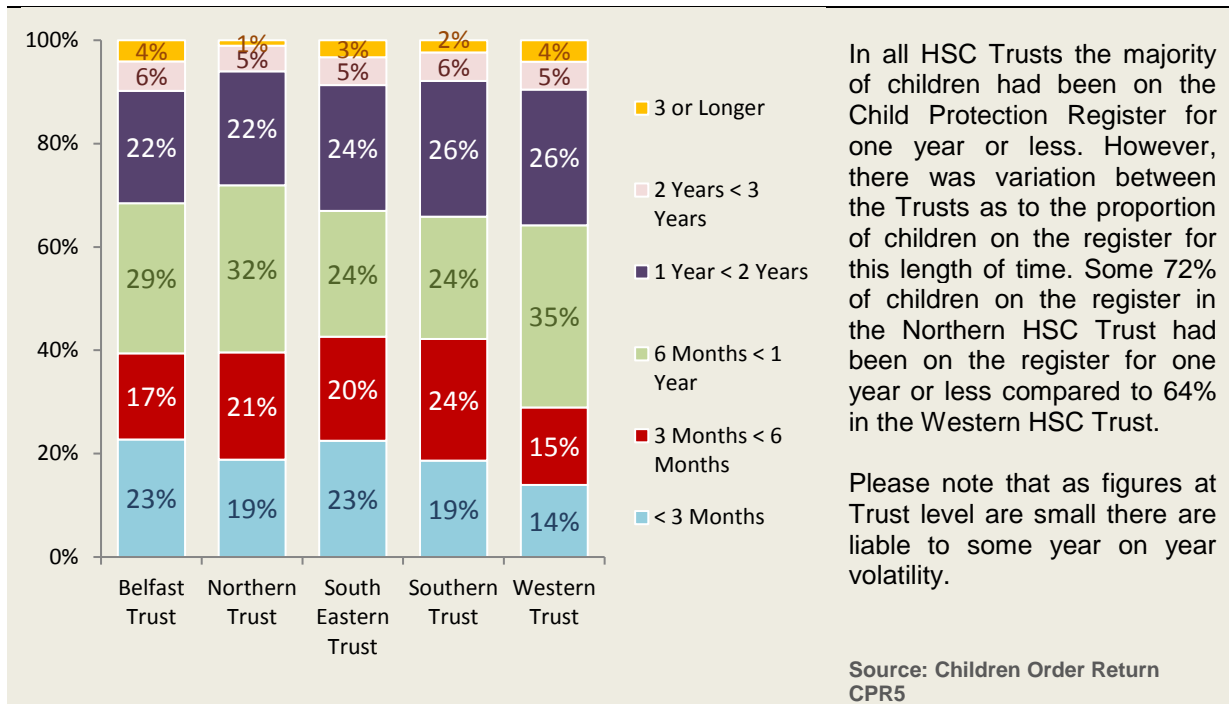
There has been some minor fluctuation in the time on the register between 2013 and 2018 (see Fig. 2.6), however largely the trend has been similar year on year.

**Figure 2.6. Children on the Child Protection Register by Duration at 31 March (2013 – 2018)**



Source: Children Order Return CPR5

**Figure 2.7. Children on the Child Protection Register by Duration on Register and HSC Trust at 31 March 2018**



# Child Protection Referrals

A Child Protection Referral is one for which the initial assessment indicates that there may be Child Protection issues. The threshold for action should be the allegation or suspicion of child abuse. However the balance needs to be struck between taking action designed to protect the child from abuse while at the same time avoiding unnecessary intervention. Except in emergency situations or urgent cases when immediate protective action is required, referrals will require preliminary discussion with other professionals from the child protection agencies and with the referrer. In some cases it will be necessary to seek specialist opinion.

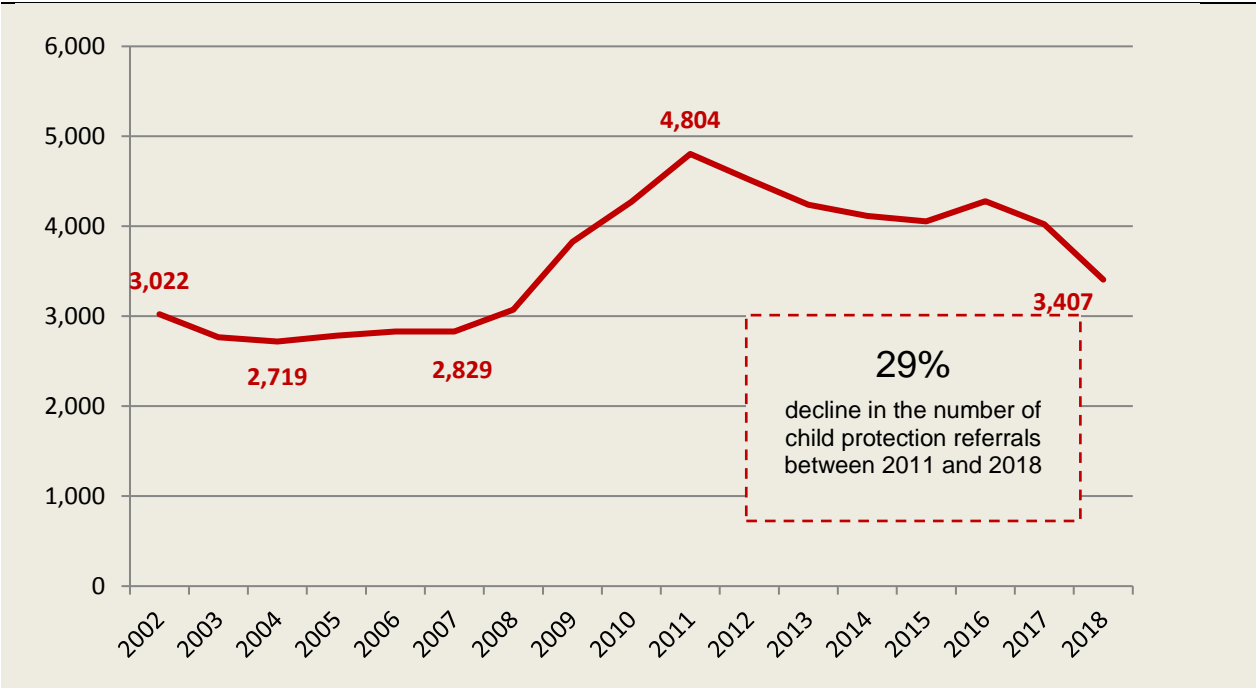
Source: 'Co-operating to Safeguard Children' DHSSPS, 2003

A total of 3,407 child protection referrals were received during the year ending 31 March 2018. This amounted to 78 referrals per 10,000 of the population under 18.

From being relatively stable, the referrals figures increased sharply from 2009 onwards, coinciding with some high profile Child Protection cases in the media, with a peak of 4,804 referrals in 2011. The sharp decline in referrals in the last two years is believed to be linked to new protocols<sup>15</sup> concerning the recording of Child Protection referrals.

All of the HSC Trusts, with the exception of the Western HSC Trust, had a reduction in recorded Child Protection Referrals between 2016/17 and 2017/18. In general the Southern HSC Trust had the highest number (939) of referrals while the Northern HSC Trust recorded 488 referrals.

**Figure 2.8. Number of Child Protection Referrals during year ending 31 March (2002 – 2018)**

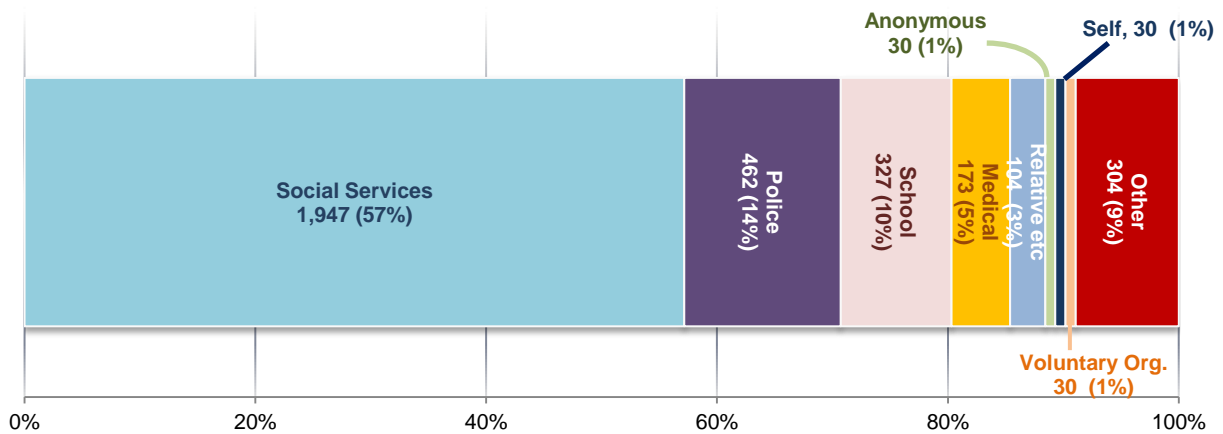


<sup>15</sup> Regional Agreement on the use of Electronic Recording for Referrals into Children’s Social Work Services – Northern Ireland Health and Social Care Trust – September 2017

Source: Children Order Return CPR3

During 2017/18, Social Services accounted for 57% of all child protection referrals received, with 14% from the police and 10% from schools. Furthermore, 3% of the referrals were made by relatives, neighbours or friends while 30 referrals (1%) were made by the child themselves. These figures were similar to previous years as the source of referral has remained relatively stable over the last five years.

**Figure 2.9. Child Protection Referrals by Source of Referral Year Ending 31 March 2018**



Source: Children Order Return CPR3

Note: Medical contains GPs, Community Nurses and Hospital

# Child Protection Investigations

There were 3,057 child protection investigations carried out during 2017/18. This was a decrease of 10% on the previous year.

*“Social Services and the police have, for some time, recognised the need to co-ordinate their investigations into suspected child abuse to ensure that each can fulfil its functions in a manner which best serves the child. Both are concerned about the child’s welfare, although the former’s concerns are dealt with by the civil law, and those of the police, by criminal law.”*

*Child Protection Investigations are classified using one of the following categories:*

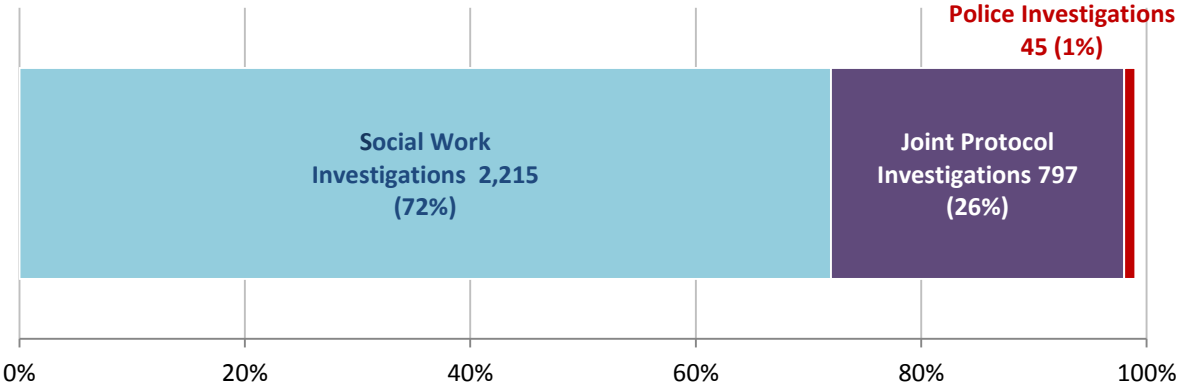
- a) *Joint Protocol (carried out jointly by social workers and the PSNI);*
- b) *Social Workers; and*
- c) *PSNI.*

**Source: ‘Northern Ireland Social Work Law’  
White, 2006**

The vast majority of the 3,057 child protection investigations were carried out by social workers (72%), with a further 26% Joint Protocol Investigations involving both the police and social workers. The remaining 1% (45 investigations) were recorded as carried out by police only. These figures were similar to those recorded the previous year.

In the Western HSC Trusts 4% of all child protection investigations were carried out by the police only, while in the other four Trusts 1% or less of all investigations were carried out by the police.

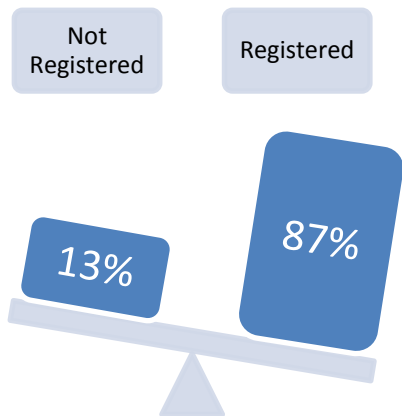
**Figure 2.10. Child Protection Investigations (year ending 31 March 2018)**



Source: Children Order Return CPR6

# Initial Case Conferences

*The Case Conference is a meeting organised by the social work services to consult with other agencies to collate information about the child and family. The Child Protection Case Conference has a specific role regarding the protection of children. The purpose is to allow the participants to pool their knowledge of the child's health, development and functioning and the carer's capacity to ensure the safety and well being of the child and assess risk.*



During the year ending 31 March 2018, 2,185 Initial Case Conferences had been completed across Northern Ireland, a 9% decrease on the previous year.

