Northern Ireland Social Care Council

Annual Report and Accounts

1 April 2025 - 31 March 2026

22 June 2026

Working together. Making a difference.

Welcome

We are the Northern Ireland Social Care Council (the Social Care Council). We are a public body, set up by the Department of Health in 2001 as part of their policy to improve standards across social work and social care services.

We are helping to raise standards in social work and social care by:

- **Registering the workforce –** there are 49,000 people working in social work and social care in Northern Ireland. All of these people must be registered with the Social Care Council to be able to work in their job role. Everyone on the Social Care Council Public Facing Register (the Register) has been checked to make sure they are suitable to work in their job role.

- **Regulating standards in the workforce -** every registered person must keep to the standards we set for their work and must keep updating their skills and knowledge to help them do their job. They must also meet the Social Care Council standards for their behaviour. This includes how they treat the people they provide services for and how they behave towards their work colleagues.

- **Setting standards for social work education** – we set the standards for the Degree in Social Work courses in Northern Ireland. We also approve education and training for social workers to support them in their career development.

- **Promoting workforce learning and development** – we work with our stakeholders to develop and promote training and learning to support social workers and social care practitioners to develop their skills and knowledge throughout their career.

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Northern Ireland Social Care Council Accounts for the year ended 31 March 2026

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03 July 2026

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Interim Chair's introduction

I am pleased to present the Social Care Council's Annual Report and Accounts for 2025-26, which set out the delivery of a substantial programme of work to regulate standards and maintain the registration of more than 49,000 social workers and social care practitioners across Northern Ireland. As the regulatory body for these professionals, our focus remains firmly on promoting high-quality, safe and effective care. This report demonstrates the contribution we have made to supporting a skilled, confident and compassionate workforce, and the vital role it plays in protecting and supporting people who rely on social work and social care services.

I had the honour of leading the Board during 2025–26, having stepped into the role of Chair on an interim basis when Paul Martin stood aside due to ill health. It is with great sadness that I record Paul's passing last summer. On behalf of the Social Care Council, I extend our sincere condolences to his family, friends and colleagues. Paul's leadership and enduring commitment to social work and social care reform in Northern Ireland and internationally leaves a lasting legacy.

I would also like to thank Board Members David Hayes, Jacqueline McGarvey, Roslyn Dougherty and Sarah Browne, whose terms of office concluded on 31 March 2026. Since their appointment in 2018, they made a significant contribution to the governance of the organisation, bringing valuable insight, expertise and assurance to the Board's work, including across our Partnerships.

This year marked an important period of renewal and new beginnings for the organisation, with the appointment of Tracy Reid as Chief Executive. Tracy is a qualified social worker with more than 25 years' experience across a wide range of practice settings. Working closely with the Board and leadership team, she has led the organisation in progressing the Social Care Council's strategic vision and statutory responsibilities, including upholding professional standards and promoting continuous learning and professional development across social work and social care. Through this work, our focus remains on achieving the best possible outcomes for people who use services, their families and carers. I would also wish to record my gratitude and appreciation to Declan McAllister, Director of Registration and Corporate Services, who provided leadership and direction to the organisation as Interim Chief Executive pending the substantive appointment of Tracy in September 2025.

This has been one of the most challenging years in my time at the Social Care Council with significant resource pressures impacting on our regulation activity – in particular our Fitness to Practise and Committee functions. Significant and sustained increases in work of 40% without a corresponding increase in resources and funding has resulted in the activity of our Fitness to Practise and Committee teams being assessed as an Extreme Risk on our strategic risk register. The issue has been escalated at departmental level, and we will continue to work with the Department on mitigating against this risk. I would also like to commend the Chief Executive, Senior team and teams in our Fitness to Practise and Committee functions for their commitment and resilience to manage and operate within this exceptionally difficult environment.

On behalf of the Board, I would like to commend all Social Care Council staff for their dedication, professionalism and commitment to our shared vision of quality social care services and positive outcomes for all. I also wish to acknowledge the leadership, support and direction provided by the senior leadership team. Our Strategic Plan for 2023–27 sets out clear ambitions and priorities for both the organisation and our registrants. Through its delivery, we continue to support the Health and Social Care Improvement and Transformation Programme, positioning social work and social care as key contributors to system-wide change. In partnership with the Department of Health, we are bringing together expertise from across the sector to support reform across social care and children's services.

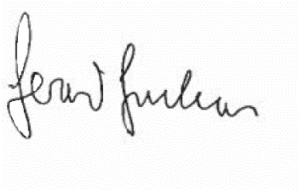
Partnership is central to the Social Care Council's effectiveness. Delivery of our strategic priorities depends on strong and enduring relationships with registrants; people who use services and carers; service providers; education and training partners; and Government. I would like to thank all those who contribute to our partnerships, committees and working groups throughout the year for their continued collaboration and support.

The Participation Partnership continues to play a pivotal role in ensuring our work remains informed by the lived experiences of people who use services and carers. During the year, members contributed to a wide range of activity, including support for social work education and training, development of engagement principles and values, exploration of user experience, review of organisational plans and reports, and consideration of the emerging use of artificial intelligence in social care. This work is undertaken on a voluntary basis and is greatly valued. Further detail of the activities completed by the Participation Partnership is included in the PPI report on page 17.

I also wish to acknowledge the dedication and professionalism of all social workers and social care practitioners registered with the Social Care Council. Despite operating within a challenging and evolving environment, they continue to deliver high-quality care and support across Northern Ireland. The importance of their contribution has never been greater. We have consulted with registrants on how to strengthen engagement and communication. The establishment of the Social Worker Registrant Engagement Group provides a structured mechanism to reflect the views and experiences of social workers in our business planning and activities. Engagement with social care practitioners remains supported through a range of advisory forums, including the Social Care Managers Forum. We will continue to review and refine our approach to engagement across social work and social care to ensure it is proportionate, adds value, and complements existing structures and networks.

As the Social Care Council approaches its 25th year of operation, the commissioning of a Landscape Review by the Department of Health towards the end of the 2025–26 business year was timely. We will work closely with the Department in the year ahead to consider the findings and agree next steps. Alongside this, we will consult on a new Strategic Plan for 2027–31, reflecting on the impact of our current plan and assessing how the evolving landscape should shape future priorities.

Looking ahead, the coming year will present both challenges and opportunities for the Social Care Council and the wider social care sector. I am confident that, by continuing to work collaboratively, we will adapt and respond effectively, ensuring the social work and social care workforce is equipped with the skills and values required to deliver high-quality services for the people of Northern Ireland.



Gerard Guckian
Interim Chair, Northern Ireland Social Care Council

Date: 22 June 2026


Our Purpose
To protect the public and safeguard service users through the regulation and development of the social work and social care workforce.
Our Vision
To have a thriving, capable and compassionate social work and social care workforce providing the highest quality of care, protection and support to people in need.
We will realise our vision by taking forward four priorities:
Regulate
Deliver effective regulation
Support
Develop the capability of the workforce
Influence
Lead with influence
Innovate
Innovate and improve

Glossary – words we use to describe our work

AI	Artificial Intelligence – refers to computer systems capable of performing complex tasks that historically only humans could do. For example, making decisions, or summarising information.
ALB	Arms' length body – A public body accountable ot a government department.
AYE	Assessed Year in Employment – the first year in assessed practice for newly qualified social workers.
BASW NI	British Association of Social Workers NI - The professional association for social work and social workers in Northern Ireland
Board	This is the Board of the Northern Ireland Social Care Council who provide strategic oversight and direction.
BSO	Business Services Organisation – provides a range of services for health and social care organisations.
CEO	Chief Executive Officer.
CORU	This is the name of the regulator for health and social care professionals in Ireland.
CPD	Continuing Professional Development – ongoing learning and training.
DoH	Department of Health – the government body responsible for health and social care in Northern Ireland.
ECHO	Extension for Community Healthcare Outcomes – is a programme of learning, sharing and support that uses video conferencing to share learning and good practice.
FtP	Fitness to Practise – a registrant's suitability to work in social work or social care.
FReM	The Department of Finance's Financial Reporting Manual.
GDPR	General Data Protection Regulation – the legislation around holding and using personal Information.
HEI's	Higher Education Institutions.
HR	Human Resources – manages staff well-being, development and their employment.
HSC	Health and social care – the people, systems and facilities that provide medical and personal care and support.
IAR	Individual Assessment Route – an option for social workers to have their learning and practice assessed and get a Northern Ireland Social Care Council Award.
IASW	Irish Association of Social Workers.
ICT	Information and Communications Technology – computers, networks, websites and mobile applications we use.
IFSW	International Federation of Social Workers – a worldwide body representing social work.
IIP	Investors in People – an award for good standards in staff and organisation management and development.
ISO	Interim Suspension Order – temporary action to stop a registrant working while we make enquiries about a very serious complaint.

KPI	Key Performance Indicator – standards we use to measure how well we do our job.
KSF	Knowledge and Skills Framework – this is the framework which staff use to ensure they are developing the right level of knowledge and skills to do their jobs well.
NI	Northern Ireland.
NICON	The Northern Ireland Confederation for Health and Social Care – A body representing the views of organisations in Health and Social Care in Northern Ireland.
OU	Open University.
PiP	Professional in Practice – the framework for social workers' on-going learning and Qualifications.
PiP II	Professional in Practice Two Requirements - New social workers are required to complete two Requirements from the Consolidation Award on the PiP Framework (PiP II Requirements) within three years of completing their AYE.
PPI	Personal Public Involvement – describes the scheme through which we engage service users and carers.
PRTL	Post Registration Training and Learning – 90 hours of learning that all registrants must do to keep their registration up to date.
QI	Quality Improvement is a way to identify how a service, process or system can be Improved.
QUB	Queens University Belfast.
Register	The Social Care Council's register is an electronic list of social workers and social care practitioners working in Northern Ireland (and also students studying for the Degree in Social Work in Northern Ireland).
Registrant	A person approved for registration on the Social Care Register – social workers, social care workers and social work students.
RRL	Revenue Resource Limit.
RQIA	Regulation and Quality Improvement Authority – checks health and social care organisations are doing their job well.
SEHSCT	South Eastern Health and Social Care Trust.
Sector Skills Council	The Social Care Council is part of a UK-wide Sector Skills Council set up to support employers in ensuring that people working in early years and children's services and those working in social work and social care have the right skills and qualifications.
Social Care Council	Refers to the Northern Ireland Social Care Council.
SLT	The Senior Leadership Team in the Social Care Council.
Stakeholders	People who are involved with our work or who are affected by what we do.
UCAS	Universities and Colleges Admissions Service.
UK	United Kingdom.
VBR	Values Based Recruitment – ensuring that people entering social care and social work roles have the right qualities for the job.

Section 1: Performance report

The Northern Ireland Social Care Council (the Social Care Council) is a public body, established by the Department of Health to raise the standards of practice in social work and social care. This performance report provides information about how the Social Care Council business priorities were delivered during 2025-26.

The performance report for 2025-26 covers four key areas:

1. **Chief Executive's Statement on performance for 2025-26 -** setting out the Chief Executive's perspective on performance against objectives and the risks to the achievement of those objectives;
2. **Personal and Public Involvement report –** summary of the partnerships and projects involving people who use services and carers in our work;
3. **Performance analysis -** providing a balanced and comprehensive analysis of performance during the year, trends identified and actions identified for the coming year; and
4. **KPI summary –** Achievement against objectives and key performance indicators for 2025-26.

Our Strategic Plan for 2023-27 and Business Plan for 2025-26 focused on four themes.

- **Deliver effective regulation -** Through our regulatory activity we protect anyone who uses social work and social care services by supporting our registrants to be person-centred, values driven, competent, confident and compassionate. All social workers and social care practitioners must comply with our Standards of Conduct and Practice.

- **Develop the capability of the workforce -** Social work and social care services are delivered within diverse communities and multi professional environments. In order to improve outcomes for people who use services and their families, carers and communities, we will help develop a confident and competent social work and social care workforce that delivers safe, effective and high-quality care.

- **Lead with influence** - As the workforce regulator, we have a key role to play in empowering social workers and social care practitioners to effectively contribute to the delivery of high-quality services. In order to support and develop the workforce, we need to understand the environment in which they work. There is a need to build our evidence base, using research, data and intelligence, to inform the provision of sufficient numbers of the right people, with the right knowledge, skills and values, are in the workforce. Our focus will be on supporting them in a way that reflects the value of their work and the contribution they make to the wider health and social care system. This is critical to the improvement and transformation of health and social care services.

- **Innovate and improve** - We are an innovative regulator, with a culture that supports inclusion, collaboration and creativity. We will develop our digital systems to deliver efficient and effective workforce regulation, and will support our registrants to engage with digital innovation.

- **Deliver our Strategic Plan** - Achievement of these priorities will be underpinned by investment in four key areas: Our People, Communication and Engagement, Evaluation and Resources. We will ensure we have the necessary infrastructure i.e. the people, resources, governance and estate management arrangements in place to deliver on these priorities.

Chief Executive's Statement on organisational performance for 2025-26

I am pleased to present the Social Care Council's Annual Report for the period April 2025 to March 2026. This is my first Annual Report as Chief Executive, having taken up the role in September 2025. The year marked the third year of delivery against our four-year Strategic Plan 2023–27. The analysis and commentary set out in this report demonstrate strong performance against our business objectives and service standards despite significant financial challenges. It is encouraging to see the positive impact of this work for social care practitioners, social workers, students, employers and, critically, for people receiving care and support.

There were several senior leadership changes during the year. I would like to thank Declan McAllister for his leadership and commitment while acting as Interim Chief Executive during a period of transition. Work is also underway to consolidate the organisation's senior leadership structure, including the role of Director of Regulation and Standards, with recruitment to the agreed structure expected to be completed during the 2026–27 reporting period.

I would also like to record our sincere condolences following the passing of Paul Martin, Chair of the Social Care Council from 2018 to 2025. Paul made a significant and lasting contribution to social work and social care, both through his professional career and through his leadership of the Board. Gerry Guckian, Board Member, was appointed Interim Chair during the year, with a permanent appointment anticipated during 2026–27.

I am proud to lead an organisation with a strong foundation built on the commitment and professionalism of its staff. During 2025–26, the Social Care Council delivered a wide range of successful outcomes, including the Professional in Practice Awards; the review of social care occupational standards and qualifications; the launch of a new registration mobile application; the development of a new Engagement Strategy; and recognition through the 2025 European Social Services Award for the Care in Practice (CiP) Framework, supporting career progression within social care.

As regulator of the social work and social care workforce, the Social Care Council has a responsibility to ensure that the Standards of Conduct and Practice remain effective and continue to support the delivery of safe and compassionate care by the social work and social care workforce. Fitness to Practise and Committee activity has increased by more than 40% over the last five years and increasingly the organisation is significantly challenged in relation to the timely discharge of these functions. For the first time the Social Care Council is reporting the utilisation of a waiting list for medium risk Fitness to Practise referrals. In addition, the Social Care Council reports a 40% increase in the usage of Interim Suspension Orders, which coupled with the increase in referrals has exposed significant capacity issues across Fitness to Practise, Committee and Legal Services. In addition, whilst the Social Care Council's Standards of Conduct and Practice remain fundamentally robust, they were last formally reviewed over a decade ago, and we will therefore take forward work in the next reporting period to ensure they continue to reflect contemporary practice, learning and expectations.

The Social Care Council's Workforce Development Team continues to engage with registrants and employers in both social work and social care. This includes supporting the Department of Health in delivering the Social Care Workforce Strategy and Social Work Leadership Strategy, as well as continuing to assure high quality undergraduate and post qualifying training and development for Social Workers.

We have worked closely with partners to support workforce sustainability and reform. Staff and Participation Partnership members have contributed to regional and UK-wide reform initiatives, including workstreams supporting reform across social care and children's services. This year also marked the fourth consecutive year in which the organisation administered Department of Health funding to support priority training in adult social care.

The Social Care Council's registration team continue to deliver front line services to almost 50,000 registrants, and managed over 70,000 individual contacts or queries during the year. The Team responded to the need for registrants to engage with us by telephone, and we were pleased to contract with Hub NI to support the management of our phone calls. The Database Team with support from Registration team colleagues, also delivered one of the largest data cleansing exercises of our register during 2025-26, cleansing over 11,000 records and in doing so, improved data quality and improved the sustainability of our register.

The Social Care Council also holds responsibility for the Social Work and Social Care Research Strategy. During the year, we established a Research and Evidence Partnership to build on existing research activity and strengthen the role of evidence in informing practice and policy. The Partnership engaged widely to develop the draft Social Work and Social Care Research, Evidence, Innovation and Improvement Strategy 2026–31, with consultation planned for summer 2026. This work reflects a strong appetite across the sector to develop a robust research and evidence base to support decision-making and improvement.

Engagement with people who use services and carers remains a core priority and central value to the work of the Social Care Council. The Participation Partnership has continued to play an important role in shaping our work, providing challenge, insight and collaboration across a broad range of projects. The breadth of this contribution is set out in the PPI report on page 17.

I would like to extend my thanks to the Staff and Senior Leadership Team of the Social Care Council who despite the many challenges experienced by the organisation continue to demonstrate the highest standards of commitment and professionalism. I am pleased to report that the organisation currently holds the Investors in People Platinum Award, reflecting our ongoing commitment to a positive, inclusive and supportive organisational culture. We remain focused on fostering openness, compassion and fairness, both internally and in how we engage with registrants and stakeholders.

Digital transformation has remained a key priority for the organisation. During the year, we upgraded the online registration system for employers, introduced online Fitness to Practise referrals through the electronic case management system, expanded the Learning Zone, developed the Care in Practice interactive resource, and published digital skills and community development resources for social work. Our digital communications channels continue to support engagement with registrants and stakeholders, with more than 14,000 active followers across platforms. We also provided leadership and support to workstreams focused on strengthening workforce data and intelligence.

Public awareness campaigns during the year promoted the value of social work and social care, supporting professional recognition and recruitment. We also continued to lead on promotion of the Degree in Social Work and the implementation of the Social Work Leadership Framework.

Finally, we apply an outcomes-based approach to performance management, combining quantitative measures with qualitative feedback to assess the difference our work makes. Key highlights are presented within this report, with detailed performance against Key Performance Indicators set out on page 69. As we plan for 2026–27, we will continue to adopt a flexible, digitally enabled approach to service delivery, ensuring that limited resources are directed towards areas of greatest impact.

Business highlights for 2025-26 include:

Stakeholders supported

72,070
people supported with registration queries
95% positive feedback on the service provided

Register maintained

for *49,597 registrants:
*Register totals 31/3/26

41,841 social care practitioners
6,900 social workers
856 social work students
175 decisions uploaded to the Register

Registrations processed

14,150 registration applications/ renewals processed
(99.9% within 20 days)

90% of fees paid online

Fitness to Practise concerns addressed

613 referrals triaged
(99.5% within 5 days)
361 cases closed
(82% closed within 15 months)
51 Interim Orders granted
31 Fitness to Practise hearings

Social work and social care careers promoted

18 careers events
17,000 active users on the Learning Zone careers resources
344 first-year students enrolled on Social Work Degree
264 newly qualified social workers graduated from NI Social Work Degree programmes

Social work education standards assured

3 Degree courses
19 Designated practice learning providers
19 PiP Programmes
19 Social work AYE submissions audited

Expertise and leadership provided to support strategic projects

- **Social Care Reform Workstreams**
- **Children's Services Reform Workstreams**
- **Social Work and Social Care Data and Intelligence Workstreams**
- **Leaders in Social Care Partnership**
- **Social Work Leadership Network**
- **Social Work Workforce Implementation Board**
- **Review of National Occupational Standards**

Finances managed effectively

Break-even achieved with a £16,565 underspend
92% of invoices paid within 10 days
99% of invoices paid within 30 days

Assurance on the management of issues and risks

Effective governance systems are in place to support the regular review of issues and risks which could affect business delivery. As part of the 'Risk Management Strategy', the Board set the strategic risks and assessed the risk appetite for the organisation. The 'Risk Appetite Statement and Matrix' in Appendix 3 of this report sets out the level of risk with which the Social Care Council aimed to operate across the key areas of finance, compliance, safety, service delivery and reputation in order to deliver on the strategic business themes in 2025-26.

During the year, we monitored closely those risks which had been identified as having the potential to impact on the achievement of the Business Plan objectives. Risks, controls and actions have been reviewed regularly by the Risk Management Committee. Summary of the assurances provided by our risk management processes is detailed in the Governance Statement on page 82. The Board Audit and Risk Assurance Committee have reviewed the Risk Register and Assurance Framework at each of their meetings. This provides assurance to the Board, our sponsor department and our stakeholders on the organisation's ability to deliver its organisational objectives. At the end of 2025-26, there were nine Strategic Risks identified by the Risk Management Committee: one risk was assessed as Extreme, one risk was assessed as High , six risks assessed as Medium and one risk assessed as Low level.

The nine strategic risks are:

- Regulatory Fitness to Practise function resourcing – assessed as Extreme Level 20.
- Sustainable resourcing to support adult social care reform - assessed as High Level 16.
- Management of financial resources - assessed as Medium Level 9.
- Promoting the value and importance of registration - assessed as Medium Level 9.
- Effective partnership/engagement with stakeholders - assessed as Medium Level 9.
- Social work and social care sector data intelligence - assessed as Medium Level 12.
- Promoting systems leadership - assessed as Medium Level 9.
- Capturing the views of stakeholders - assessed as Medium Level 9.
- Changes at Board and senior level – assessed as Low Level 4.

Assessment and management of strategic risks in 2025-26

Regulatory Fitness to Practise function resourcing Extreme Level 20

This is the highest level of risk in the organisation and has retained its Extreme risk status over the past 7 months reflecting the high impact of a very significant increase in referral activity in this function, which is being experienced across Fitness to Practise, Committee and Legal Services. This risk presents the greatest challenge to the regulation of the social work and social care workforce and has been escalated at Board and Departmental level. A new proposed structure to sustain Fitness to Practise now and into the future has been developed however this cannot be progressed without additional funding. Risk mitigations are in place, and these are kept under regular review.

Sustainable Resourcing for the Council to Support Adult Social Care Reform High Level 16
The Social Care Council is committed to developing the capability of the social work and social care workforce as a method of supporting the delivery of high quality social work and social care. The Social Care Council has led on substantial pieces of innovative work to support the sustainability of the social care workforce. These are in line with longer term regional ambitions. As a systems leader the Social Care Council has been using its influence and voice to support the sector, however the Social Care Council requires sustainable recurrent resources to carry out these duties.

Management of Financial Resources Medium Level 9
The Social Care Council is reporting a breakeven position at year end (month 12) of £16,565 surplus (within the £20,000 breakeven target). This reporting period has been another challenging year and this risk will be kept under review given the likely requirement for further savings in the forthcoming reporting period. This will be confirmed once the 2026-27 funding position is known.

Promoting the Value and Importance of Registration Medium Level – 9
Our engagement programme across social work and social care continues. The Communications Team is working closely with Registration and Workforce Development colleagues to continue to deliver a targeted communication programme to registrants, employers and others including using benchmarks and surveys to evaluate and monitor impact and outcomes.

Effective partnership/engagement with Stakeholders Medium Level – 9
The Department of Health has transferred the Leadership Framework for Social Work to the Social Care Council, and this will strengthen partnership working around the Professional in Practice Framework and engagement with universities. The Social Care Council continues to build relationships with providers of Further Education to ensure high quality delivery of the Social Work degree. The Social Care Council is also working in partnership with the NI Degree in Social Work Partnership (NIDSWP) to review their governance arrangements and the Partnership Agreement between the NIDSWP and the Social Care Council.

Social Work and Social Care Sector Data Intelligence Medium Level – 12
Separate workstreams for Social Work and Social Care Data and Intelligence have been established, with reporting on progress to the Social Work and Social Care Reform Boards. We are triangulating our data to join up data sets across the HSC and carrying out deep delve reviews into specific business areas including Fitness to Practise referral data. These reports can be found at Data reports - NISCC.

Promoting Systems Leadership Medium Level - 9
During the consultation on the organisation's Strategic Plan, the Social Care Council heard from registrants about the need to use our voice and our role to help shape better outcomes for the sector. In response to this, the organisation has a strategic theme (Lead with Influence) which will build on our earlier work to support the sector and influence decision makers and decision making. The organisation is working closely alongside an extensive range of stakeholders to make this happen. The organisation is also working alongside the DoH on the Social Care Collaborative Forum to support this work in relation to the social care workforce.

Capturing the views of stakeholders Medium Level – 9
We are continuing to work with people who use services and carers to develop our evidence base and evaluate effective engagement. An engagement platform based on MS Teams is in place which enables our partnership members to share information, events, connections and intelligence to support the work of the Social Care Council. The organisation has also recently launched the new Engagement Strategy which will inform and shape our engagement going forward.

Changes at Board and Senior Level Low Level – 4
The level of this risk was previously reduced from 6 to 4, reflecting the appointment of three new Board members, the appointment of a new Chief Executive, and the formal appointment of an Acting Chair (pending a recruitment exercise to fill this position on a substantive basis). The risk however will remain on the strategic risk register, until such time as the internal senior structure is normalised and a permanent Chair is appointed.

I am satisfied that the Social Care Council has performed well against the objectives set out in the 2025-26 Business Plan. Further narrative on performance against each of the objectives is contained within the performance analysis and in the annual accounts within this report.

Tracy Reid
Chief Executive, Northern Ireland Social Care Council

Date: 22 June 2026

Personal and Public Involvement (PPI) report for 2025-26

Hello from the Participation Partnership

Members of our Partnership are people who access social care services, or who have experience of caring for someone.

Their role is to influence, advise and challenge the work of the Social Care Council, ensuring that people who access social care services and their carers have an opportunity to shape and contribute to all of our work.

The contribution of people who access social care support and carers is a valued and integral part of planning, implementing and reviewing all areas of work across the organisation.

The Participation Partnership for 2025-26 was co-chaired by Sarah Browne (Board Member) and Participation Members Alan Ritchie and Joanne Sansome. The Partnership is supported by the Director of Registration and Corporate Services, together with a small group of other staff. The Co-Chair role rotates amongst members on a regular basis. Their responsibilities include planning meetings, leading agenda items and hosting promotional events for the Partnership.

In March 2026, the partnership said goodbye to Sarah Browne when her appointment as a Social Care Council Board member ended. Sarah has been involved with the Social Care Council for almost 8 years. Everyone would like to thank her for her contribution and wish her well for the future. Participation Members Joanne Sansome and Grace Price also stepped down from the Partnership during the year. Between them, they had over 10 years of service with the Partnership. Their contributions and expertise have made a significant impact on our work, particularly in social work education and raising awareness about homelessness.

Members are committed to meeting at least every three months and they report back to the Board on their progress. They work alongside Social Care Council staff to provide insight and challenge on the involvement of people who access services and carers in social work and social care development. Members agree their agenda and all meetings are minuted.

Throughout the year, members held their meetings and carried out project work using MS Teams, telephone calls and emails. Meetings were hosted at James House and offered as a hybrid of online and in-person to enable members to participate in the way that best suits. The Social Care Council recognises the significant amount of personal time and expertise contributed by the members, which provides assurance that all activities are focused on the needs and experiences of those who use social care services.

As well as engaging in the business agenda for the Social Care Council, Participation members shared their personal lived experience and expertise in projects to provide insight for those planning and delivering social care services, and providing learning and development, including regional and UK-wide reforms for social care services.

Partnership highlights from 2025-26:

- Contributed to development of the Social Care Council Engagement Strategy - supporting the Council Communications and Engagement team in developing the values and principles for the Engagement Strategy. Members shared their views to help the Council to better understand how they feel about their engagement with the Social Care Council. This work will be used to shape communications and engagement plans.

- Participation Partnership members as well as service users and carers from other networks shared their experiences for the 'Social Care Making a Difference' summer 2025 campaign. This campaign uses social care stories to reflect the people delivering services alongside those they provide them for. Joanne represented the partnership at the launch event and welcomed the Health Minister to Glencraig supported living in Omagh, giving the Minister and guests an opportunity to see social care in action.

- Service users and carers supported a number of Care to Chat podcasts throughout the year. Gerard contributed to the June podcast for Carers week. The May series on social work and dementia services with carer views involved family carers from the Newry and Mourne services. In July, supported living residents shared their experience of good quality care and support.

- Reviewed the Social Care Council Annual Report for 2024-25 and prepared the Personal and Public Involvement (PPI) report section to reflect on the Council's involvement of service users and carers in all aspects of the business.

- Reviewed the outline Social Care Council Business Plan for 2026-27. This report will cover the fourth and final year of the 2023-27 Strategic Plan; looking at progress achieved to date, and what actions are needed to ensure the focus is maintained towards longer term outcomes. Also, to establish if there are objectives that may need adjusted to reflect changes in needs or priorities.

- Provided feedback and insights to influence key pieces of work being undertaken by the Social Care Council. The Partnership's views were sought on the National Occupational Standards (NOS) for Health and Social Care (HSC) Review, the Department of Health Children's Social Care Reform Workstream recording framework, Department of Health Learning Disability Consultation Report and service user and carer expectations of the Review of the Framework Specification for the Degree in Social Work.

- Ensured effective service user involvement in social work training and development – members have been involved in service-user focused sessions with students through on the NI Degree programmes. Gerard has worked with the Open University (OU), providing service user expertise to review the teaching and content, which will be used in regular improvement and help to ensure it prepares students for practice.

- Provided strategic direction for social work training - Joanne is a member of the Strategic Advisory Group for social work and is also a member of the Review of the Degree Implementation group. Outside of her work with the Partnership, Joanne has been involved in providing guidance to the COVID enquiry and developing recommendations for policy development/learning actions.

- Participated in Department of Health social care reform and innovation workstreams. Members have shared their experience and expertise on areas including Learning Disability, Supported Living, Residential Care, Communications, Workforce Pay and Conditions, Workforce Development.

- Alan Ritchie and Gerard McWilliams continue to contribute to NI and UK Impact Assembly. These projects aim to take innovative practice from a local to national practice. Members had been involved with a project exploring social care practitioners' wellbeing, recruitment and retention. The latest Impact NI project was focused on how Artificial Intelligence could support social care service delivery. Members shared their views on concerns and expectations which service users and carers have about AI being involved in their care, and reflected on the training and support needed for front-line staff to develop digital skills and confidence to make positive change using AI. This work will continue into 2026-27.

Members are also providing expertise and support through their own networks and contacts on a regular basis, providing vital support for family carers to review the impact of financial and service changes and supporting appeals for families who have not received care or respite they are entitled to. They have been involved in service reform projects and activities to encourage more people to participate in networks to improve services.

Looking ahead

The members recognise that social workers and social care practitioners face immense challenges in this period of significant change for Health and Social Care. This will require Government and the DoH to continue with their commitment to learn from the experiences of service users and carers and from frontline staff. The Participation members will support and challenge the Social Care Council to make sure that change is driven by the experience and knowledge of service users and carers. The Participation Partnership looks forward to continuing to play an important role in the new business year.

Sarah Browne, Chair

Alan Ritchie, Co-Chair

Performance analysis for 2025-26

To ensure that our work to support workforce registration, regulation, education and development is effective, the Social Care Council applies a regular cycle of monthly reporting, quarterly evaluation and reflection; learning from experiences and adapting to changing workforce needs to shape how our work is developed and delivered.

This performance analysis section highlights achievements for the year across each of the strategic priorities in our 2025-26 Business Plan. It also includes key learning outcomes gained from our review of performance and provides a summary of the success indicators identified for 2025-26. It provides commentary on adjustments to plans to reflect changing business needs or where achievement was not progressing as originally anticipated.

Assessment of overall progress for each of the Strategic Priorities is set out in the table below.

 **Strategic Priority 1**	**Deliver effective regulation**	**Assessment at 31 March 2026 - AMBER- Good progress, with some delays or changes in focus.** This assessment was based on progress against objectives, evidence of indicators of success and performance against KPIs. Four of the five objectives had been achieved satisfactorily, and five of the seven indicators of success were met or largely achieved. KPI achievement was impacted by significant increases in FtP referrals, new cases, interim orders and hearings.
 **Strategic Priority 2**	**Develop the capability of the workforce**	**Assessment at 31 March 2026 - GREEN – Satisfactory progress** This assessment was based on progress against objectives, evidence of indicators of success and performance against KPIs. Four of the five objectives had been achieved satisfactorily, and thirteen of the fourteen indicators of success were met or largely achieved. KPIs were within acceptable limits.
 **Strategic Priority 3**	**Lead with influence**	**Assessment at 31 March 2026 - GREEN – Satisfactory progress** This assessment was based on progress against objectives, evidence of indicators of success and performance against KPIs. Four of the five objectives had been achieved satisfactorily, and seven of the eight indicators of success were met or largely achieved. KPIs were within acceptable limits.
 **Strategic Priority 4**	**Innovate and improve**	**Assessment at 31 March 2026 - GREEN – Satisfactory progress** This assessment was based on progress against objectives, evidence of indicators of success and performance against KPIs. Four of the five objectives had been achieved satisfactorily, and five of the seven indicators of success were met or largely achieved. KPIs were within acceptable limits.
	**Deliver our Strategic Plan**	**Assessment at 31 March 2026 - GREEN – Satisfactory progress** This assessment was based on progress against objectives, evidence of indicators of success and performance against KPIs. Four of the five objectives had been achieved satisfactorily, and nine of the eleven indicators of success were met or largely achieved. KPIs were within acceptable limits.

A significant proportion of our work is longer term and will be included in the objectives for 2026-27. Further information on our aims and objectives for the coming year is published in our Business Plan for 2026-27 (available from our website www.niscc.info).

Performance analysis for 2025-26

Strategic priority 1. Deliver effective regulation

Our Strategic Plan 2023-27 says we will make the following differences in delivering effective regulation:

1. Social work and social care registrants use the Standards of Conduct and Practice to support their practice.
2. Regulation enables people who use services and carers to have confidence in the social work and social care workforce by ensuring that registrants work to their standards and deliver high quality care.
3. Social workers and social care practitioners are supported by their employers through the Standards for Employers of Social Workers and Social care practitioners.