Some 87% of Initial Case Conferences resulted in a child being placed on the Child Protection Register in 2017/18. At HSC Trust level there was some variation ranging from 92% of case conferences resulting in registration in the Belfast

HSC Trusts to 80% in the Northern HSC Trust.

It is worth noting however that the act of registration itself confers no protection on the child and must be accompanied by a Child Protection Plan. It is the responsibility of the Case Conference to make recommendations on how agencies, professionals and family should work together to ensure that the child will be safeguarded from future harm<sup>16</sup>.

<sup>16</sup> Children's Services Definitions and Monitoring Guidance, Health and Social Care Board, 2014



# Registrations, Re-registrations and De-registrations

**Registration** is the placement of a child on to the Child Protection Register. Where a child has moved on or off the Register several times during the year each registration is recorded.

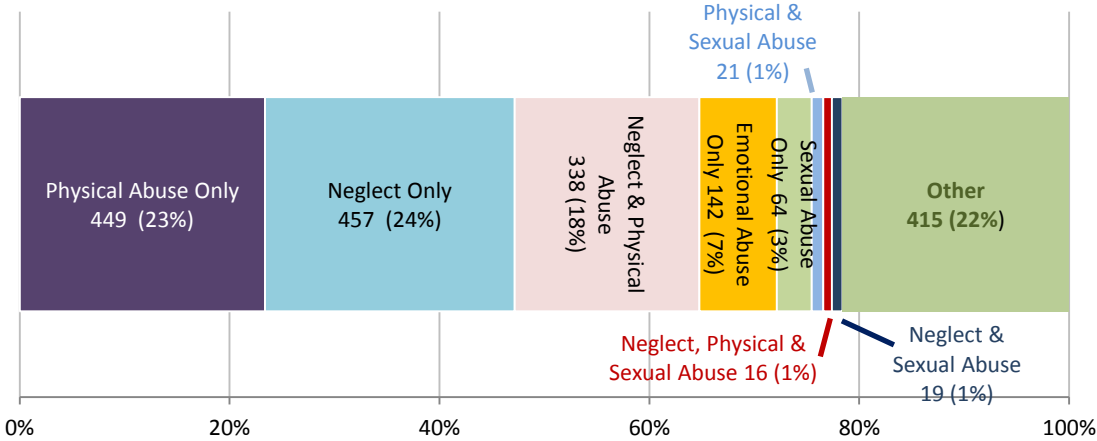
**De-registration** is the removal of a child from the Child Protection Register. Where a child has moved on or off the Register several times during the year each deregistration is recorded.

**Re-registration** is the placement on to the Child Protection Register of a child who has already been on the register, irrespective of the date of their first registration on the Register.

During the year ending 31 March 2018, there were 1,921 registrations to the Child Protection Register, a 10% decrease on the previous year. The largest proportion of registrations occurred in the Southern HSC Trust (26%), with the Belfast HSC Trust accounting for the least amount (16%). By age, young people aged 16 and over were the least likely to be registered.

As it might be expected, the category of abuse reasons for new registrations during the year were similar to those of children on the Child Protection Register at the end of the year (see previous section). Some 65% of those children registered during the year were likely to suffer from Physical Abuse Only, Neglect Only or a combination of the two. Neglect Only was the single largest category, accounting for just under a quarter of all registrations<sup>17</sup>.

**Figure 2.11. Registrations to the Child Protection Register by Category of Abuse year ending 31 March 2018**



Please see footnote  
 Source: Children Order Return CPR8

Physical Abuse Only accounted for the largest proportion of children registered in the Northern and Western HSC Trusts, with Neglect Only accounting for the largest proportion of registrations in the Belfast and South Eastern HSC Trusts. Similar to the category of abuse of

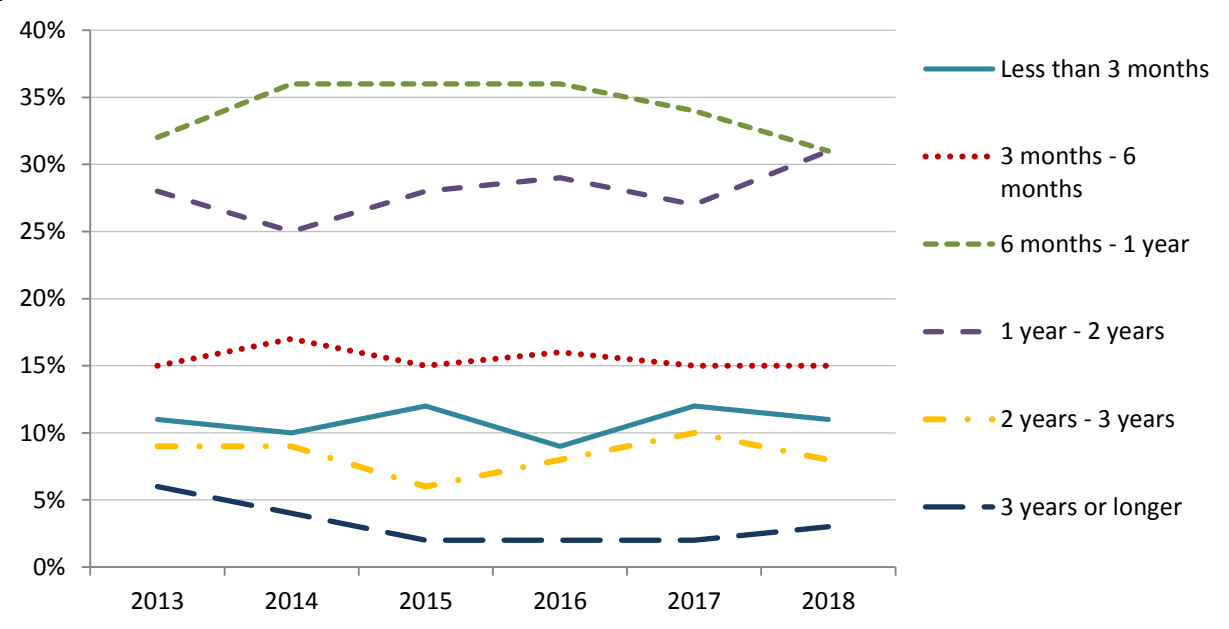
<sup>17</sup> Please note that due to reporting difficulties, the Southern HSC Trust categorised 415 registrations to the Child Protection Register as 'Other'. This will be amended in due course.

children on the register, figures at Trust level are small and therefore may exhibit large year on year variances.

There were 315 re-registrations to the Child Protection Register during 2017/18, a decrease of 21% on the previous year. The Northern HSC Trust accounted for a third of all re-registrations, in comparison just over a tenth (12%) of all re-registrations occurred in the Belfast HSC Trust.

Some 1,946 children were removed from the Child Protection Register during 2017/18, a decrease of 10% on the previous year. The largest proportion of de-registrations occurred in the Southern HSC Trust (26%), with the least amount in the Western HSC Trust (15%).

**Figure 2.12. De-registrations from the Child Protection Register by Duration on the Register year ending 31 March (2013 – 2018)**



Source: Children Order Return CPR10

Some 11% of the children were de-registered after being registered for less than three months. A further 15% were de-registered after three and six months on the Register.

Just over three fifths of children were de-registered after spending between six months and two years on the register, with the smallest proportions de-registered after 3 years or longer. It is however worth noting that very few children are on the register for this length of time (see previous section on duration on register).

## Child Protection Comparability across the United Kingdom

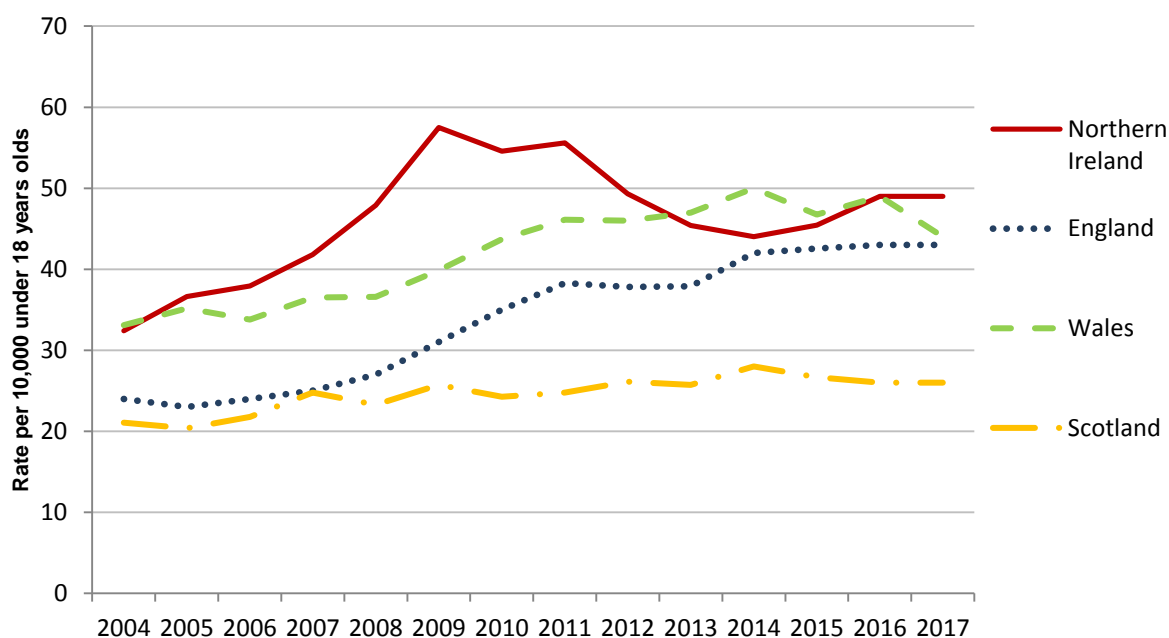
Child Protection systems across the United Kingdom vary but are generally comparable. Scotland's collection year for these figures runs from 1 August to 31 July, so end year figures are reported as at 31 July. In comparison the collections in England, Wales and Northern Ireland run from 1 April to 31 March. As Scottish figures for year ending 31 July 2018 are not available only figures up to 2017 will be compared.

Recent child protection figures in Northern Ireland show a much different pattern compared to the other UK countries. Up to 2009 there was a very steep rise in the rate; followed by a slow decline to 2014 before the rate again began to gently rise.

Scotland has consistently had the lowest rate of children on its child protection register, with a very slight rise during the last decade. Over the same period there was a sharper rise in both England and Wales. The child protection rates in both Scotland and England have plateaued over the last three years, while in Wales rates have begun to decline.

Between 2013 and 2015 Wales overtook Northern Ireland as having the highest rate of children on child protection registers in the UK, however in 2017 Northern Ireland had the highest rate of children on the child protection register.

**Figure 2.13. Cross UK Comparison of Rate of Children on the Child Protection Register per 10,000 under 18's, 2004 – 2017** <sup>1,2</sup>



Sources: England – 'Characteristics of Children in need in England', Wales – 'Local Authority Child Protection Registers & Scotland 'Children's Social Work Statistics.'

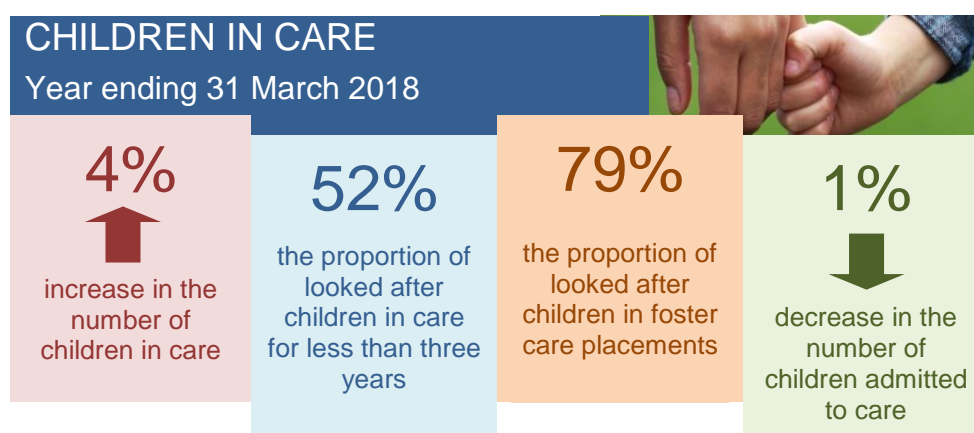
<sup>1</sup> 2011, 2012, 2013 & 2014 figures for Scotland taken at 31 July, all other figures at 31 March.

<sup>2</sup> Up to 2009 figures for England have been taken from aggregate CPR3 return provided by local authorities. In 2010 this data source was replaced by the child level Children in Need (CIN) census and so readers should be cautious in making direct comparisons between the 2009 and 2010 figures.

# Section Three: Children in Care

## Key Findings

- At 31 March 2018, 3,109 children were in care in Northern Ireland. This was the highest number recorded since the introduction of the Children (Northern Ireland) Order 1995;
- The majority of children in care in Northern Ireland had been looked after for less than three years, with just under a tenth looked after for ten years or longer;
- Four fifths of the children in care were in foster care placements (79%), 12% placed with parents, 5% in residential care and 4% in other placements. This was similar to previous years;
- During 2017/18 there were 848 admissions to care and 732 discharges.



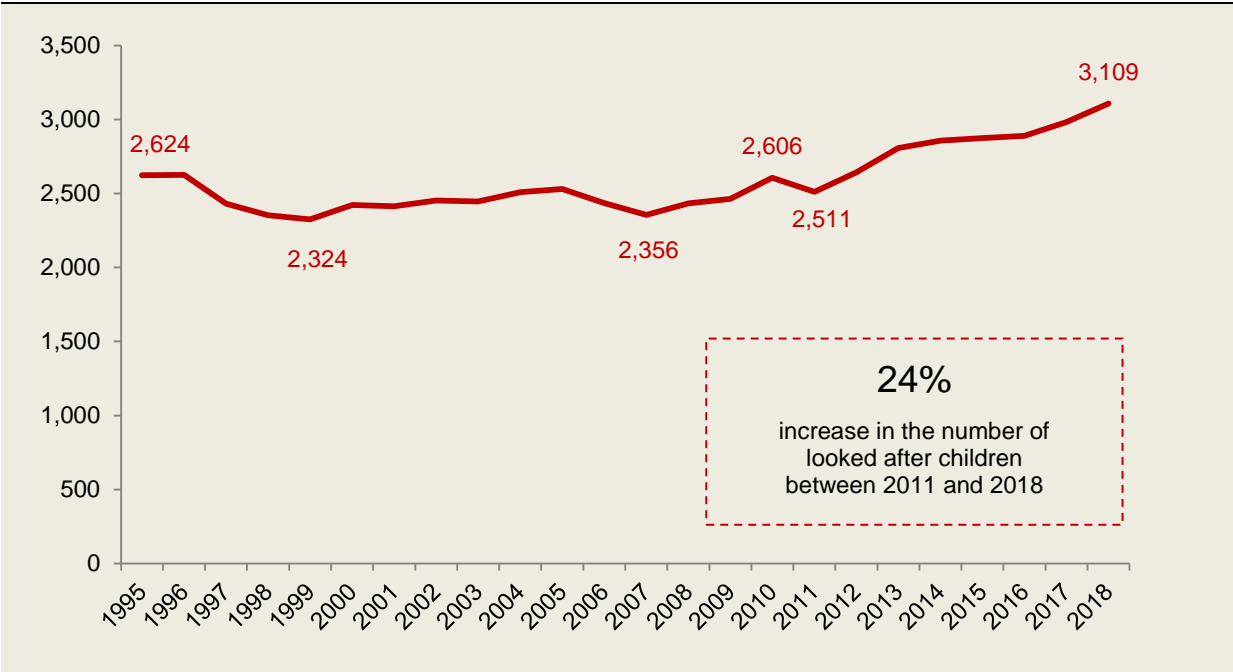
# Children in Care in Northern Ireland

*A Child is Looked After by an Authority if he or she is in their care or if he or she is provided with accommodation for a continuous period of more than 24 hours by the Authority in the exercise of its Social Services function.*

Source: 'Northern Ireland Social Work Law', White, 2006

At 31 March 2018, 3,109 children were looked after in Northern Ireland. This was the highest recorded number of children in care since the introduction of the Children (Northern Ireland) Order 1995, representing 71 children per 10,000 of the child population<sup>18</sup>. The number of looked after children in Northern Ireland has risen by 24% since 2011 and by 34% since 1999 when the lowest number of looked after children was recorded under the 1995 Children Order legislation. The number of looked after children at 31 March 2018 was 4% higher than at the same time the previous year (2,983).

**Figure 3.1. Children in Care in Northern Ireland at 31 March (1995 – 2018)**



Source: Children Order Return LA1 & Delegated Statutory Functions Return 10.3.1

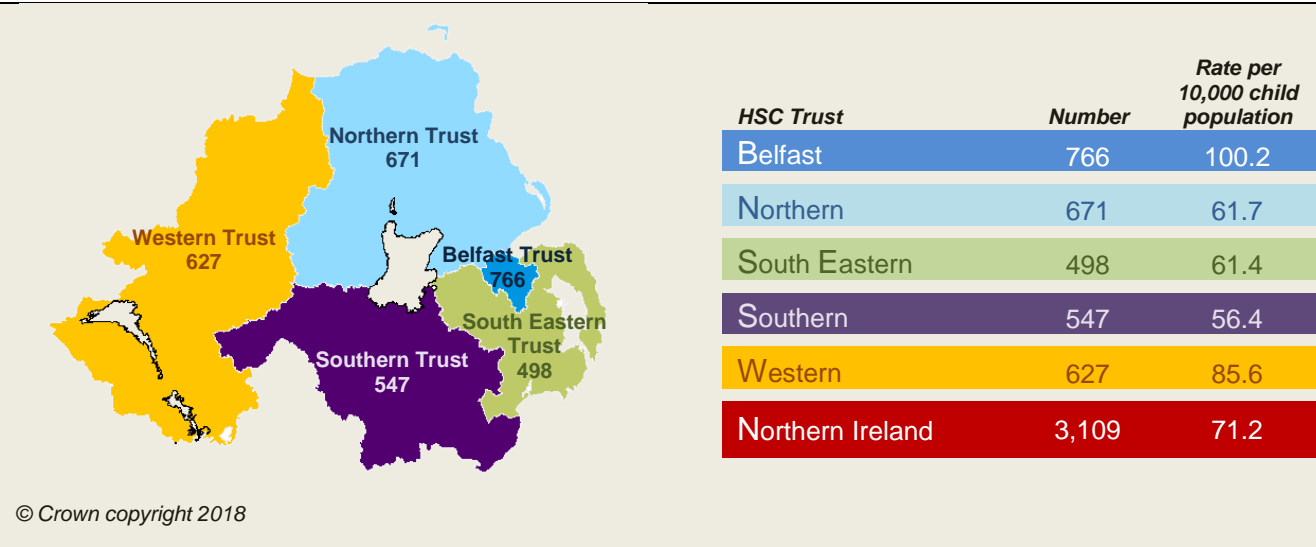
<sup>18</sup> 2017 Mid-Year Population Estimate (NISRA 2018)

The rise in numbers of looked after children in Northern Ireland is similar to the trend across the UK<sup>19</sup>. The increase may be explained by a number of factors including an increased awareness of child protection issues; greater willingness to take action to protect children who are potentially at risk and more adolescents becoming looked after due to family breakdowns.

The Belfast HSC Trust had the highest numbers of looked after children in 2017/18. Taking into account the size of the Trusts’ general child population<sup>20</sup>; the Belfast HSC Trust also had the highest rate of looked after children compared to the other Trusts. A possible contributing factor for this may be that the Belfast HSC Trust contains Northern Ireland’s biggest city, and this large urban area contains some of the most deprived areas within Northern Ireland.

Changes in the number of looked after children in the Trusts between 2016/17 and 2017/18 ranged from an increase of 13% in the Southern Trust to a decrease of 4% in the South Eastern Trusts.

**Figure 3.2. Children in Care by HSC Trust (31 March 2018)**



Source: Delegated Statutory Functions Return 10.3.1  
2017 Mid Year Population Estimate (NISRA 2018)

<sup>19</sup> Links to other UK publications can be found in the technical annex  
<sup>20</sup> 2017 Mid Year Population Estimate (NISRA 2018)

At 31 March 2018, some 5% (154) of the looked after children were also on the Child Protection Register. This was the same as the previous year. The largest proportion of these children (in care and on the Child Protection Register) were located in the Western HSC Trust (30%).

Source: Delegated Statutory Functions Return 10.3.11

Of those children looked after at 31 March 2018, a slightly higher proportion were male than female (54% and 46% respectively). This differed to the gender split in the general childrens population (51% male and 49% female).

The looked after children had an older age profile compared with the general child population in Northern Ireland; 42% of the looked after population were aged 12 years and over whereas 31% of the general child

population were in this age group.

**Table 3 A: Age distribution of Children in Care and the Northern Ireland Child Population**

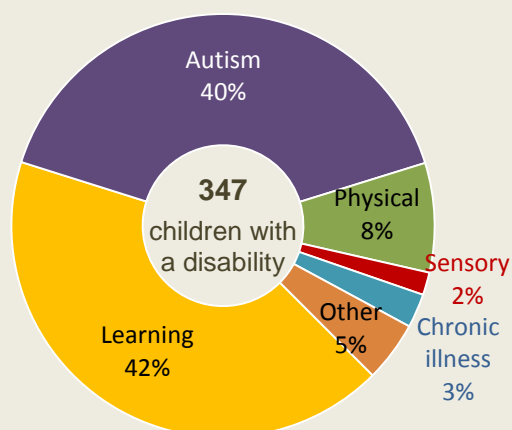
	Age group				
	Under 1	1-4	5-11	12-15	16 & over
Looked After Children	4%	18%	36%	26%	16%
Northern Ireland child population <sup>A</sup>	5%	23%	41%	21%	10%

Children in care had an older age profile than the general child population in Northern Ireland

<sup>A</sup> Source: Mid-Year Population Estimates 2017, NISRA (2018)

Source: Delegated Statutory Functions Return 10.3.1

**Figure 3.3. Children in Care with a Disability (31 March 2018)**



Of the 3,109 children in care in Northern Ireland, 11% were recorded as having a disability. Over two fifths of these had a learning disability.

Disability was more prevalent in the male population with 14% of males having a disability recorded compared to 8% of females. In each disability category, apart from sensory impairment<sup>21</sup>, males outnumbered females. This was especially evident in those with autism, with 77% being male. These findings are consistent with those published in *'The Prevalence of ASD (including Asperger's syndrome) in School Age Children in Northern Ireland'*<sup>22</sup>, published on the Department's website.

The largest proportion of looked after children with a disability were located in the Belfast HSC Trust (38%), where learning disability was the most common disability recorded.

Note: 'Autism' includes those with Aspergers and ADHD.

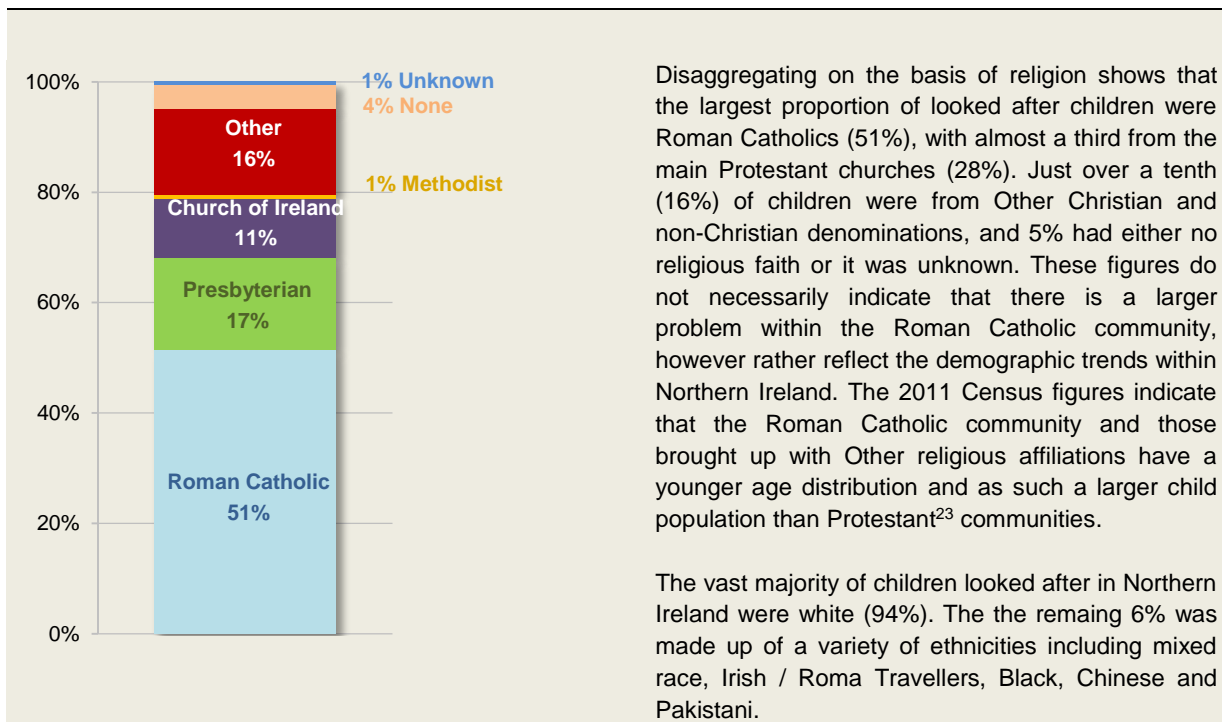
Children with no category assigned are included in 'Other'.

Source: Delegated Statutory Functions Return 10.3.12

<sup>21</sup> Please note that only a small number of children have a Sensory disability

<sup>22</sup> <https://www.health-ni.gov.uk/publications/prevalence-autism-including-asperger%E2%80%99s-syndrome-school-age-children-northern-ireland-1>

**Figure 3.4. Children in Care by Religion and Ethnicity (31 March 2018)**



Note: 'Church of Ireland' contains a small number of those included as 'Church of England'.