Our actions for 2025-26 - we said we would:	Indicators of success for 2025-26 – the difference we wanted to see:
1. Support registrants and employers to maintain and value registration; promoting our online resources, encouraging the use of the online portal, managing & responding to emails and phone calls, promoting 1-2-1 clinics for registrants and employers, processing applications, and renewals against our KPIs.	• A minimum of 97% of registrants maintain their registration throughout the year and our KPIs are met.
2. Deliver our Fitness to Practise functions safely and effectively in accordance with rules, emerging case law and regulatory best practice and our KPIs. This includes triaging cases, investigative enquiries, and preparing and presenting evidence to FtP Hearings.	• Fitness to Practise (FtP) activity is managed efficiently in line with FtP Rules, best practice, and Key Performance Indicators (KPIs). • The outcomes of our activity are robust, fair, equitable and proportionate.
3. Deliver our Committee hearings services to support our KPIs, including the provision of high-quality papers, ensuring hearings (online or in person) are managed professionally and that all committee members are trained and supported in carrying out their roles.	• Committee activity delivers against the KPIs and hearings are managed in an effective, professional and timely manner.
4. Commence a review our Standards of Conduct and Practice for Registrants and the Standards for Employers to ensure these remain fit for purpose.	• The Standards continue to reflect best practice and meet the needs of registrants and employers.
5. Promote compliance with the Standards of Conduct and Practice for Registrants, and working with RQIA promote compliance with the Standards for Employers.	• At least 90% of registrants report they are using the Standards to inform their practice. • At least 90% of employers report they are using the Employer Standards to support social workers and social care practitioners.

Strategic priority 1. Deliver effective regulation

Achievements - how did we do in 2025-26?

Our regulation activity is delivered through workforce registration, setting standards for social workers' and social care practitioners' conduct and practice, and investigating concerns about individuals' fitness to practise. Together, these establish and maintain clear benchmarks for good social work and social care practice.

The 2025–26 Business Plan sets out five objectives and seven indicators of success for delivering effective regulation. These reflect the key activities undertaken to support this outcome. Progress against both the objectives and associated indicators has been monitored through monthly and quarterly reporting, with performance tracked against Key Performance Indicators (KPIs).

During the year, Fitness to Practise and Committee activity saw a significant increase in the number of concerns referred for investigation and action. This placed additional pressure on team capacity and impacted the ability to meet KPIs at points during the year. Progress on the objective to commence a review of the Standards of Conduct and Practice was delayed due to capacity constraints and this work will continue into 2026–27.

Assessment at 31 March 2026 - AMBER- Good progress, with some delays or changes in focus. This assessment was based on progress against objectives, evidence of indicators of success and performance against KPIs. Four of the five objectives had been achieved satisfactorily, and five of the seven indicators of success were met or largely achieved. KPI achievement was impacted by significant increases in FtP referrals, new cases, interim orders and hearings.

The following pages provide an overview of the achievements in this area of work, commentary for performance against KPIs and details of mitigating action taken to address pressures affecting KPI performance.

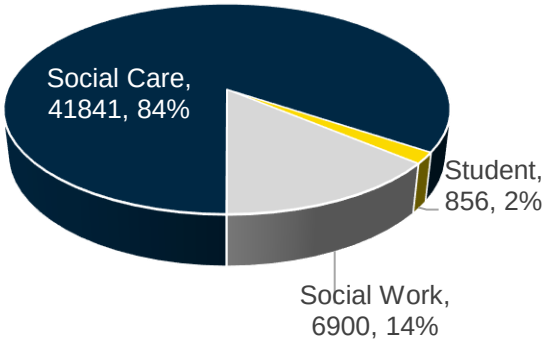
Regulation – Workforce registration 2025-26

The Social Care Council is responsible for registering all social workers, social care practitioners and social work students in Northern Ireland. This is a workforce which currently numbers around 49,500 people.

- 49,597 people were registered on the Register at 31 March 2026.
- The Register was made up of 41,841 social care practitioners, 6,900 social workers and 856 students.
- Social care practitioners make up the largest proportion of the register (84%). Social workers make up 14% of the register and social work students are 2%.
- The majority of the registered workforce (83%) identifies as female.
- Representation across the age bands remains steady, with 35% of social workers and 50% of social care workers in the under 40 age bands.

Social Care Council Register Profile

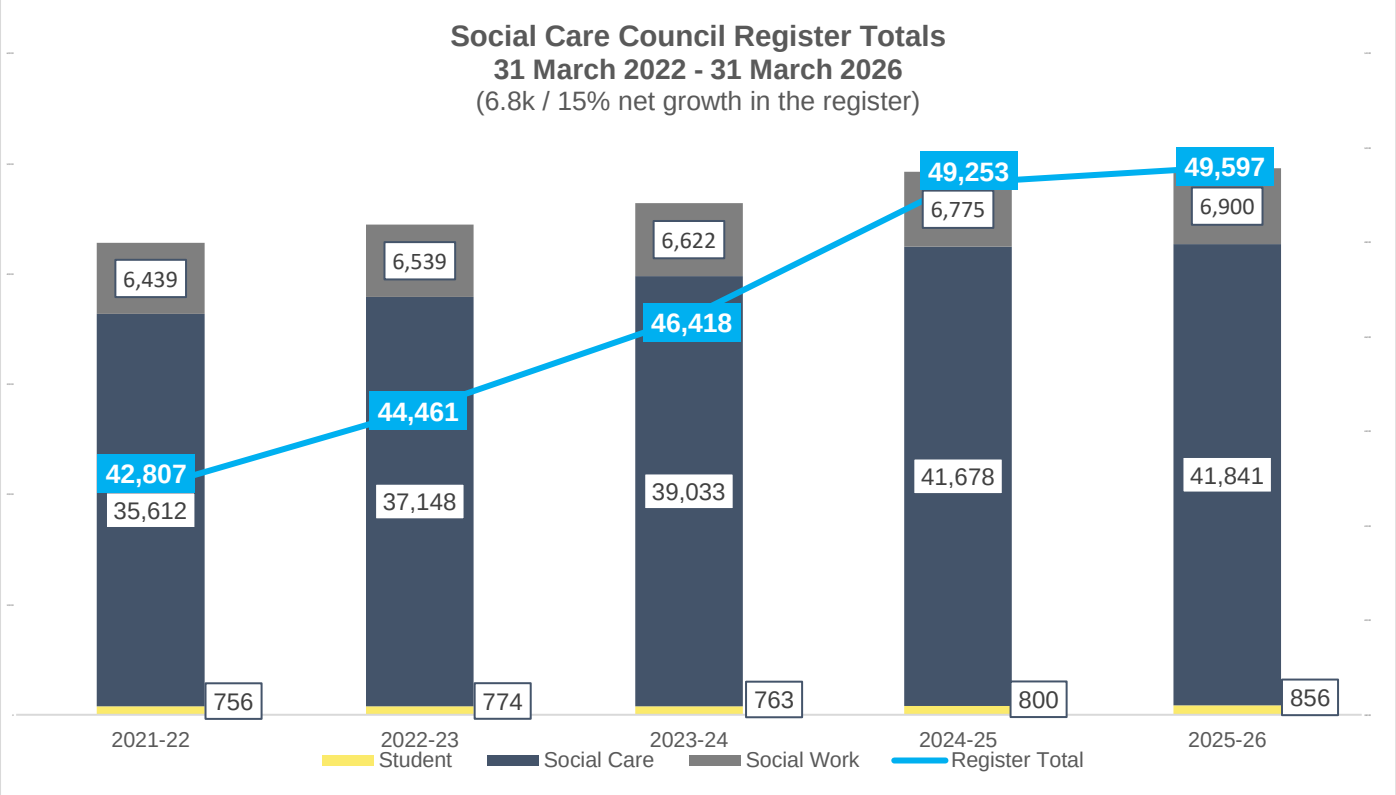
49,597 registrants at 31 Mar 2026



The register currently lists 510 employing organisations across all the employment sectors:

- 73% of social workers are employed within the Health and Social Care Trusts.
- 6% of social workers are employed in the voluntary sector, 4% work within the justice system, 4% work within education, 1.6% work in the private sector, 4% work across other statutory organisations and 1.25% are self-employed.
- 44% of social care practitioners are employed in the private sector, with a further 21% employed by Health and Social Care Trusts and 16% employed by voluntary or charitable social care organisations.
- Job roles for social care practitioners are predominantly Adult Residential Care Workers (35%) and Home Care Workers (Domiciliary Care (31%). The next largest numbers of staff within social care are employed as Supported Living Workers (7%) and Day Care Workers (5%).

This composition of the registered workforce (14% social work, 84% social care, 2% student) has remained relatively stable since compulsory registration for social work and social care was completed in 2018. The graph below shows the register totals and the register composition for the at 31 March for each of the last five reporting years.



In the four-year period from 31 March 2022 to 31 March 2026:

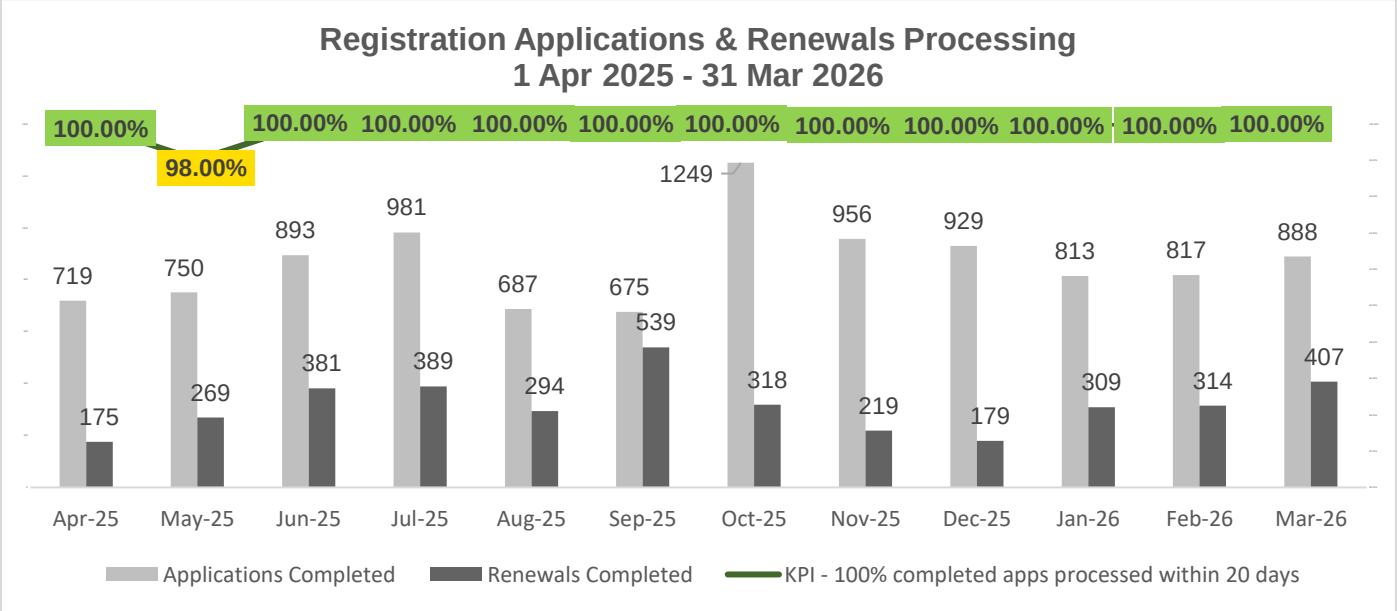
- Numbers on the register have shown a net growth of around 15%. The rate of increase in the register numbers has dropped back significantly in the last two years, with only a 0.7% increase in register totals between March 2025 and March 2026, however despite the rate of increase stabilising, the register is reporting at its highest level in the last 5 years.
- Social care practitioner registrations showed the greatest net increase (+6k / 17%).
- Social worker registrations net increase (+461 / 7%).
- Social work student registrations net increase (+100 / 13%)

Extensive recruitment programmes and the increased need for social care services are the most likely causes of the net increase in social care practitioner numbers. The increase in social work students is largely due to increases in the number of social work student university places funded and the establishment of the Open University route. This will in turn have supported increases in the social work workforce.

The number of people on the Register recorded the highest ever numbers during the pandemic, peaking at 51,700 in March 2021 following the recruitment of temporary workers to support frontline services during the pandemic. Register totals for 2021-22 then dropped back towards 43,000 as temporary workers returned to pre-COVID-19 employment. 2025-26 is the first year in recent times that the register increase has shown signs of slowing. A review of register churn and follow up on those joining/leaving the register is planned for 2026-27 to explore this further.

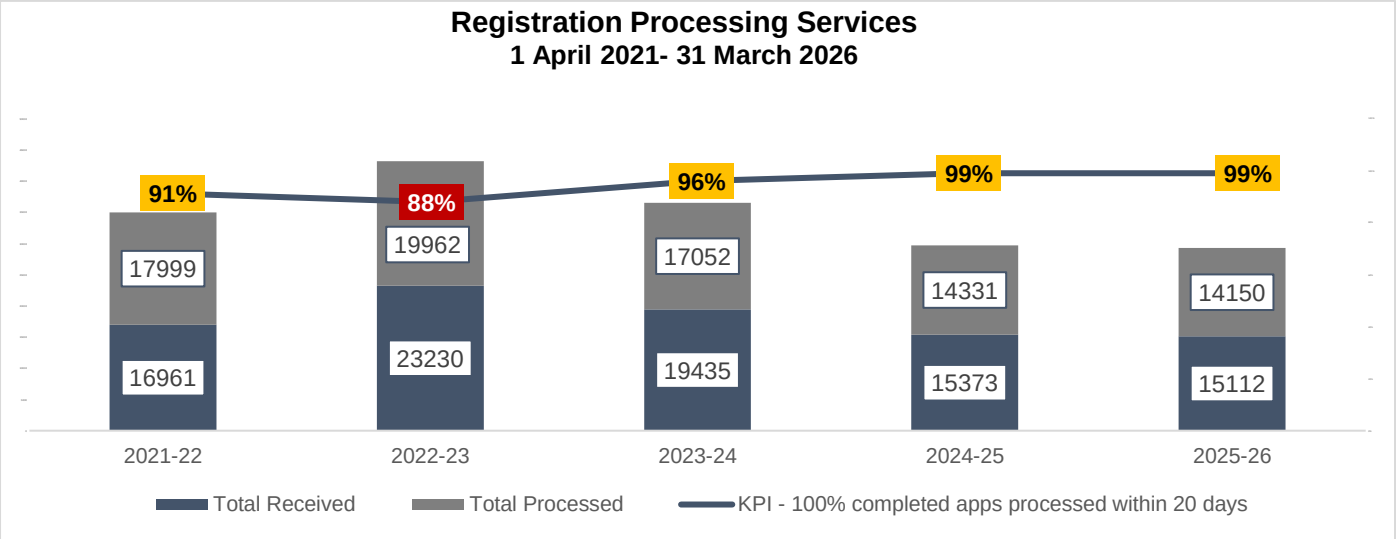
It is important to note that register data does not provide detail on whether a registrant works full-time or part-time, therefore it cannot be confirmed whether this increase in head count equates to increased capacity in front-line services. Work is being undertaken with employers and service commissioners to build a regional dashboard for workforce data. This will help with workforce planning to meet future service needs. Early indications from social work workforce data are that approximately 13% of social workers work part-time. Within each business year there will also be some fluctuation in the figures for registration caused by movements on/off the register as people leave or are removed for non-payment of fees and the time it takes to renew and process new applications for registration. It should also be noted that student numbers will drop June-September as new social workers graduate and then increase October-December as new students enrol on their degree course.

Registration Processing Services



Registration processing met the 20 day KPI for all months in 2025-26 except May. During May 2026, 21 applications took an additional 2-5 days to complete. This shortfall resulted in a cumulative KPI of 99% for the year 2025-26.

- During 2025-26, 14,150 registrations were processed (10,357 applications and 3,793 renewals)
- On average, 1,200 applications/renewals are received every month.
- 888 applications were in the system to be completed at 31 March 2026.



(Performance information used to make these assessments are included in the KPI summary on page 69.)

Registration processing activity for the last two reporting years has remained stable. Over 14,000 applications and renewals were processed in each year. The KPI for registration processing requires all completed applications to be processed within 20 days. Achievement against KPI has been marginally below standard at 99% in the last two reporting years. This is a significant improvement compared to the performance across 2021-2023. Improvements in the online registration services, introduction of the mobile registration app and ongoing staff training have assisted with capacity to process registrations within timescales. The introduction of Digital ID technology in the next year will remove the need for manual uploading and cross-referencing IDs and should further support processing performance.

Registration Matters

All registrants are required to pay an annual fee to maintain their registration. They must also complete a renewal process every three to five years depending on their job role.

Reminders are sent to all registrants to help them maintain their registration. 99% of registration applications and 90% of registration fees were completed using the online registration system.

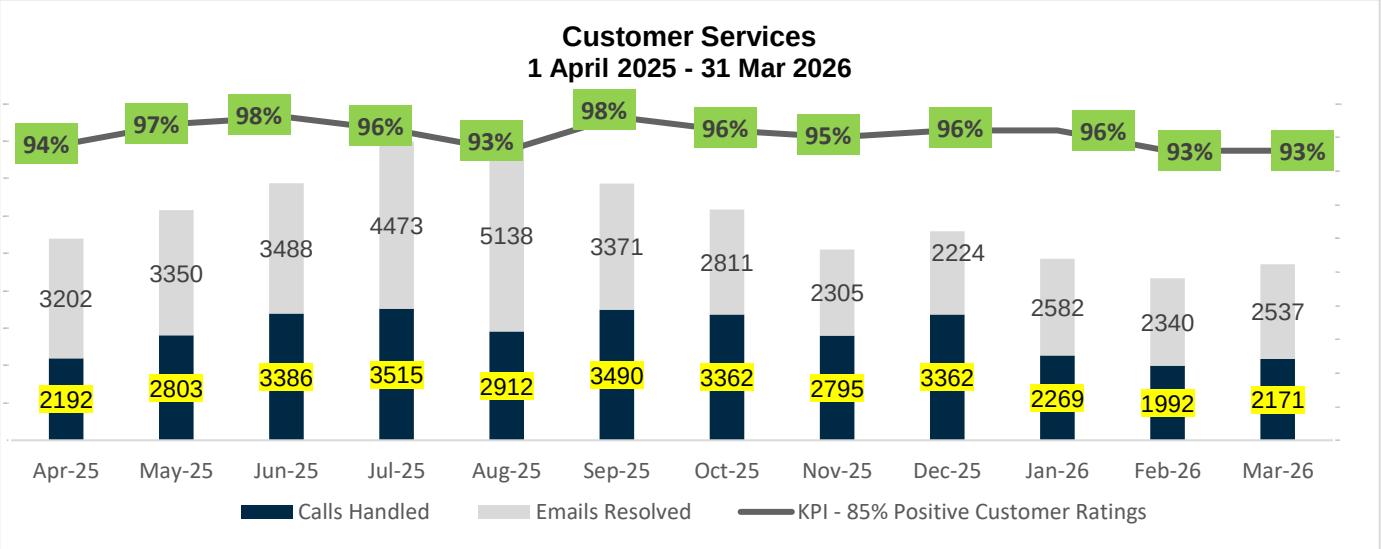
Those who do not pay fees or fail to complete renewal processes are automatically removed from the Register after seven days. The application of these automated reminders and removals has assisted in cleansing the register data and ensuring that only those currently practising in social work or social care remain on the live register. 98% of registrants maintained their registration throughout the year. This includes meeting requirements to pay annual fees, update their details, and complete periodic renewal processes.

In 2025-26 the registration team engaged in training and development sessions to support business improvement. Review of registration processes was completed and development work

initiated to support the separation of the application process between social work and social care. This work is currently in testing phase and expected to be rolled-out in summer 2026. The mobile app for registration services was launched in June 2025. This can be used to pay fees, update information, and make an application. These improvements have contributed to the improvements in registration processing times as well as the increased levels of customer satisfaction reported in surveys.

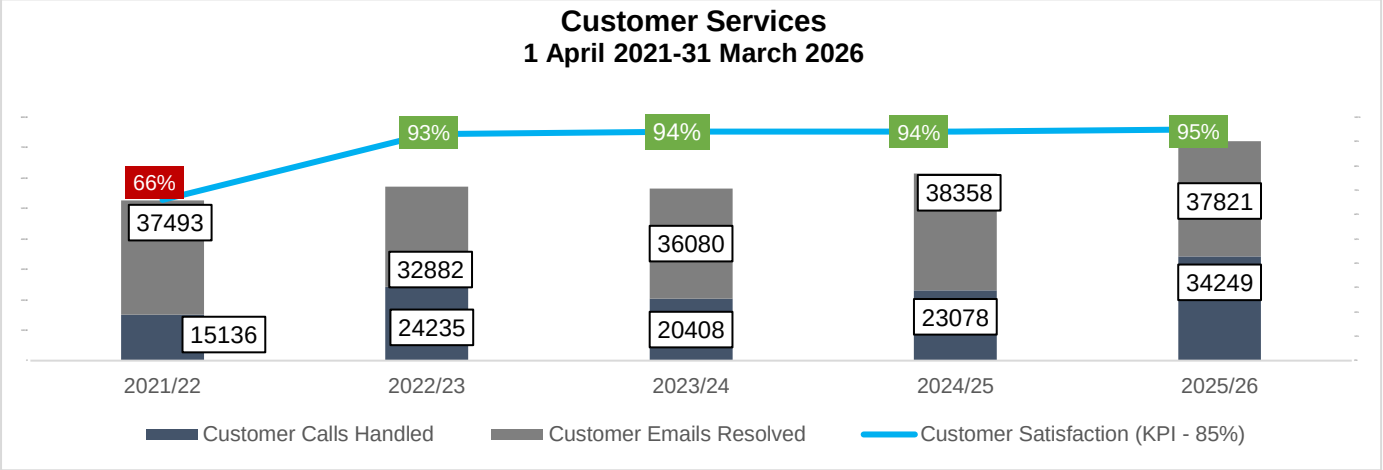
Customer service standards for registration support

Registration services are delivered primarily through the online registration portal for registrants and employers. Those requiring support for queries are supported by telephone and email. A customer appointment system is in place to enable those who need in-person support to arrange a convenient time to come to the office for assistance. One-two people per month require in-person support at James House. All contacts are invited to complete an online survey to give feedback on the service.



Customer satisfaction remained above the 85% KPI throughout the year. 1,076 people responded to the Customer survey in 2025-26 and reported 95% positive satisfaction. Average of 15 people per month provided additional commendation for staff. Call handling services were transferred to a local call centre in September 2024 to improve call handling performance (which had dropped below 50% in 2024-25). This triage option for telephone queries has improved call handling rates significantly.

- 72,070 people were supported with their registration queries during the year – this is a 17% increase on 2024-25 activity and a 37% increase since 2021-22.
- 52% of people (37,821) were supported by email and 48% (34,249) by telephone.
- Handle rates (the % of calls presented that were responded to) for customer phone calls were recorded at 95% or above throughout 2025-26.
- More than 10,000 additional calls were handled in 2025-26 and 80% of caller queries were resolved. Complex queries are forwarded to the Registration Team for investigation and resolution.
- Average turnaround time for emails was three days. 29 emails remained in the system for action at the end of March 2026.



Customer service activity for the last five years shows an increase of 37% (calls and emails combined). Service improvements, staff training and the addition of dedicated call centre support has enabled overall compliance with customer service KPIs at 93%-95% for the last four years.

Regulation – Workforce Fitness to Practise 2025-26

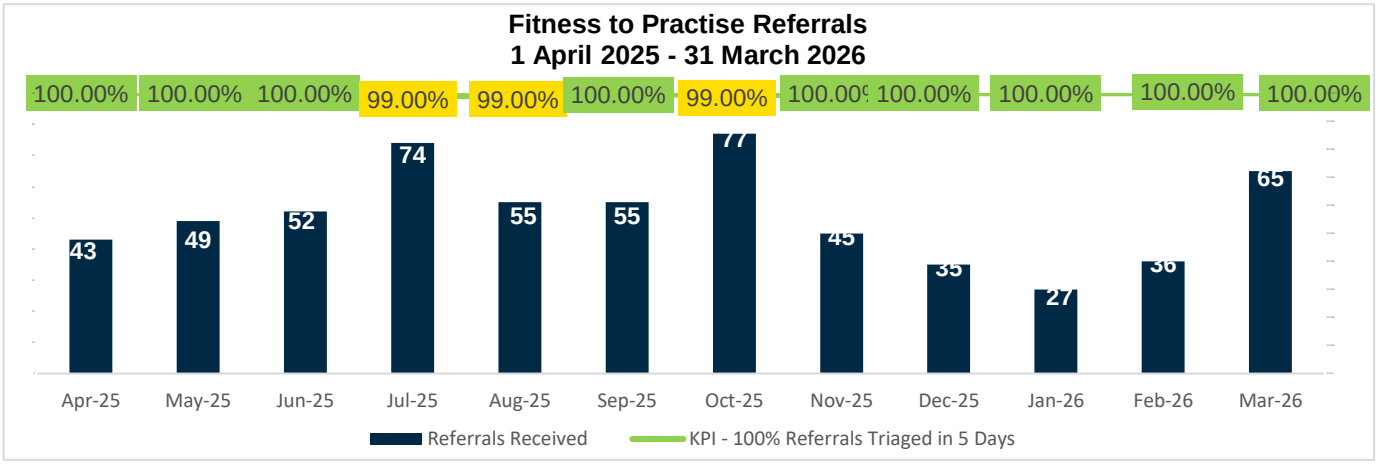
The Social Care Council is responsible for investigating concerns that a registrant may not have met the standards required in their conduct or practice. Concerns can be referred by anyone and they can relate to a wide range of issues. FtP takes account of whether a registrant has the skills, knowledge and character to practise their profession safely and effectively. This approach to regulation provides the option to apply consensually agreed conditions and sanctions that can remediate for lapses in a registrant's practice. It offers the capacity to resolve concerns about practice issues, or health conditions in a fair and appropriate manner. More serious cases continue to be managed through formal FtP hearings and committees.

Fitness to Practise Referrals

Only a small number of registrants are referred to the Fitness to Practise Team each year (1.2% of all registrants in 2025-26). The Fitness to Practise team assesses all concerns referred to them and follows a series of steps to ensure that all concerns are treated in a fair, robust and appropriate way. The Social Care Council aims to have all referrals risk assessed within five working days of receiving them. High risk concerns are escalated to ensure that risk to the public is minimised.

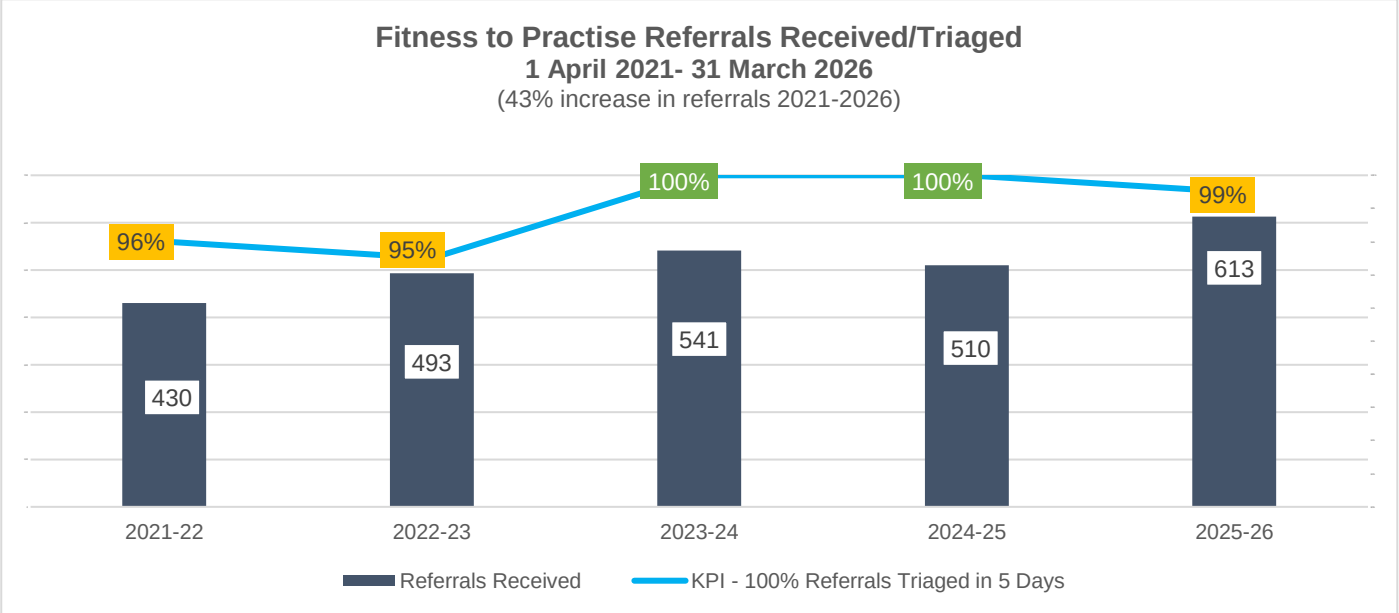
- 613 referrals were received in-year, which is a 20% increase against the total referrals received for 2024-25 (40% increase on the referrals received in 2021-22).
- 19% of these referrals were assessed as not meeting the threshold for a case to be opened for a Fitness to Practise investigation. This is similar to the pattern in the previous year.
- 381 new FtP cases were opened for investigation in-year (353 were opened in 2024-25)
- 361 FtP cases were closed (307 were closed in 2024-25).

The significant increase in FtP activity has required the team to create a waiting list for medium risk cases, to wait for allocation to an officer for further action. Waiting list cases are kept under review by the team at weekly Case Conference to ensure there is no change in status in the interim. At 31 March 2026, there were 480 active cases and 124 waiting list cases in the system. This is the highest caseload recorded to date. This pressure on the system has been recorded on the risk register and reported to the DoH.



(KPIs and the performance information used to make these assessments are included in the KPI summary on page 69)

99% of referrals received in 2025-26 were triaged within five working days – marginally below the 100% KPI standard. KPI was not met in July, August and October. In each of these months, one referral took an additional day to complete. No additional risk to the public arose from these minor delays. The achievement of over 99% KPI compliance in 2025-26 is a strong performance by the team in responding to a 20% increase in activity within year - to be managed without additional resources. Year to year comparisons are set out below.

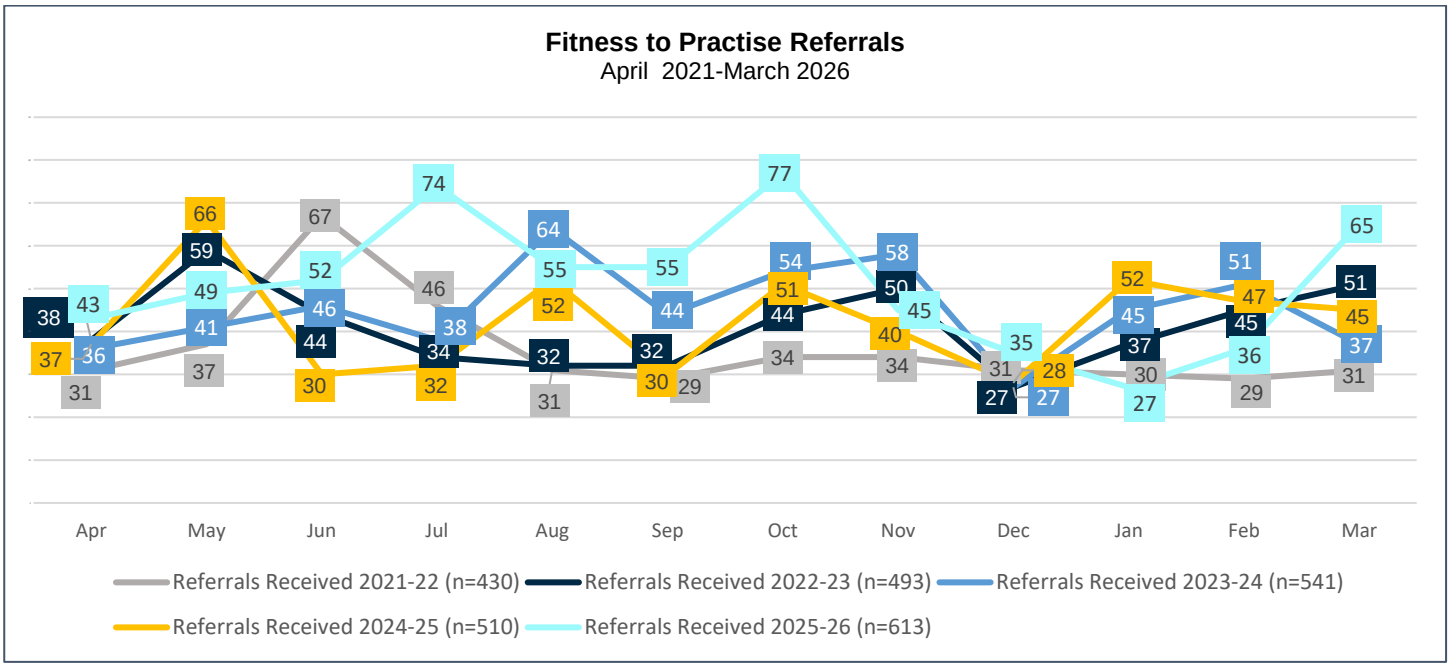


(KPIs and the performance information used to make these assessments are included in the KPI summary on page 69)

The introduction of the electronic case management system last year facilitated the introduction of an online service for referring FtP concerns. This has assisted with ensuring more consistent information is reported initially on referrals. Referrals are unpredictable in terms of frequency and what the alleged concern relates to. Referral activity for 2025-26 demonstrates a significant increase, as part of a 5 year upward trajectory. It is acknowledged that referral activity was exacerbated as a result of a regional BSO led investigation. However, the trend being experienced by the Council is consistent with similar FtP demand being experienced across other Social Work and Social Care regulators across the UK and across Healthcare Regulators, who all report similar growth.

Comparison of referral patterns was reviewed for the last five years to ascertain if there were possible trends in referrals at certain times of the year. The analysis did not provide any conclusive

links. The review showed some higher occurrences in May, June, August, October, November and Quarter 4, but no evidence of underlying causes. Anecdotal evidence may link cyclical increases to delays in referrals at holiday periods, or around times when larger numbers of registrants are due to renew registration and have to declare any changes affecting their registration.



(KPIs and the performance information used to make these assessments are included in the KPI summary on page 69)

Guidance to help people identify concerns about registrant standards is being shared with employers and managers on an individual basis and at regular forums/information sessions. This follows from a quality improvement project from 2024, which focused on options to reduce the number of referrals incorrectly reported to the Fitness to Practise Team. The project involved surveys and interviews with people who had recently made a referral. The online referral form and onscreen guidance is also expected to assist with reducing erroneous referrals on an ongoing basis as more people access the service. Approximately half of referrals were submitted using the new service. This new process will help manage some of the pressures on the Fitness to Practise Team and will also benefit registrants and employers from having unnecessary involvement in the referral system. This will be promoted widely during 2026-27 to encourage uptake.

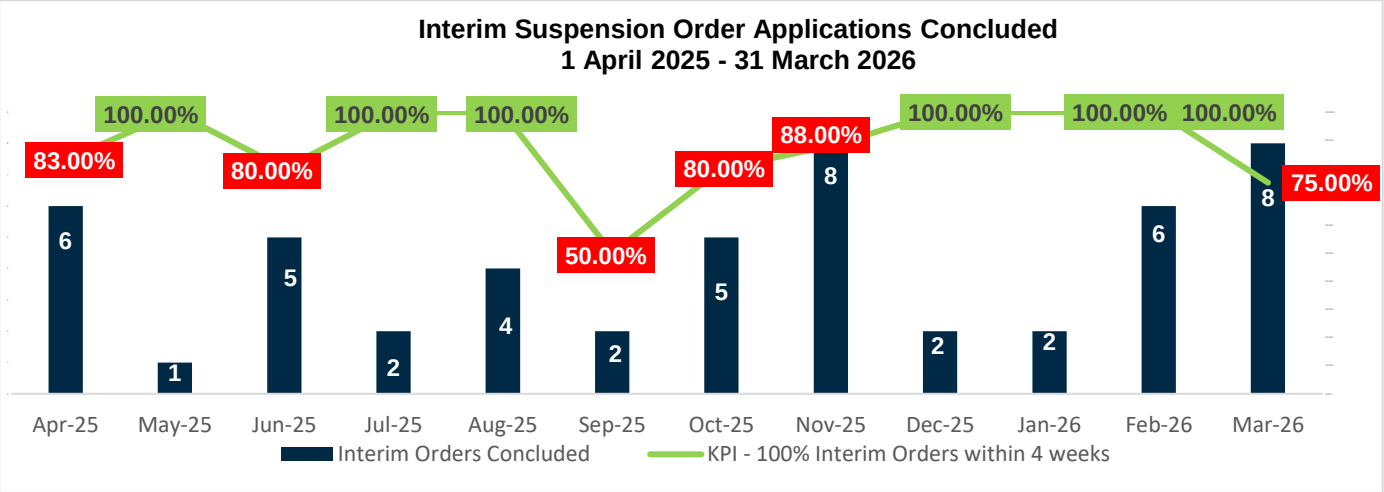
Interim Suspension Orders

Where a concern about a registrant is assessed as high risk, the Fitness to Practise Team may apply for an Interim Suspension Order (ISO) hearing. An ISO is a temporary measure to suspend a registered person from practising in their social work or social care role during further investigations. This occurs for only a small number of referrals.

KPIs require that an ISO application to be concluded within 4 weeks of referral. The unprecedented volume of ISO requests in 2025-26 placed extreme pressures in terms of scheduling committee members for panels, as well as accessing support from legal services.

- 51 applications were made for Interim Suspension Orders in 2025-26 which is a 34% increase on the previous year. At 31 March 2026 - 72 Interim Orders were in place which is the highest recorded number of ISOs to date.
- 86% of these ISO applications were concluded within the 4-week KPI. 7 of these ISOs did not meet the 4-week KPI – taking between 1 and 4 additional weeks to be completed. No additional risk was placed on the public as a result of these delays.

ISO applications in 2025-26 included those of high risk such as inappropriate relationships, offences against the person, theft, fraud, financial misconduct, physical abuse, rough handling, police investigation, unsafe practice, social services investigation, sleeping on duty, driving under influence, fraudulent references. The unpredictability of when ISOs will be required places additional pressures on Fitness to Practise and Committee teams. Achievement of KPI standards required careful allocation of resources to manage them effectively.



(KPIs and the performance information used to make these assessments are included in the KPI summary on page 69)

Closing Fitness to Practise Cases

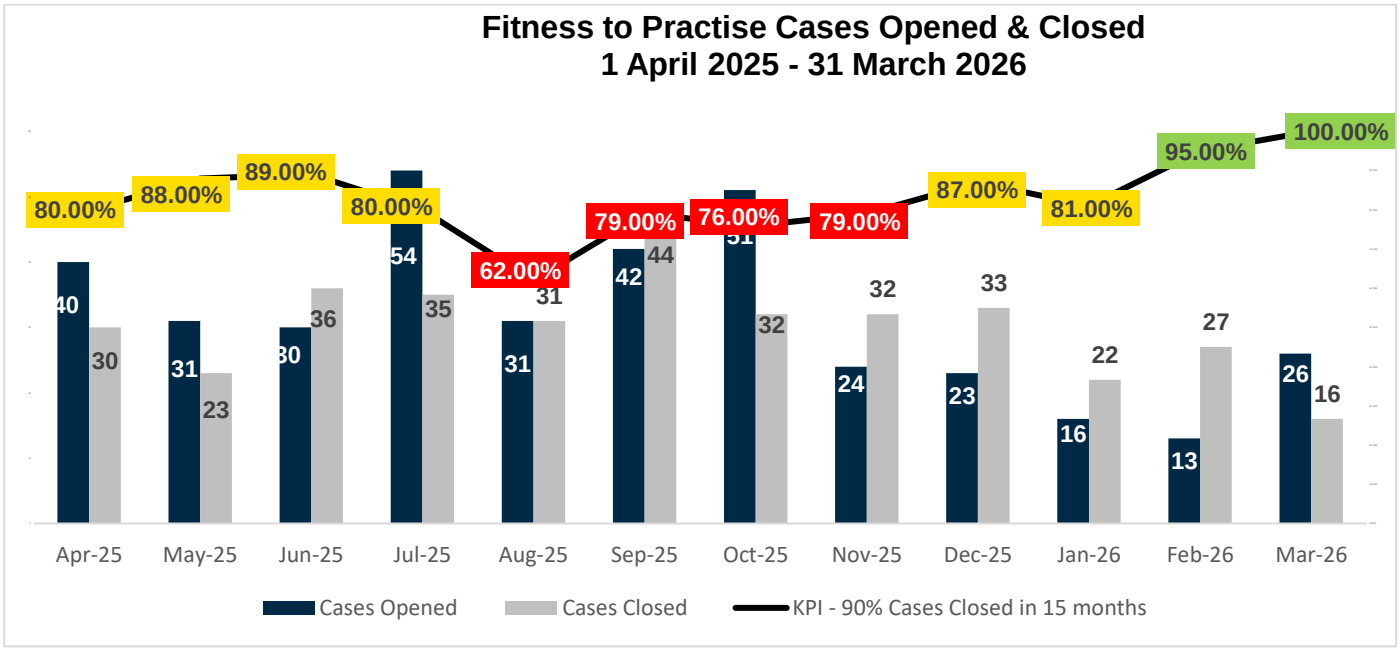
361 FtP cases were closed in 2025-26. 92% of these cases were closed by Fitness to Practise Officers and 8% were closed by Fitness to Practise Committees. The Fitness to Practise Model of Regulation provides a wide range of disposal options including Consensual Disposals, ranging from letters of advice to warnings or undertakings to improve practice. Closure by FtP Officers at preliminary stages, or through consensual disposals for 2025-2026 were as follows:

- 165 cases were assessed as requiring 'no further action',
- 142 cases required a 'letter of advice about the Standards',
- 16 cases required a 'warning',
- 2 cases involved 'undertakings' and
- 1 cases was resolved through 'removal by agreement'.

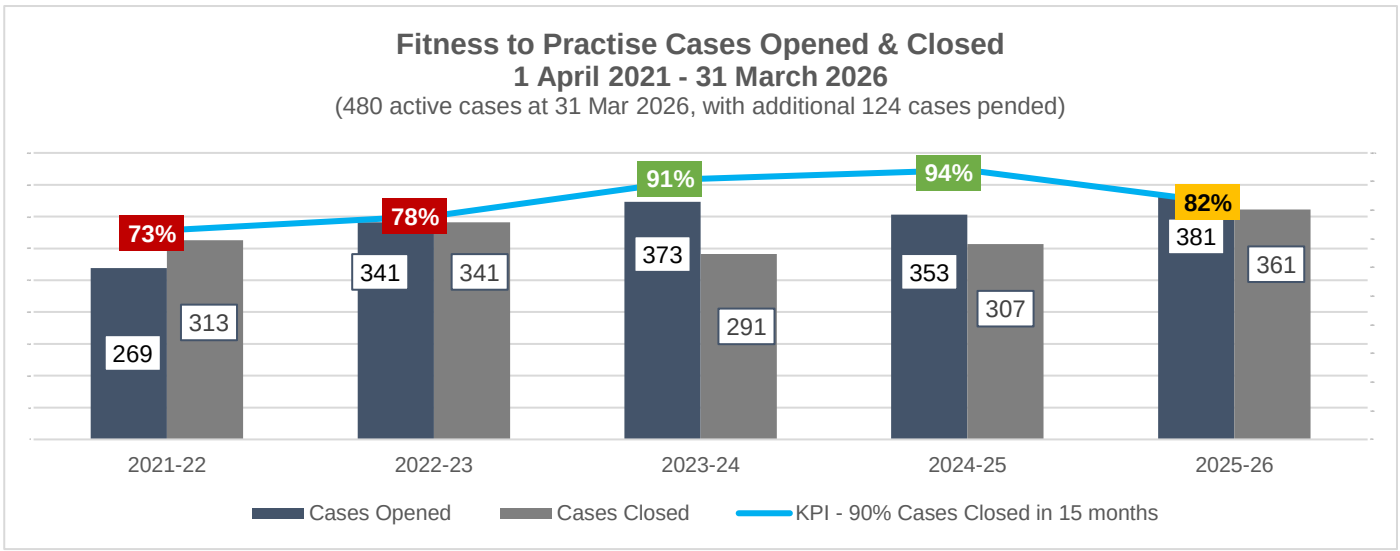
The Social Care Council will only grant 'removal by agreement', if a registrant admits the allegation and that their fitness to practise is impaired. It means that a registrant is removed from the Register and is unable to work in any social care or social work post which requires registration. This approach supports engagement with the registrant to apply a proportionate and timely sanction. It also offers the opportunity to apply a sanction that can support remediation and improvement in practice. It is important to highlight that all Consensual Disposal decisions are public facing and subjected to regular external audit to ensure openness and transparency.

As the graph below illustrates, during 2025-26, the 15-month KPI for closing 90% cases was met in only two of the reporting months.

- 82% of cases closed in 2025-26 were within the 15-month KPI (case closure KPI for 2024-25 was 94%).
- 16% more cases were closed in 2025-26 compared to 2024-25 (304 cases were closed in 2024-25; 294 were closed in 2023-24; 341 in 2022-23). The KPI standard for closure of Fitness to Practise cases is that 90% are closed within 15 months.



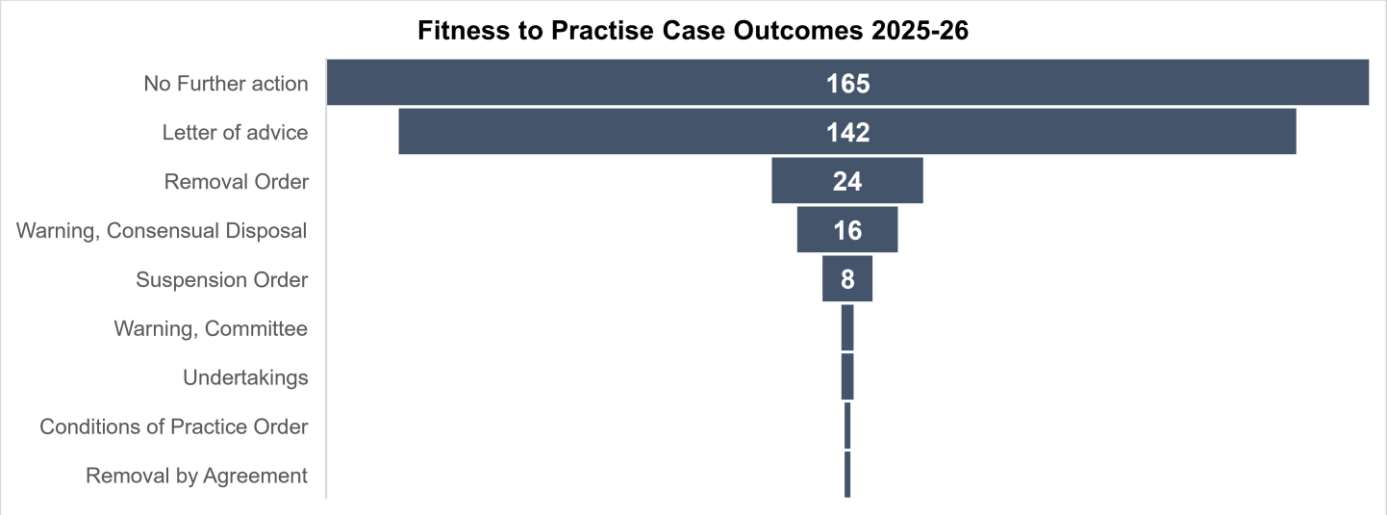
(KPIs and performance information used to make these assessments are included in the KPI summary on page 69)



(KPIs and the performance information used to make these assessments are included in the KPI summary on page 69)

At 31 March 2026, 480 active Fitness to Practise cases remained in the system, 24% of which were more than 18 months old. Case closure times can be impacted by external factors such as employer investigations, police or court proceedings or health issues relating to the registrant. Some cases can take 16 to 59 months to conclude.

High referral rates and caseloads have affected capacity to close cases – additional resourcing options are currently being explored with the Department of Health to increase capacity within the FtP team. 124 FtP referrals were on the waiting list at 31 March 2026, for allocation to an investigating officer. All active and waiting list cases are reviewed at monthly case conferences, including long-running cases. It remains the aim to attain the standard of closing 90% of cases within 15 months. This will prove challenging in light of the significant and increasing pressures on Fitness to Practise.



Fitness to Practise Hearings and Committee Services

During 2025-26, the Hearings and Committees team have been implementing the report and recommendations from the consultation on updated processes for assessing the most suitable method (in-person, online or hybrid) for delivering Fitness to Practise Hearings and Committees post-pandemic. The Fitness to Practise Rules have been updated to ensure consistency with the new processes. Hearings are scheduled and delivered in adherence to the rules. Care is taken to ensure that all parties are supported to engage in proceedings and any support needs, including the method of delivering the proceedings is allocated appropriately.

The Fitness to Practise and Committee teams were severely impacted during the year with an ongoing growth in referrals, including an increase in the complexity of cases. These pressures were compounded by requisite pressures for DLS in BSP who provide legal support for hearings and committees. These pressures resulted in waiting lists both for Fitness to Practise in investigating cases but also for Committee in scheduling Interim Suspension Orders. These pressures will continue into 2026-27 and the risk concerning this has been escalated to the DoH.

During the year 2025-26:

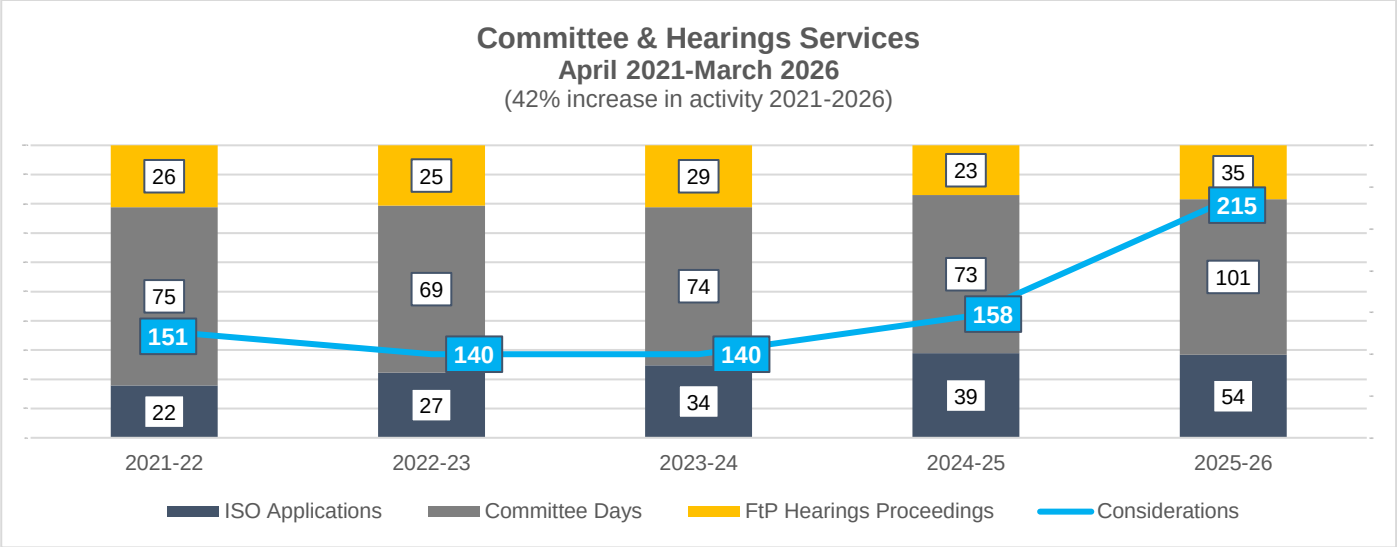
- 161 cases were referred to Fitness to Practise Committees.
- 196 Notices of Proceedings were issued
- Committees made 197 decisions involving registration applications, Interim Order applications and Fitness to Practise final orders.
- 51 Interim Order applications were concluded, and 58 Interim Order reviews were held, (43 held in 2024-25; 37 held in 2023-24; 30 held in 2022-23).
- 35 Fitness to Practise Hearings were held (21 in 2024-25; 25 in 2023-24; 22 in 2022-23), with 22 Removal Orders, seven Suspension Orders, two Warnings and one Conditions of Practice Order were applied (one case was adjourned in the period).
- The Registration and Preliminary Proceedings Committees heard 100 registration, interim order and interim order review applications.

KPIs require all Hearing and Committee proceedings to be managed within the timescales and processes set out in the Fitness to Practise Rules.

- The KPI for Hearings and Committees requires that 90% of FtP hearings held under the FtP procedure will be completed within 6 months of the date of transfer. 81% of FtP hearings held under the FtP procedure were concluded within 6 months of transfer in 2025-26. 5 hearings concluded in-year did not meet KPI - requiring an additional 10 days to 10 weeks to conclude.

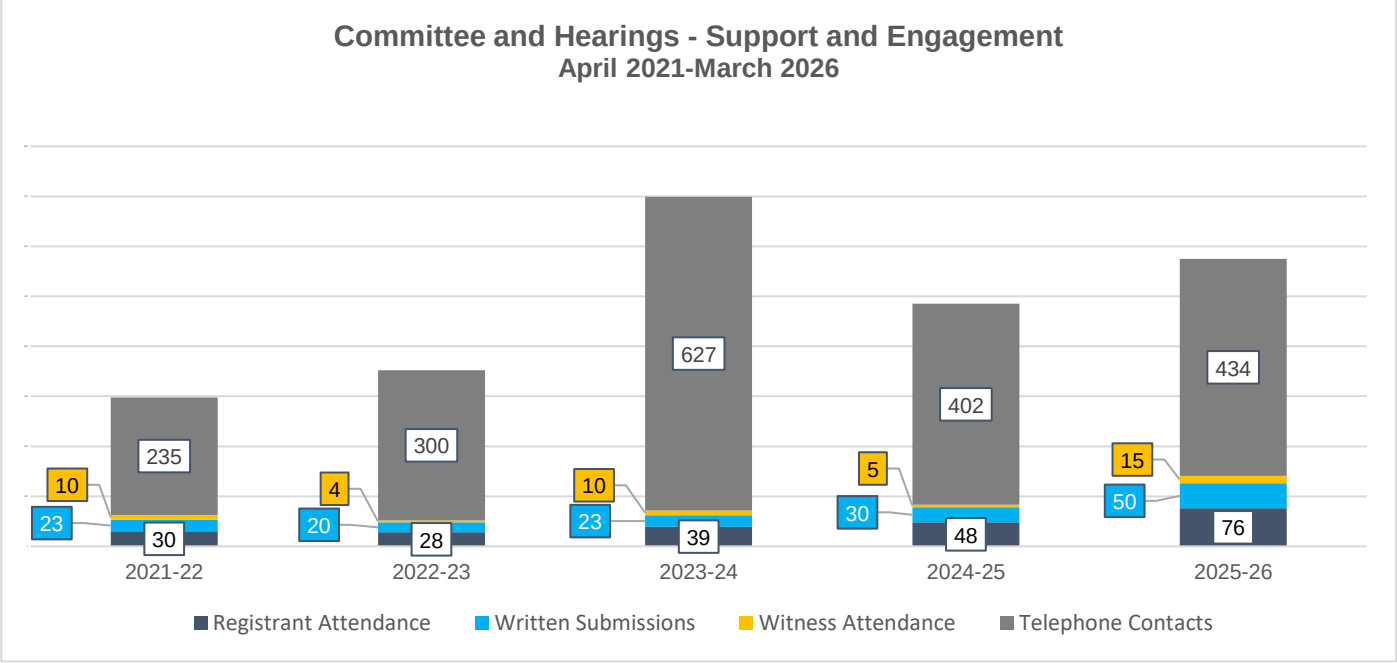
- The KPI for hearings held under the Health procedure requires that 90% of Health hearings are completed within 10 months. One hearing was held under the Health procedure and completed the prescribed timescales.

The graph below illustrates the overall 40% increase in activity for Hearings and Committee services over the past five years, similar to the change experienced in Fitness to Practise referrals/cases.



(KPIs and performance information used to make these assessments are included in the KPI summary on page 69)

The Team delivered 101 Committee days in 2025-26, including 35 Fitness to Practise Hearings. All hearings were held in accordance with the Registration and FtP Rules. Hearings were delivered using in-person and online service delivery. The delivery medium was selected based on complexity of the case and the needs of participants. Requests for support and engagement to facilitate people to participate in proceedings has increased by 93% in the last five years. In 2025-26, 76 registrants were supported by the team to attend proceedings; 499 contacts were made by phone, email or in person (93% increase in activity since 2021-22).



Recruitment for Committee and Hearing panels was completed at the end of 2025-26. This included the appointment of 4 new Chairs, 3 Lay Members and 3 Social Care Members. These members replace those whose terms of appointment expired April 2025. Induction, training and observations were completed by the new members. 4 new Legal Advisers were appointed to provide additional flexibility in scheduling proceedings. Development work to create the adjudication module for Committees/Hearings on the Fitness to Practise electronic case management system is progressing well.

Annual training was delivered with Chairs and Committee Members to consolidate and underpin their knowledge, as well as to provide them with case law updates. The performance of Chairs and Committee Members is continually measured by the completion of our bespoke online 360 assessment tool after each Committee and culminated with one-to-one meetings with the Director of Registration and Corporate Services.

The Council takes a proactive approach towards reducing the number of registrants whose conduct or practice falls below the standards required for registration. Fitness to Practise and Workforce Development Teams worked together on a programme of workforce engagement and education to improve understanding about the workforce standards and to share learning about issues that cause registrants to be referred to Fitness to Practise. Staff have engaged with managers, registrants and students at workplace and college information sessions to raise awareness of the standards expected of registrants and employers. Staff from the Social Care Council and RQIA meet every quarter to share practice experience and review any themes arising from inspections or referrals. Collaborative was work undertaken with RQIA and employers to strengthen the connection between workplace practices, inspection standards and the Standards for Conduct and Practice.

The 2025-26 business plan included an objective to commence a review of our Standards of Conduct and Practice for Registrants and the Standards for Employers to ensure these remain fit for purpose. Due to resource limitations, this review was not commenced in-year. This work will be taken forward in 2026-27. An objective has been included to complete a scoping exercise to enable the planning for a consultation on changes to the Standards to ensure these continue to reflect best practice.

Raising Standards in Practice

The Council's Learning Zone provides a wide range of free resources for registrants and their managers to use to guide them on meeting the standards expected of registrants and their employers. All learning resources have Standards of Conduct and Practice embedded to ensure workforce familiarity with the Standards. Additionally, all PiP submissions are required to incorporate standards thus evidencing understanding of application.

Annual quality assurance processes confirmed that Council approved providers of the Degree in Social Work, Queens University Belfast, Ulster University and the Open University and employers providing practice learning opportunities were delivering qualifying social work education to the required standard. Student inductions, highlighting the Standards and registrant responsibilities, were facilitated with all Degree providers in this period.

The Workforce Development Engagement officer attended 49 events (employers, registrants and prospective registrants) across the period, all of which incorporate promotion of the Standards of Conduct and Practice tailored to the audience. 13 of these were specific presentations to social care staff to help them understand the application of Standards to practice.

6 Lunchtime seminars were also facilitated where registrants are reminded of the Learning Zone resources to help them apply the Standards to their work. One Social Work Registrant Forum event included opportunities to discuss promoting the standards and the programme for the June Social Care Managers Forum events provided an update on registration, fitness to practise and the standards.

Feedback on the Learning Zone indicates a positive learning experience for those using the resources to learn more about the Standards.

Strategic priority 1. Deliver effective regulation

What we have learned in 2025-26

Standards are the cornerstone of everything the Social Care Council does to strengthen the professionalism of the registered workforce across Northern Ireland. We must continue engaging with registrants, employers and key stakeholder groups to raise awareness and understanding of the Standards. Continued collaboration between the Social Care Council Fitness to Practise and Workforce Development Teams and inspection staff and leads from the Regulation and Quality Improvement Authority and other regulators is essential in order to share learning about workforce standards and to discuss interventions to promote registration and the standards in the workplace.

Looking ahead – Our plans for 2026-27

Evaluation of the work completed to deliver effective regulation indicates that the actions set out in the 2025-26 Business Plan supported these priorities. It has identified work that will carry forward into the new business year and some new actions to be taken forward in 2026-27 that will support us in our long-term plans to improve workforce standards.

Our 2026-27 priorities are to:

1. Support registrants and employers to maintain and value registration by promoting our online resources, encouraging the use of the online portal, managing and responding to emails and phone calls, promoting one to one clinics for registrants and employers, and effectively processing applications, and renewals against our KPIs.

2. Deliver our FtP functions in a safe, timely and effective way in accordance with rules, emerging case law and regulatory best practice and our KPIs. This includes securing necessary FtP resource, triaging cases, investigative enquiries, and preparing and presenting evidence to FtP Hearings.

3. Deliver our Committee hearings services in a timely and effective way to deliver our statutory requirements and achieve our KPIs, including the provision of appropriate Committee resources, delivery of high-quality papers, ensuring hearings (online or in person) are managed professionally and that all committee members are trained and supported in carrying out their roles.

4. Commence a review of our Standards of Conduct and Practice for Registrants and the Standards for Employers to ensure these remain fit for purpose.

5. Promote compliance with the Standards of Conduct and Practice for Registrants, and working with RQIA to promote compliance with the Standards for Employers.

Strategic priority 2. Develop the capability of the workforce

Our Strategic Plan 2023-27 says we will make the following differences in developing the capability of the workforce:

1. Establish a qualifications and continuous learning framework which can support a career in social care that strengthens the capability of the social care workforce.
2. Ensure the delivery of high-quality qualifying and post-qualifying social work education and training that is accessible, flexible and equips social workers to meet the needs of the people they work with in an increasingly diverse society.
3. Embed the PiP Framework for social workers as the benchmark for safety, quality, improvement and continued fitness for practice.
4. Support the development of social work leadership capability using the DoH Leadership Framework.
5. Promote uptake and engagement in continuous learning through the development of a Digital Learning Strategy.

Our actions for 2025-26 - we said we would:	Indicators of success for 2025-26 – the difference we wanted to see:
1. Approve and assure standards of social work education and training at qualifying and post qualifying levels.	• Degree in Social Work programmes meet the required Standards for Approval. • Actions arising from the Review of the Degree are delivered • The statutory requirements for the PiP Framework are met. • Post-qualifying social work education meets the required Standards for Approval within the PiP Framework.
2. Work with the Professional in Practice (PiP) Partnership, social work registrants, and others to promote a culture of continuous learning & improvement through engagement in PIP Framework.	• All forums and committees associated with the delivery of the PiP Framework are delivered. • Routes to achievement within the Framework are delivered. • PiP Awards are delivered.
3. Engage with Social Work Leaders to support leadership at all levels of the profession by implementing the Social Work Leadership Framework.	• Learning Zone includes a section promoting the Leadership Framework. • Evidence of engagement with social work leaders to support the Social Work Leadership Framework. • Evidence of outcomes from year one of implementation across workstreams
4. Support the equality, diversity and inclusivity of the social work and social care workforce by establishing reliable baseline data.	• Baseline data gathered that will enable a strategy and actions to be developed to support equality, diversity and inclusion in our work to support the workforce.
5. Develop, promote and support the Care in Practice Framework and career progression as part of the Social Care Council's responsibilities within the wider social care workforce reform agenda as set out in the DoH Social Care Workforce Strategy 2025-35.	• In year one (2025-26) 40% of Learning Zone resources will include opportunities to enhance cultural competence. • Review of the Diplomas in Health and Social Care are overseen and facilitated.

Strategic priority 2. Develop the capability of the workforce

Achievements - how did we do in 2025-26?

Central to our workforce development activity is working in partnership with stakeholders to develop education, training and learning to future-proof the workforce. All Social Care Council registrants must engage in learning and development throughout their career in social work and social care. Through our workforce development functions, we develop and promote qualifications, learning resources, training opportunities and informal information sessions to support registrants to develop the knowledge and skills required to practice safely and to a high standard. We also audit registrants' training and learning records to ensure they are meeting the standards required in their professional development.

By setting and monitoring standards for social work education and training at both qualifying and post-qualifying levels we support the development of safe and effective practice across the career spectrum. We regulate and quality assure the delivery of the Degree in Social Work and Professional in Practice approved programmes and courses (for which we are the awarding body) through robust approval, monitoring and review processes.

The 2025–26 Business Plan sets out five objectives and fourteen indicators of success for our activity to develop the capability of the workforce. These reflect the key activities undertaken to support this outcome. Progress against both the objectives and associated indicators has been monitored through monthly and quarterly reporting, with performance tracked against Key Performance Indicators (KPIs).

During the year, resources for business analysis and intelligence was reallocated to support business services for the Council and to manage Department of Health social care reform projects, including the Training Support Programme. Progress on the objective to scope workforce data to establish baseline datasets for EDI was not completed and will be taken forward within the EDI programme for 2026-27. A strong performance was achieved against all other aspects of this business theme for workforce qualifications and development.

Assessment at 31 March 2026 - GREEN – Satisfactory progress This assessment was based on progress against objectives, evidence of indicators of success and performance against KPIs. Four of the five objectives had been achieved satisfactorily, and thirteen of the fourteen indicators of success were met or largely achieved. KPIs were within acceptable limits.

The following pages provide an overview of the achievements in this area of work, commentary for performance against KPIs and details of mitigating action taken to address pressures affecting KPI performance.