Source: Delegated Statutory Functions Return 10.3.2

<sup>23</sup> Census 2011: Detailed Characteristics for Northern Ireland on Health, Religion and National Identity, May 2013



## Legal Status of Children in Care

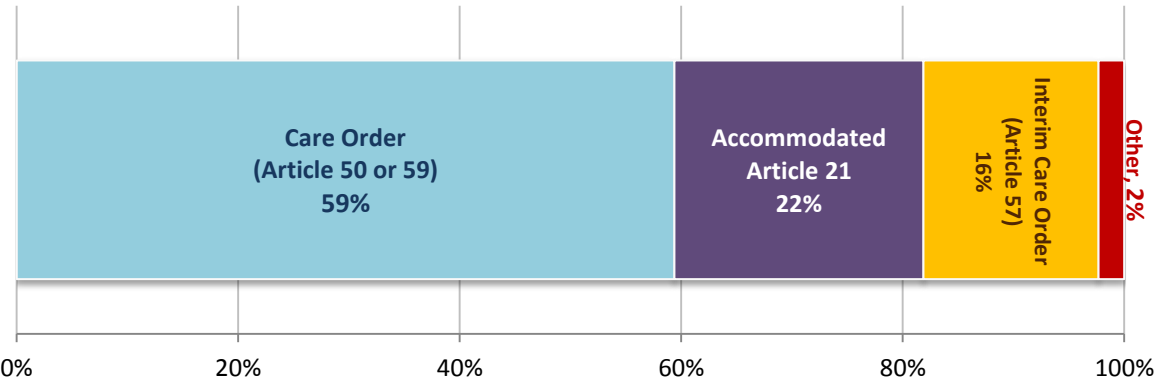
The legal status of looked after children was, in 2017/18, similar to that in previous years. The majority, 59%, of looked after children were subject to a Care Order (Article 50), 22% were Accommodated Article 21, 16% had an Interim Care Order and 2% had other legal statuses<sup>24</sup>.

*Before a Court makes a **Care Order** it must be satisfied that the child is suffering, or is likely to suffer, significant harm; and that the harm, or likelihood of harm, is attributable to: '(i) the care given to the child, or likely to be given to him if the order were not made, not being what it would be reasonable to expect a parent to give him; or (ii) the child's being beyond parental control.*

**Source: White, C. 'Northern Ireland Social Work Law' 2006**

There was some variation between the HSC Trusts, with the South Eastern Trust having 28% of its looked after population Accommodated under Article 21. In comparison 15% of children looked after in the Belfast HSC Trust had this legal status. Children accommodated under Article 21 have been placed in care with the permission of their parents.

**Figure 3.5. Legal Status of Children in Care at 31 March 2018**



Source: Delegated Statutory Functions Return 10.3.1

Some 22% of children in the Southern HSC Trust had an Interim Care Order at 31 March 2018. In contrast, 13% of children in the Northern HSC Trust had this legal status. An Interim Care Order is put in place if the proceedings for a Care Order are adjourned or in any family proceedings in which a Court orders a Trust to investigate the circumstances of a child. An Interim Order can initially be in place for up to eight weeks, for up to four weeks upon renewal and subsequent occasions that a Court deems an Interim Order necessary.

<sup>24</sup> Definitions of the different legal statuses can be found in appendix B

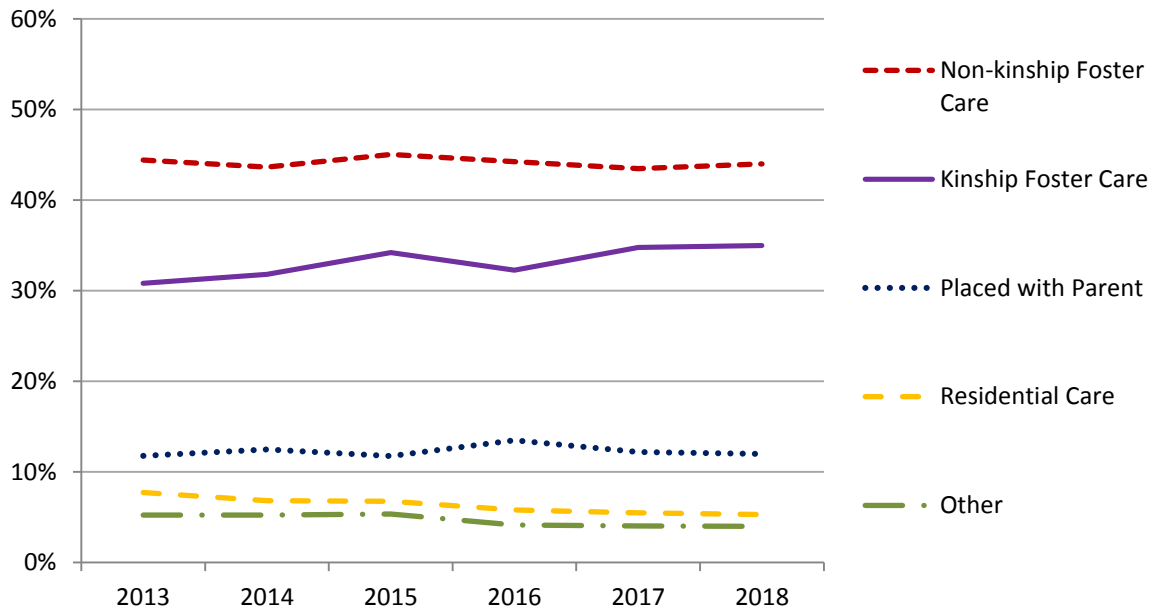
## Placement of Children in Care

Fostering continues to be the preferred placement option for children in care, with 79%<sup>25</sup> of children being fostered at 31 March 2018. A further 12% of children had been placed with parents, 5% were in residential care and 4% in other placements<sup>26</sup>. There have only been minor variations to these proportions the last six years.

The favouring of foster care as a placement type can be linked to the philosophy running through the Children (Northern Ireland) Order 1995 that safe family settings are a major way of supporting and helping children<sup>27</sup>. Furthermore, there has been a recent emphasis on kinship care, which means the child is placed with a relative, friend or other person with a prior connection with the child. It is however essential to note that the needs and circumstances of each child are unique and that a kinship care placement is not suitable for every child. Around two fifths of those children in foster care were in a kinship placement.

There has been a small increase in those foster care placements that are kinship placements from 40% in 2012 to 44% in 2018. Within the HSC Trusts, at 31 March 2018 the Western HSC Trust had the highest proportion, 55%, compared to the South Eastern HSC Trust which had the lowest, 36%. Over the five years from 2013 to 2018 the Western HSC Trust saw a growth in foster care placements that were kinship placements from 41% to 55%.

**Figure 3.6. Children in Care by Placement at 31 March (2013 – 2018)**



Source: Children Order Return LA2 & Delegated Statutory Functions Return 10.3.3

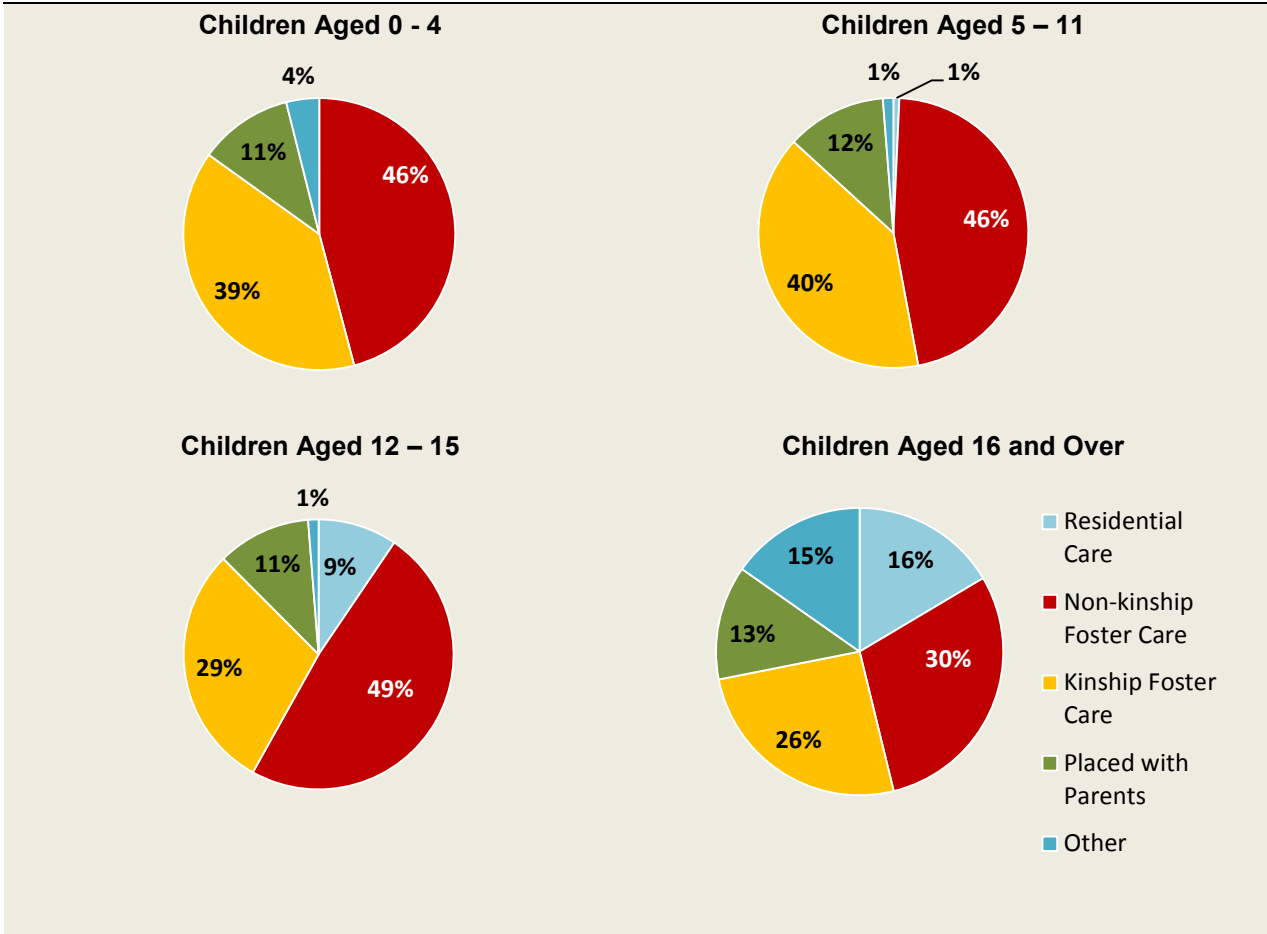
Note: Non-kinship foster care includes placements provided by Independent Providers

<sup>25</sup> Of those children placed in foster care some 48% were in non-kinship foster care, 44% in kinship foster care and 8% were placed with Independent Providers

<sup>26</sup> Description of placement types is included in Appendix B

<sup>27</sup> See "Introduction" for further details.

**Figure 3.7. Placement of Children in Care by Age Group at 31 March 2018**



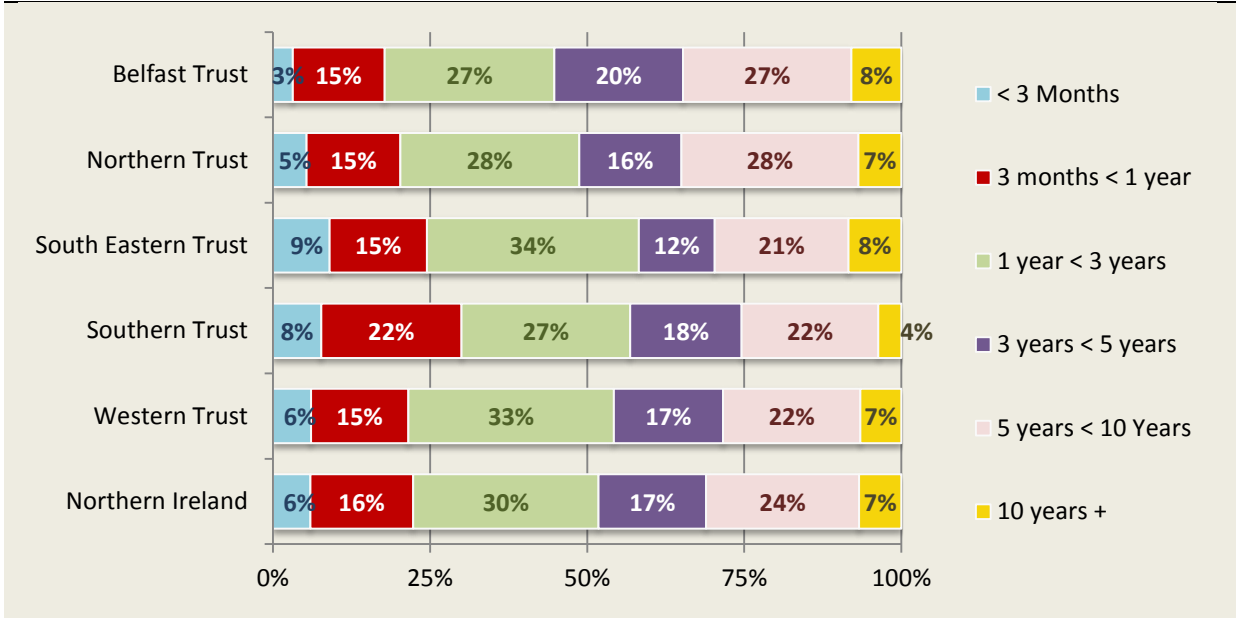
Source: Delegated Statutory Functions Return 10.3.3  
 Note: Non-kinship foster care includes placements provided by Independent providers

The age of a child in care can have an influence on the suitability of placement. In all age groups the majority of children were placed in foster care, though we can see from Figure 3.7 that this proportion decreased with age. Post-primary school aged children were more likely than their younger counterparts to find themselves in residential care, with 16% of those aged 16 and over in this placement. These figures are similar to those recorded in previous years.

### Duration in Care

Just over a fifth of looked after children at 31<sup>st</sup> March 2018 had come into care within the last year whereas almost a third had been in care for five years or longer.

**Figure 3.8. Children in Care by Duration and HSC Trust at 31 March 2018**



Source: Delegated Statutory Functions Return 10.3.4

The duration in care for the looked after children population was similar in all of the HSC Trusts. However 8% of the looked after population in the Belfast and South Eastern HSC Trusts had been in care for ten years or longer, in contrast 4% of the Southern HSC Trust looked after population had been in care for this period of time. This has been an ongoing trend over the previous five years.

Age will naturally be closely linked with duration in care; for example a one year old child cannot have been in care for more than one year. Over two fifths of both the 12 -15 age group and the 16 and over age group had been in care for five years or longer.

### Admissions to Care

During 2017/18, 848 children were admitted to care in Northern Ireland; this was 1% less than in 2016/17. The Southern HSC Trust accounted for the largest proportion of admissions (25%), followed by the Northern (21%), Western (20%) and South Eastern (18%) HSC Trusts, with the smallest proportion of admissions in the Belfast HSC Trust (17%).

The legal status of seven tenths (70%) of the children was Accommodated Article 21<sup>28</sup> at the time of admissions to care. This pattern was evident throughout Northern Ireland however there was some variation, with 62% of children in the Belfast HSC Trust admitted with this legal status compared to 79% in the Northern HSC Trust. The proportion of children admitted

<sup>28</sup> See Appendix B for description of legal statuses

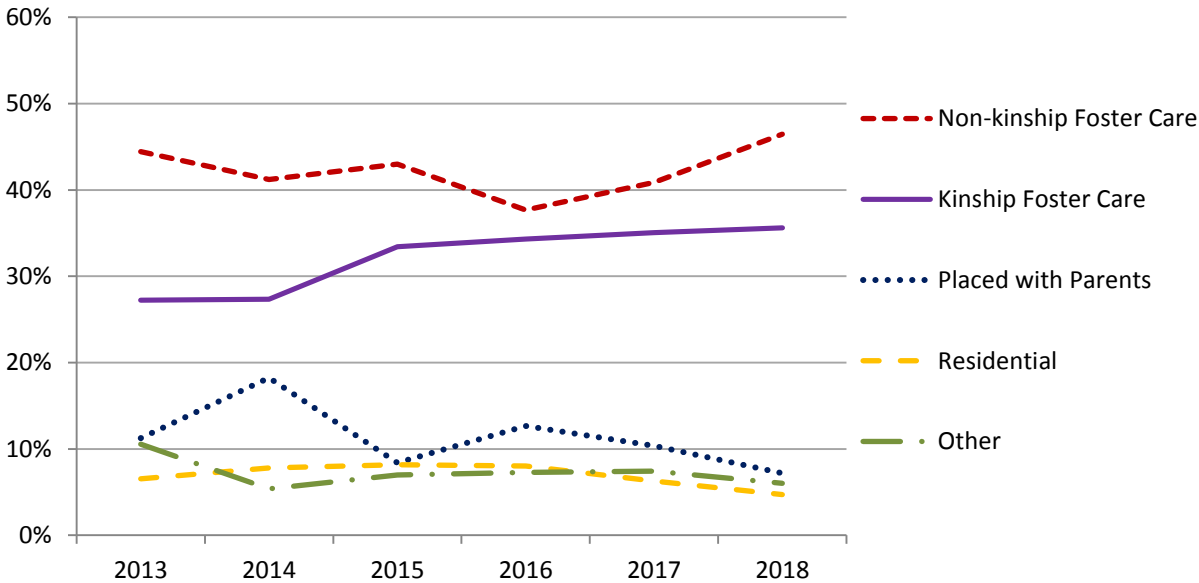
to care under an Emergency Protection Order was two times higher during 2017/18 than any of the previous three years, accounting for 10% of all admissions.

*Of the 663 admissions to foster care during 2017/18, 46% were with kinship carers.*

In recent years, the vast majority of children admitted to care have initially been placed in foster care<sup>29</sup>, with a recent narrowing of the proportions of those placed in kinship care and non-kinship care.

There were some differences between the HSC Trusts in terms of the placement when admitted to care. In all HSC Trusts the majority of admissions were placed in foster care. This ranged from 91% of admissions in the Southern HSC Trust to 69% in the Western HSC Trust. The Western HSC Trust placed 11% of its admissions in 'Other' accommodation whilst the Southern HSC Trust had no admissions to this placement category. However, due to the low numbers involved, especially in relation to residential and other placements, caution must be taken when interpreting the figures.

**Figure 3.9. Admissions to Care by Placement during year ending 31 March (2013 – 2018)**



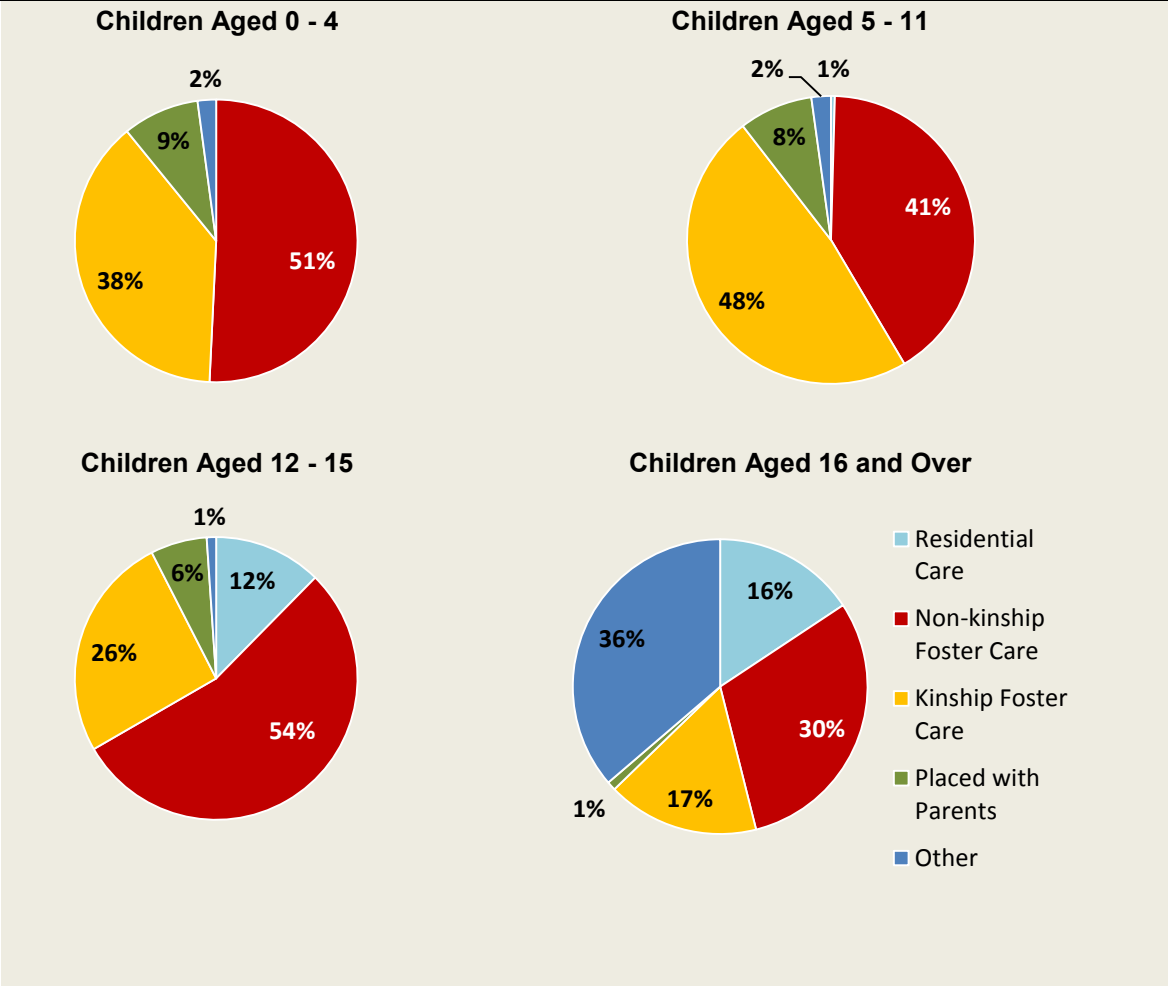
Source: Delegated Statutory Functions Return 10.3.39  
 Note: Non-kinship foster care includes placements provided by Independent providers

Age can have an influence upon the placement of those admitted to care. Across each of the age groups, foster care accounted for the largest proportion of admissions. However, 89% of admissions of the younger children (under the age of 12) entered foster care, compared with only 47% of those aged 16 and over. Those young people aged 16 or over who were admitted

<sup>29</sup> Of those admissions to foster care, 52% were placed in non-kinship care, 43% in kinship care and 5% with Independent Providers

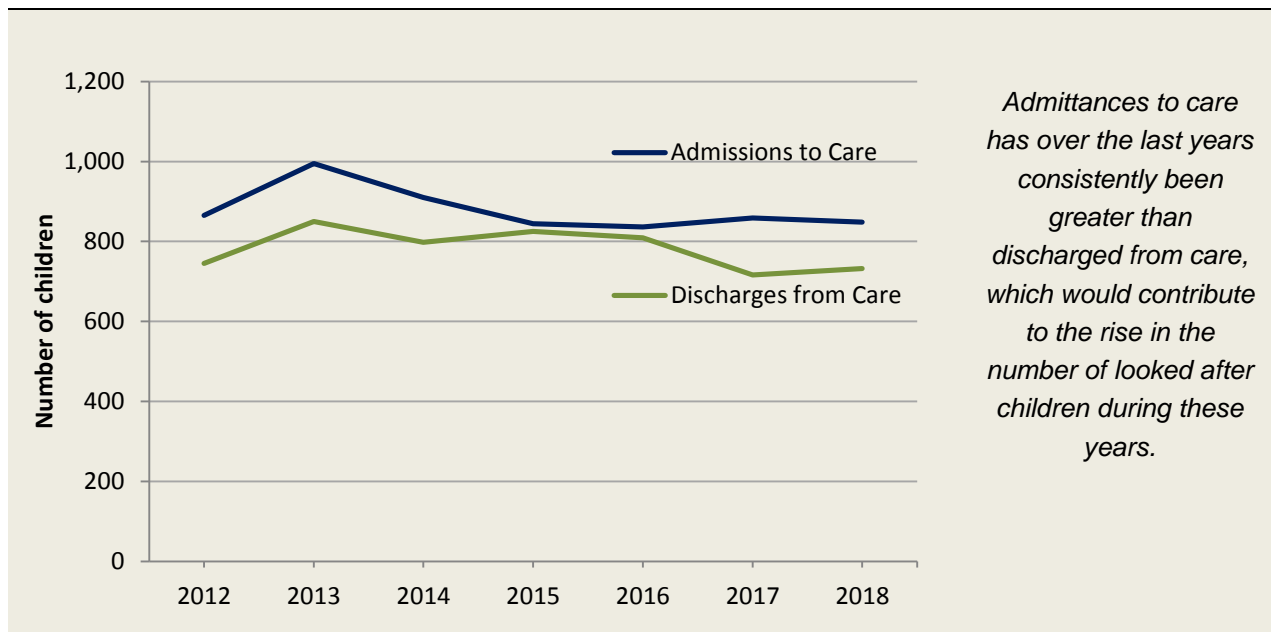
to care were also the least likely to be placed with parents and had the largest proportion who were placed in both residential and other types of accommodation.