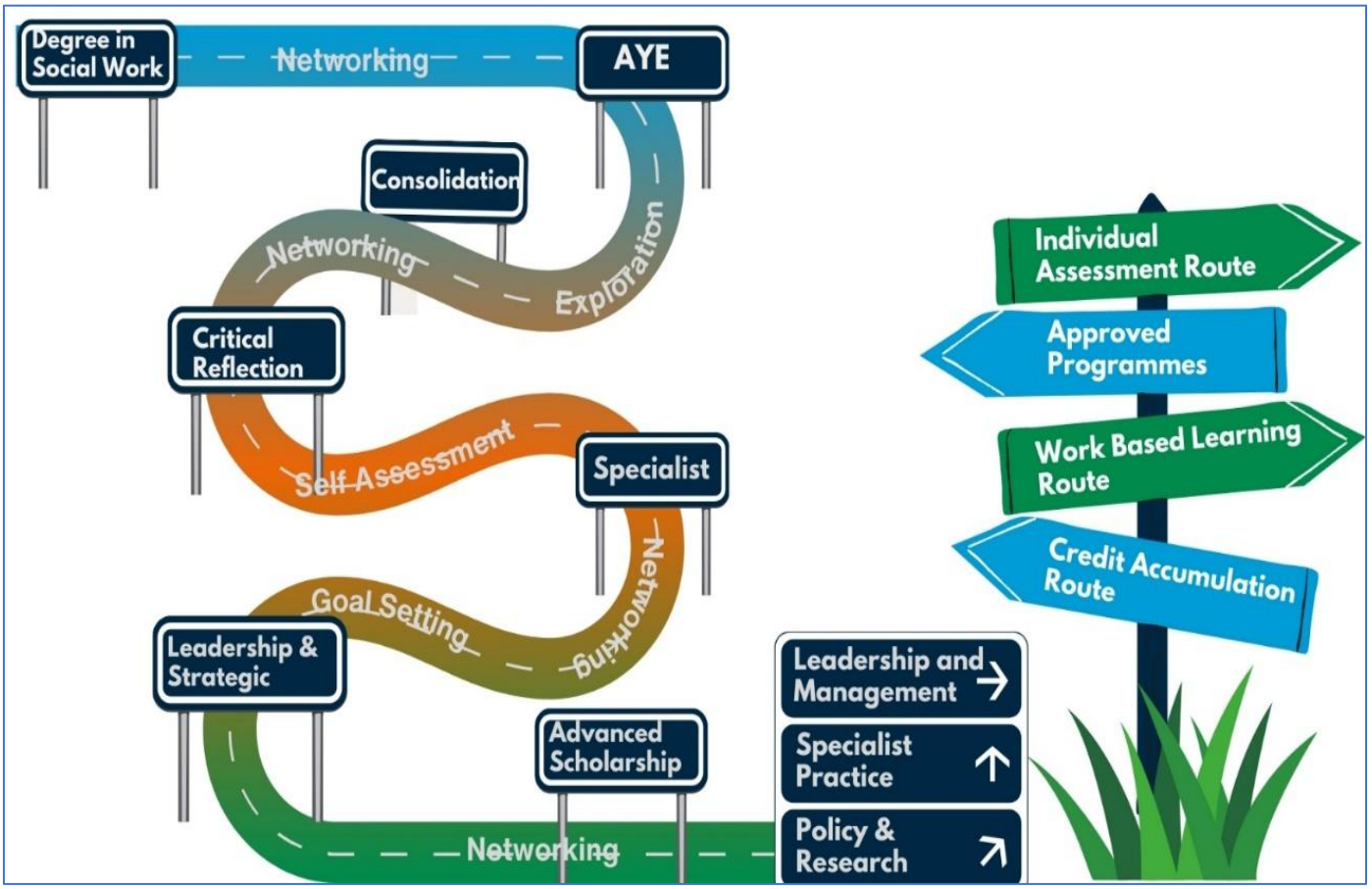
Approving and assuring standards for social work education and training NI

The Social Care Council has a statutory responsibility to set standards for social work education and training at both qualifying and post qualifying levels. The Council is responsible for approving courses to deliver the Degree in Social Work in Northern Ireland. There are three approved courses which are delivered through the Open University (OU), Queens University of Belfast (QUB) and Ulster University (UU) – UU sites are at Belfast Metropolitan College, Magee College and South West Regional College.

The annual programme of Quality Assurance and monitoring visits was completed for the Degree courses, Designated Practice Learning Providers who provide placement opportunities for social work students and approved PiP Programmes. Management Boards and the NI Degree in Social Work Partnership (NIDSWP) were supported to ensure effective delivery of the Degree and Practice Learning and regional consistency in standards. Funding was disbursed to Voluntary Sector organisations on behalf of the DoH to support costs of practice learning opportunities for social work students.

The Council is also the awarding body for qualifications delivered through the Professional in Practice Framework for qualified social workers. There are 19 approved programmes for PiP delivered through taught programmes at QUB, UU, HSC Leadership Centre and Child and Adolescent Psychoanalytic Psychotherapy, Northern Ireland (CCAPNI). Social workers can also engage with the PiP Framework through approved Work Based Learning programmes (WBLR), by submitting a portfolio through the Individual Assessment Route (IAR), or through the Credit Accumulation Route for ongoing learning (CAR).

A career in social work - The learning and development journey



Degree in Social Work students and newly qualified social workers 2025-26
All students on the Degree in Social Work courses in NI must become Social Care Council registered as part of enrolment on their course. In autumn 2025, the Social Care Council processed registration applications for 344 new Degree in Social Work students. Records were updated throughout the year to reflect deferrals and withdrawals. Students who completed the Degree in June 2025 were registered as Qualified Social Workers with the condition of Assessed Year in Employment. The registration team worked with universities to fast-track student graduation outcomes, as part of the DoH recruitment programme for new social workers entering priority posts within Health and Social Care Trusts.

Degree in Social Work - 2025-26

- 344 new students enrolled on Degree courses
- 265 students graduated from Degree courses
- 221 newly qualified social workers completed the Assessed Year in Employment

Professional in Practice Awards - 2025-26

- 58 NI Consolidation Awards
- 109 NI Specialist Awards
- 7 NI Leadership and Strategic Awards
- 1 Advanced Scholarship Award

PiP Awards recognition of achievement - September 2025 Tracy Reid welcomed successful PiP award candidates and their guests to the 2025 PiP awards celebrations in Lisburn Civic Centre. Aine Morrison, Chief Social Work Officer for NI and Alderman Hazel Legge, Deputy Mayor of Lisburn & Castlereagh City Council gave their congratulations to the 175 social workers who had achieved PiP Awards during the year.

Keynote speaker, Jennifer McKinney, Lecturer in Systemic Psychotherapy at Queen's University shared her research 'Social Work: Growing an Ethics of Belonging'. Guests also had the opportunity to hear about the PiP Care to Chat podcast 'Embrace the Stretch'- supporting social workers to learn and develop. The podcast can be viewed on the Council website and social media channels.

The day was also an opportunity to focus on Social Work Leadership and to celebrate social work leaders and supporters of the PiP Framework. This event was the inaugural year for the Social Care Council's Award for Outstanding Contribution to Post Qualifying Social Work Education. Dr Judith Mullineux was the posthumous recipient of this award in recognition of ther commitment to social work and PD for social workers. Judith's varied career in social work touched so many and she really 'belonged' to the profession.

Standards for the Degree in Social Work - The annual programme of Quality Assurance and monitoring visits was completed for the Degree courses, Designated Practice Learning Providers who provide placement opportunities for social work students and approved PiP Programmes. The Northern Ireland Degree in Social Work Partnership (NIDSWP) performance was evidenced in mid and year end accountability reports to the Council that ensures regional consistency in standards. Funding was disbursed to Voluntary Sector organisations on behalf of the DoH to support costs of practice learning opportunities for social work students. Annual monitoring of Degree Providers demonstrates that Degree programmes meet the required Standards for the Degree. Similarly, annual monitoring of Designated Practice learning Providers (DPLPs) has provided assurance of meeting Standards for Practice Learning. A workshop in March enabled DPLP representatives to further embed the Standards. The ongoing implementation of the actions arising from the Review of the Degree (October 2024) is further ensuring a focus on improvement in relation to social work education and training at qualifying level. As a member of the National QAA Social Work Subject Benchmark Statement Advisory Group, the Social Care Council has influenced the resulting updated Statement.

Standards for the Professional in Practice Framework (PiP) All PiP programmes must complete a cycle of approval and reapproval to provide assurance that the course continues to meet the Social Care Council Standards. All submissions for PIP Annual Monitoring were completed and follow up sent to those requiring additional material. Processed for annual monitoring were reviewed during the year to streamline the process, increase accountability and provide more analysis on how programmes are managed.

During the year, progress across the PiP workplan was characterised by strong delivery of approved programmes and increasing engagement with the Individual Assessment Route (IAR), alongside a continued focus on improving data quality, reporting, and system functionality. Candidate files were reviewed throughout the year to ensure that records of PiP achievement and progress were kept up to date. Candidates and employers received advice on how they could add to their PiP achievements to attain a full PIP Award.

- 706 PiP Approved Programme module intakes and 1,084 outcomes were processed.
- 101 Work Based Learning Route module intakes and 81 outcomes were processed.
- 600+ candidate records were updated to reflect withdrawals from modules or programmes.

Standardisation training was provided for new and existing PiP assessors for the Individual Assessment Route (IAR). A new External Assessor was inducted for the IAR route. To ensure consistent application of the assessment criteria across all submissions, PiP assessment panel outcomes were reviewed by an independent assessor.

The Independent Visitors review of Initial Professional Development Award and NI Practice Teaching Training Programme was completed in Quarter 1. Review of the Research Methods programme was also completed. PiP Partnership and the University agreed the programme will retain the current delivery format until the re-approval is due.

Due to resource constraints to support development work on the database and reporting functionality, development of the Credit Accumulation Route (CAR) remained limited, with planned system enhancements placed on hold and an interim approach adopted whereby candidates are encouraged to utilise existing IAR submission routes to apply accumulated credits. While uptake of CAR remains modest, there is evidence of steady use by social workers, indicating ongoing demand.

Work to enhance system functionality, increase utilisation, and better support employers remains a priority to ensure the CAR route can realise its intended role within the PiP framework.

The Work Based Learning Route continues to expand opportunities for access to recognition for in-house learning within the PiP Framework with four courses now established.

Post Registration Training and Learning (PRTL) audits - monitoring registrant standards of training and learning

All registrants are required to complete at least 90 hours of training/learning during every registration period (3 or 5 years depending on their registration role). This is called Post Registration Training and Learning (PRTL). PRTL auditing is normally carried out twice a year in June and December, with registrant records selected at random. The Board approved for PRTL auditng to be paused in 2025-26 for a 1 year period to allow time for review of the process. Scoping work has been completed and recommendations for engagement on the an updated approach to auditing standards of PRTL will be taken forward in 2026-27.

AYE Audit - monitoring newly qualified social worker standards in the first year of employment. All newly qualified social workers are registered with a condition on their registration called the Assessed Year in Employment (AYE). This condition is normally applied for the new social worker's first year in social work practice. As a newly qualified social worker they receive extra support to develop their skills, knowledge and competence through their first Assessed Year in Employment. Each AYE social worker is assessed by their employer against the AYE standards set by the Council. Completion of the AYE ensures that new social workers have made the transition from student to employee and are competent to practise in the workplace. To ensure consistency in AYE standards across all areas in social work in NI, the Council audits a sample of new social workers who are have completed their AYE year. A 10% sample of AYE social workers is selected from AYEs due to meet their registration condition by August of the year of audit. The purpose of the audit is to ensure compliance with the Social Care Council standards; findings are used to highlight key themes, inform workforce planning and recommend improvements in the arrangements and promote regional consistency. The audit looks at the practice context, employment journey, training and development days and the experience of completing AYE reflected in registrants' personal statements.

In 2025-26, 19 AYE social workers were selected for audit. All evidence submitted was assessed as meeting the AYE audit standards. The Social Care Council will continue to work collaboratively with key stakeholders to review AYE processes and identify how newly qualified social workers can be encouraged and supported to develop within the current practice environment of workforce recruitment and retention challenges.

PiP Two Requirements Monitoring – As part of their continuing professional development, new social workers are required to complete two Requirements from the Consolidation Award on the PiP Framework (PiP Two Requirements) within three years of completing their AYE. The PiP II Requirements support the development of in-depth competence, to produce well-rounded, competent and confident practitioners. New social workers will have a condition placed on their record until they complete the 'PiP Two Requirements'.

The Council monitored completion of PiP Two Requirements throughout the year and followed up with registrants and employers to track their progress to satisfying this condition. A Two Requirements Extension Panel, comprising representation from Workforce Development and Fitness to Practise, met monthly to consider applications from social workers for extensions to

achieving the Two Requirements condition of registration. In 2025-26, 37 social workers were granted extensions. The PiP team also provided support for social workers to build on their achievements and progress to complete the remaining four Requirements for them to complete the full PiP Consolidation Award. In 2025-26, 58 social workers attained the full PiP Consolidation Award.

PIP AWARDS 2026

Specialist Awards

Leadership Awards

Consolidation Awards

Social care qualifications and occupational standards – The Social Care Council is a partner in the Skills for Care and Development (SfCD) UK Alliance – the Sector Skills Council for those working in social care, early years, children and young people's services. Together we are developing a workforce that is innovative, skilled and sustainable; one that fosters economic growth and sustainable communities across the UK. The Social Care Council is responsible for reviewing social care qualifications in NI to ensure that they remain relevant to the training and education needs of the workforce.

During 2025-26, the Social Care Council led on the review of Diploma qualifications and National Occupational Standards for social care in NI. Reference groups with membership from awarding bodies, education and employment were engaged in the refresh of these qualifications to meet changing service needs. All Diploma qualifications aligned to the Care in Practice (CiP) Framework for adult services have now been reviewed, with implementation on track to support registration from September 2026. Strong progress has been made in securing CCEA Regulation approval across Levels 2–5, reflecting high levels of engagement from Awarding Organisations.

The newly developed Level 5 Diploma in Leadership and Management is advancing through approval processes and is being positioned for integration into regulatory standards for registered managers, alongside inclusion within the Higher-Level Apprenticeship framework. In parallel, work is underway with Further Education Colleges to introduce a new Level 2 Traineeship to support entry into social care careers and strengthen workforce supply. These developments are underpinned by the imminent launch of updated National Occupational Standards for Health and Social Care and Childcare at Levels 2–4. A new Level 5 Management and Leadership suite is in development, ensuring continued alignment between qualifications, workforce capability, and sector standards.

Workforce engagement – Throughout the year, the Workforce Development Team has delivered a range of presentations, information sessions and small group discussions to raise awareness about social work and social care standards and development. The team uses a range of ways to reach out to stakeholders including, in-person meetings, online seminars, news and videos on our website and social media and updating learning resources on the online Learning Zone.

During 2025-26, over 150 engagement opportunities were fulfilled, involving around 4,000 managers, social care practitioners, social workers, students and service users, at service settings, colleges, career seminars and public events across NI. The engagement team delivered presentations at workplace events to share information about the Social Care Council, registration, standards, learning and development with social care practitioners and managers. Information sessions were held to promote the Care in Practice Framework and Apprenticeships for Social Care. Sessions were also delivered to university students to introduce the AYE standards. The PiP Framework information was shared in workplaces as part of induction and CPD for social workers.

Lunchtime seminars - The Lunchtime Seminars are an opportunity for social workers, social care practitioners and colleagues from other professions to share their learning and best practice without having to take extended time away from their workplace. The live broadcasts are normally recorded and the presentations shared on the Council digital channels after the seminars are completed.

The Lunchtime Seminars have been operating for a number of years and continue to be popular with attendees and with those wishing to present a seminar. The events are free to attend and open to anyone who wishes to register. In 2025-26, over 600 people logged on to six Social Care Council online Lunchtime Seminars. A further 350 people have viewed the seminars online. Topics for 2025-26 were wide ranging:

- Dysphagia
- Personal Education Plans for Children in Care in NI
- Links – Protecting Animals, Protecting People
- Engagement in Post Qualifying Social Work Education programmes
- Guidance on Supporting Social Workers
- Moral and Fiscal Effects of Social Work Turnover in Child Protection

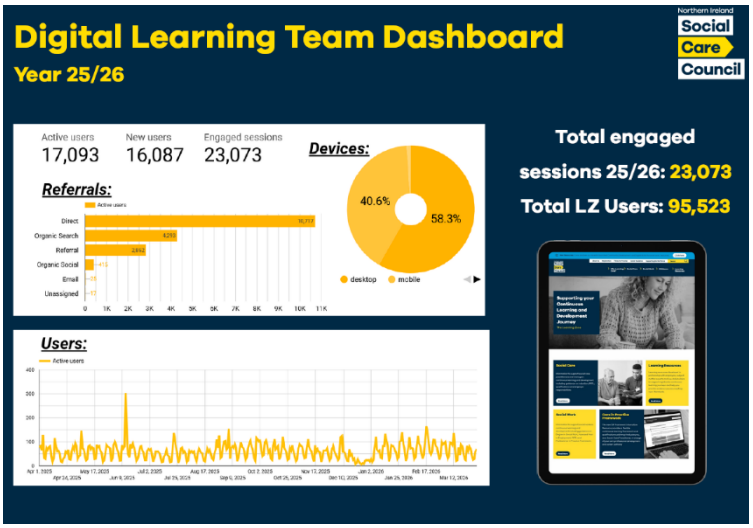
Social Care Managers Forum - 400 people attended the four regional Social Care Managers Forum events held in June and November 2025.

These events aim to bring together managers from across the sector to update them on the new resources available to support them in meeting their responsibilities for registered staff. The events provided an opportunity for managers to share their views about the new Care in Practice Framework; a digital strategy for social care, coaching and mentoring for social care and experiences of social care in children's services. DoH staff also presented at the event, providing a joined-up approach to social care policy, standards and regulation.

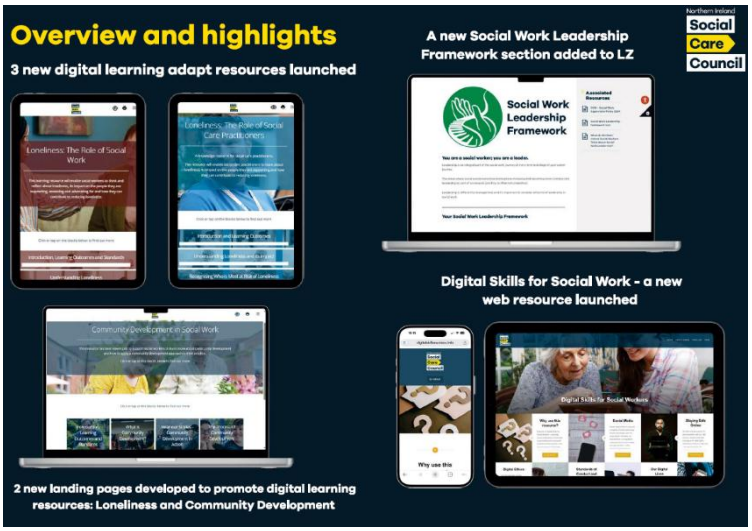
Learning Zone online learning and resources – This free-to-use suite of learning resources was updated throughout the year and information promoting the site was shared via Mailchimp and social media. Website pages were created to share information about Social Care Workforce Reform and the review of qualifications for Health and Social Care.

During 2025-26, the Digital Learning Team delivered significant development of the Learning Zone, expanding high-quality resources aligned to workforce needs, including:

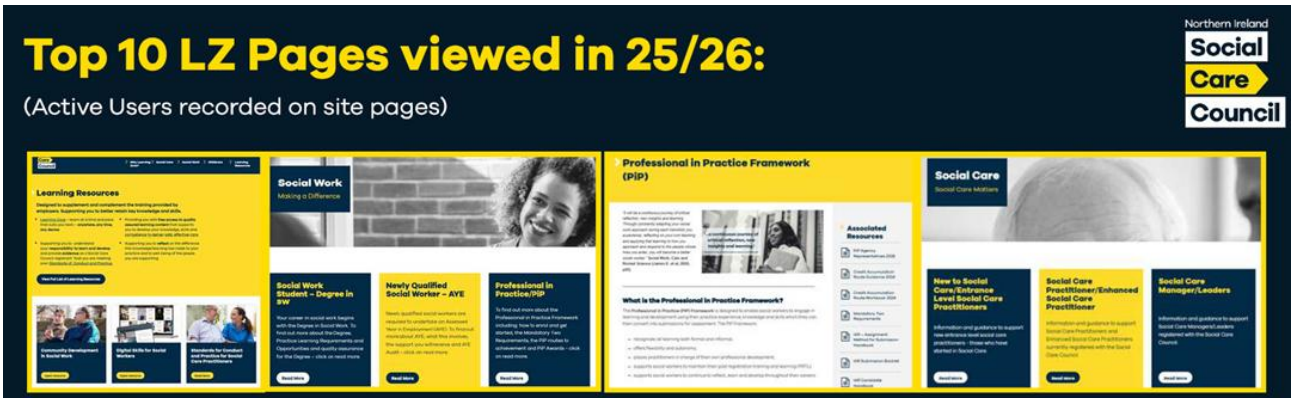
- Social work leadership
- Community development & social work
- Digital skills for social work
- Loneliness supports
- Child development
- Trauma-informed approaches
- Social work careers



The CiP interactive resource was reviewed and updated to demonstrate the structured learning pathways available through the Care in Practice (CiP) Framework. This work was complemented by the introduction of dedicated digital skills content to support modern practice. User engagement remained strong throughout 2025-26, with over 17k active users and more than 23k engaged sessions.



The highest levels of interaction were with core content areas such as qualifications, professional development pathways, and CiP resources.



Feedback from 572 survey respondents was consistently positive, with the majority reporting that the Learning Zone supports their role, enhances their understanding of standards, and would be recommended to others, demonstrating its effectiveness in supporting workforce capability, professional learning, and career progression across the sector.

Strategic priority 2. Develop the capability of the workforce

What we have learned in 2025-26

Our collaborative approach with employers, registrants, social care educators and awarding bodies has been effective in supporting workforce learning and development. Social care practitioners, social workers, managers and allied professionals are making use of our free to access resources, networks and events as part of their learning and development. Online learning offers flexibility to learn at a time and a pace that suits the individual. Registrants and employers also value in-person training to support safe and effective delivery of care.

Social care practitioners and their managers welcome the introduction of a career structure and learning framework for social care. Information and awareness sessions will be key to supporting employers as they integrate the new certificate. Improvements to terms and conditions for the workforce, the provision of funded training programmes and a recognised career structure should attract more people to the workforce.

Social care transformation includes changes to working practice and service delivery to make use of digital technology. Social care practitioners are positive about the use of technology but will require training to use these with confidence. Further engagement with the sector is required in 2026-27 to develop a Social Care Council digital learning strategy that will support the registered workforce.

Social Workers have continued to engage in learning and development opportunities despite recruitment, retention and workforce pressures. This is reflected in submissions for PRTL audit and in levels of achievement within the Professional in Practice Framework. We anticipate continued growth in submissions to the individual Assessment and Work Based Learning Routes in 2026-27.

Looking ahead – Our plans for 2026-27

Evaluation of the work completed to develop workforce capability indicates that the actions set out in the 2025-26 Business Plan support these priorities. It has identified work that will carry forward into the new business year and some new actions to be taken forward in 2026-27 that will support us in our long-term plans to improve workforce standards.

Our 2026-27 priorities are to:

- Approve and assure standards of social work education and training at qualifying and post qualifying levels.
- Work with the Professional in Practice (PiP) Partnership, social work registrants, and others to promote a culture of continuous learning and improvement through engagement in the PIP Framework.
- Engage with Social Work Leaders to support leadership at all levels of the profession by implementing the Social Work Leadership Framework.
- Support the equality, diversity and inclusivity of the social work and social care workforce by establishing baseline data.
- Develop, promote and support the Care in Practice Framework and career progression as part of the Social Care Council's responsibilities within the wider Department of Health social care workforce reform agenda set out in the 'DoH Social Care Workforce Strategy 2025-35'.

Strategic priority 3. Lead with influence

Our Strategic Plan 2023-27 says we will make the following differences in leading with influence :

Our actions for 2025-26 - we said we would:	Indicators of success for 2025-26 – the difference we wanted to see:
1. Support the reform, transformation and development of the social care workforce through our work with the Leaders in Social Care Partnership, the Social Care Collaborative Forum and the Children's Services Strategic Reform Board.	• The programme of work for the Leaders in Social Care Partnership for 2025-26 is delivered. • Support provided to designated workstreams to achieve agreed outcomes. • The Social Care Council programme of work for the Children's Services Strategic Reform Board, for 2025-26 is delivered.
2. Work across all our Partnerships to design and deliver our business to meet the needs of the workforce, employers, and stakeholders.	• Maintained inclusive engagement and networking with existing groups supporting the creation of new research engagements as appropriate, internally and externally
3. Work collaboratively with our existing partnerships and networks to develop our Research and Evidence Partnership in order to influence and support the use of research and evidence within the social work and social care workforce, including the development of a 10-year research and evidence Strategy.	• Continue to establish the Research and Evidence Partnership and programme of work through inclusive engagement and networking with existing groups and by supporting the creation of new research engagements as appropriate, internally and externally.
4. Raise the profile of social work and social care while increasing recognition of the value of the social work and social care workforce.	• Using surveys around awareness and recognition of the value of the social work and social care workforce, develop a benchmark based on the 2023 survey outcomes and 'Social care: making a difference' campaign evaluation outcomes. • Targeted public relations campaign delivered
5. Engage our stakeholders in agreeing our equality, diversity and inclusion programme to support an inclusive and diverse workforce that embraces differences and improves awareness.	• Our Equality, Diversity and Inclusion programme is built in collaboration with others including agreeing how we will evidence baselines and change.

Strategic priority 3. Lead with influence

How did we do in 2025-26?

We are developing our capacity to analyse the information and intelligence we hold about the social work and social care workforce. Our work with strategic forums and workstreams to share and access data across the health and social care system is informing policy development and social care reform. Along with employers and education providers, we are promoting careers in social work and social care to help strengthen the capability and diversity of the workforce. We are also leading on development of the 'Social Work and Social Care Research Strategy' to support research evidence activity, improvement and innovative practice.

The 2025–26 Business Plan sets out five objectives and eight indicators of success for leading with influence. These reflect the key activities undertaken to support this outcome. Progress against both the objectives and associated indicators has been monitored through monthly and quarterly reporting, with performance tracked against Key Performance Indicators (KPIs).

During the year, the Social Care Council supported an increasing number of projects and workstreams to support reform across adult social care and children's services. This placed additional pressure on staff capacity to contribute to internal working groups including the Equality, Diversity and Inclusion (EDI) group. EDI development work requires representation from across the organisation and meaningful engagement with stakeholders. The EDI group met during the year, but progress towards the objective to develop an EDI programme in partnership with our stakeholders was delayed due to these constraints. The project will continue into 2026–27.

Assessment at 31 March 2026 - GREEN – Satisfactory progress This assessment was based on progress against objectives, evidence of indicators of success and performance against KPIs. Four of the five objectives had been achieved satisfactorily, and seven of the eight indicators of success were met or largely achieved. KPIs were within acceptable limits.

The following pages provide an overview of the achievements in this area of work, commentary for performance against KPIs and details of mitigating action taken to address pressures affecting KPI performance.

Building and Sharing Data and Intelligence – The Social Care Council is committed to sharing the intelligence it develops in an open and transparent way. Through comprehensive analysis and insightful commentary, our aim is to explain why social care matters, how it shapes people's lives in Northern Ireland, and how evidence can be used to inform policy, improve regulation, and enhance public safety, education and training for registrants.

The Research and Data section of the Social Care Council's website provides access to reports, data and research produced by the organisation. Designed as a resource for researchers, practitioners and individuals with an interest in the wellbeing of Northern Ireland's communities, the site is regularly updated with reports, newsletters and presentations, including outputs from the Social Care Council Annual Research Conference and the Research Community Network. During the year, Social Care Council quarterly reports and analysis of the register profile were added to the resource section.

Supporting Social Care Workforce Reform - A major part of our workforce development activity is in support of the Department of Health (DoH) policy to reform social care services in NI and to deliver the Social Care Workforce Strategy. We deliver on priorities identified by our Leaders in Social Care Partnership to recruit, retain and upskill the workforce to meet the needs of people in our community who need care and support. The Leaders in Social care Partnership has met on three occasions in the last year, agreed new Terms of Reference and a workplan for the year. Membership has been refreshed to ensure representation across adult and children's social care. The partnership will have an important role in shaping and influencing implementation of the Care in Practice Framework. Social Care Council staff are supporting implementation and promotion of the career pathway for social care practitioners; leading the promotional campaigns for social care; and leading work to develop a common dataset for social care. The Council maintains a Social Care Reform webpage to provide information and updates on progress for the sector.

Collaboration and Policy Influence - The team continues to contribute to subject expert groups that inform policy development and implementation to support population wellbeing. The Director of Regulation and Standards is co-chair of the newly constituted Social Care Workforce Implementation Board (SCWIB). SCWIB brings together the adult and Children's Social Care workforce workstreams into an implementation board. The Chief Executive sits on the Children's Services Strategic Reform Board, is Deputy Chair of the Adult Social Care Collaborative Reform Board and a Board member of NICON. The implementation workstreams will support delivery of the Social Care Workforce Strategy. The Council lead on a survey and delivered a programme of engagement with the children's social care workforce across the statutory and community/voluntary sectors.

Social care career structure - The Council led on the development of the Care in Practice Framework for Social Care which was launched in December 2024 as part of the Department of Health launch of the 10 Year Social Care Workforce Strategy. Development of a career structure and recognised learning framework for social care is a key element of the plans to reform and transform social care services in NI. The foundation for the Care in Practice Learning Framework for social care is the Level 2 Certificate in Safe and Effective Practice. This certificate has been designed to provide a recognised qualification for new social care practitioners as they get started in their social care career. This is an employment-based qualification which will provide employers with assurance of a new employee's experience and ability to practice their role. It will reduce the duplication of training when a social care practitioner changes employment or role within social care. The workforce engagement team provided information sessions, mailouts and social media posts to encourage employers to integrate the Level 2 certificate into their induction for new social care staff. The certificate is approved by CCEA Regulation and is included within the Apprenticeship Framework.

Social Care Council staff were selected to present on Workforce Support at the ESN June 2025 conference in Denmark.

In November 2025, the CiP Framework project won in the Social Services Delivery Innovation Award category.

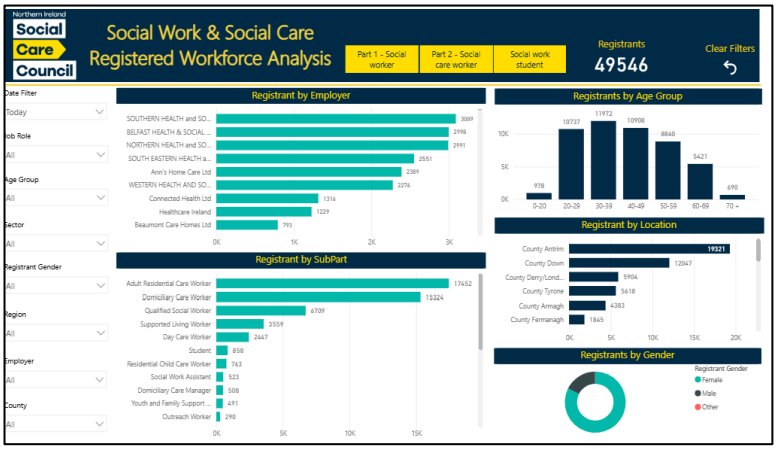
DoH funded social care training – 2025-26 was the fourth consecutive year in which the Department of Health provided funding to support priority training in adult social care. The Social Care Council administered Training Support Programme which allocated £270k for staff to complete 231 Health and Social Care qualifications: The programme also provided funding for 480 social care staff to participate in training initiatives in priority areas.

Funding was allocated to support the following qualifications and initatives. Coaching and mentoring support is also being provided for learners to support them and their managers as they progress through their funding training. Qualifications and learning themes included:

- Level 5 Diploma in Leadership and Management in Health and Social Care (NI)-Adult Residential Management pathway.
- Level 5 Diploma in Leadership and Management in Health and Social Care (NI)-Adult Management pathway.
- Level 4 Diploma in Adult Care (NI)
- Level 4 Certificate in Principles of Leadership and Management for Adult Care
- Level 3 Diploma in Health & Social Care (NI).
- Level 3 Award in Education and Training (Train the Trainer).
- Level 2 Diploma in Health & Social Care (NI).
- Level 2 Certificate in Safe and Effective Practice.
- Dementia Awareness
- Moving and Positioning/ Handling of Individuals
- Emergency First Aid
- Palliative Care Awareness
- Trauma-informed Practice.

Developing Workforce Intelligence - During 2025–26, work continued to strengthen the Council's skills and capacity to analyse information about the registered workforce and to share insights with the Department of Health and sector partners to support workforce development. Access to timely and reliable workforce intelligence is essential for effective forecasting and planning across social care.

The Database and Intelligence Officer provided specialist expertise in analysing organisational data, addressing data quality issues and resolving inconsistencies or gaps in information held about registrants. Data fields relating to job roles and sectors within the registration database are regularly reviewed, with gaps followed up directly with registrants to ensure the workforce dashboard is accurate and up to date.



Digital Capability and Emerging Technologies - Emerging technologies are central to transforming social work and social care services to meet the changing needs of communities. The Social Care Council is an active member of Social Care Data workstreams and the Regional Business Intelligence Group. Social Care Council staff have led and contributed to workstreams supporting the Department of Health in developing social work and social care workforce intelligence, with a shared focus on improving the quality and alignment of workforce data. This collaborative work aims to enable a unified view of the workforce across Northern Ireland and to strengthen digital capability and business intelligence within health and social care. By ensuring staff have the right information, in the right place, at the right time, this work supports more effective, efficient and safe decision-making.

The Social Care Council has also contributed insight into workforce digital capability and attitudes towards the use of technology, informing the development of the Digital Capability Strategy and the forthcoming Digital Capability Framework. Working with digital partners, the Social Care Council seeks to motivate and support a workforce that can confidently use digital health technologies to deliver care. The Social Care Council facilitated workshops and meetings for social work and social care data leaders. These groups shared their experience of data collection, analysis and reporting, with a long-term aim of developing systems and processes to enable more effective sharing of data and intelligence to support workforce planning and development. As part of this work, the Regional Social Work Workforce Dashboard is being developed to reflect the workforce profile. Currently, approximately 6,400 of the 6,900 registered social workers in Northern Ireland are included in the dashboard. Work will continue in 2026–27 to involve employers from the non-statutory sector and smaller organisations.

Joint working with other regulators – The Head of Fitness to Practise is an active member of NI Joint Regulator's Forum. This forum has developed a Shared Intelligence Framework/Emerging Concerns Protocol which provides a structure and mechanisms for regulators to share information that may indicate risks to people who use services, their carers and families. The Social Care Council joined with the HSC Regulators Forum at an engagement event held with local Assembly Members and interest groups to raise awareness of the role of regulation in Health and Social Care in raising professional standards. Staff also participated in meetings and workshops with partner regulators in Northern Ireland, as well as regulators from across the UK and Ireland, to support consistency in social work and social care education, training and practice.