**Figure 3.10. Admissions to Care by Placement and Age during year ending 31 March 2018**



Source: Delegated Statutory Functions Return 10.3.39  
 Note: Non-kinship foster care includes placements provided by Independent providers

**Figure 3.11. Admissions and Discharges from Care during year ending 31 March (2013 – 2018)**



Source: Delegated Statutory Functions Returns 10.3.40 & 10.3.41

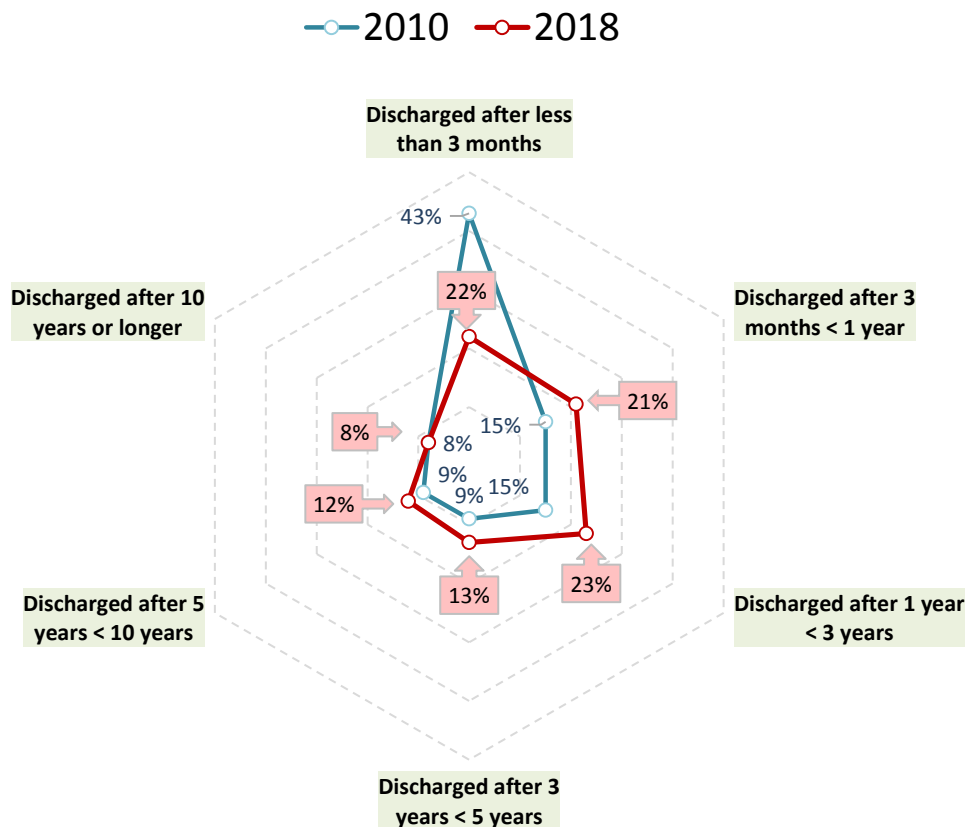
## Discharges from Care

During the year ending 31 March 2018, there were 732 discharges from care in Northern Ireland, this was an increase of 2% on the previous year. The largest proportion of all discharges occurred in the Belfast HSC Trust (22%), with the least occurring in the Western HSC Trust (17%).

In general, between 2007/08 and 2013/14, most children were discharged from care after less than three months of becoming looked after. However there has been a large decline in this proportion from 44% in 2007/08 to 22% in 2017/18. This decline has coincided with notable increases in those discharged having spent between one and three years in care (see Figure 3.12 below for comparison of 2009/10 and 2017/18).

Those discharges that occurred after three to five years, five to ten years and ten years or more have remained relatively steady over the same time period. They have each accounted for around a tenth of the discharges year on year.

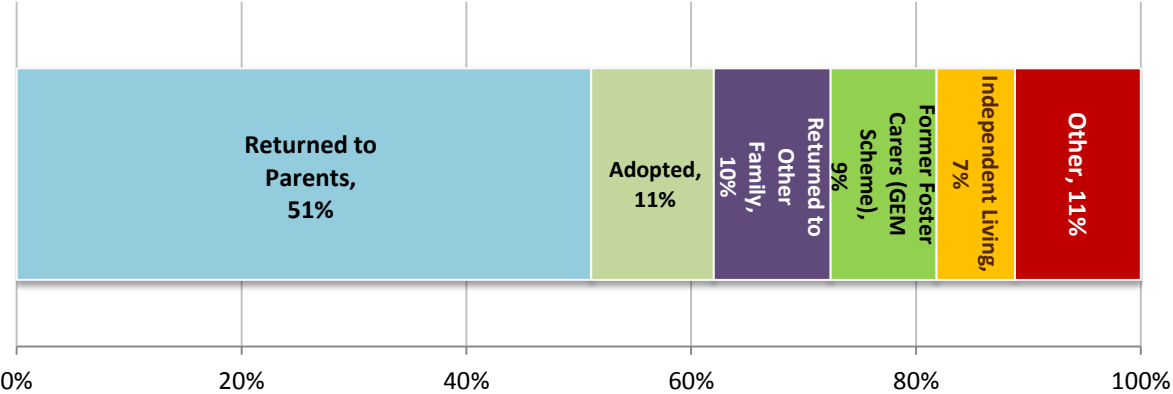
**Figure 3.12. Discharges by duration in Care during year ending 31 March 2010 and 2018**



Source: Delegated Statutory Functions Return 10.3.41



**Figure 3.13. Destination of Children Discharged from Care during year ending 31 March 2018**



Source: Delegated Statutory Functions Return 10.3.42

Half (51%) of children discharged from care during 2017/18 returned to live with their parents, 11% were adopted from care, 10% returned to live with other family members, 11% were in Other Accommodation<sup>30</sup>, 9% were living with their former foster carers via the ‘Going the Extra Mile (GEM) Scheme and 7% were living independently.

The GEM Scheme allows those aged 18 – 21 to live with their former foster carers promoting continuity in the living arrangements in post care life. The scheme ensures that appropriate and agreed levels of financial and other supports are available to assist carers to continue to meet the care, accommodation and support needs of these young people.

**Short Breaks<sup>31</sup>**

*During the year ending 31 March 2018 there were 9,275 episodes<sup>32</sup> of short breaks in Northern Ireland<sup>33</sup>. Short breaks refer to either a series of short-term pre-planned or ad-hoc placements where a child moves temporarily from their parents/carers in order to allow the child and/or carer a period of respite. During a short break, the child becomes a looked after child by virtue of the short break arrangement. The largest proportion of short break episodes took place in the Northern HSC Trust (27%), 23% in the Southern HSC Trust, 21% in the South Eastern HSC Trust, 19% in the Belfast HSC Trust and 10% in the Western HSC Trust.*

<sup>30</sup> ‘Other Accommodation’ includes Bed & Breakfast, Hostels, Supported Board and Lodgings, Prison, Hospital etc.  
<sup>31</sup> A child taken into care for a Short Break is not considered to be looked after and is not counted in previous figures  
<sup>32</sup> An episode is a period of involvement with Social Services  
<sup>33</sup> Source: Delegated Statutory Functions Return 10.3.5

## UK & Ireland Comparison of Children in Care Statistics<sup>34</sup>

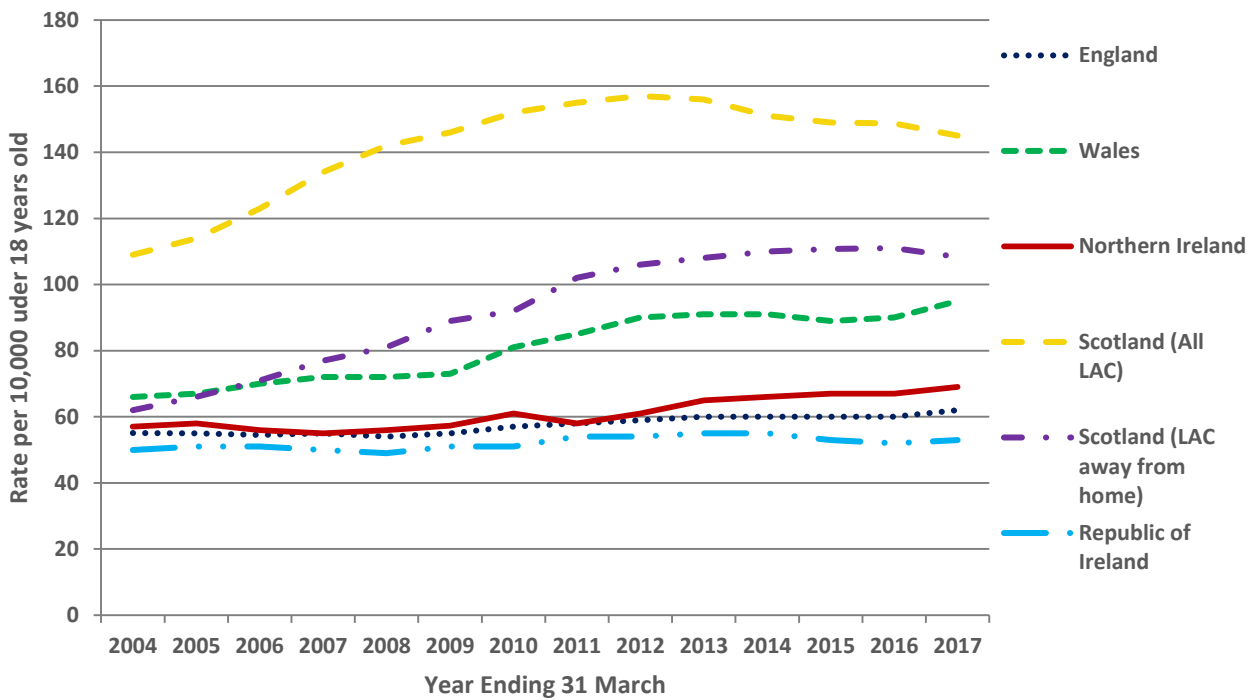
Definitions of what constitutes a child in care differs slightly across the different countries of the UK & Ireland. The main difference being that in Scotland children looked after under a supervision requirement are considered to be in the care of their local authority, this is not the case in the rest of the UK. The result of this is that simply comparing the rates of looked after children leaves Scotland with much higher figures than the rest of the UK. The figure below therefore contains two trend lines for Scotland, one with all looked after children and one excluding those in care under a supervision order. Please note that as Scottish figures for year ending 2018 are not available, only figures up to 2017 will be compared.

The rate of looked after children in Northern Ireland remained relatively steady between 2004 and 2011, and has been steadily rising ever since. It has remained on a par with the rate in England and the Republic of Ireland, however a small gap has emerged between Northern Ireland and the Republic of Ireland in the last few years. Figures for all looked after children show that Scotland has a dramatically larger rate of looked after children in comparison to the rest of the UK. When excluding those looked after under a supervision order, Scotland had similar rates of looked after children as the other UK countries at the beginning of the period. However, since 2006, the rates in both Scotland and Wales increased. While the rise in Wales has not been as marked as that observed in Scotland, it is still notably higher than the rates seen in Northern Ireland and England.

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<sup>34</sup> As Scottish figures for year ending 31 July 2018 are not available, only figures up to 2017 will be compared.

**Figure 3.14. UK & Ireland Comparison of Rate of Children in Care per 10,000 children (2004 – 2017)**



Sources: England – ‘Children Looked After in England (including Adoption and Care Leavers)’; Wales – ‘Adoptions, outcomes and placements for children looked after by local authorities’; Scotland – ‘Childrens Social Work Statistics’; Republic of Ireland - <http://www.tusla.ie/data-figures/>

Note: Scotland publishes figures at 31 July. However to aid comparisons all figures above are at 31 March.

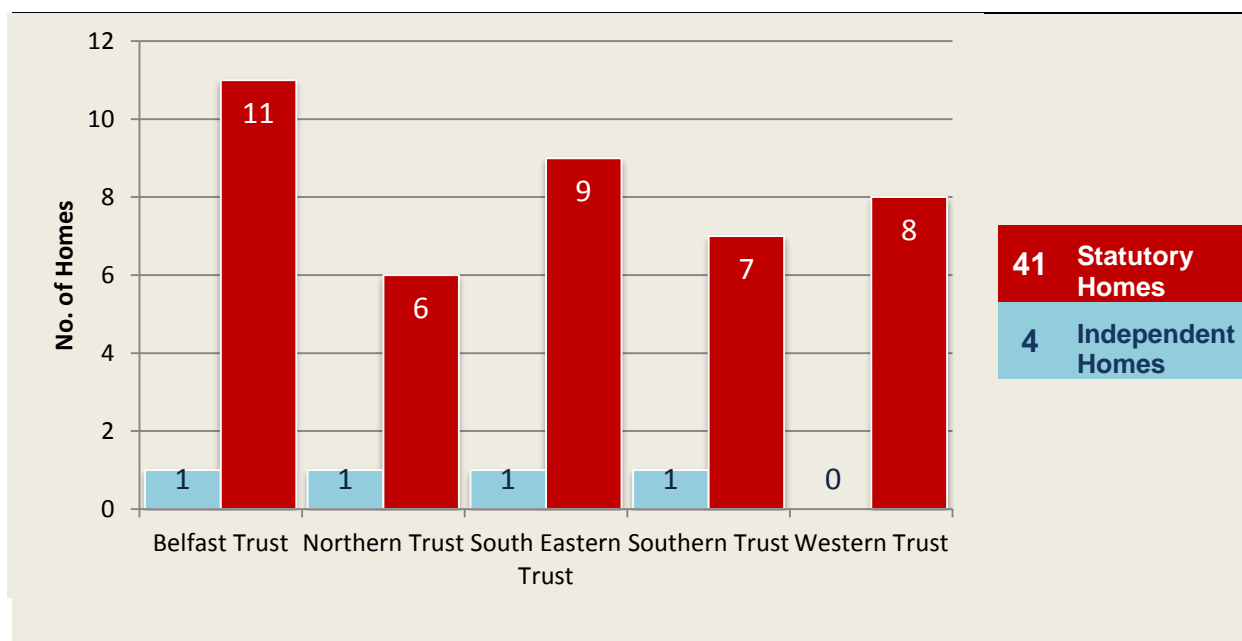
# Section Four: Children's Residential Homes

## Statutory and Independent Residential Homes

At 30 June 2018, there were 45 Children's Residential Homes in Northern Ireland, 41 homes were statutory and 4 were independent. Statutory homes provided 271 places at an average of 7 places per home; independent homes provided 24 places at an average of 6 per home.