Social work leadership - The Social Care Council holds lead responsibility for implementation of the 'NI Social Work Leadership Framework'. Meetings and workshops were held throughout the year, bringing together social work leads to collaborate on integrating the framework into education and practice development. Front-line social workers and students were engaged in online surveys and focus groups to benchmark awareness of the framework, how it is used in practice and possible opportunities to make it more accessible. A recommendation was to build an online resource on the Social Care Council website. This will be taken forward in 2026-27. Social workers who were nominated for the Contribution to Social Work Leadership category in the 2025 Social Work Awards were engaged in developing their leadership story as part of a webpage hosted on the Department of Health website for Social Work Leadership. A publication promoting social work leadership has also been developed and will be launched in Summer 2026.

UK and Ireland Social Work and Social Care Alliance – The Social Care Council is a member of this Alliance working with the social work/social care Regulators in the UK and Ireland, along with Skills for Care in England. This group meets quarterly to plan and review progress on join working on skills, qualifications and workforce development for social care across the UK and Ireland.

Raising the profile of social work and social care - The Head of Strategic Communications and Engagement, supported the Social Care Collaborative Forum's Communications workstream. The group led on planning and delivery of the 2025 'Social Care Making a Difference' campaign and the evaluation of the 2022-23 'social care – making a difference' campaign. The 2025-26 'Social care – making the difference' campaign was designed during the year, ready for delivery in Summer 2026 which is focusing on career progression, diversity of social care and myth busting – this includes podcasts, videos, digital storytelling and a PR/social media campaign.

Communication campaigns and engagement activities were delivered to raise awareness of a career in social work, promoting it as a positive career choice. Promotional work was aligned to support applications to social work courses and included features with people from diverse backgrounds. Widening participation in social work education requires longer term changes in attitudes and expectations amongst prospective students and those who influence their career choices. Success in this area in terms of increasing the diversity of applicants and students may not be evident for another three to five years. This campaign will continue into 2026-27.

The annual #Yes2SocialWork campaign launched in October and ran to January 2026 to promote the Degree in Social Work. Promotional activity included 'Pathways into social work' videos, highlighting the routes into the Degree in Social Work in NI. Stories featured school leavers, graduates returning to study social work through the two-year Relevant Graduate Route and mature students from different backgrounds embarking on a career change.

The Social Care Council created the 'Holding Space: inside social work' exhibition to share experiences of social work and the contribution it makes. During March, the exhibition travelled round further education colleges in NI, finishing at the Belfast Met. The exhibition and those featured in it were promoted online and in local media. This was an opportunity to celebrate World Social Work Day and thank the social workers throughout NI who make a difference every day. This had significant success and included digital storytelling and PR awareness. It focused on stories from social workers, describing their experiences of working in the profession. These stories were shared widely by local media outlets and viewed extensively on the Social Care Council website and social media. The Social Care Council is providing a key role in planning for the December 2026 Regional Social Work Awards. Nominations for the 2026 awards opens on 30 April. The Social Care Council holds a key role in development of the online application processes, screening entries, co-ordinating judging panels and managing outcomes.

To celebrate Apprenticeship Week 2026, the Social Care Council developed news stories and videos to highlight the availability of all-age apprenticeships in the social care sector. Information sessions were held with social care awareness of social care apprenticeships and opportunities linked to the Care in Practice Framework. The campaign ran across all digital platforms, aimed at encouraging employers in the independent and voluntary sector who want to develop their social care practitioners and support them to gain qualifications. The Learning Zone was updated to provide information for employers and potential apprenticeship recruits.

The Care to Chat podcast series was further developed during 2026-27, with 11 new recordings released discussing topics across social work and social care, including diversity, making a difference in supported living and supporting research. 8,500 people have downloaded the podcasts to date. Care to Chat recordings can be accessed from the Council website.

Research and evidence – The Social Care Council holds lead responsibility for building a social work and social care research community in NI. The vision is to capitalise on the work already established over the years to build a culture of research and evidence, including the Building Research Community which is a thriving engagement network for social work research.

The Social Work and Social Care Research and Evidence Partnership reports to the Social Care Council Board on their work to lead the social work and social care research agenda in NI. Communications and engagement activity is ongoing to encourage members to join the community and network. During 2025-26, the partnership hosted stakeholder workshops to draft the research strategy for 2026-2031. This will be published for consultation in May 2026. A stakeholder mapping event and workshops were held during the year to support development and planning for the research strategy.

The 13th Annual Social Work and Social Care Research in Practice Conference was hosted jointly by the Social Care Council and the Public Health Agency in Riddell Hall, Belfast in March 2026. Attended by 180 delegates and speakers the event included a number of keynote speakers from across the UK and Ireland. In addition, it showcased 40 research, evidence and innovation projects via oral and poster formats. The event was also an opportunity to recognise 15 post qualifying students, including service users and carers, for their achievements in the post qualifying Research Methods Programme at Ulster University. The conference newsletters, presentations and photos from the event are available from the Research section of the website.

Annual Social Work and Social Care Research Conference 2026

Strategic priority 3. Lead with influence

What we have learned in 2025-26

In recognising the value of compassionate and collective leadership across the Health and Social Care system, as well within the regulatory system, we work with a range of networks of people who collaborate on development and improvement. Our work to connect social work and social care leaders is helping to shape social work and social care as health and social care transformation moves forward. Now, more than ever, insight from sector leaders is needed to inform strategic workforce planning and development.

Looking ahead – Our plans for 2026-27

Evaluation of the work completed to lead with influence indicates that the actions set out in the 2025-26 Business Plan support these priorities. It has identified work that will carry forward into the new business year and some new actions to be taken forward in 2026-27 that will support us in our long-term plans to support the building of a sustainable workforce and improve workforce standards.

Our 2026-27 priorities are to:

- Support the reform, transformation and development of the social care workforce through our work with the Leaders in Social Care Partnership, the Social Care Workforce Reform Board and the Children's Services Strategic Reform Board to support the DoH Reset and Reform Agenda, in line with planning paper requirements and the Neighbourhood Model.

- Work across all our Partnerships to design and deliver our business that meets the needs of the workforce, employers, and stakeholders.

- Work collaboratively with our existing partnerships and networks to develop our Research and Evidence Partnership in order to influence and support the use of research and evidence within the social work and social care workforce, including the development of a 10-year research and evidence Strategy.

- Raise the profile of social work and social care while increasing recognition of the value of the social work and social care workforce in line with our Engagement Strategy.

Strategic priority 4. Innovate and improve

Our Strategic Plan 2023-27 says we will make the following differences to innovate and improve:

Our actions for 2025-26 - we said we would:	Indicators of success for 2025-26 – the difference we wanted to see:
1. Finalise our engagement strategy by December 2025, following a period of consultation, which will set out how we engage registrants and others in delivering our business and promoting the value, impact and recognition of the social work and social care workforce.	• Engagement strategy in place supporting meaningful engagement.
2. Following business case approval for a new Registration and CPD system, commence delivery of a business reform project to put a new ICT enabled system in place by March 2027.	• Two-year project plan in place. • First year's project milestones are met.
3. Scope how Artificial Intelligence (AI) can support workstreams and business functions that will inform a Digital AI strategy for the Social Care Council by December 2025.	• Surveyed understanding of AI on the business. • Potential pilot areas identified. • Principles of AI on current and future business drafted.
4. Work with our Registration, Workforce Development, Database, Fitness to Practise and Committee Teams to drive up the quality of our system data with clear targets out outcomes to identify areas for inspection and quality assurance during 2025-26.	• Testing and quality assurance of our data and datasets will improve reporting, confidence and better outcomes.

Strategic priority 4. Innovate and improve

How did we do in 2025-26?

We need to keep connected to the evolutions in technology and provide services in a manner that meets the needs of our registrants and our staff. We engaged with our stakeholders to develop the values and principles underpinning our engagement strategy. This strategy will ensure we target our use of electronic communications, engagement and collaboration in a meaningful and accessible way. Our Data Quality Improvement Group is improving the quality of the data we hold and the Digital Content Group is reviewing consistency across our front line and online services.

The 2025–26 Business Plan sets out four objectives and seven indicators of success for delivering innovate and improve. These reflect the key activities undertaken to support this outcome. Progress against both the objectives and associated indicators has been monitored through monthly and quarterly reporting, with performance tracked against Key Performance Indicators (KPIs).

Financial constraints have delayed progress towards receiving approval for the business to develop a new registration and CPD ICT system. Scoping has been undertaken to identify opportunities for integrating new technologies into work processes, including Artificial Intelligence. Staff members have participated in AI introductory training and information session. 11 staff are participating in the HSC Co-Pilot project. All staff are being encouraged to use the basic version of Co-pilot provided within MS Teams. Integration of AI will depend largely on funding being available to support the technology needed to make full use of the opportunities identified by these pilots.

Assessment at 31 March 2026 - GREEN – Satisfactory progress This assessment was based on progress against objectives, evidence of indicators of success and performance against KPIs. Four of the five objectives had been achieved satisfactorily, and five of the seven indicators of success were met or largely achieved. KPIs were within acceptable limits.

The following pages provide an overview of the achievements in this area of work, commentary for performance against KPIs and details of mitigating action taken to address pressures affecting KPI performance.

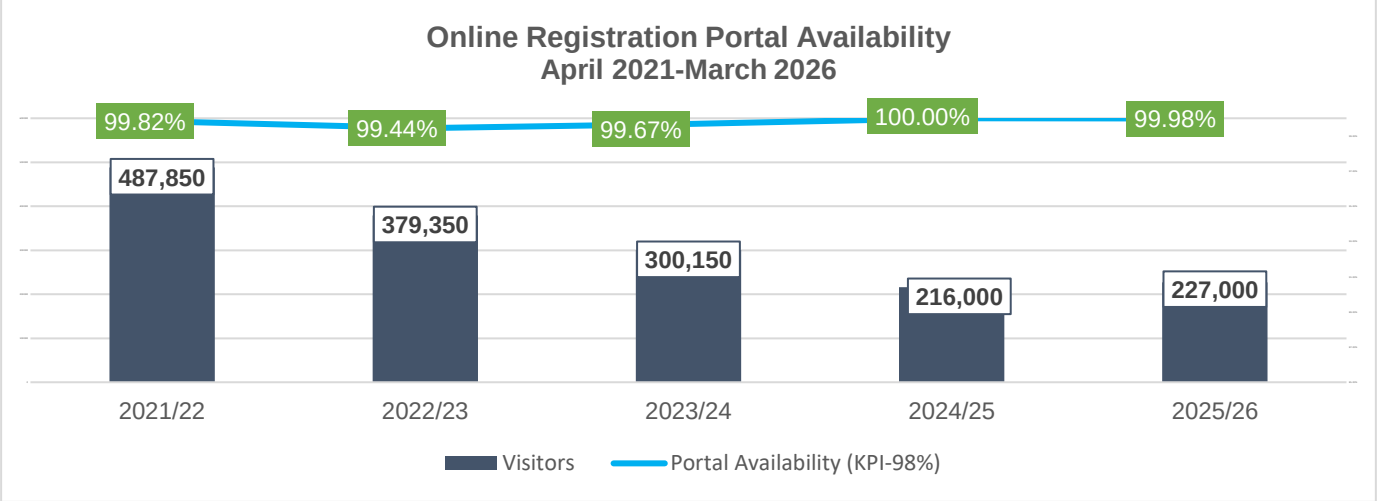
Engaging effectively – The Engagement Strategy and internal communications plan were launched at the end of 2025-26. These were co-designed by staff and stakeholder groups. Feedback from registrants, managers, employers, and service users/carers on their communications needs and expectations from their engagement with the Council was reflected in the final proposals. The User Experience Group met throughout the year to review customer contacts for accessibility and ease of understanding (letters, emails, phone scripts, website information and printed guidance). Feedback from Customer Service and events has also been reviewed to identify opportunities to improve our engagement. This work will continue in 2026-27.

App development – Staff and user groups were engaged in the development phases for the new Registration Mobile App. Work on the application pathway in SOCRATES and data cleansing to streamline employment sectors/job profiles was completed. This work was required to ensure that information processed through the App is compatible with the main database. The app was launched in summer 2025 and testing is ongoing to increase the range of functions offered.

Learning Management System – All staff are engaged with developing their knowledge through the new HSC learning management system for staff which was launched in May 2023. This provides for all training and e-learning and enables managers to review the learning and development of their teams. The system supports managers and staff, providing in tracking and links to training available, through the user's profile.

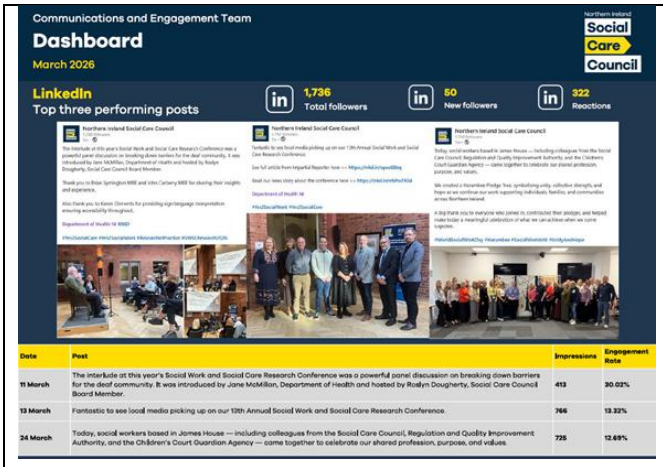
Fitness to Practise Case Management System - the first phase of this project to deliver a new ICT supported case management system for Fitness to Practise and Committee was completed in 2025-26. This project was completed on time and within budget. The online form for referring FtP concerns was also completed in-year. On average, 10 people per month are using the new online referral process.

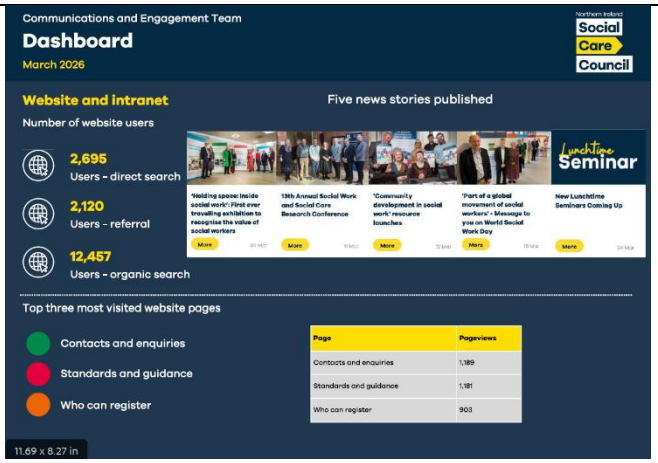
Registration and regulation system: The team delivered a rolling programme of development work and updates for the SOCRATES online registration system and registration portal services to improve user experience and streamline processes required for registrations/renewals/maintenance of registration. Development work has also been carried out on the reports for the PiP assessment processes in March 2026. Reports have been developed to provide information to assist with tracking PiP achievement and compliances for those subject to PiP Requirements and the AYE condition.

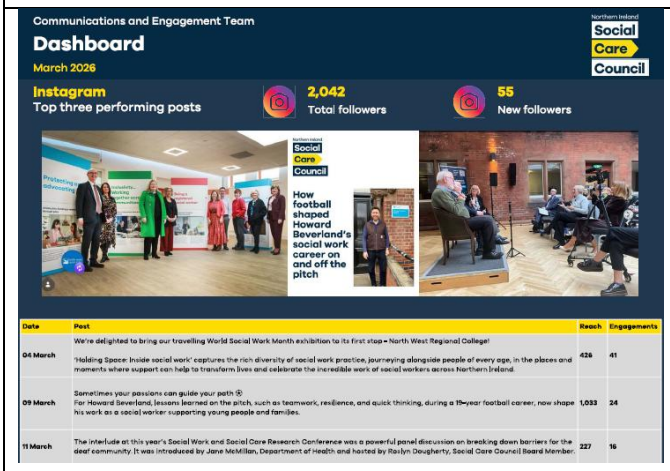


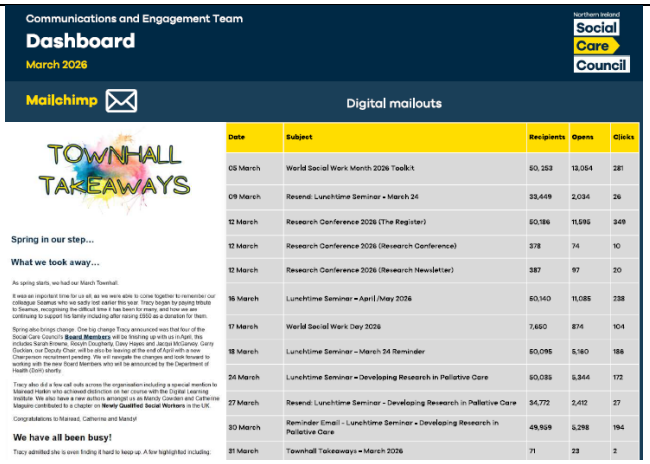
Consultations and surveys - The Citizen Space consultation platform was used extensively to gather stakeholder feedback on a range of activities including: Customer Service, Lunchtime Seminars, Learning Zone resources, Social Care Managers Forum, Qualifications Reviews, Social Work Leadership and Training Support Programme. This government supported platform provides a range of tools to securely manage all stakeholder consultation and engagement. Staff from across all teams have been trained to use the site for their projects and to generate reports on the information provided. Citizen Space has also used to support online applications for the Social Work Awards and applications for approved Training Funding.

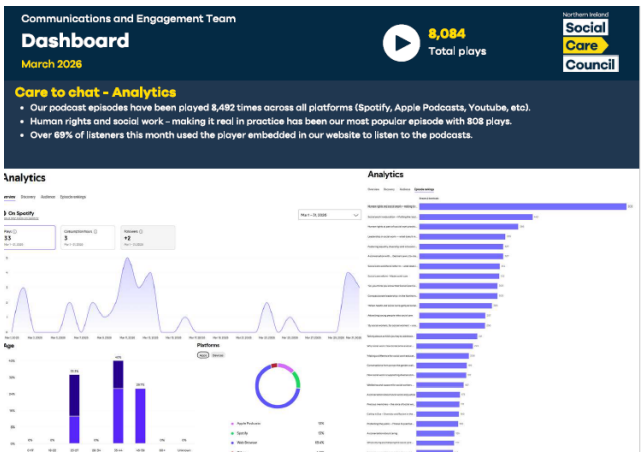
Digital communication - The Social Care Council website and digital media channels were updated throughout the year. Email marketing via Mailchimp delivered over 50 campaign messages and updates to registrants every month. In 2023-24, Google Analytics software was upgraded on the Social Care Council website, Learning Zone and Registration Portal.

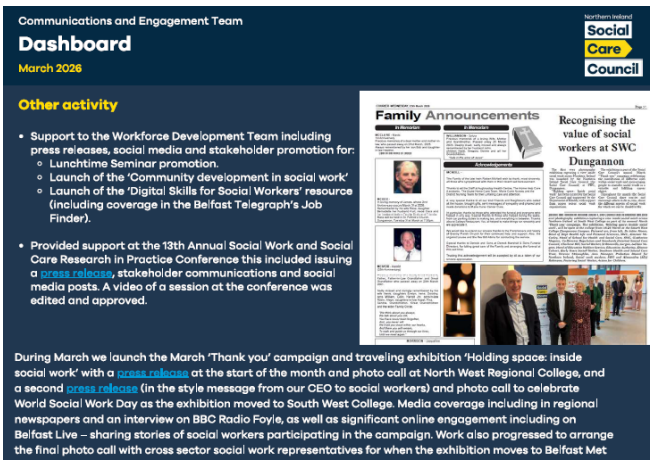












Strategic priority 4. Innovate and improve

What we have learned in 2025-26

The use of technology continues to revolutionise the way we work – we are now much more confident and capable in accessing services online, using online meeting tools (or a hybrid approach to allow both in person and on screen at the same time), the use of Applications (Apps) to support services, social media platforms and seeing how Artificial Intelligence (AI) is being referenced more in the media as a business and home life tool. All of this means that as an organisation we need to keep connected to the evolutions in technology and provide services in a manner that meets the needs of our registrants and our staff; while acknowledging the benefits of in person engagement and communication; and getting the balance right between technology and human contacts and interactions.

Looking ahead – Our plans for 2026-27

Evaluation of the work completed to innovate and improve indicates that the actions set out in the 2025-26 Business Plan support these priorities. It has identified work that will carry forward into the new business year and some new actions to be taken forward in 2026-27 that will support us in our long-term plans to improve the quality and accessibility of our services.

Our 2026-27 priorities are to:

- Deliver our engagement strategy during 2026-27 including monitoring impact and compliance to ensure we are engaging registrants and others when delivering our business and promoting the value and impact of the social work and social care workforce.
- Following business case approval for a new Registration and CPD system, commence delivery of a business reform project to put a new ICT enabled system in place by March 2029.
- Scope how AI can support workstreams and business functions that will inform a Digital AI strategy for the Social Care Council by December 2026.
- Work with our Registration, Workforce Development, Database, Fitness to Practise and Committee Teams to drive up the quality of our system data with clear targets and outcomes to identify areas for inspection and quality assurance during 2026-27.
- Implement the new Equip programme across finance, procurement, human resources including learning and development in support of the Equip Programme timetable.

Delivering our Strategic Plan

Our Strategic Plan 2023-27 says we will make the following differences to delivery on our strategy:

Our actions for 2025-26 - we said we would:	Indicators of success for 2025-26 – the difference we wanted to see:
1. Deliver the actions arising from the IIP assessment including a Reward and Recognition framework for all staff that supports our culture, values, equality and diversity commitments and People Plan by December 2025.	• IIP Platinum maintained • Reward and Recognition Framework in place • Positive impact on culture of the organisation and staff satisfaction levels benchmarked against the IIP survey.
2. Develop a 3-year Learning and Development Programme for all staff that supports them in their work and their careers.	• Staff have ownership of their learning and development and a pathway for career progression. • Leadership capability is improved across the organisation.
3. Develop a Health and Wellbeing Programme with associated outcomes to support all staff in the organisation by March 2026.	• IIP Health and Wellbeing Gold maintained with actions that will inform a future Platinum accreditation by March 2026. • Positive impact on the wellbeing of staff with levels benchmarked against the IIP health and wellbeing survey.
4. Review our structure and functions to ensure we are able to continue to deliver our business priorities in the future within our financial allocation, while also building career structure and growth for staff.	• A sustainable and flexible structure is in place to enable the organisation to perform to a high level and support growth for staff.
5. Develop and implement an internal communications plan to include digital opportunities such as redeveloping the intranet using SharePoint and investing in the right tools for updating staff by September 2025.	• Internal communications plan implemented.
6. Ensure we break even by March 2026.	• Break even achieved.

Delivering our Strategic Plan

How did we do in 2025-26?

Infrastructure is about the people, systems and processes that guide and deliver our work. Our objectives in relation to promoting a healthy workplace, developing staff, improving quality and managing our finances were successfully achieved. Risks were monitored and mitigating actions taken where appropriate. The Social Care Council agile working policy has supported staff to adapt to balance office-based and remote working to make best use of their time. Staff have delivered a wide range of meetings and events for internal engagement, external stakeholders and to deliver projects on behalf of the Department of Health and other HSC networks.

During the year, the Social Care Council had committed to completing a three-year Learning and Development Programme for all staff that supports them and their careers. Staff engagement events and online training needs surveys have been completed. The draft learning programme will be reviewed with staff in Quarter 1. Review of structures has been taken forward into 2026-2027.

The 2025–26 Business Plan sets out six objectives and eleven indicators of success for delivering our strategic plan. These reflect the key activities undertaken to support this outcome. Progress against both the objectives and associated indicators has been monitored through monthly and quarterly reporting, with performance tracked against Key Performance Indicators (KPIs).

Assessment at 31 March 2026 - GREEN – Satisfactory progress This assessment was based on progress against objectives, evidence of indicators of success and performance against KPIs. Four of the five objectives had been achieved satisfactorily, and nine of the eleven indicators of success were met or largely achieved. KPIs were within acceptable limits.

The following pages provide an overview of the achievements in this area of work, commentary for performance against KPIs and details of mitigating action taken to address pressures affecting KPI performance.

People

All staff come together in James House at least once a month to participate in the 'Townhall' events that were held during the year. Townhalls are in-person events at James House. They are an opportunity to update everyone on all things 'Social Care Council', celebrate staff achievements and involve staff in planning our work. Through the year, all staff teams presented an overview of their work as part of the Townhall events.

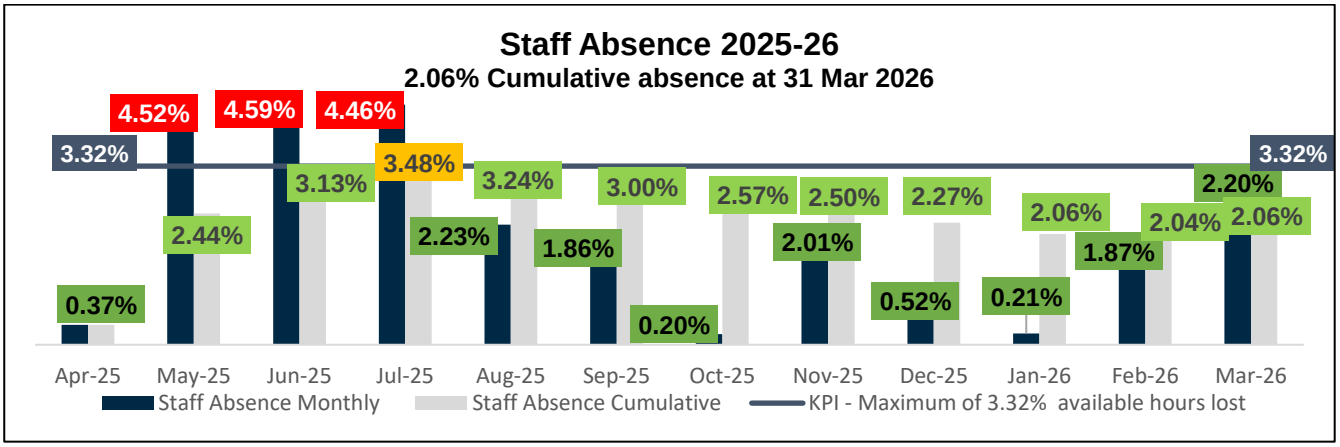
Every staff member was engaged in quarterly check-ins throughout the year. These provide an opportunity to reflect on what is helping individuals to achieve their goals and to identify any supports they or their manager can make to help address any 'stones in their shoes' that are impeding them. Everyone has individual goals and development opportunities that they agree with their manager to support them in their plans for the year.

All staff are using the updated HSC e-learning system and have access to the Metacompliance platform for all policies and updates. The site is used for mandatory e-learning and personal development. Staff have ongoing engagement in groups to review work processes and contribute ideas to support improvements to services such as customer services support and developing specialist for specific areas of work such as Assessed Year in Employment, Internationally Qualified Social Workers and Data Quality exercises. New staff were supported by colleagues to complete their induction based in the office. Staff also completed a range of training including Microsoft packages.

The Social Care Council IIP action plans were successfully delivered in-year. The organisation had achieved Platinum accreditation in March 2024, which is the highest IIP standard worldwide. The organisation also holds the IIP Health and Wellbeing Award Gold Standard. At the annual assessment in Spring 2026, the assessor commented on the positive experiences and engagement evident amongst the staff team. Staff are engaged in a range of activities, supporting the overall delivery of the Social Care Council's Business Plan. The Senior Leadership Team, chaired by the Chief Executive, has worked with staff to ensure the staffing resources are deployed to support business priorities. Staff contributed to discussions relating to the opportunities for development they would like to see for themselves and their team in the next 3-5 years. Feedback from these sessions was collated and the management team is taking forward the recommendations with staff groups in 2026-27.

Health and wellbeing - Support for staff wellbeing and development remains a priority for managers and team leaders. A combination of online and in-person team meetings, check-ins and informal breaks have supported staff during the year. Staff were offered the opportunity to have a free health check provided through the Civil Service Sports Association. Other health and wellbeing activities included awareness sessions on health and disability, walking groups, Couch to 5K and the traditional tea and buns to mark personal achievements. All staff members have opted into the new Agile Working Policy and are using this to manage their work pattern between the office space and remote locations, including home. Managers and teams plan working patterns to ensure regular opportunities for teams to come together in a shared space at least one day per week. Staff events and team meetings are planned as in-person events to provide opportunities for connection and shared learning. The Health and Wellbeing Committee shared links to services and local events to support wellbeing such as the lunchtime walking tours and Sustrans promotional events. Social Care Council staff have supported health events in the building including NI Blood donor sessions and disability coffee mornings.

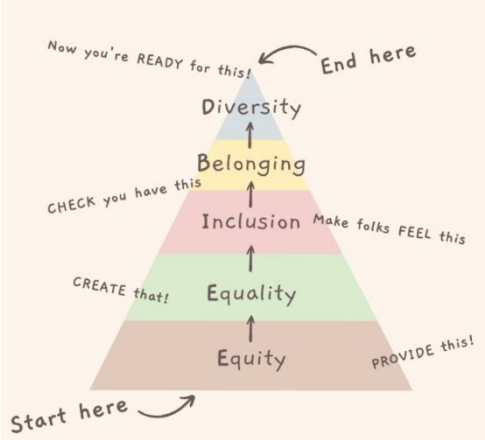
Staff absence totals for 2025-26 were 2.06% (2024-25-24 3.04%) - which is below the overall KPI of 3.5%. Absence exceeded the KPI in May, June and July 2025. This was due to long-term absences and seasonal illnesses. Absence remained within KPI for all other months.



Equality and Diversity - The Social Care Council is committed to promoting equality and diversity; providing the systems and culture to meet the duties set out within Section 75 of the Equality Act. Business Services Organisation (BSO) Equality Unit provides the Council with a high-quality bespoke Equality and Human Rights service. Services include staff training, awareness sessions and guidance materials relating to individual responsibilities for promoting equality and diversity. BSO also provides one-to-one support for senior staff on considering equality issues in policy and decision-making. All staff have completed e-learning modules on equality and diversity and all those involved in policy/service development have completed training on equality screening and impact assessment.

The Social Care Council delivered the annual 'Equality Action Plan' and annual 'Disability Action Plan' in addition to a broad range of equality founded policies and procedures. (The Equality Scheme is reviewed every five years). The Equality Unit in the Business Services Organisation provided guidance and expertise on delivering on annual Action Plans and supported statutory reporting to the Equality Commission.

Work is progressing to raise the profile of inclusion and diversity as core component of the role and functions of the Social Care Council as an Employer and a Regulator. The Internal Diversity group for Social Care Council staff was established in 2025, bringing together volunteers with an interest in progressing this work across the organisational functions. All staff participated in a facilitated workshop which provided opportunities for discussions on equality, diversity and inclusion and to capture their views and perceptions and suggestions for improvements. This work will continue in 2026-27.



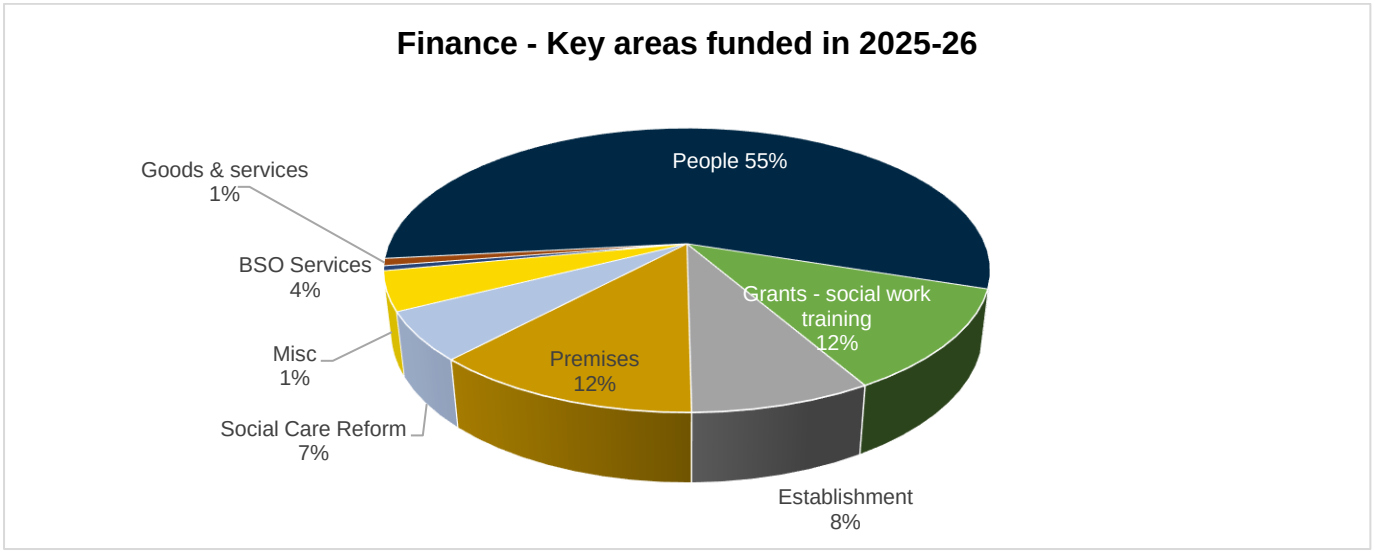
Details of what the organisation has done to deliver its equality, diversity, disability, human rights and good relations actions are set out in the Annual Equality Progress Reports which can be found on our website at www.niscc.info.

Resources – 2025-26 marked the third full year of business in the new premises in James House. The Social Care Council relocated to James House as part of the Belfast Optimisation Project in February 2023. All staff are working flexibly, using the James House office as a base to come together with teams and projects as required. The organisation is maximising the use of technology available to support agile working. All staff are equipped to work in the office and remotely. Staff can also use HSC local hubs to work from if their home location is not suitable. All staff have CISCO and Microsoft Teams for calls, meetings and messaging.