The South Eastern HSC Trust had the highest average number of places per statutory home at 8, while the Belfast, Northern and Southern HSC Trusts had the lowest average at 6 respectively. The Western HSC Trust did not have any Independent Children's Homes; there was one independent home in each of the other HSC Trusts.

**Figure 4.1. Number of Children's Homes by HSC Trust at 30 June 2018**

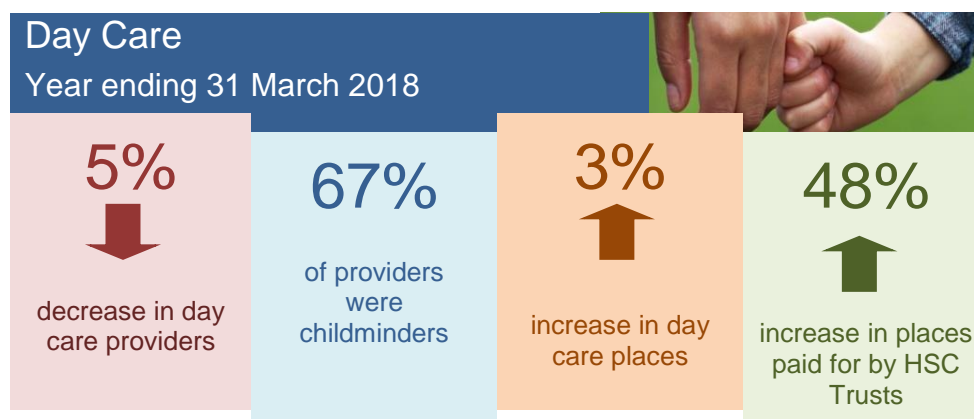


Source: Regulation and Quality Improvement Authority

# Section Five: Children's Day Care

## Key Findings

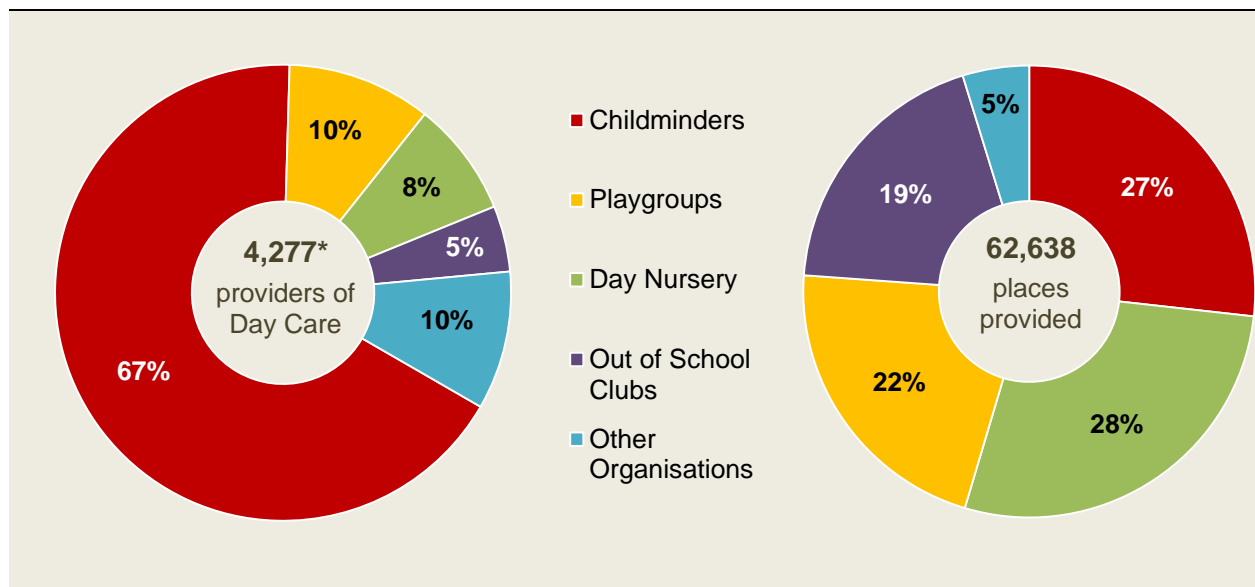
- At 31 March 2018 there were 4,277 individuals/facilities registered as day care provision for children aged 12 and under in Northern Ireland. This was a 5% decrease on the previous year;
- Similar to the previous year, child-minders made up the largest number of day care providers followed by, in descending order, playgroups, day nurseries, out of school clubs and other organisations; and
- At 31 March 2018 there were 62,638 registered places for day care in Northern Ireland representing an increase of 3% on the previous year.



## Children’s Day Care Provision in Northern Ireland

At 31 March 2018, 4,277 people or facilities were registered for the provision of day care for children under the age of 12 with HSC Trusts in Northern Ireland, providing 62,638 places. In terms of those providing day care this was a decrease of 5% on the previous year, with a 3% increase in the number of registered places.

**Figure 5.1. Children’s Day Care Provision by Provider and number of Places at 31 March 2018**



Source: Delegated Statutory Functions Return 10.7.1

\* Some 226 Day Nurseries are also registered as Out of School and are included in both categories. A single registration only is required for a Day Nursery which also provides out of school services.

Note: ‘Other Organisations’ include crèches, summer schemes and two year old programmes.

Day care provision for children can be divided into five main categories; child-minders, playgroups, day nurseries, out of school clubs and other organisations.

A child-minder is someone who looks after children under the age of five or school age children outside school hours and in the holidays. They use domestic premises, usually their own home. This is a service often offered year round, with fees and conditions negotiated between the child-minder and parents. At 31 March 2018, there were 2,871 child-minders providing 16,761 day care places. This equated to almost two thirds of those providing day care services and just over a quarter of the places provided with an average of 6 child places per child-minder.

Playgroups provide sessions (lasting no more than four hours) of care for children aged between three and five years old, offering learning experiences through structured play in groups. Most of these groups are run on a self-help basis by groups of parents with some paid staff; they can also be run by Trusts or voluntary organisations such as the NSPCC. Playgroups accounted for a tenth of all day care providers and a fifth of the total number of places available. In total there were 437 playgroups providing 13,492 places, an average of 31 places per playgroup.

Day nurseries provide care for children less than five years old for the length of the working day. Children can attend on either a full-time or part-time basis depending on needs. Nurseries may be run by voluntary organisations, private companies, community groups or by employers for their workforce. There were 349 day nurseries in Northern Ireland at 31 March 2018 registered with HSC Trusts, offering 17,443 places. This meant an average of 50 places per nursery.

Some 5% of day care provision was made up of stand-alone Out of School Clubs<sup>35</sup>, providing 10% of all day care places. A further 9% of day care places were provided by day nurseries which also provided Out of School Clubs. These clubs offer care for school age children from the end of the school day until a parent can collect the child. They can be run by a Trust, voluntary organisations or community groups.

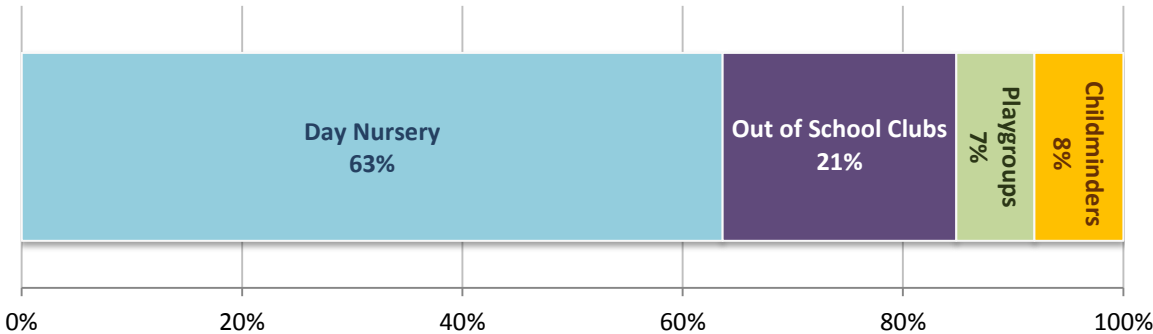
Other day care providers<sup>36</sup> made up the least amount of providers and places with 420 providers and 2,981 places. As this is a variety of different types of provider an average number of places cannot be provided due to the different cohorts using their services.

### HSC Trust Sponsored Places in Day Care

At 31 March 2018, HSC Trusts in Northern Ireland were sponsoring 750 places in day care for children. This was an increase of 48% on the previous year. The Belfast HSC Trust accounted for 59% of all sponsored places in day care; the Southern HSC Trust was the only Trust that recorded a decrease in the number of sponsored day care places in comparison to the previous year.

Places in day nurseries accounted for the largest proportion of sponsored places, followed by out of school clubs, child-minders and playgroups.

**Figure 5.2. Sponsored Day Care Places by Day Care Providers at 31 March 2018**



Source: Delegated Statutory Functions Return 10.1.12

<sup>35</sup> Some 226 Out of School Clubs are provided by Day Nurseries with 5,729 registered places available. A single registration only is required for a Day Nursery which also provides out of school services.

<sup>36</sup> Other day care providers include 'Approved Home Childcarers'. Home childcarers enable parents to have their children cared for in their own home. They are professional childcarers, offering children safe, good quality care and providing them with play and learning opportunities that contribute to their development.

# Appendix A - Technical Notes

## A National Statistics Publication

The United Kingdom Statistics Authority (UKSA) has designated these statistics as National Statistics, in accordance with the Statistics and Registration Service Act 2007 and signifying compliance with the Code of Practice for Official Statistics.

Designation can be broadly interpreted to mean that the statistics:

- meet identified user needs;
- are well explained and easily accessible;
- are produced according to sound methods; and
- are managed impartially and objectively in the public interest.

Once statistics have been designated as National Statistics it is a statutory requirement that the code of practice shall continue to be observed.

All assessment reports can be found on the UKSA [website](#).

If you have any comments on this publication please contact:

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or

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## Children's Social Care Statistics for Northern Ireland

'Children's Social Care Statistics for Northern Ireland', first published in 2012, provides a comprehensive series of data on the Children (Northern Ireland) Order 1995, replacing 'Children Order Statistical Tables for Northern Ireland' together with its companion publication the 'Children Order Statistical Trends for Northern Ireland,' which were first published in 2002 and 2005 respectively. Prior to this, information was published in 'Key Indicators of Personal Social Services for Northern Ireland'. These publications can be found on the Department of Health's [website](#).

## Data Collection

The information presented in this bulletin derives from Children Order statistical returns and Health and Social Care Board Delegated Statutory Functions (DSF) returns provided by each of the five Health and Social Care (HSC) Trusts in Northern Ireland to the Health and Social Care Board (HSCB). The HSCB then supply this data to Community Information Branch (CIB) in the Department of Health (DoH).

The statistical returns are aggregated counts relating to child protection, children in need, looked after children and day care provision for children. Figures relate to 31 March 2018 and for the year ending 31 March 2018, and breakdowns are available by age, gender and other key variables, such as length of time in care and duration on the Child Protection Register.



## Statement of Administrative Sources

Children Order and DSF returns are derived from Trust administrative systems used to support HSC Trusts in delivering social care services to children. A detailed 'Statement of Administrative Sources' is available on the Department's [website](#).

## Data Quality

To ensure the statistical returns are accurate, HSC Trusts have six weeks to update the main electronic administrative system (SOSCARE or PARIS) with relevant information before submitting to HSCB. When returns are received by Community Information Branch, checks are carried out to verify that information is consistent both within and across returns. Trend analyses are used to monitor annual variations and emerging trends. Queries arising from validation checks are presented to HSCB for clarification and if required returns may be amended and/or re-submitted.

Counts of children in need for some Trusts exclude children whose details are not recorded on the electronic administrative system.

A detailed quality report for children's community statistics is available on the Department's [website](#).

## Rounding Conventions

Percentages have been rounded to whole numbers and as a consequence some percentages may not sum to 100. A 0% may reflect rounding down of values under 0.5%

## Disclosure Conventions

To prevent disclosure of the identity of individual children it has been necessary to suppress figures whenever it would be possible to calculate the value of a cell with a low count by means of simple arithmetic. The CIB policy statement on disclosure and confidentiality is available on the Department's [website](#).

## Revisions Policy

These data are revised by exception. If this occurs the circumstances of the revision are reported on our website and the dates figures are revised are noted both on the website and within the publication. The full revisions policy for these and other community statistics is published on the Department's [website](#).

## Main Uses of Data

Data from the 'Children's Social Care Statistics' publication meets the information need of a wide range of internal and external users. Within DoH figures from the publication are used by policy officials to monitor the volume of activity, Inter Agency working and reasons for referrals and to compare characteristics of children in need, looked after children and children on the child protection register, monitor any increase in the children in need population and monitor the impact of policy and to report on achievement against targets.

## Related Publications

Statistics on similar themes to those detailed within this bulletin, published by other countries in the United Kingdom and Ireland are outlined below.

A report titled '[Safeguarding children statistics: the availability and comparability of data in the UK](#)' was produced by the Childhood Wellbeing Research Centre in September 2011. It evaluates the data available across the United Kingdom relating to the safeguarding of children.