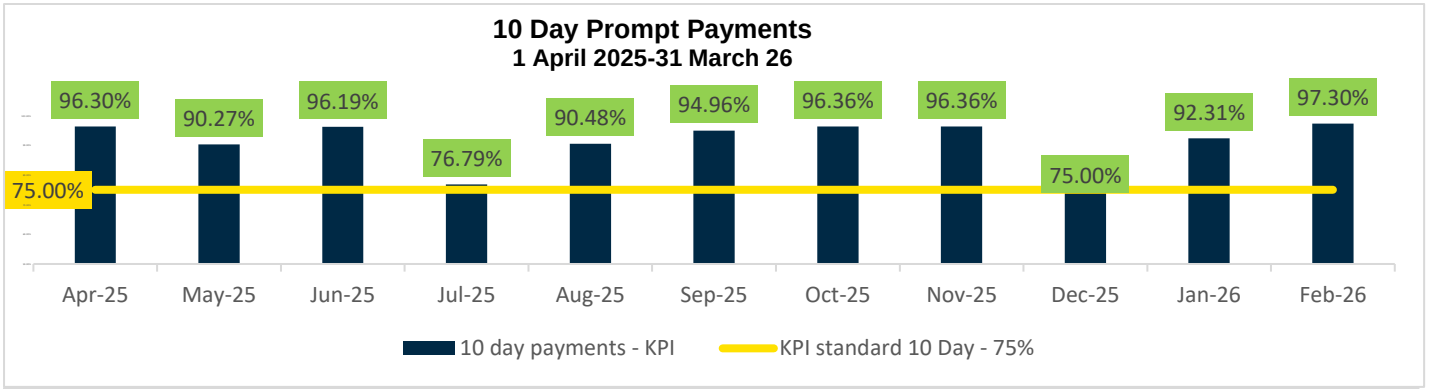
In addition to providing cost-savings in estates management, the new premises provides access to a wide range of onsite meeting rooms and a large conference space, which have proved invaluable for in-person meetings, workshops and events. James House offers a range of shared and collaborative spaces to work from, with staff pre-booking desks and areas through a mobile application. The new premises are equipped with video conferencing technology to facilitate online and hybrid meetings. Meetings with BSO have taken place to review the level of service and cover from the range of SLA's for back office services including Information Governance, Estates, Health and Safety and recruitment. The new facility also offers space for bicycle parking, access to local running/walking routes and there are shower facilities for those who exercise on the way to work, or during rest periods.

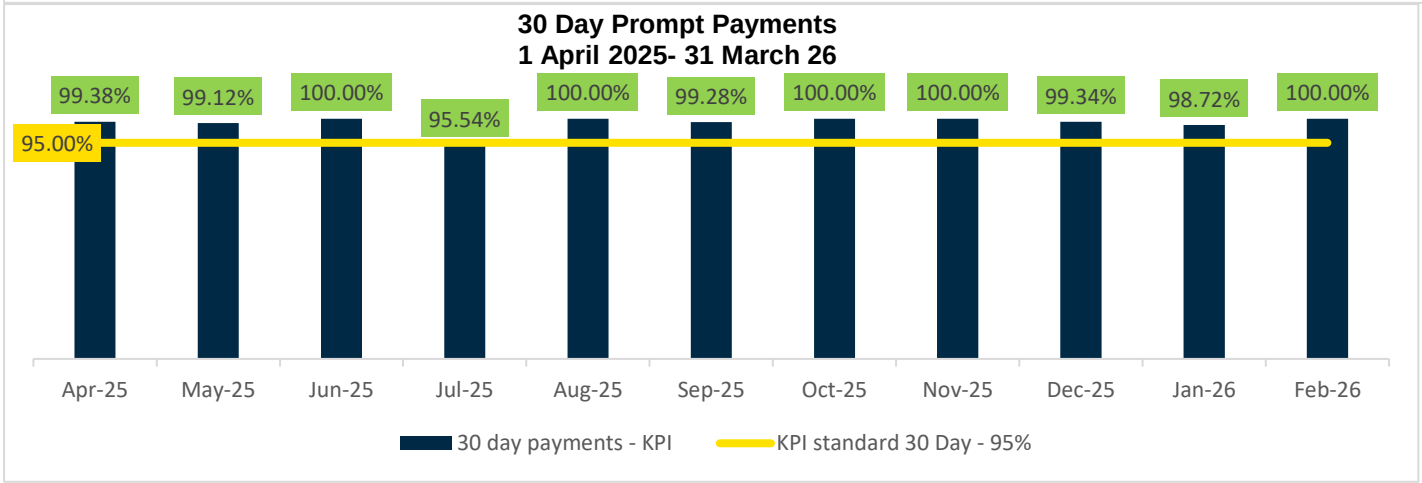
Finance

The Social Care Council achieved a £16,565 surplus at year-end (31 March 2026). The breakeven position target has therefore been reached for the financial year 2025-26. Full details of income and expenditure is on pages 120-124 of the accounts. Income received includes £1,897,093 from Registration Fees and £4,789,210 Revenue Resource Limit received from the Department of Health. Total expenditure of £6.96m was made up of £3.9m pay-related costs and £3.06m non-pay costs.



During the year, the Social Care Council paid 1,452 invoices totaling £3.3m in the course of its business. Prompt payment targets to pay 75% of invoices within 10-days and 95% within 30-days were met.





Communications and engagement

Since our establishment in 2001, communication and engagement with our registrants and stakeholders has remained a key theme, recognising that to deliver our statutory functions we need to effectively connect with our registrants and stakeholders to successfully deliver our business. To support the outcomes set out in the Strategic Plan 2023-27, we have invested in the promotion of social work and social care, developing our social media presence and creating engagement forums for leaders, managers and front-line registrants to strengthen our connections with the sector.

Digital communications - The Communications Team progressed a series of campaigns across the website, social media through direct email campaigns to support internal and external communications and engagement activity. Corporate communications activities included: the Social Work and Social Care career campaigns, Lunchtime Seminar series, Learning Zone, Care to Chat Podcasts, World Social Work Day, Apprenticeships Week, Carers Week, Schools Summit, recruitment opportunities and promotion of reports. At 31 March 2026, we had over 14k followers across our digital channels.

Traffic on the website www.niscc.info averaged 12k users per month. The Social Care Council websites have WebReader by ReachDeck software, which adds speech, reading, and translation support tools to online content, to enable people with a visual impairment to access information on our websites. The service was used about 4k times per month. The most popular aids used were Toolbar, Speech and Translate.

Developing strategy - Work on the development of the engagement strategy continued in this year. Registrants, staff and Participation Partnership members developed the values and principles which are the foundations for all our engagement and communication. In order to widen accessibility to Social Care Council activities and resources, the Digital Content Group is involving staff from all areas to review how we prepare and present what we do to make future proof material in terms of accessibility needs. The Social Care Council invests a significant amount of time to ensure staff are connected with the work of the organisation. Work will continue on the implementation of the Engagement Strategy and the Internal Communications Plan in 2026-27 to ensure the Social Care Council can articulate and co-ordinates the activity and engagement involving our staff. This will ensure that all the work to keep people involved and connected is tracked directly to our communications aims and we can target activity to where it is most effective.

Delivering our Strategic Plan

What we have learned in 2025-26

Our strategic plan sets an ambitious vision to engage with the workforce and the wider public to raise awareness about the positive difference made by our work to raise standards in social work and social care. More work is required to solidify communication and engagement with our immediate stakeholders – registrants, employers, people who use services and their carers; improving public perception is a long-term outcome. A communication and engagement strategy will support and co-ordinate our key efforts and messages.

Supporting staff to use new tools such as quality improvement, evaluation, design thinking will ensure that our work makes best use of available resources, integrates with changing stakeholder needs and integrates with emerging technology solutions.

Our staff are benefiting from health and wellbeing programmes, the availability of the agile working policy and the opportunity to be involved in training and learning. Staff events, team meetings and quarterly check-ins are involving staff in organisational development as well as supporting them in their personal development plans.

Looking Ahead – Our Plans for 2026-27

Evaluation of the work completed to deliver our strategy indicates that the actions set out in the 2025-26 Business Plan support these priorities. It has identified work that will carry forward into the new business year and some new actions to be taken forward in 2026-27 that will support us in our long-term plans to improve workforce standards.

Our 2026-27 priorities are to:

- Consult on a new Strategic Plan for 2027 – 2031.
- Deliver the actions arising from the Social Care Council People Plan to support our culture, values, equality and diversity commitments during 2026-27.
- Ensure that our organisational culture is open, compassionate, fair and in line with the DoH's Being Open Framework for Health and Social Care and support the implementation of the Being Human Framework across the Health and Social Care system.
- Develop and deliver a 3-year Learning and Development Programme for all staff that supports them in their work and their careers.
- Deliver a Health and Wellbeing Programme with associated outcomes to support all staff in the organisation by March 2027.
- Review our structure and functions to ensure we are able to continue to deliver our business priorities in the future within our financial allocation, while also building career structure and growth for staff.
- Develop and implement an internal communications plan to include digital opportunities such as redeveloping the intranet using SharePoint and investing in the right tools for updating staff by December 2026.
- Ensure we break even by March 2027.

Performance in relation to environmental matters

The Statutory Duty for Sustainable Development applicable to public authorities is set out at section 25 of the Northern Ireland (Miscellaneous Provisions) Act 2006 and applies to all Northern Ireland Departments and District Councils.

The six priority areas are:

- Building a dynamic, innovative economy that delivers the prosperity required to tackle disadvantage and to lift communities out of poverty.
- Strengthening society so that it is more tolerant, inclusive and stable and permits positive progress in quality of life for everyone.
- Driving sustainable, long-term investment in key infrastructure to support economic and social development.
- Striking an appropriate balance between the responsible use and protection of natural resources in support of a better quality of life and a better-quality environment.
- Ensuring a reliable, affordable and sustainable energy provision and reducing our carbon footprint.
- Ensuring the existence of a policy environment which supports the overall advancement of sustainable development in and beyond Government.

The Social Care Council remains committed to making an active contribution to those areas which it can influence. Prominence is therefore given to the way in which we conduct our work to minimise, where relevant, a negative impact on these duties, but more importantly to make sustainable improvements wherever possible.

A number of positive actions have been implemented:

- The Social Care Council participated in the Belfast Optimisation Project, moving to James House in February 2023 alongside a number of other ALBs and organisations.
- Facilities within James House have enabled staff to recycle food waste, plastics, paper, tins and cardboard.
- Agile working is now in place with staff working a combination of at home and office-based. This has reduced the need for travel to the workplace and meetings are taking place using video-conferencing software.
- As a result of agile working the production of printing and photocopying has reduced as staff use ICT support including One Note.
- The Social Care Council's Board now uses the Decision Time platform for publication of papers.
- E-Resources – investment in the Learning Zone as an alternative to printed learning resources.
- The Social Care Council has signed up to the Xerox Green Alliance to ensure the prompt recycling of all printing materials.

This has included clear procedures on the minimisation of waste, colour photocopying and paper production. The continued promotion of the online Portal has also led to almost negligible use of printed materials for registration application paperwork. Following the organisation's move to new premises at James House, the Social Care Council is reviewing how it can develop actions and measures to support a Climate Action Plan. This will continue into 2026-27.

Performance analysis – Key Performance Indicators

The organisation delivered its business making best use of technology to support agile working – with staff working flexibly between remote and office-based working. The Senior Leadership Team, supported by Heads of Functions, continued to meet monthly throughout the year to review business priorities and share learning.

The 2025-26 Business Plan was delivered against 25 objectives and 14 KPIs. Progress against the annual Business Plan objectives was monitored by the Operational Leadership Team throughout the year. Monthly performance reports for the Senior Leadership Team and Quarterly reports for the Social Care Council Board included successes, opportunities for improvement and details of mitigating action undertaken for areas that were at risk of not meeting required outcomes.

The Senior Leadership Team is satisfied that overall delivery of the objectives and performance against the KPIs set out in the 2025-26 Business Plan meet the standards required to confirm achievement of year-end outcomes in line with the 2023-27 Strategic Plan despite the challenges of delivering our services through remote and then agile working arrangements.

Overview of Key Performance Indicators for 2025-26

At the end of 2025-26 business year (31 March 2026): Further detail on the performance information used to make these assessments on these 14 KPIs for 2025-26 are included below.

- 8 KPIs were rated GREEN
- 4 KPIs were rated AMBER
- 2 KPIs were rated RED
- 20 out of 25 Objectives were assessed as fully completed

KPI	Performance	Comment on any highlights/risks/mitigation
1. Customer experience – 85% of those using our services, report a positive experience	**Cum 95%** Number of Survey responses (n=1,076)	**Across months 1-12 of 2025-26** • **72,070** people supported by Registration Advisers • **34,249** calls handled (96% of calls presented were handled) • **37,821** emails managed (29 emails awaiting resolution at closing) **GREEN rating for 95% cumulative KPI** reflects positive experiences reported by those supported through the services. It is recognized that the survey responses represent 1.7% of customers. Further work will be done in 2026-27 to promote the survey.
2. We will process **100%** of completed applications/ renewals within 20 working days of submission	**Cum 99%** Number of applications/ renewals completed (n=14.1k)	**Across months 1-12 of 2025-26** • **14,150** registrations completed **(10,357** applications and **3,793** renewals) • **99.9%** of applications/renewals processed within 20 days of completed materials being received (**888** applications in the system at closing) • **95%** of renewals processed automatically through the online system • **50,781** fees paid (90% paid online)

		AMBER rating for 99% cumulative KPI reflects the continued service improvement from management activities to recruit and develop staff and to involve staff in improving work processes. Introduction of the Registration Mobile Application and increased options on the Registration Online Portal have improved user-experience, reduced opportunities for errors and minimised duplication of submissions. KPI was marginally below 20-day KPI in one month (May - 98%)
KPI	**Performance**	**Comment on any highlights/risks/mitigation**
3. We will update the register for **all** Fitness to Practise decisions within 2 working days of receipt of the information	**Cum 89%** Number of registration records updated (n=175)	**Across months 1-12 of 2025-26** • **175** registrant records were updated to reflect decisions made by Fitness to Practise Officers and Committees • **89%** (156/175) of updates were completed within the 2-day timescale. **RED rating for 89% cumulative KPI** reflects the reduced capacity within the team to meet 2-day KPI in June (14%) and July (53%). Training has been undertaken to increase capacity within the team to amend registration records with fitness to practise and committee decisions.
4. We will triage **all** referrals to the Fitness to Practise Team within 5 working days (referrals are assessed against the Social Care Council 'Standard for Acceptance')	**Cum 99.5%** Number of concerns referred to fitness to practice-and triaged (n=613)	**Across months 1-12 of 2025-26** • **613** concerns referred about a registrant's fitness to practise were triaged • **19%** of referrals were screened out at triage because they did not meet the standard, or were not within the remit of the Social Care Council • **62%** of referrals resulted in investigation as a fitness to practise case (69% last year) • **20%** increase in referrals compared to previous year. • **43%** increase in referrals compared to 2021-22 **AMBER rating for 99.5% cumulative KPI** reflects strong performance across the year and the effective management of risk in triaging referrals in-year, despite considerable increase in referrals. Three months were marginally below 5-day KPI - July (99%), Aug (98%), Oct (99%). Average of 51 referrals rec'd per month.
5. We will conclude **100%** of Interim Suspension Order (ISO hearings within 4 weeks of referral)	**Cum 86%** (n=51)	**Across months 1-12 of 2025-26** • **51** cases were identified as high risk and referred for Interim Suspension Order (ISO)hearing • **86%** of ISOs were concluded within 4 weeks of referral • **34%** increase in ISOs compared to previous year • **145%** increase in ISOs compared to 2021-22 **RED rating for 86% cumulative KPI** reflects the pressure to deliver on the significantly higher number of ISO applications received in-year. Achievement of 86%

		in these circumstances is a strong performance across the year which took effective management of resources. 8 ISO cases took more than 4 weeks to complete. ISO occurrences are unpredictable and require rapid adjustment to scheduling to process within timescales. No additional risk to the public occurred during the delay. The system was robust enough to respond within tight timescales to ensure registrants identified as posing a high risk to those receiving social care services were temporarily prevented from practising whilst investigations proceeded.
KPI	**Performance**	**Comment on any highlights/risks/mitigation**
6. We will conclude **90%** of Fitness to Practise cases within 15 months of opening the case	**Cum 82%** (n=361)	**Across months 1-12 of 2025-26** • **361** Fitness to Practise cases concluded (480 active cases in the system at closing) • **92%** of cases resolved by FtP Officers Officer's (156 no further action, 109 letters of advice about standards, 17 Removal Orders, 19 warnings, 1 undertaking. 2 removals by agreement) • **8%** of cases decided by FtP Hearing Committee (23 removal orders, 5 suspension orders, 2 warnings, 1 conditions of practice order) One further order held in may to revoke a suspension order and invoke a removal order **AMBER rating for 82% cumulative KPI** reflects the steady performance on case management through the year. Case closures were 15% lower than last year. There were 480 cases in the system at year end. Performance on closure times can be impacted by criminal proceedings, safeguarding investigations, employer investigations, health assessments, as well as staff resource. Witness/employer co-operation was also a factor. All cases are reviewed at monthly case conferences, including long-running cases. 25% of active cases in the system at closing were older than 15 months. The impact of these long-running cases on the KPI is kept under review by management. It remains the aim of management to attain the standard of closing 90% of cases within 15 months.
7. We will conclude 90% of FtP hearings under the FtP procedure within 6 months of the date of transfer.	**Month 12 Cum 81%** (n=31)	**Across months 1-12 of 2025-26** • **31** FtP hearings concluded • **81%** of FtP hearings held under the FtP procedure were concluded within 6 months of transfer in 2025-26. • **5/31*** FtP hearings concluded in-year did not meet KPI - requiring additional 10 days - 10 weeks to conclude. Hearings outcomes were: 23 removal orders, 5 suspension orders, 2 warnings, 1 conditions of practice order (27 social care, 4 social work). (*One further hearing was held in May to

		revoke a Suspension Order and impose a Removal Order. **AMBER rating for 81% cumulative KPI reflects** the pressure placed on Hearings Services resulting in 5 hearings taking additional 10 days – 10 weeks to conclude.
KPI	**Performance**	**Comment on any highlights/risks/mitigation**
8. We will conclude 90% of FtP hearings under the health procedure within 10 months of the date of transfer	**Month 12 Cum 100%** n=1	**Across months 1-12 of 2025-26** • 1 FtP health hearing concluded within KPI **GREEN rating for 100% cumulative KPI**
9. We will conclude or refer to a Registration Committee, 75% of all suitability assessments within 2 months of creating the case.	**Month 12 Cum 76%** n=327	**Across months 1-12 of 2025-26** • 327 suitability assessments for those applying/renewing registration were completed within 2 months of creating the case. • 76% of suitability assessments for those applying/renewing registration were completed within 2 months of creating the case. • 51 assessments in system at end of period **GREEN rating for 76% cumulative KPI**
10. We will ensure our staff absence levels do not exceed **3.32%** during the year	**Month 12 Cum 2.06%**	**Cumulative absence across months 1-12 was recorded at 2.06%.** Staff absence totals for 2025-26 were 2.06 % (2024-25 3.04%) - which is below the overall KPI of 3.32%. KPI was marginally exceeded in April (4.52%), May (4.59%) and June (4.46%). This was due to long term absences and seasonal illnesses. Absence remained within KPI for all other months. ***GREEN rating for 2.06% cumulative KPI for staff absence**
11. We will ensure we achieve the prompt payments minimum standard of paying **95%** of undisputed invoices within 30 days	**Cum** (n=1673) **30 Day** KPI **99.17%**	**Across months 1-12 of 2026-27** • **1,452** invoices paid, with a value of £3.3m • **99.17%** of invoices paid within 30 days (£3.29m) **GREEN rating for 99.17% cumulative KPI** reflects the strong performance across procurement, processing and approval of invoices to ensure efficient processing of payments. KPI standard for 30-day payments was met throughout the year.

KPI	Performance	Comment on any highlights/risks/mitigation
12. We will ensure we achieve the prompt payments minimum standard of paying **75%** of undisputed invoices within 10 days	**Cum** (n=1673) **10 Day** KPI **91.67%**	**Across months 1-12 of 2026-27** • **1,452** invoices paid, with a value of £3.3m • **91.67%** of invoices paid within 10 days (£3.15m) **GREEN rating for 91.67% cumulative KPI** reflects the strong performance across procurement, processing and approval of invoices to ensure efficient processing of payments. KPI standard for 10-day payments was met throughout the year.
13. We will manage our finances to achieve financial breakeven target of **0.25% or £20k** (whichever is greater)	**At end of Month 12** Unaudited Year-End Position **£16.6k**	Month 12 finance reports confirmed a £16.6k surplus at 31 March 2026. The breakeven position has therefore been reached for the financial year 2025-26. ***GREEN rating for breakeven position against KPI** is based on the following summary of actual income and expenditure. Further information is provided in the accounts section of this report.
14. We will ensure the Online Registration Portal is available at least **98%** of time during the year	**Month 12 Cum 99%** **Number of Portal Sessions** n=227k *Lower limit for KPI risk tolerance assessed as 93%	**Across months 1-12** • **99%** Portal availability • **18k** active users per month **227k** sessions ***GREEN rating for 99% cumulative KPI** reflects the robust systems in place to monitor system performance and address service issues as they are reported by users. In addition to maintaining the online system, the team managed development and testing for improvements to the database and portal. Staff and stakeholders were assisted with payment issues, online account log-ins, updating employment details, amending employer/endorser permissions and set up for videoconferencing. Support was provided for bulk management of duplicated registration applications, requests for voluntary registration removals, fee generations system updates and system training.

Positioning

Based on these performance reports, I can confirm that the Social Care Council is well placed to deliver a strong and reliable performance during the next business year. We recognise that there may be some adaptations needed as we continue to prioritise and deliver our business in response to the demands and constraints placed on planning and service delivery within the current financial climate. The organisation has a highly skilled workforce, who are strongly motivated to deliver quality services and who are well supported to enable them to work flexibly to meet business needs.

We are committed to supporting front line workers in social work and social care. We will continue to develop online learning and supports and ensure that those coming back to work in social work or social care can be registered quickly and safely.

The Leadership Teams will continue to review the needs and demands for our services and will ensure that feedback from stakeholders will shape our perspective on our priorities and ambitions.

I will ensure that the Social Care Council listens to those priorities and ambitions to make sure we continue to work with and for our stakeholders.

Tracy Reid
Chief Executive
Northern Ireland Social Care Council

Date: 22 June 2026

Section 2: Accountability Report

Corporate Governance Report – Director's Report

The Northern Ireland Social Care Council was established in October 2001 under the Health and Personal Social Services Act (NI) 2001. It is a Non-Departmental Public Body sponsored by the Department of Health. The Social Care Council is helping to raise standards in social care through the registration of the social work and social care workforce and setting standards for their conduct, training and practice. In doing so, the Social Care Council engages with a variety of stakeholders, including those who use social care services, carers, the social care workforce, employers, training providers and government agencies. The Social Care Council also works collaboratively with its counterparts in England, Scotland, Wales and Ireland.

Our Values

The overall vision for the Social Care Council focuses on improving standards in social work and social care.

This vision will be achieved through the delivery of our core values:

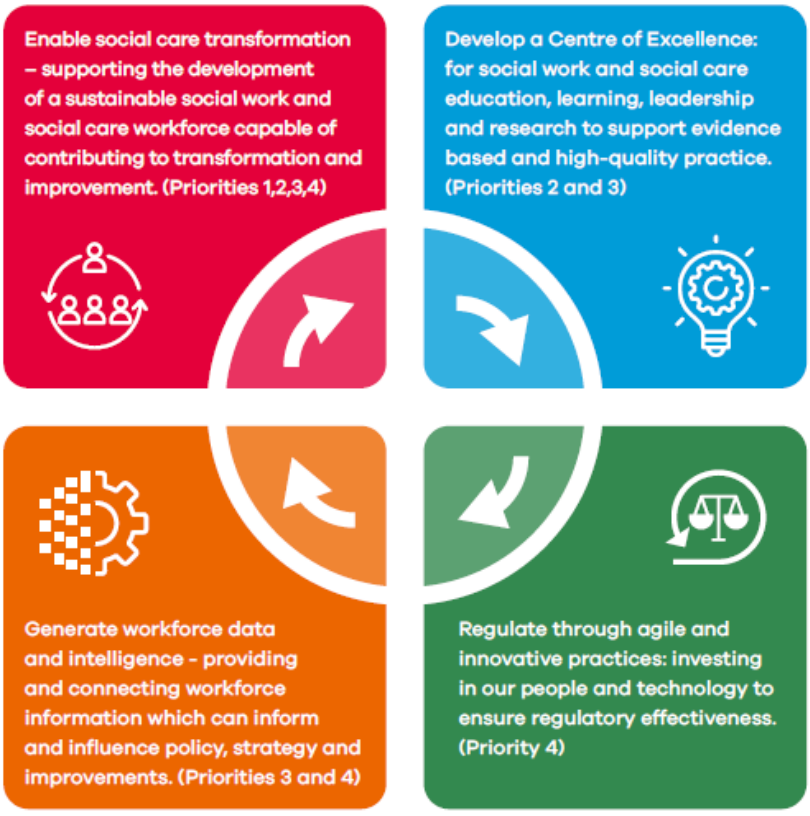
- Respect.
- Integrity.
- Partnership.
- Excellence.

Our Ambitions

We want to make a difference to social work and social care, to improve outcomes for those who are supported through these services.

Our ambitions are the long-term outcomes we want to achieve for both the Social Care Council and for the social work and social care workforce:

- Workforce transformation.
- Evidence-based practice.
- Workforce data & intelligence.
- Agile regulation.
- Innovation.



The Social Care Council is a partner in the UK Alliance, Skills for Care and Development (SfCD), responsible for social care and children's services throughout the UK. As partners we're committed to supporting employers to create a world-class workforce, that's vital for the growth of the economy and the wellbeing of people who need care and support in our communities.

The Social Care Council is led by a Board which comprises a Chair and 8 non-Executive Members who have responsibility for ensuring the Board's strategic policies as agreed with the DoH are successfully delivered. Details of the Board's structure and its membership can be found at Appendix 1 of this Annual Report. The organisational structure is headed by a Chief Executive who is also the designated Accounting Officer. The Chief Executive is supported by the Director of Registration and Corporate Services and the Director of Regulation and Standards (which is vacant and is covered through a job-sharing arrangement). The organisational structure can be found at Appendix 2.

Equality and diversity

The Social Care Council is committed to promoting equality of opportunity for all. Details of good practice and training initiatives, including those relating to disability issues are outlined in the Annual Equality Progress Report which can be found on its website at www.niscc.info. The Social Care Council has an Equal Opportunity Policy in place that covers all aspects of equality within employment, including the obligations of the organisation under disability discrimination legislation and protecting the rights and interests of Section 75 groups. Managers worked with BSO Equality Unit and Human Resources Team, reviewing recruitment and employment policies and practice to ensure they meet their business objective to be an Employer of Choice for people from all backgrounds.

The Social Care Council is a partner in the HSC work placement scheme which provides opportunities for people with disabilities to gain employment experience. During 2023-24, the Social Care Council consulted with stakeholders on the Disability and Equality Action Plans for 2023-28. This review was delivered in partnership with the BSO Equality Unit in accordance with the Equality Commission guidelines. These plans assist the Social Care Council to deliver on policy and service delivery developments to better promote equality of opportunity and good relations; and the outcomes and improvements achieved. The 'Disability and Equality Action Plans' are available from the website www.niscc.info

Internal communication

A range of methods are used to communicate with staff. These include monthly team meetings which enable the sharing of corporate information together with updates on business and team performance, and team development. Monthly staff 'Townhall' meetings are held to encourage staff teams to share information about the work that they do. The staff intranet is updated regularly to help staff to access useful information such as policies and procedures in one place, together with an interactive calendar and group forums. The Social Care Council also holds information sessions every quarter to openly discuss matters which impact the organisation such as funding pressures, business delivery and strategic policy directions. Teams and working groups use Microsoft Teams to share work updates and information.

Prompt Payment Policy

Public Sector Payment Policy – Measure of Compliance

The Department of Health requires that the NI Social Care Council pay their non-HSC trade creditors in accordance with applicable terms and appropriate Government Accounting guidance. The NI Social Care Council's payment policy is consistent with applicable terms and appropriate Government Accounting guidance and its measure of compliance is:

	2026		2025	
	Number	Value £	Number	Value £
Total bills paid	1,452	3,301,556	1,673	2,990,505
Total bills paid within 30 day target	1,440	3,293,628	1,656	2,920,244
% of bills paid within 30 day target	**99%**	**99%**	**99%**	**98%**
Total bills paid within 10 day target	1,331	3,146,542	1,572	2,804,020
% of bills paid within 10 day target	**92%**	**95%**	**94%**	**94%**

The Late Payment of Commercial Debts Regulations 2002

There was no interest payable arising from claims made by businesses under this legislation.

Information Governance

BSO provides services to the Social Care Council to assist with fulfilling responsibilities for General Data Protection Regulation (GDPR). Staff are required to complete the mandatory e-learning module to ensure they are aware of their role in fulfilling GDPR requirements. There were two data breaches during the year. These were assessed and neither required reporting to the Information Commissioner's Office.

Health and Safety at Work

The Social Care Council has an approved Health and Safety at Work Policy. The organisation complies with the requirements of the Health and Safety at Work (NI) Order 1978 and all other relevant health and safety legislation and codes of practice. We are committed to ensuring so far as is reasonably practicable the health, safety and welfare of employees and of others who may be affected by our operations. Expert advice and support on health and safety legislation and codes of practice is provided through a Service Level Agreement with the Business Services Organisation. The Health and Wellbeing Committee, which reports to the Senior Leadership Team has a responsibility to promote measures which ensure the health, safety and wellbeing of staff at work. The Committee has representation from all teams and meets quarterly to plan and deliver Health and Wellbeing activities. The Social Care Council has access to the HSC Occupational Health Service. In addition, a programme of employee assistance and confidential counselling is made available through the Inspire Workplace organisation.

Complaints
The Social Care Council received 15 written complaints about its services during 2025-26. All of these were resolved at the initial stage – with 11 complaints upheld and addressed. 4 complaints were not upheld. No complaints were received from the Northern Ireland Public Services Ombudsman. In addition, the Evaluation Manager reviews all feedback received through the Customer Service Survey to identify those customers who issues remain unresolved, or those who have reported they received an unsatisfactory outcome. These are followed up with relevant team members to ensure that all customer issues are resolved where possible. Learning from these reviews is discussed with managers and staff teams as appropriate.

Audit Information
The Directors can confirm that there is no relevant audit information of which the auditors are not aware. The Directors can also confirm that they have taken steps to ensure that they are aware of relevant audit information and to establish that the Social Care Council's auditors are aware of the information.

Long Term Expenditure
The Social Care Council receives its financial allocation on a year-to-year basis from the Department of Health (DoH) and any long-term expenditure pressures identified by the Social Care Council are managed through the DoH.

Senior Leadership Team 2025-26

The Senior Leadership Team (SLT) is responsible for ensuring all of the Social Care Council's business areas meet corporate, governance and legislative requirements for public accountability and value for money.

In October 2024, interim arrangements to cover the senior leadership responsibilities were put in place whilst recruitment to cover retirement of Chief Executive and Director of Regulation and Standards was in progress. The permanent Chief Executive role was filled in September 2025. Work is underway to consolidate the organisations senior leadership structure, including the role of Director of Regulation and Standards during 2026-27.

Summary of SLT responsibilities are as follows:

Tracy Reid (Chief Executive) has overall responsibility for the Social Care Council. She works with the Chair of the Social Care Council's Board and the Board Members in the delivery of the Social Care Council's strategic direction, leadership and accountability. Tracy Reid was appointed 1 September 2025. Declan McAllister acted as interim CEO from 14 October 2024–31 August 2025 to cover these responsibilities following Patricia Higgins' retirement.

Declan McAllister (Director of Registration and Corporate Services) has responsibility for the Registration function and for Corporate Services, which includes Finance, HR, IT Development, Procurement, Estates and Governance. Sandra Stranaghan acted as interim Director from 17 February-31 August 2025 to cover these responsibilities.

Helen McVicker and Catherine Maguire (Co-Directors of Regulation and Standards - Interim) have responsibility for the Fitness to Practise function, Research and Evidence, the regulation of social work education and training at qualifying level and the Professional in Practice CPD framework for social workers, and the development of the social work and social care workforces. These interim appointments commenced 1 December 2024.

Northern Ireland Social Care Council Board 2025-26

Board Membership reflects three broad interest groups:

Lay People: People who have direct experience as a user of social care services, as a carer, or of unpaid work in the voluntary or community sector.

Registrants: People who are social care practitioners, eligible for inclusion in the Social Care Register.

Stakeholders: People who must be directly involved in the commissioning or delivery of social care services, the delivery of education and training in social care or as a representative of a trade union, professional or other regulatory body concerned with health and social care, or be a member of the legal profession.

All Members are appointed in a personal capacity because of the skills and experience they possess.

The Board Chair (Interim) is Mr Gerard Guckian and he is supported by Board Members –

- Gerard Guckian **(Interim Chair)
- *Bria Mongan
- David Hayes
- Jacqueline McGarvey
- Sarah Browne
- *Carol Diffin
- *Denise Hunt
- Roslyn Dougherty

*3 new Board Members appointed 19 May 2025 to fill vacant posts

**Mr Gerard Guckian (Board Deputy Chair) has fulfilled the role of Interim Chair since 1 April 2024. Public Appointments recruitment to appoint a permanent Chair commenced in Spring 2025. All appointments, including the Chair role are managed by the Public Appointments Unit. Board Members are listed at Appendix 1.

The Board meets four times a year to consider issues of strategy and accountability. The meetings of the Board are held in open session and are advertised on our website. The agenda and minutes of Board meetings are published on the Social Care Council's website www.niscc.info. The Board also have strategic days during the year to focus on key areas of work and strategy, for example when developing the Corporate Plan.

Following guidance from the Department of Health, Boards are no longer required to complete the DoH Annual Board Self-Assurance Checklist. In the absence of this checklist, the Social Care Council Board is considering how it provides key lines of assurance regarding its performance, level of assurance and that it is supported well in delivering its function. We will report on the outcome of that work during 2026-27.

The Social Care Council holds a Register of Directors' Interests which contains the declared interests of both Executive and Non-Executive Directors. This is available by contacting the Business Support Team at the Northern Ireland Social Care Council, 4th Floor James House, 2 Cromac Avenue, Belfast, BT7 2JA, or by emailing business.support@niscc.hscni.net.

Northern Ireland Social Care Council Committees 2025-26

The Board has established two Committees to support it in the delivery of its strategic functions, each of which is chaired by a Board Member:

- **The Audit and Risk Assurance Committee** (chaired by Board Member Denise Hunt) assists the Board in the discharge of its functions by providing independent and objective review of the Social Care Council's control systems, financial information to the Board, risk management and information governance processes, compliance with the law, guidance and Standards of Conduct and Practice, and governance processes. The Audit and Risk Assurance Committee Report which forms part of this Annual Report can be found on page 94.

- **The Remuneration Committee** (chaired by the Board Chair) advises the Board about appropriate remuneration and terms of service for the Chief Executive. It meets twice a year.

Northern Ireland Social Care Council Partnerships 2025-26

The Board has established a number of Partnerships to inform and deliver its wide range of business and to provide structured arrangements for stakeholder engagement and involvement:

- **Participation Forum** consists of people who use social care services and carers, and its role is to challenge, influence and advise the work of the Social Care Council.
- **Leaders in Social Care Partnership** consists of providers of social care services from the statutory, private and 3rd sectors, with a focus on supporting the transformation and development of the social care workforce in Northern Ireland.
- **Professional in Practice (PiP) Partnership** consists of social work employers and Higher Education Institutions (HEI's) who are key to the delivery of the PiP Framework.
- **Research and Evidence Partnership** - comprising representatives from government departments and other relevant research constituencies, senior representatives from higher education institutions, health and social care, justice, education and voluntary and private sectors; service users and carers and the professional body for social workers and social care practitioners in Northern Ireland. This partnership was established in 2024 to take forward the programme of work to build a social work and social care research community.

Tracy Reid
Chief Executive
Northern Ireland Social Care Council

Date: 22 June 2026

Corporate Governance Report – Statement of Accounting Officer Responsibilities

ACCOUNTS FOR THE YEAR ENDED 31 March 2026

Under the Health and Personal Social Services Act (Northern Ireland) 2001, the Department of Health has directed the Northern Ireland Social Care Council to prepare for each financial year a statement of accounts in the form and on the basis set out in the Accounts Direction. The accounts are prepared on an accruals basis and must provide a true and fair view of the state of affairs of the Northern Ireland Social Care Council and of its income and expenditure, Statement of Financial Position and cash flows for the financial year.

In preparing the accounts the Accounting Officer is required to comply with the requirements of the Government Financial Reporting Manual (FReM) and in particular to:

- observe the Accounts Direction issued by the Department of Health, including the relevant accounting and disclosure requirements, and apply suitable accounting policies on a consistent basis
- make judgements and estimates on a reasonable basis
- state whether applicable accounting standards as set out in FReM have been followed, and disclose and explain any material departures in the accounts
- prepare the accounts on a going concern basis, and
- confirm that the Annual Report and Accounts as a whole is fair, balanced and understandable and take personal responsibility for the Annual Report and Accounts and the judgements required for determining that it is fair, balanced and understandable

The Permanent Secretary of the Department of Health as Principal Accounting Officer for Health and Social Care Resources in Northern Ireland has designated Tracy Reid of the Northern Ireland Social Care Council as the Accounting Officer for the Northern Ireland Social Care Council. “The responsibilities of an Accounting Officer, including responsibility for the propriety and regularity of the public finances for which the Accounting Officer is answerable, for keeping proper records and for safeguarding the Northern Ireland Social Care Council’s assets, are set out in Managing Public Money Northern Ireland published by the Department of Finance.”

As the Accounting Officer, I have taken all the steps that I ought to have taken to make myself aware of any relevant audit information and to establish that the Northern Ireland Social Care Council’s auditors are aware of that information. So far as I am aware, there is no relevant audit information of which the auditors are unaware.

Corporate Governance Report – Governance Statement 2025-26

1. Introduction / Scope of Responsibility

The Northern Ireland Social Care Council (Social Care Council) is accountable for internal control. As Accounting Officer and Chief Executive of the Social Care Council, I have responsibility for maintaining a sound system of internal governance that supports the achievement of the organisation's policies, aims and objectives, whilst safeguarding the public funds and assets for which I am responsible in accordance with the responsibilities assigned to me by the Department of Health (DoH).

The Northern Ireland Social Care Council (the Social Care Council) is a Non-Departmental Public Body (NDPB), sponsored by the Department of Health (NI) (specifically the Office of Social Services). The Social Care Council Board Chair is accountable to the Minister of Health. Being an NDPB means the Social Care Council has operational independence in carrying out its regulatory role, but it operates within a governance and accountability framework set by the NI Government. The Social Care Council is established under the Health and Personal Social Services Act (Northern Ireland) 2001 and has a legal responsibility for the regulation and registration of the social work and social care workforce in Northern Ireland.

The Social Care Council is responsible for: –

- maintaining a register of social workers and social care practitioners in Northern Ireland;
- setting standards for social workers and social care practitioners for their conduct, training and practice; and
- setting standards for and regulating social work education and training in Northern Ireland.

2. Compliance with Corporate Governance Best Practice

The Board applies the principles of good practice in Corporate Governance and continues to further strengthen its governance arrangements. The Board last carried out an annual self-assessment in April 2025 (for the year 2024-25) and no new actions were identified at that time.

Following changes to the annual Board Self-Assessment, the Board are reviewing the key elements of good practice against the Nolan principles, values, behaviours and ethics required of a Board. The Board will carry out this review for the 2025-26 year (including looking ahead for 2026-27) at their June 2026 meeting. The governance of the Board is also audited once every three years by Internal Audit at the Business Services Organisation (BSO). The last audit took place in 2024-25 which provided satisfactory assurance and all recommendations arising have been implemented.

In moving forward with its annual review of good practice, the Board have noted that going into 2026-27, all of the Board Members (and Chair from September 2026) will have less than 2 years' experience as Board Members of the Social Care Council, and of these 60% will have less than one years' experience.

Governance Framework

The Board provides strategic leadership to the Social Care Council and comprises a Chair and 8 Members who are a combination of registrants, lay members and others who are key stakeholders in social care services. At present the Board has 1 vacancy. Three Board members were appointed in April 2026, with a further Board Member and new substantive Chair to be appointed later in 2026.

Operational responsibilities are delivered by the Chief Executive. The duties and functions of the Chair and Board Members are set out in the Partnership Agreement and also in the Social Care Council's Standing Orders, Scheme of Delegation and Standing Financial Instructions.

Meetings of the Board were held in open session five times during the year and records are maintained of the Board attendance. During 2025-26 the Board attendance for all sessions was:

Chair/ Member	**Attendance at Board During 2025-26 (%)**
Gerry Guckian- Acting Chair	100%
Sarah Browne, Member	100%
Carol Diffin	100% *
Roslyn Dougherty, Member	100%
David Hayes, Member	100%
Denise Hunt	100% *
Jacqueline McGarvey, Member	100%
Bria Mongan	100% *

*joined May 2025

In addition, the Board held three Strategic Planning Sessions. Attendance at Board Strategic Days, Committees and Partnerships during 2025-26 is set out below:

	Board Strategic	Audit & Risk Assurance Committee	Remuneration Committee	Participation Forum	Leaders in Social Care Partnership	Professional in Practice Partnership	Research & Evidence Partnership
FREQUENCY OF MEETINGS IN 2025-26	3	5	2	4	3	3	2
G Guckian	100%	100%	100%	N/A	N/A	N/A	N/A
S Browne	66.6%	N/A	100%	75%	100%	N/A	N/A
C Diffin*	100%				100%***		
R Dougherty	100%	N/A	100%	N/A	N/A	100%	N/A
D Hayes	66.6%	N/A	N/A	0%	N/A	N/A	100%
D Hunt*	100%	100%**		100%			
J McGarvey	100%	100%	N/A	N/A	N/A	N/A	N/A
Lesley Mitchell (Co-Opted)	N/A	100%	N/A	N/A	N/A	N/A	N/A
Bria Mongan*	100%						

** New Board members appointed from May 2025*
*** Replaced G Guckian as Audit & Risk Assurance Committee Chair from June 2025 meeting*
**** New Chair of Leaders in Social Care Partnership*

The Board has established two statutory Committees to support it in the delivery of its strategic functions:

- The Audit and Risk Assurance Committee is chaired by a Member of the Board of the Social Care Council and assists the Board in the discharge of its functions by providing independent and objective review of the Social Care Council's control systems, financial information to the Board, risk management processes, compliance with law, guidance and Codes of Conduct, and governance processes; and

- The Remuneration Committee is chaired by the Chair of the Social Care Council and advises the Board about appropriate remuneration and terms of service for the Chief Executive.

The Audit and Risk Assurance Committee carries out an annual self-assessment and develops an action plan to address any areas where performance could be improved or enhanced.

3. Business Planning, Risk Management and Fraud

Business planning and risk management are at the heart of governance arrangements to ensure that statutory obligations and ministerial priorities are properly reflected in the management of business at all levels within the organisation.

Business Planning
The Social Care Council has developed a four-year Strategic Plan following engagement with staff and stakeholders including, in particular, people who use social care services and carers as is described in the Social Care Council's Personal and Public Involvement (PPI) Consultation Scheme.

The Strategic Plan takes account of recent developments in social care strategy including the Minister of Health's strategy 'Health and Wellbeing 2026'. The Strategic Plan describes at a strategic level how the Social Care Council will deliver on its overarching aim and strategic outcomes as a regulator of the social care workforce and the outcomes which it expects as a result. The Strategic Plan is available on the Social Care Council's website at www.niscc.info.

The Social Care Council also develops an annual Business Plan which provides further detail on how the Social Care Council will deliver its Strategic Plan, focusing on the outcomes of delivering its objectives. The same process of engagement and consultation is applied as with the development of the Strategic Plan. The Business Plan is approved by the Board and ultimately by the DoH Sponsor Branch before being circulated and published. The Strategic Plan and Business Plan are compliant with the requirements set out in the Social Care Council's Management Statement and Financial Memorandum. The Chief Executive has overall responsibility for delivering the Strategic and Business Plans, and is supported by the Senior Leadership Team and an operational team.

To give effect to the Strategic and Business Plans, the Social Care Council reports quarterly on business objective and key performance indicator performance. This ensures that all staff can clearly understand their role in delivering the Social Care Council's objectives, and ensures that their own personal and team objectives and learning plans are aligned to the Social Care Council's business objectives.

A Business Performance Management Report is presented to the Board for scrutiny on a quarterly basis, detailing how the Social Care Council is performing against its annual Business Plan. This includes further assurance reports such as an evaluation of the Social Care Council's delivery of its

strategic outcomes; financial monitoring reports; and reports associated with workforce registration and regulation.

The Board agrees its work programme for the year to make best use of both its open sessions and strategic planning sessions.

Ultimately, the Social Care Council accounts for its business performance through the production of its Annual Report and Accounts which are laid before the NI Assembly and published on the Social Care Council's website.

Financial Planning

The Social Care Council received a flat cash allocation in 2025-26 based on its 2024/25 allocation. This presented immediate and real challenges for the organisation within in-year funding and resource pressures. While the Social Care Council has been able to break even at year end this came with real challenges in managing the emerging pressures, in particular, those in relation to the increasing growth in Fitness to Practise and Committee statutory regulatory activity.

As part of the HSC sector, the Social Care Council will face further significant financial challenges in 2026-27 with savings plans submitted across the DoH to collectively support the deficit in health and social services funding.

Risk Management

The Chief Executive has overall responsibility to the Board for risk management. Leadership on risk is provided through the Board with delegated authority to the Audit and Risk Assurance Committee which is chaired by a Board Member and is supported by the Director of Registration and Corporate Services. The Risk Management process seeks to identify risks in accordance with best practice as well as providing a system for embedding risk management throughout the Social Care Council.

The Board set the strategic risks and risk appetite for the organisation which are set out in the Social Care Council's Risk Management Strategy. The Board also approve and have oversight of the Social Care Council's Risk Assurance Framework and Performance Framework. The Board agrees the strategic risks that impact on the delivery of the organisation's strategic plan and annual business plan. The Board's Audit and Risk Assurance Committee review the strategic risks in detail at each of their meetings, ensuring the controls and actions are having a positive impact on the mitigation of the risks.

The risk appetite agreed by the Board in relation to each of the strategic themes and strategic risks from cautious to hungry is in place along with an agreed risk appetite statement for each of its risk appetite areas (finance, compliance, safety, service delivery and reputation).

All staff receive training on risk management and are also provided with detailed Risk Management Procedures. In addition, risk management training forms part of induction for all new staff.

The Social Care Council has been able to effectively manage its risk profile throughout the year by identifying the risk appetite relevant to the risk and its associated mitigating actions which are set out in its Risk Register and Risk Assurance Framework.

<u>Risk Management Framework</u>

The Social Care Council ensures effective risk management is embedded as part of its culture and throughout the organisation. It has a Risk Management Strategy which describes how risks (and near misses) should be managed, elevated, and controlled, including evaluating the value of inherent and residual risks. The Social Care Council has also developed detailed Risk Management Procedures which break down how to report and manage risks for all staff. This also includes

additional RAG rating for each control and assurance which is identified against each risk as part of the three lines of defence good practice guide.

The Social Care Council details its risks through a Risk Register and Risk Assurance Framework which are formally reviewed on a quarterly basis by the Risk Management Committee (chaired by the Director of Registration and Corporate Services), which in turn reports to the Senior Leadership Team, the Audit and Risk Assurance Committee and ultimately to the Board as part of a quarterly Risk Progress Report. The risk register is maintained on a regular basis and updated through risk management software which assigns risk owners, controls and actions. The risks can be tracked through the software to establish how risks are being managed and mitigated.

The Risk Management Committee is also responsible for ensuring the overarching Risk Management Strategy is reviewed on a regular basis so that it reflects all aspects of risk, governance and control.

The Social Care Council works with Internal Audit to provide assurances and validation of its compliance in relation to risk management, and has a Business Continuity Strategy and Plan in place which is tested on an annual basis, with lessons learned being fed back into the overarching Risk Management Strategy.

Fraud

The Social Care Council has a zero tolerance approach to fraud in order to protect and support our key public services. It has put in place a Fraud Policy Statement and Fraud Response Plan to outline the approach to tackling fraud, define staff responsibilities and the actions to be taken in the event of suspected or perpetrated fraud, whether originating internally or externally to the organisation. The Social Care Council has a Fraud Liaison Officer (FLO) whose role is to promote fraud awareness, coordinate investigations in conjunction with the Business Services Organisation (BSO) Counter Fraud and Probity Services team and provide advice to staff on fraud reporting arrangements. All staff are provided with mandatory fraud awareness training in support of the Fraud Policy Statement and Fraud Response Plan.

4. Information Risk

Information Risk Management is an essential part of good governance. The Social Care Council ensures that information risk management is considered in its procedures and policies. Information Risk Management is managed within the context of the Social Care Council's Risk Management Strategy and Information Governance Strategy.

The Social Care Council holds a range of personal data in respect of registrants (c.49,800) and confidential data in respect of complaints against registrants. It also holds a range of personal data in respect of staff and information which supports the running of the business. The Social Care Council maintains an Information Asset Register and Disposals Schedule which are reviewed regularly and any areas of non-compliance are brought to the attention of the Senior Information Risk Owner and Personal Data Guardian.

Specific roles in the Social Care Council have been identified to support it in managing risks to the organisation in respect of the information it may hold. These roles include:

- Personal Data Guardian
- Senior Information Risk Owner (SIRO)
- Information Governance and Records Management Officer (IGRMO)
- Information Asset Owners (IAOs)

The Information Governance function is well embedded in the organisation and forms part of the remit of the Risk Management Committee as reflected in the Committee's Terms of Reference. The Director of Registration and Corporate Services chairs the Risk Management Committee and is also the Social Care Council's SIRO. The Head of Corporate Services is the organisation's Personal Data Guardian. Due to the size and structure of the organisation the members of the Risk Management Committee (risk co-ordinators) are also the organisation's Information Asset Owners.

The Social Care Council receives its Information Governance support through a Service Level Agreement with Information Governance Shared Services in the Business Services Organisation (BSO). This includes the appointment of a Data Protection Officer to support the Social Care Council in its compliance with Information Access Requests and the General Data Protection Regulations (GDPR).

The Social Care Council ensures that the information it produces and creates is used appropriately, stored and shared safely and is compliant with its Information Management policies. Where information or data is shared outside of the organisation, Data Sharing Protocols, and Data Sharing Agreements are agreed in advance as necessary. The transfer of information is also subject to compliance with GDPR.

The organisation has ICT policies in place that include protecting against the risk of a cyber-security event, and draws upon the services of BSO Information Technology Serviced (ITS) to support it in the delivery of robust cyber security protocols and arrangements. The Board, the Senior Executive Team and all staff are trained in cyber security awareness and are regularly reminded of their personal responsibility to be vigilant and how to report any concerns.

The Social Care Council can report that there were two data breaches during the year. Both breaches were low risk and were managed in accordance with the Social Care Council's Data Security Breach Management Policy. There were no cyber security incidents.

The Social Care Council has a number of policies and strategies in place that support its overall risk management agenda. These are:

- Information Governance Strategy
- Records Management Strategy
- Records Management Procedures
- Access to Information Policy
- Privacy Policy and Privacy Statement
- Disclosure Policy
- Clear Desk and Screen Policy
- Data Security Breach Management Policy
- Confidentiality Policy
- Data Quality Policy
- ICT Policy

The Accounting Officer and Board receive quarterly reports through the Risk Assurance Report on the management of all risks, including those in relation to IT, information and other potential threats. The Risk Assurance Report highlights any gaps in assurance and how these are being remedied. In addition, an end of year Assurance Report is produced that highlights assurances (and gaps) across all areas of business. This Report is provided to the Senior Leadership Team, the Audit and Risk Assurance Committee and the Board. The Social Care Council received two limited assurance reports from Internal Audit during 2025-26 which are set out at section 6 of this Statement (Information Technology and Personal Data). The Personal Data audit detailed a number of

recommendations to strengthen and improve the management of data. 60% of these recommendations have been implemented to date, with the remainder to be implemented in full during 2026-27.

Partnerships and Public Stakeholder Involvement

The Social Care Council works in partnership with all the Health and Social Care (HSC) organisations including the other Regional Organisations sponsored by the DoH.

The Social Care Council has a Memorandum of Understanding with the Regulation and Quality Improvement Authority (RQIA) to enable it to properly fulfil its role as a regulator of the social care workforce, and information sharing protocols are in place with the other Social Care Councils in England, Wales and Scotland. The Social Care Council works closely with CORU, the Social Work and Social Care regulator in the Republic of Ireland, to share best practice in regulation and registration of social workers and social care practitioners. The Social Care Council is also a member of the NI Joint Regulators Forum comprising health and social care professional and system regulators, to share best practice and identify emerging concerns.

In particular, the Social Care Council is the Deputy Chair of the Social Care Collaborative forum with the DOH which has the responsibility for taking forward proposals for the Reform of Adult Social Care and is represented on the Social Work Implementation board taking forward transformation in Social Work.

The Social Care Council has a Partnership Agreement and Engagement Plan in place which sets out the strategic control framework within which the Social Care Council is required to operate, and the conditions under which government funds are provided as detailed in Government Accounting Northern Ireland. The Accounting Officer and Chair of the Social Care Council apprise the DoH at the highest level of engagement through twice-yearly Accountability Meetings, and at the same time the Social Care Council works in partnership with the DOH Government Liaison Officer to ensure operational and strategic issues are raised appropriately with the DoH throughout the year.

The Social Care Council's engagement with people who use services and carers, and other stakeholders has been enshrined in its structure since its inception in 2001. In addition, the Social Care Council has a strategic objective to 'raise awareness and knowledge of the work of the Social Care Council and ensure its work is informed and influenced by people who use services and carers, registrants, employers and other stakeholders'.

The Social Care Council published a Personal and Public Involvement Consultation Scheme which was developed by people who use social care services and carers, and was approved by the Board. Additionally, it produced Principles of Participation, again in partnership with service users and carers.

The Social Care Council has established a number of Partnerships to ensure inclusivity and involvement from the broadest range of people and stakeholders. These are:

- Participation Forum (comprising people who use social care services and carers)
- Leaders in Social Care Partnership (comprising employers of the social care workforce)
- The Professional in Practice Partnership (comprising employers of social workers, Higher Education Institutions (HEI's), and other education providers who are key to the delivery of the PiP Framework).
- Research and Evidence Partnership (comprising representatives from government departments and other relevant research constituencies, senior representatives from higher education institutions, health and social care, justice, education and voluntary and private

sectors; service users and carers and the professional body for social workers and social care workers in Northern Ireland).

The Social Care Council Partnerships meet regularly throughout the year and are kept informed of the Social Care Council business developments and issues raised at these meetings are brought to the attention of the Board who review the minutes of the meetings of the Partnership Forums. This holistic approach to engagement ensures that any risks identified by stakeholders are brought to the attention of the Board.

The Social Care Council ensures all papers presented to its Board include a cover sheet which explains to what extent stakeholders have been engaged in the development of the paper/proposal and, where appropriate, how they influenced the outcome. The Board can therefore clearly challenge the Social Care Council in how it has engaged people who use services and carers, and other stakeholders in the development of policy and other initiatives.

5. Assurance

As part of its Governance arrangements, the Social Care Council considers the contents of its Risk Assurance Framework, Performance Framework and Risk Register when identifying possible control issues.

The Social Care Council's Standing Orders require the setting up of an Audit and Risk Assurance Committee to reassure the Board that financial stewardship and corporate governance standards are being met. The Audit and Risk Assurance Committee maintains and reviews the effectiveness of the system of internal control for the Social Care Council. Full details of the Audit and Risk Assurance Committee, its role, terms of reference, and responsibilities can be found in the Standing Orders.

The Internal Audit Service for the Social Care Council is provided by the BSO. Internal Audit carries out its role by systematic review and evaluation of risk management, control and governance which comprises the policies, procedures and operations in place to:

- establish and monitor the achievement of the Social Care Council's objectives;
- identify, assess and manage the risks to achieving the Social Care Council's objectives;
- ensure the economical, effective and efficient use of resources;
- ensure compliance with established policies, procedures, laws and regulations; and
- safeguard the Social Care Council's assets and interests from losses of all kinds, including those arising from fraud, irregularity, bribery or corruption.

The Board receives a wide range of papers for information and decision making purposes presented by Social Care Council's officers. This includes a Business Performance Management Report. The papers are of suitable quality to enable the Board to make informed decisions.

The Board is satisfied with the quality of the information received during the year and is satisfied that the information was sufficient to enable the Board to fulfil its obligations.

End of Year Assurance

The Social Care Council provides an end of year assurance report to its Audit and Risk Assurance Committee and its Board on all of its areas of governance and control, using a RAG system to identify any areas where gaps in assurance and/or action is required. Any actions identified are managed through the Social Care Council's Risk Register and Risk Assurance Framework.

6. Sources of Independent Assurance

The Social Care Council obtains Independent Assurance from the following sources:

- Internal Audit (as provided under a Service Level Agreement with BSO);
- External Audit by the Northern Ireland Audit Office (NIAO); and
- Other Independent Assurances.

Internal Audit

The Social Care Council utilises an internal audit function which operates to defined standards and whose work is informed by an analysis of risk to which the body is exposed and annual audit plans are based on this analysis. Internal Audit has three assessment levels of assurance; Satisfactory, Limited and Unacceptable.

In 2025-26 Internal Audit reviewed the following systems:

- Workforce Development, providing a satisfactory assurance.
- Governance and Assurance Framework, providing a satisfactory assurance.
- Financial Review, providing a satisfactory assurance.
- Management of Personal Data, providing a limited assurance.
- IT Audit, providing a limited assurance.

The two limited assurance reports had no priority 1 weaknesses, but did identify a number of priority 2 weaknesses. Action has been taken to address a number of these recommendations, with work continuing to ensure the remainder are fully addressed in 2026-27.

Information Technology Audit

The Information Technology audit identified a need to improve the continuity and procurement arrangements in relation to two business critical systems – the Socrates (registration) system and the Case Management (Fitness to Practise) system. Four priority 2 recommendations were identified and work is taking place with Digital Health Care NI to secure the capital funding to put in place a new registration system. Work will be progressed during 2026-27 to address the recommendations set out in the audit report.

Personal Data Audit

A number of recommendations were identified in the audit and 60% of these have been fully implemented with work ongoing to implemented the remaining recommendations.

Outstanding Audit Recommendations

The Social Care Council recognises that, for the first time, there are two limited assurance audits together with a number of recommendations across each of the audit areas which require implementation. The Social Care Council faces challenges in relation to resourcing, funding and complex systems which has impacted on its ability to fully implement all the outstanding recommendations. 67% of all recommendations have been fully implemented across all audits and action will be taken to ensure all remaining recommendations are implemented in full during 2026-27.

In her annual report, the Internal Auditor reported that she can provide satisfactory assurance on the adequacy and effectiveness of the Social Care Council's framework of governance, risk management and control.

External Audit
The Financial Statements of the Social Care Council are audited by the Northern Ireland Audit Office (NIAO) and the results of their audit are set out in their Annual Report to those Charged with Governance. A representative from the Northern Ireland Audit Office attends the Social Care Council's Audit and Risk Assurance Committee Meetings. The External Auditor is required to certify, examine and report on each of the Statements comprising the Financial Statements of the organisation. An unqualified audit opinion was provided in 2025-26.

Other Independent Assurances

The Social Care Council was proud to be awarded IIP Platinum standard award for Investors in people in 2023-24 and currently holds IIP Gold for the new Health and Wellbeing assessment standard. A review of progress is carried out annually by the Assessor, with good feedback being received in 2025-26 ahead of planning for the formal assessment in March 2027.

7. Review of Effectiveness of the System of Internal Governance

As Accounting Officer, I have responsibility for the review of effectiveness of the system of internal governance. My review of the effectiveness of the system of internal governance is informed by the work of the internal auditors and the executive managers within the Social Care Council who have responsibility for the development and maintenance of the internal control framework, and comments made by the external auditors in their management letter and other reports. I have been advised on the implications of the result of my review of the effectiveness of the system of internal control by the Social Care Council, the Audit and Risk Assurance Committee, and the Risk Management Committee, and a plan to address weaknesses and ensure continuous improvement to the system is in place.

8. Internal Governance Divergences

Internal Control Issues 2025-26

<u>Senior and Board Appointments</u>
During the year, a new Chief Executive was appointed. This will enable a number of other interim senior arrangements to be put in place, including the Director of Regulation and Standards. An interim Chair remains in place during 2025-26 with plans to appoint a substantive Chair in 2026-27.

Three new Board Member appointments were made in May 2025 with an additional 3 new Board Members appointed April 2026. The changes in Board membership means that the majority of the Board will have less than 2 years' experience with the Social Care Council. Robust induction and engagement is planned to support the new Board members.

<u>Fitness to Practise and Committee</u>
The Social Care Council faced significant financial and resource challenges during 2025-26 in particular, in relation to its statutory function for Fitness to Practise and Committee:

These functions have witnessed a 40% increase in work over the last five years together with increasing complexity of cases. During 2025-26 a regional fraud investigation commenced into social care workers working under fraudulent references across Northern Ireland. The Social Care Council has been working with other regulators and organisations to support these investigations. This investigation and increased referral cases has put unprecedented additional pressure on an already stretched resource.

By end March 2026, the Social Care Council raised an Early Alert with the DoH outlining the critical environment to continue to deliver safe and effective regulation, with waiting lists being created in both Fitness to Practise and Committee teams. There is an immediate need to inject resources and funding, including a need to increase funding for legal support for the BSO Legal Services, to deliver hearings and regulatory activity within the statutory framework and regulations.

This risk has been escalated to the Social Care Council Board and DoH Sponsor Branch. The risk is recorded as an 'extreme' risk on the risk register and mitigation arrangements are in place. A model to address the challenges on short to medium term has been submitted to DoH, alongside a proposal for increased income generation. The Social Care Council recognises the financial challenges and awaits further direction from the DoH.

Data Cleansing Exercise

During 2025-26 an extensive data cleansing exercise was undertaken to review over 11,000 registration records which had a historic action called a 'do not remove' activated in their account which meant that these registrants may not have paid their renewal fee or completed their 3 or 5 year renewal correctly. A project team was commissioned to investigate and resolve these issues in October 2025 with that work fully completed by February 2026. There were no material impacts on the size of the register or lost income, and a number of lessons and improvements were delivered as a result.

Funding

The Social Care Council submitted a Savings Delivery Plan to the DoH forecasting the impact of 5%, 10% and 15% reductions in RRL. The Social Care Council has received an indicative allocation for 2026-27 of £3,156,070 based on the 2025-26 allocation and including a 5% saving. This will present immediate and significant pressures on the Social Care Council when taken into account with already stretched and underfunded resources which will need further escalated in the risk register and at Departmental level. The Social Care Council is working with Sponsor Branch on its financial challenges and potential options for income generation.

Landscape Review

The Social Care Council participated in a Landscape Review during 2025-26 which was commissioned by DoH Sponsor Branch in line with its requirement to conduct an independent quinquennial review of ALB's to take account of the broader strategic challenges and changing landscape of health and social care in Northern Ireland, including the Department's transformation agenda and other strategic developments.

The outcome of the Review is expected early in 2026-27 and any recommendations will be considered by the Board during the business year. The Social Care Council will also be consulting on a new Strategic Plan during 2026-27 and the outworking of the Landscape Review will help inform this.

9. Interjurisdictional Work

Following the EU Exit, the Social Care Council is satisfied that it is able to operate its business effectively, and continues to work collaboratively with Regulators across the UK and Ireland to ensure the maintenance of standards and the right to work in social work and social care. This includes working with the Department of Health and Republic of Ireland (ROI) counterparts to help register social workers who are required to practice in Northern Ireland and the ROI.

10. Budget Position and Authority

"The Budget Act (Northern Ireland) 2026, which received Royal Assent on 20 March 2026, together with the Northern Ireland Spring Supplementary Estimates 2025-26 which were agreed by the Assembly on 23 February 2026, provide the statutory authority for the Executive's final 2025-26 expenditure plans. The Budget Act (Northern Ireland) 2026 also provides a Vote on Account to authorise expenditure by departments and other bodies into the early months of the 2026-27 financial year. The Department is currently operating under the authority provided by the Vote on Account which provides 45% of the 2025-26 financial year's cash and resources. The cash and resource balance to complete for the remainder of 2026-27 will be authorised by the 2026-27 Main Estimates and the associated Budget Bill based on an agreed 2026-27 Budget.

In the event that this is delayed, then the powers available to the Permanent Secretary of the Department of Finance under Section 59 of the Northern Ireland Act 1998 and Section 7 of the Government Resources and Accounts Act (Northern Ireland) 2001 will be used to authorise the cash, and the use of resources during the intervening period."

The Social Care Council received an indicative allocation for 2026-27 of £3,156,070 based on the 2025-26 allocation and including a 5% savings reduction. This will present immediate and significant financial pressures for the organisation. The Social Care Council will work closely with its Sponsor Department at the Department of Health during the year to help manage these pressures which includes funding for social care reform.

11. Conclusion

The Social Care Council has a rigorous system of accountability which I can rely on as Accounting Officer to form an opinion on the probity and use of public funds, as detailed in Managing Public Money NI (MPMNI).

Further to considering the accountability framework within the Social Care Council and in conjunction with assurances given to me by the Head of Internal Audit, I am content that the Social Care Council has operated a sound system of internal governance during the period 2025-26.

Tracy Reid
Chief Executive
Northern Ireland Social Care Council

22 June 2026

Corporate Governance Report – Audit and Risk Assurance Committee Report

The Social Care Council's Audit and Risk Assurance Committee is made up of Board Members. The Committee met on the following dates during 2025-26:

- 3 April 2025 (this was an extraordinary meeting)
- 7 May 2025
- 25 June 2025
- 1 October 2025
- 18 February 2026

During the 2025-26 financial year, membership of the Audit and Risk Assurance Committee was as follows:

APRIL 2025 – MARCH 2026	ATTENDANCE AT AUDIT and RISK ASSURANCE COMMITTEE (%)
Mr Gerry Guckian (Chair until Oct 2025)	100%
*Ms Denise Hunt (Chair from Oct 2025)	100%
Ms Jacqui McGarvey	100%
**Ms Lesley Mitchell (co-opted)	100%

*New Board member appointed May 2025).
**Interim appointment from May 2023 to provide financial experience. Public Appointments Unit recruitment in 2025-26 to fill vacant Board Member posts included requirements for a member with relevant financial experience. New Board Members will take up post in May 2026. Lesley Mitchell will step down in May 2026.

Internal Audit, External Audit and representatives from the Business Services Organisation (BSO) attend the Audit and Risk Assurance Committee. The Chief Executive of the Social Care Council, also attends when required along with the Director of Registration and Corporate Services and the Director of Regulation and Standards. The Director of Registration and Corporate Services is the Executive Officer in attendance and is responsible for servicing the Audit and Risk Assurance Committee. The Government Liaison Officer (GLO) from the DoH also attends.