### *England*

[Children looked after in England including adoption: 2016 to 2017](#)

[Characteristics of children in need: 2016 to 2017](#)

[Childcare and early years providers survey: 2016](#)

[Children accommodated in secure children's homes: 31 March 2018](#)

### *Wales*

[Children looked after by local authorities, 2016/17](#)

[Children receiving care and support, 2016/17](#)

### *Scotland*

[Children's Social Work Statistics 2016/17](#)

### *Republic of Ireland*

[TUSLA Child and Family Agency – Performance and Activity Reports](#)

### Next Release

The next release of these statistics, for the year ending 31 March 2019, is scheduled for October 2019. The publication schedule for Health and Social Care statistics in Northern Ireland will be available from the DoH [website](#).

# Appendix B – Data Definitions

## **Children (Northern Ireland) Order 1995**

The Children (Northern Ireland) Order was made on 15 March 1995. The Order deals with the care, upbringing and protection of children, including disabled children. It reforms, consolidates and harmonises most of the public and private law relating to children in a single coherent statutory framework along the lines of the Children Act 1989 in England and Wales.

### **Child**

Under the Children (Northern Ireland) Order 1995, a child is defined as a person under the age of 18.

### **Children in Need Referral**

A referral of a child to Social Services, regardless of the source of referral. A child may be referred several times over the course of a year.

### **Religion**

Roman Catholic: Refers to anyone of the Roman Catholic faith.

Presbyterian: Refers to all stating their denomination to be Presbyterian. Include here also Church of Scotland but exclude all other groupings with 'Presbyterian' in their title, e.g. Free Presbyterian, Non-subscribing Presbyterian, etc. These groups are recorded under 'Other denominations'.

Church of Ireland: Refers to all stating their denomination to be Church of Ireland.

Methodist: Refers to all stating their denomination to be Methodist.

Other Denominations: Refers to all other Christian and non-Christian denominations and faiths.

None: 'None' refers to those with no religious persuasion.

Refused/Unknown: Refers to those who refuse to give details of their religious affiliation or whose religious affiliation cannot be established.

### **Ethnic Group**

White: 'White' refers to all white or olive skinned people from Europe, North Africa, Middle East, the Americas and Australasia.

Chinese: 'Chinese' refers to all those belonging to the Chinese ethnic group, originating from mainland China, Hong Kong, Singapore, Taiwan and Malaysia.

Irish Traveller: 'Traveller' refers to persons sometimes known as gypsies or itinerants but excluding New Age Travellers. The term applies to those who travel from place to place, are temporarily based on a traveller site or who are settled in permanent accommodation on a traveller site.

Indian: 'Indian' refers to those from the India.

Pakistani: 'Pakistani' refers to those from Pakistan.

Bangladeshi: 'Bangladeshi' refers to those from Bangladesh.

Black Caribbean: 'Black Caribbean' refers to those of Afro-Caribbean origin.

Black African: 'Black African' refers to Black Africans.

Black Other: 'Black Other' refers to those of other origin including African Americans.

Mixed Ethnic Group: 'Mixed Ethnic Group' refers to those with mixed ethnicity.

Other Ethnic Group: 'Other' refers to those other ethnic groups. Included here are those from Malaysia (other than Chinese), Vietnam, Japan, etc.

Roma Traveller: 'Roma Traveller' refers to persons sometime know as gypsies or itinerants. The term 'Roma' is generally acceptable in collectively describing Travellers of European origin. Many have now settled into housing, however a Romani language is usually spoken in the home.

Not stated: Refers to those who refuse to give details of their ethnic group or whose ethnic group cannot be established.

### **Child Protection Register**

A register must be maintained by each Trust listing every child in the Trust area who has been abused or who is considered to be at risk of abuse, and who is currently the subject of a child protection plan.

### **Child Protection Registration**

Registration is the placement of a child on to the Child Protection Register. Where a child has moved on or off the Register several times during the year each registration is recorded.

### **Child Protection Deregistration**

Deregistration is the removal of a child from the Child Protection Register. Where a child has moved on or off the Register several times during the year each deregistration is recorded.

### **Child Protection Re-registration**

Re-registration is the placement on to the Child Protection Register of a child who has already been on the register, irrespective of the date of their first registration on the Register.

### **Child Protection Referral**

Child protection referrals are those referrals for which the initial assessment indicates that there may be child protection issues. The threshold for action should be the allegation or suspicion of child abuse. However the balance needs to be struck between taking action designed to protect the child from abuse while at the same time avoiding unnecessary intervention. Except in emergency situations or urgent cases when immediate protective action is required, referrals will require preliminary discussion with other professionals from the child protection agencies and with the referrer. In some cases it will be necessary to seek specialist opinion.

In some cases action other than a formal investigation will be decided upon following the consultation process. This might include the provision of support for the family. Such a decision should be discussed and agreed with a social worker in consultation with the team leader or supervisor; and recorded and communicated to senior management.

The definition is not taken to mean all referrals, as some may require action such as advice or family support rather than child protection procedures.

### **Child Protection Investigation**

The purpose of an investigation is to establish whether a Trust should make an application for a court order or exercise any of its other powers, for example the provision of services under Part IV of the Children Order.

Protocol Not Appropriate: this option used when a Principal Social Worker or above makes the decision that the threshold for a case conference has been met. Article 66 of the Children (Northern Ireland) Order 1995, places a duty on the Health and Social Care Trusts to investigate whether a child is suffering or likely to suffer 'significant harm'. Child abuse, whether sexual, physical, emotional or neglect, may result in significant harm and Social Services have a duty to investigate. There may be cases of poor parenting and situations that may have an innocent explanations which need not be criminalised by involving Police from the outset.

### **Category of Abuse for Child Protection Registration**

The category of abuse under which a child is registered will have been decided upon at the child protection conference, when agreement was reached that registration was necessary. If a child suffers multiple abuses, this should be recorded against the main category of abuse. The abuse may be potential, suspected or confirmed, although the terms 'actual' or 'likely' occur. Potential and suspected equate with 'likely' and confirmed with 'actual'. The categories are:

- |  |                                      |
|--|--------------------------------------|
| 1. <b>Neglect, Physical Abuse and Sexual Abuse</b> | 10. Main category - sexual abuse     |
| 2. Main category - neglect                         | 11. <b>Physical and Sexual Abuse</b> |
| 3. Main category - physical abuse                  | 12. Main category - physical abuse   |
| 4. Main category - sexual abuse                    | 13. Main category - sexual abuse     |
| 5. <b>Neglect and Physical Abuse</b>               | 14. <b>Neglect (only)</b>            |
| 6. Main category - neglect                         | 15. <b>Physical Abuse (only)</b>     |
| 7. Main category - physical abuse                  | 16. <b>Sexual Abuse (only)</b>       |
| 8. <b>Neglect and Sexual Abuse</b>                 | 17. <b>Emotional Abuse (only)</b>    |
| 9. Main category - neglect                         |                                      |

Neglect: The actual or likely persistent or severe neglect of a child, or the failure to protect a child from exposure to any kind of danger, including cold or starvation, or persistent failure to carry out important aspects of care, resulting in significant impairment of the child's health or development, including non-organic failure to thrive.

Physical Abuse: Actual or likely deliberate physical injury to a child, or wilful or neglectful failure to prevent physical injury or suffering to a child including deliberate poisoning, suffocation or Munchausen syndrome by proxy.

Sexual Abuse: Actual or likely sexual exploitation of a child or adolescent. The child may be dependent and/or developmentally immature.

Emotional Abuse: Actual or likely persistent or severe emotional ill-treatment or rejection resulting in severe adverse effects on the emotional, physical and/or behavioural development of a child. All abuse involves some emotional ill-treatment. This category should be used where it is the main or only form of abuse.

### **Legal Status**

The legal framework for compulsory intervention in the care and upbringing of children. If more than one legal status is indicated or in force for the child at 31 March, the latest one only is recorded.

Emergency Protection Order (Article 63 & 64): An Emergency Protection Order (EPO) is intended for use in urgent cases to protect a child in the short-term. Almost anyone with a concern can apply for an EPO, although in most circumstances a Trust will seek one. Where the applicant is a Trust or the NSPCC they must show that in the course of fulfilling their duty to investigate they are being unreasonably frustrated in gaining access to the child. Anyone else applying for an EPO they must show that the child is likely to suffer significant harm unless removed to, or allowed to remain, in a safe place.

An EPO last for eight days but can be extended on one occasion for a further seven days. An application to discharge the order cannot be made within the first 72 hours giving a Trust sometime to decide what actions to take in respect of the child. The person to whom the order is addressed also gains parental responsibility for the child for the duration of the order.

Accommodated (Article 21): Children with this legal status have been accommodated by a HSC Trust if there is no one who has parental responsibility for them, they have been lost or abandoned or of the person who has been caring for them has been prevented, for whatever reason, from providing them with suitable accommodation or care. Children are often accommodated with the permission of their parents.

Care Order (Article 50 or 59): A Care Order accords the HSC Trust parental responsibility and allows for the child to be removed from the parental home. This does not extinguish the parental responsibility of the child's parents but means that they cannot exercise this responsibility while the Care Order is in place. In order for a Court to make a Care Order it must be satisfied that the child is suffering or is likely to suffer significant harm and that the harm or likelihood of harm is attributable to the care given to the child, or likely to be given to the child, not being what it would be reasonable to expect a parent to give or the child being beyond parental control.

Interim Care Orders (Article 57): An Interim Care Order is put in place following an adjournment of proceedings for a Care Order or in any family proceedings in which a Court orders a Trust to investigate the circumstances of a child. An Interim Care Order can be in place for up to eight weeks initially and for

a further four weeks upon renewal and subsequent occasions that Court deems an Interim Order necessary.

Supervision Order: This order requires the Trust to advise, assist and befriend the supervised child and can only be granted if the same threshold conditions that apply for Care Orders are met. This Order does not give the Trust parental responsibility. It does allow a social worker to issue directions about the child's upbringing including place of residence and involvement in certain programmes. Schedule 3 of the Children Order sets out the full range of matters that may be addressed in a Supervision Order.

Interim Supervision Orders (Article 57): An Interim Supervision can be put in place following an adjournment of proceedings for a Supervision Order or in any family proceedings in which a question arises with respect to the welfare of any child, it appears to the court that it may be appropriate for a supervision order to be made with respect to him, the court may direct the appropriate authority to undertake an investigation of the child's circumstances.

### **Looked After Child / Child in Care**

A child is looked after by an Authority if he or she is in their care or if he or she is provided with accommodation for a continuous period of more than 24 hours by the authority in the exercise of its Social Services function.

### **Placements**

Residential Care: Residential care refers to care which takes place in statutory, voluntary or private children's homes.

Non-kinship Foster Care: Foster care includes children fostered with persons who are not related to the child, including placements provided by Independent Providers.

Kinship Foster Care: Kinship Foster care includes children fostered with a relative, friend or other person with a prior connection to the child. A 'connected person' means a relative friend or other person connected with the child. This may be someone who knows the child in a more professional capacity such as a childminder, a teacher or a youth worker although these are not exclusive categories.

Placed with parent: This refers to children for whom a Care Order exists and who are placed with their parents, a person who is not a parent but who has parental responsibility for the child or where a child is in care and there was a Residence Order in force with respect to him/her immediately before the Care Order was made, a person in whose favour the Residence Order was made.

Independent living: Independent living refers to any young person being looked after by an authority, who moves from his/her placement to live independently within the community before he/she is 18 years of age. Do not count changes of placement or change of legal status within care as a re-admission, or children being looked after for respite care.

### **Short Breaks**

This term refers to either a series of short-term pre-planned or ad hoc placements, where a child moves temporarily from their carer/parents in order to allow the child and/or the carer a period of respite.

### **Day Nursery Services**

Day nurseries look after children under five years old for the length of the adult working day. They can be run by voluntary organisations, private companies, community groups or employers in the public or private sectors for their workforce. Children will attend part-time or full-time depending on their needs.

### **Childminders**

Childminders look after children aged under five years and school aged children outside of school hours and in the holidays in domestic premises, usually the home of the childminder. This is a service offered all year round for the full adult working day. Parents and childminders negotiate the terms and conditions.

### **Playgroups**

Playgroups provide session care for children between three and five years of age, in some exceptional cases they may accept younger children. They aim to provide learning experiences through structured play. Most playgroups are run on self-help basis by groups of parents with some paid staff. Some of these groups will be run by HSC Trusts or voluntary organisations such as the NSPCC. Some of these groups may be referred to as opportunity groups which cater for children with special needs. Playgroup sessions last no longer than four hours.

### **Out of School Clubs**

These clubs care for school age children from the end of the school day until the parent can collect their child. Some clubs may also care for children before school. These clubs are not open access. Children will be escorted to the club by a responsible person and may not leave until they have been collected by a parent or person with parental responsibility. These clubs may be run by Trusts, voluntary organisations, community groups or privately.

### **Home Childcarers**

Other day care providers include 'Approved Home Childcarers'. Home childcarers enable parents to have their children cared for in their own home. They are professional childcarers, offering children safe, good quality care and providing them with play and learning opportunities that contribute to their development.

# Additional Information

**Further information** on Children's Social Care Statistics for Northern Ireland 2017/18 is available from:

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This and other statistical bulletins published by Community Information Branch are available to download from the DoH internet at:

<https://www.health-ni.gov.uk/topics/dhssps-statistics-and-research-social-services/social-care-statistics>