Membership of the Audit and Risk Assurance Committee is consistent with the Social Care Council's Standing Orders.

During the 2025-26 financial year, the Audit and Risk Assurance Committee undertook the following tasks:

- Agreed an Internal Audit Plan.
- Considered an External Audit Strategy.
- Reviewed the Social Care Council's Assurance Framework.
- Ensured the production of the Social Care Council's Final Accounts were in accordance with relevant statutory regulations.
- Considered the Social Care Council's mid-year Assurance Statement and Governance Statement.
- Reviewed a number of Internal Audit Reviews of key aspects of the Social Care Council's business during the previous business year 2024-25.
- Considered the NIAO Report to Those Charged with Governance.
- Reviewed the Social Care Council's Procurement Report, including the Contract Register and Direct Award Contract Report for 2025-26.
- Reviewed the Social Care Council's End of Year Assurance Report.

As part of its remit the Audit and Risk Assurance Committee can confirm, on reviewing the processes and related documents in relation to finance, risk, risk registers, governance and audit reports, that it is able to provide assurances to the Board and to the Accounting Officer in relation to key statutory and accountability obligations.

Furthermore, the Audit and Risk Assurance Committee can provide assurance to the Board and the Accounting Officer on key issues relating to the Governance Statement. This is based on the information provided to the Committee from Internal Audit, External Audit and from the Executive Team. The Audit and Risk Assurance Committee endorses the Assurance Framework which captures all risks, controls and gaps in controls and mitigating actions, and this is presented to the Board by the Chair of the Audit and Risk Assurance Committee.

The Audit and Risk Assurance Committee can further confirm that, on an annual basis, Internal Audit provide written confirmation to the Committee that all reviews performed are in accordance with applicable auditing standards. In doing so, the Chair and the Audit and Risk Assurance Committee present the final Accounts to the Board and the Accounting Officer for approval. The Audit and Risk Assurance Committee, facilitated by the Head of Internal Audit, completed the National Audit Office Audit Committee Self-Assessment Checklist, which is carried out on an annual basis. As a result, the Council's Audit and Risk Assurance Committee confirmed its compliance with the good practice principles.

The Audit and Risk Assurance Committee was satisfied that during 2025-26, based on the information available to it, that:

- The assurances provided to it were comprehensive and reliable and were of a sufficient standard to inform the decision-making of the Board and of the Interim Accounting Officer.
- The assurances provided to it were suitably reflected in the Social Care Council's Risk Management process as necessary.
- It was suitably informed of any material issues that were pertinent to the Governance Statement.
- Appropriate financial reporting and information was in place.

The work of Internal and External Audit was of a suitable quality and their approach to their responsibilities was appropriate.

Remuneration and Staff Report for the Year Ended 31 March 2026

Remuneration Report for the Year Ended 31 March 2026

SCOPE OF THE REPORT

The Remuneration Report summarises the Remuneration Policy of the Northern Ireland Social Care Council and particularly its application in connection with senior managers. The Report also describes how the Northern Ireland Social Care Council applies the principles of good corporate governance in relation to senior executives' remuneration in accordance with HSS(SM) 3/2001 and subsequent supplements issued by the DoH. Total remuneration includes salary, non-consolidated performance-related pay and benefits in kind. It does not include severance payments, employer pension contributions and the cash equivalent transfer value of pensions.

REMUNERATION COMMITTEE

The Northern Ireland Social Care Council's Board, as set out in its Standing Orders, has delegated certain functions to the Remuneration Committee, including assessing the performance of Senior Executives and, where permitted by the DoH, agreeing the discretionary level of performance related pay. The Remuneration Committee meetings held in 2025-26 were chaired by the Deputy Chair, Mr Gerard Guckian. The Remuneration Committee is entirely comprised of Non-Executive Directors, namely, Roslyn Doherty and Sarah Browne. The Remuneration Committee met in this form on 04 June 2025, 17 December 2025, and 14 January 2026.

REMUNERATION POLICY

The salary, pension entitlement and the value of any taxable benefits in kind paid to both Executive and Non-Executive Directors is set out within this Report. None of the Executive or Non-Executive Directors of the Social Care Council received any other bonus or performance related pay in 2025-26.

Non-Executive Directors are appointed by the DoH under the Public Appointments process and the duration of such contracts is normally for a term of four years. The overall objective of the Senior Executive remuneration arrangements is to achieve a fair, transparent, affordable and defensible pay and grading system for all Senior Executives employed across the HSC.

The main components of the arrangements are:

- pay and terms and conditions of service for the Chief Executive are determined by the DoH;
- the Chief Executive post is subject to evaluation by the DoH Evaluation Panel which is responsible for the management, maintenance and integrity of the evaluation process;
- pay ranges will be reviewed annually and the effective date for any extension of the pay ranges following review of the ranges by the Minister will be 1st April in the year of the review; and
- there will be progression through the pay range subject to fully acceptable performance.

SERVICE CONTRACTS

HSC appointments are made on the basis of the merit principle in fair and open competition and in accordance with all relevant legislation and Circular HSS (SM) 3/2001. Unless otherwise stated, the employees covered by this Report are appointed on a permanent basis, subject to satisfactory performance. Further information about the work of the Civil Service Commissioners can be found at www.nicscommissioners.org.

Remuneration Report

The date of appointment for the Northern Ireland Social Care Council's Executive and Non- Executive Directors, and the Chair are set out below:

CHAIR

NAME	POSITION	DATE OF APPOINTMENT
Gerard Guckian	Acting Chair	1 April 2024 (original appointment 1 May 2018)

NON-EXECUTIVE DIRECTORS

NAME	POSITION	DATE OF APPOINTMENT
Sarah Browne	Council Member	1 April 2018 (Term ended 31 March 2026)
Roslyn Dougherty	Council Member	1 April 2018 (Term ended 31 March 2026)
David Hayes	Council Member	1 April 2018 (Term ended 31 March 2026)
Jacqueline McGarvey	Council Member	1 April 2018 (Term ended 31 March 2026)
Bria Mongan	Council Member	19 May 2025
Carol Diffin	Council Member	19 May 2025
Denise Hunt	Council Member	19 May 2025

EXECUTIVE DIRECTORS

NAME	POSITION	DATE OF APPOINTMENT
Mrs Patricia Higgins	Chief Executive (Retired from post 31/10/2024)	From 3 September 2018 (Director of Regulation and Standards from 1 June 2002, Chief Executive from May 2022) Retired 31 October 2024, from 12 November 2024 on secondment to Department of Health. Retired again 3 November 2025.
Tracy Reid	Chief Executive	1 September 2025
Mr Declan McAllister	Chief Executive (Interim)/Director of Registration and Corporate Services	Interim Chief Executive from 14 October 2024 to 30 September 2025. Substantive Director of Registration and Corporate Services From 01 October 2025.
Ms Catherine Maguire	Co-Director of Regulation and Standards (Interim)	From 4 November 2024 0.5 WTE (substantive position Head of Workforce Development from 01 May 2023, Professional Advisor - Workforce Development from 02 January 2017.)
Mrs Helen McVicker	Co-Director of Regulation and Standards (Interim)	From 4 November 2024 0.5 WTE (substantive position Head of Fitness to Practice 01 October 2017, Professional Advisor – Workforce Development from a April 2009)
Ms Sandra Stranaghan	Director of Registration and Corporate Services (Interim)	From 17 February 2025 to 31 October 2025. (substantive position Head of Business Services from 01 December 2019).

NOTICE PERIODS

Three months' notice is to be provided by either party except in the event of summary dismissal. There is nothing to prevent either party waiving the right to notice or from accepting payment in lieu of notice.

RETIREMENT AGE

The Social Care Council does not operate a general retirement age for all staff. However, the Social Care Council reserves the right to require an individual employee or group of employees to retire at a particular age where this is objectively justified in the particular circumstances of the case.

Remuneration Report

COMPENSATION FOR PREMATURE RETIREMENT

In accordance with the DoH circular HSS (S) 11/83 and subsequent supplements, there is provision within the HSC Pension Scheme for premature retirement with immediate payment of superannuation benefits and compensation for eligible employees on the grounds of:

- Efficiency of the service.
- Redundancy.
- Organisational change.

Retirement Benefit Costs

The Social Care Council participates in the HSC Superannuation Scheme. Under this multi-employer defined benefit scheme both the Social Care Council and employees pay specified percentages of pay into the scheme and the liability to pay benefit falls to the DoH. The Social Care Council is unable to identify its share of the underlying assets and liabilities in the scheme on a consistent and reliable basis.

As per the requirements of IAS 19, full actuarial valuations by a professionally qualified actuary are required at intervals not exceeding four years. The actuary reviews the most recent actuarial valuation (published 2020) at the statement of financial position date and updates it to reflect current conditions. The 2020 valuation for the HSC Pension scheme which reflects current financial conditions (and a change in financial assumption methodology) has been used for 2025-26.

Pension benefits are administered by BSO HSC Pension Service. Two schemes are in operation, HSC Pension Scheme and the HSC Pension Scheme 2015. There are two sections to the HSC Pension Scheme (1995 and 2008) which was closed with effect from 1 April 2015 except for some members entitled to continue in this Scheme through ‘Protection’ arrangements. On 1 April 2015 a new HSC Pension Scheme was introduced. This new scheme covers all former members of the 1995/2008 Scheme not eligible to continue in that Scheme as well as new HSC employees on or after 1 April 2015. The 2015 Scheme is a Career Average Revalued Earnings (CARE) scheme.

On 1 April 2015, the government made changes to public service pension schemes which treated members differently based on their age. The public service pensions remedy, known as the ‘McCloud Remedy’ puts this right and removes the age discrimination for the remedy period, between 1 April 2015 and 31 March 2022. Stage 1 of the remedy closed the 1995/2008 Scheme on 31 March 2022, with active members becoming members of the 2015 Scheme on 1 April 2022. For Stage 2 of the remedy, eligible members had their membership during the remedy period in the 2015 Scheme moved back into the 1995/2008 Scheme on 1 October 2023. This is called ‘rollback’. All benefits accrued from 1 April 2022 onwards are calculated under the 2015 CARE Scheme. HSCPS will contact retirees with personalised information to assist in making their retrospective choice regarding the remedy period. Disclosed CETVs are calculated using both rolled back and remediable service, with the higher financial figures given.

In accordance with the Scheme regulations, the tiered contribution thresholds for 2025-26 were amended to reflect the AFC uplift in pay. The revised thresholds are in displayed Table 1 below.

Remuneration Report

Table 1: 1 April 2025 – 31 March 2026

Annual pensionable earnings **(full-time equivalent basis, based on actual salary)**	**Contribution Rate (before tax relief and based on actual annual pensionable pay)**
Up to £13,259	5.2%
£13,260 to £27,288	6.7%
£27,289 to £33,247	8.5%
£33,248 to £49,913	10.0%
£49,914 to £63,994	10.9%
£63,995 and Above	12.7%

The employer contribution rate remained at 23.2% for 2025-26.

REPORTING OF EARLY RETIREMENT AND OTHER COMPENSATION SCHEME - EXIT PACKAGES - AUDITED

There were no exit packages during 2024-25 or 2025-26.

Remuneration Report

Senior Employees' Remuneration (Audited)

The salary, pension entitlements and the value of any taxable benefits in kind of the most senior members of the Northern Ireland Social Care Council were as follows:

Single total figure of remuneration								
Name	**Salary £000s**		**Benefits in kind (rounded to nearest £100)**		**Pension Benefits (rounded to nearest £1,000)**		**Total £000s**	
Non-Executive Members	**2025-26**	**2024-25**	**2025-26**	**2024-25**	**2025-26**	**2024-25**	**2025-26**	**2024-25**
Paul Martin	-	20-25	-	-	-	-	-	20-25
Gerard Guckian*	10-15	20-25	-	-	-	-	10-15	20-25
Anne O'Reilly**	-	0-5	-	-	-	-	-	0-5
Jacqueline McGarvey	5-10	5-10	-	-	-	-	5-10	5-10
David Hayes	5-10	5-10	-	-	-	-	5-10	5-10
Sarah Browne	5-10	5-10	-	-	-	-	5-10	5-10
Roslyn Dougherty	5-10	5-10	-	-	-	-	5-10	5-10
Bria Mongan***	5-10	-	-	-	-	-	5-10	-
Denise Hunt***	5-10	-	-	-	-	-	5-10	-
Carol Diffin***	5-10	-	-	-	-	-	5-10	-

*From 1 April 2024 Gerard Guckian has been Acting Co-Chair alongside Paul Martin. During 2025-26 Gerard Guckian took up the Chair role following the end of Paul Martin's tenure.

**Anne O'Reilly's last day of service was 30 September 2023. Anne O'Reilly received a back-dated pay award re 2023-24 during 2024-25 but was not working as part of the Social Care Council's Board function.

*** Bria Mongan, Denise Hunt and Carol Diffin were appointed to Social Care Council Board on 19 May 2025.

Remuneration Report

Senior Executive Pay Structure Reform

With effect from 1 April 2023, the Department of Health introduced revised Senior Executive pay arrangements via a Senior Executive Pay Structure Reform which impacted all Senior Executives in post at 1 April 2023, as set out within DoH circular HSC (SE) 1/2025. An incremental scale has been introduced, initially set out as an 8-point scale, annually reducing by 1 point to achieve a 5-point scale by year 4 of the reform (1 April 2026). All incremental progression on this scale during transition to the revised 5-point scale is automatic however robust performance management processes continue to operate, overseen by Social Care Council's Remuneration Committee applying the standards as set out within the Performance Management Framework. The 2023-24 and 2024-25 Senior Executive Pay Award circular was received from the DoH on 13 May 2025 and the 2025-26 Senior Executive Pay Award circular was received from the DoH on 29 January 2026; all payments were made during 2025-26.

Public Service Pensions Remedy

With effect from 1 April 2022, all active members of the HSC Pension Scheme transitioned to the new 2015 HSC Pension Scheme. For those members who were previously in the legacy schemes, the 1995 and 2008 sections, the benefits they had accrued on those schemes will remain with them and are fully protected until they retire. The McCloud judgement found that the transitional protection offered to members when their schemes were reformed was discriminatory on grounds of age. In light of this decision, the government agreed to provide remedy to eligible members across the main public sector schemes. Those affected by the McCloud remedy and retiring after 1 October 2023 will be asked to make a choice about some of their pension benefits as part of their retirement process. For those members affected by the McCloud judgement, the highest value under the remedy options has been provided in accrued pension benefits.

Remuneration Report

Senior Employees' Remuneration (Audited)

Name	Salary - £000s		Benefits in kind (rounded to nearest £100)		Pension Benefits (rounded to nearest £1,000)		Total - £000s	
Executive Members	**2025-26**	**2024-25***	**2025-26**	**2024-25***	**2025-26**	**2024-25***	**2025-26**	**2024-25***
Tracy Reid	65-70 FYE 115-120	-	1,000	-	29	-	95-100	-
Patricia Higgins***	-	70-75 FYE 105-110	-	-	15	(55)	10-15	10-15
Declan McAllister***	90-95 FYE 110-115	85-90 FYE 90-95	-	-	57	48	150-155	135-140
Marian O'Rourke***	-	60-65 FYE 85-90	-	-		(217)	-	(150-155)
Catherine Maguire	35-40 FYE 75-80	15-20 FYE 70-75	-	-	18	14	55-60	20-25
Helen McVicker***	35-40 FYE 75-80	15-20 FYE 70-75	-	-	23	17	60-65	30-35
Sandra Stranaghan	40-45 FYE 75-80	5-10 FYE 70-75	-	-	16	-	55-60	5-10

FYE – full year equivalent

*2025-26 salaries are reflective of AFC pay award and Chief Executive pay settlement payments according to 2025-26 pay circulars. Salaries for 2024-25 are reflective of AFC pay awards paid for 2023-24 and 2024-25 as well as Chief Executives pay settlement accrued for 2023-24 and 2024-25.

***Members affected by the Public Service Pensions Remedy, McCloud judgement

Tracy Reid took up the Chief Executive role on 1 September 2025. Having transferred from Belfast HSC Trust, Tracy Reid's pension benefit includes pension earned across her Chief Executive role in Social Care Council and her previous Director role at Belfast HSC Trust. Full year equivalent is listed for Chief Executive role.

Remuneration Report

Patricia Higgins 2024-25 includes Chief Executive pay up retirement date of 31 October 2024. Patricia Higgins was on secondment with the Department of Health (DoH) from 12 November 2024 recharged to DoH, these amounts have not been included in above salary. £nil backpay has been paid in 2024-25 with an additional £17k (£22k in total including accruals prior year) accrued for back pay due for 2023-24 and 2024-25. Pension benefit is the total benefit 1 April 2024 - 31 March 2025 including accrued in secondment role with DoH. During 2025-26 Patricia Higgins continued on secondment to Department of Health (DoH) and retired again 3 November 2025, these amounts have not been included in the above salary. £18k back pay has been paid 2025-26 relating to the 2023-24 and 2024-25 Chief Executive pay settlement. Pension benefit is the total benefit 1 April 2025 – 3 November 2025.

Declan McAllister 2023-24 pay included £6k accrued into 2024-25 for 2023-24 AFC pay award paid in 2024-25 in relation to Director of Registration and Corporate Services role retained until 13 October 2024. On 14 October 2024 Declan McAllister became Chief Executive (Interim), £40k salary in Chief Executive role is included in the above amounts and £nil backpay has been paid in 2024-25 in relation to the Chief Executive role with £1k accrued for back pay due for 2023-24 and 2024-25. During 2025-26 Declan McAllister remained in the Chief Executive (Interim) role until 30 September 2025 (£53k salary for Chief Executive role). During 2025-26, Declan McAllister received payments in relation to Chief Executive pay settlement in relation to his time in role and AFC 2025-26 pay award in relation to his substantive director role. As both roles retained in year fall into Executive pay, figures above include total pay and pension benefit across the year for both roles. Full year equivalent is listed for Chief Executive role.

Marian O'Rourke retired from her role as Director of Regulation and Standards on 31 December 2024. Whilst Marian O'Rourke is a member of the HSC pensions scheme affected by the Public Service Pensions Remedy, McCloud judgement, the member had already made CARE remedy decision and therefore only these figures have been provided in accrued pension benefit.

Catherine Maguire became Co Director of Regulation and Standards (Interim) on 4 November 2024 alongside Helen McVicker at 0.5 working time equivalent (WTE) whilst retaining her substantive role 0.5 WTE. Above salary is in relation to director role. 2024-25 and 2025-26 pension benefit is the total benefit from both substantive and interim roles. Full year equivalent is listed for director role.

Helen McVicker became Co Director of Regulation and Standards (Interim) on 4 November 2024 alongside Catherine Maguire at 0.5 WTE whilst retaining her substantive role 0.5 WTE. Above salary is in relation to director role. 2024-25 and 2025-26 pension benefit is the total benefit from both substantive and interim roles. Full year equivalent is listed for director role.

Sandra Stranaghan became Director of Registration and Corporate Services (Interim) on 17 February 2025 and remained in post until 31 October 2025. Above salary is in relation to director role and full year equivalent is listed for director role. Sandra Stranaghan re-joined the pension scheme from 1 April 2025. Pension benefit for 2025-26 is the total benefit 1 April 2025 - 31 March 2026 including both substantive and interim roles.

BONUSES

Bonuses are based on performance levels attained and are made as part of the appraisal process. Bonuses relate to the performance in the year in which they become payable to the individual. No bonuses were paid in 2025-26 or in 2024-25.

Remuneration Report

Pensions of Senior Management (Audited)

Name	Accrued pension at pension age as at 31/3/26 and related lump sum £000	Real increase in pension and related lump sum at pension age £000	CETV at 31/03/25 £000	CETV at 31/03/26 £000	Real increase in CETV £000
*Tracy Reid	20-25 Plus lump sum of 2.5-5	0-2.5 Plus lump sum of 0-5	320	351	31
**Patricia Higgins	35-40 Plus lump sum 0-5	0-2.5 Plus lump sum of 0-5	750	748	(2)
Declan McAllister	35-40 Plus lump sum 90-95	2.5-5 Plus lump sum of 0-5	823	903	80
***Sandra Stranaghan	2.5-5 Plus lump sum 0-5	0-2.5 Plus lump sum of 0-5	31	50	19
Catherine Maguire	10-15 Plus lump sum of 0-5	0-2.5 Plus lump sum of 0-5	174	200	26
Helen McVicker	20-25 Plus lump sum of 0-5	0-2.5 Plus lump sum of 0-5	349	381	32

Pension figures included above are based on actual contributions in 2025-26 including backpay pay award for 2025-26 paid in 2025-26 in respect of the AFC salaries. Also included is 2025-26 chief executives pay settlement for 2024-25 and 2025-26. For those members affected by the McCloud judgement, the highest value under the remedy options has been provided in accrued pension benefits.

* Tracy Reid took up the role of Chief Executive 1 September 2025.
** Patricia Higgins retired 31 October 2024 and returned on secondment to DoH from 12 November 2024. Patricia retired again 3 November 2025.
***Sandra Stranaghan held the Director of Registration and Corporate Services (Interim) role up to 31 October 2025 and re-joined the pension scheme 1 April 2025.
As Non-Executive members do not receive pensionable remuneration, there will be no entries in respect of pensions for Non-Executive members.

Remuneration Report

Cash Equivalent Transfer Values

A Cash Equivalent Transfer Value (CETV) is the actuarially assessed capital value of the pension scheme benefits accrued by a member at a particular point in time. The benefits valued are the member's accrued benefits and any contingent spouse's pension payable from the scheme. A CETV is a payment made by a pension scheme, or arrangement to secure pension benefits in another pension scheme or arrangement when the member leaves a scheme and chooses to transfer the benefits accrued in their former scheme. The pension figures shown relate to the benefits that the individual has accrued as a consequence of their total membership of the pension scheme, not just their service in a senior capacity to which the disclosure applies. The CETV figures and the other pension details, include the value of any pension benefits in another scheme or arrangement which the individual has transferred to the HPSS pension scheme. They also include any additional pension benefit accrued to the member as a result of their purchasing additional years of pension service in the scheme at their own cost.

CETVs are calculated within the guidelines prescribed by the institute and Faculty of Actuaries. CETV figures are calculated using the guidance on discount rates for calculating unfunded public service pension contribution rates that was extant at 31 March 2026. HM Treasury published updated guidance on 27 April 2023; this guidance was used in the calculation of 2025-26 CETV figures.

Real Increase in CETV - This reflects the increase in CETV effectively funded by the employer. It takes account of the increase in accrued pension due to inflation, contributions paid by the employee (Including the value of any benefits transferred from another pension scheme or arrangement) and uses common market valuation factors for the start and end of the period.

Fair Pay Statement (Audited)

Northern Ireland Social Care Council is required to disclose the relationship between the remuneration of the highest paid Director and the lower quartile, median and upper quartile remuneration of the organisation's workforce. Following application of the guidance contained in DoH Circular (F) 23/2013, the following can be reported:

*Disclosure	2025-26	2024-25
Band of the Highest Paid Director's Total Remuneration	115-120	105-110
25th Percentile Total Remuneration	27,485	26,244
Median Total Remuneration	37,796	36,483
75th Percentile Total Remuneration	46,990	46,148
Ratio (25%/Median/75%)	4.33/3.15/2.53	4.16/3.00/2.37

The banded remuneration of the highest-paid director in the Social Care Council in the financial year 2025-26 was £115-120k (2024-25; £105-110k) which was:

- 4.33 times (2024-25; 4.16) the 25th percentile remuneration of the workforce, which was £27,485 (2024-25; £26,244).
- 3.15 times (2024-25; 3.00) the median remuneration of the workforce, which was £37,796 (2024-25; £36,483).
- 2.53 times (2024-25; 2.37) the 75th percentile remuneration of the workforce, which was £46,990 (2024-25; £46,148).

Remuneration Report

In 2025-26, 0 (2024-25; 0) employees received remuneration in excess of the highest-paid director. Remuneration ranged from £26,598 to £119,031 (2024-25: £24,071 to £109,268). Total remuneration includes salary, non-consolidated performance-related pay, and benefits-in kind.

The percentage change in remuneration in respect of the Social Care Council is shown in the following table:

Disclosure	2025-26 Vs 2024-25
Average employee salary and allowances	1.97%
Highest paid director's salary and allowances	8.93%

The average salary has increased due to AFC pay awards for 2025-26 and the highest paid director's salary has also increased due to Senior Executive pay awards for 2025-26. No bonus payments were made in 2024-25 or 2025-26.

Staff Report for the Year Ended 31 March 2026

Staff recruitment, employment, terms and conditions are managed through a service-level agreement with the Business Services Organisation. Appointments are made on the HSC 'Agenda for Change' pay bands. Changes to staff policies, terms or conditions are consulted on and developed in collaboration with staff-side organisations and unions (Joint Negotiating Forum). The Social Care Council has an Equal Opportunity Policy in place that covers all aspects of equality within employment, including the obligations of the organisation under disability discrimination legislation and protecting the rights and interests of Section 75 groups. Details of staff engagement and equality initiatives are included on page 51 of this report.

Training and Development - The Social Care Council values its staff and is committed to enhancing their skills and improving their contribution to the organisation's goals. Individuals are encouraged to complete a Personal Development Plan (PDP) as part of the appraisal process. Overall, needs are very much focused on service delivery with outcomes that relate to performance against team and organisational objectives.

The cumulative sickness and absenteeism rate for the Social Care Council for 2025-26 was 2.06% (2.33% after full-year return).which was below the Northern Ireland Social Care Council's corporate target to maintain absences at a maximum of 3.32%.

Staff Report

Staff Composition (Audited)

At 31 March 2026, 70 people worked for the Social Care Council. 65 people were employed on permanent contracts, 8 of whom worked part-time. 5 people are employed on temporary/fixed term contracts and 0 were engaged temporarily as agency workers. 14% of contracted staff work part-time or a form of flexible working (this was 16.2% in 2024-25). From January 2023, staff could opt into the Social Care Council's Agile Working Policy – 100% of staff opted to do so.

89% of job roles in the Social Care Council are categorised as administrative and 11% as social work/services posts. Job descriptions and specifications are reviewed routinely as part of recruitment practice to ensure there are no requirements within them that may act as a barrier to any stakeholder group.

Staff composition remained relatively stable with turnover rates for permanent staff at 4.59% in 2025-26 (3.15% in 2024-25). The composition of the workforce is set out below:

Staff composition by pay band

Pay Band	*% of Workforce*	*Number of Staff*
Band 2	1%	1
Band 3	24%	17
Band's 4/6	47%	33
Band's 7/8	22%	15
SLT	6%	4

Staff composition by function

Function	*% of Workforce*
Registration	26%
Workforce Development (includes PiP)	24%
Fitness to Practise	17%
Business Support	11%
Committee	6%
Database	6%
Communications	6%
SLT	4%

All staff in the Social Care Council are supported to understand and apply the Council's values of respect, integrity, partnership and excellence. These underpin all aspects of our work and support our ambition to develop a diverse and inclusive workplace. Regional policies are in place to support a positive work environment e.g. flexible working, adjustments for individual circumstances, equality of opportunity. These ensure that support is in place for staff who need adjustments to enable them to fulfil their job role and also that all staff can recognise and address any discriminatory practice.

To assist the Council in developing and supporting diversity and inclusion in the workplace, staff are asked to indicate on their HR record their gender, sexual orientation, ethnicity, disability/health conditions, marital status, dependents, community background, and political opinion. It is not compulsory for staff to provide these details and currently around 60% of staff have opted not to disclose their status in these areas. Whilst the Council recognises that staff are entitled to keep this information private, managers are working with staff to raise awareness of the benefits of having stronger data on the workforce profile to better support and inform positive equality and diversity practice.

Staff Report

Staff composition by gender (contracted Staff)		
Pay Band (Contracted Staff)	**Male Number**	**Female Number**
Bands 2/3	4	14
Band's 4/6	11	22
Band's 7/8	4	11
SLT	1	3
Overall	**20**	**55**

The profile for the workforce has remained relatively unchanged in the last three years in terms of key demographics.

The age profile of the workforce has lowered slightly following a number of planned retirements in-year. The number of staff aged 60 years or over reduced from 19% in 2024-25 to 17% for 2025-26.

As part of ongoing work to support business continuity and succession planning, job roles & specifications are being reviewed to ensure there are no barriers to people from underrepresented groups seeking to join the workforce or for existing staff members to achieve internal promotion.

Community Background			**Marital Status**	
Perceived Protestant	10.31%		Divorced	4.12%
Protestant	34.02%		Married/Civil Partnership	32.99%
Perceived Roman Catholic	2.06%		Other	1.03%
Roman Catholic	39.18%		Separated	0.00%
Neither	2.05%		Single	10.31%
Perceived Neither	0.00%		Unknown	50.52%
Not assigned	12.37%		Widow/Widower	0.00%
Ethnicity			**Dependents**	
Not assigned	60.82%		Yes	19.59%
White	38.14%		Not assigned	62.89%
Other	1.03%		No	17.53%
Black African	0.00%			
Indian	0.00%			
Chinese	0.00%			
Sexual Orientation			**Disability**	
Do not wish to answer	1.03%		No	36.08%
Not assigned	62.89%		Not assigned	53.61%
Opposite sex	34.02%		Yes	10.31%
Both sexes	0.00%			
Same sex	2.06%			

Staff Report - Staff Numbers and Related Costs (Audited)

Staff Costs

Staff costs comprise:	2026 Permanently employed staff	2026 Others	2026 Total	2025 Total
	£	£	£	£
Wages and salaries	2,869,238	51,320	2,920,558	2,743,821
Social security costs	381,096	-	381,096	289,362
Other pension costs	596,530	-	596,530	525,281
Sub-Total	3,846,864	51,320	3,898,184	3,558,464
Capitalised staff costs	-	-	-	-
Total staff costs reported in Statement of Comprehensive Expenditure			3,898,184	3,558,464
Less recoveries in respect of outward secondments			50,282	28,353
Total net costs			**3,847,902**	**3,530,111**

The Social Care Council participates in the HSC Pension Scheme. Under this multi-employer defined benefit scheme, both the Northern Ireland Social Care Council and employees pay specified percentages of pay into the scheme and the liability to pay benefit falls to the DoH. The Social Care Council is unable to identify its share of the underlying assets and liabilities in the scheme on a consistent and reliable basis.

As per the requirements of IAS 19, full actuarial valuations by a professionally qualified actuary are required at intervals not exceeding four years. The actuary reviews the most recent actuarial valuation (published 2020) at the statement of financial position date and updates it to reflect current conditions. The scheme valuation data provided for the 2020 actuarial valuation has been used for the 2025-26 accounts. Demographic assumptions are updated to reflect an analysis of experience that has been carried out as part of the 2020 valuation.

Staff Report - Average number of persons employed (Audited)

The average number of Whole-time equivalent persons employed during the year was as follows:

	2026			2025
	Permanently employed staff	**Others**	**Total**	**Total**
	No.	**No.**	**No.**	**No.**
Administrative and clerical	52*	1	53	52
Social services	14	2	16	18
Total average number of persons employed	66	3	69	**70**
Less average staff number relating to capitalised staff costs				-
Less average staff number in respect of outward secondments**				-
Total net average number of persons employed			**69**	**70**

The staff numbers disclosed as ‘Others’ in 2025-26 relate to temporary members of staff.

*Staff numbers exclude 8 Non-executive members.

**Patricia Higgins was on secondment to Department of Health from 1 April 2025 to 3 November 2025 working part time hours during this period, therefore nil average staff number in respect of outward secondments. Patricia Higgins is included in permanently employed average staff number.

Staff Report - Reporting of early retirement and other compensation scheme – exit packages (Audited)

Exit package cost band	Number of compulsory redundancies		Number of other departures agreed		Total number of packages by cost band	
	2026	2025	2026	2025	2026	2025
<£10,000	-	-	-	-	-	-
£10,000-£25,000	-	-	-	-	-	-
£25,000-£50,000	-	-	-	-	-	-
£50,000-£100,000	-	-	-	-	-	-
£100,000-£150,000	-	-	-	-	-	-
£150,000-£200,000	-	-	-	-	-	-
>£200,000	-	-	-	-	-	-
Total number of exit packages by type	-	-	-	-	-	-
	£	**£**	**£**	**£**	**£**	**£**
Total resource cost	-	-	-	-	-	-

Redundancy and other departure costs are paid in accordance with the provisions of the HSC Pension Scheme Regulations and the Compensation for Premature Retirement Regulations, statutory provisions made under the Superannuation (Northern Ireland) Order 1972.

The table above shows the total exit cost of exit packages agreed and accounted for in 2025-26 and 2024-25. £nil exit costs were paid in 2025-26, the year of departure (2024-25 £nil). Where the Northern Ireland Social Care Council has agreed early retirements, the additional costs are met by the Northern Ireland Social Care Council and not by the HSC pension scheme. Ill health retirement costs are met by the pension scheme and are not included in the table.

Consultancy

The Social Care Council has not engaged any consultants during the year 2025-26 (2024-25 nil).

Off Payroll engagements

There were no off-payroll engagements during the year 2025-26 (2024-25 nil).

Retirements due to Ill Health

During 2025-26 there were no early retirements from the Council agreed on the grounds of ill health (2024-25 nil).

The Social Care Council recognises that all payment disclosures should be reported in line with best practice set out in FReM 6.5.3-4, where there is a presumption that information about named individuals will be given in all circumstances, and all disclosures in the remuneration report will be consistent with identifiable information of those individuals in the financial statements. In these circumstances, the individual would be advised in advance of the intention to disclose information about them, with an invitation for sight of the intended information to be published and notification that the individual can challenge this decision under Article 21 of the General Data Protection Regulation (GDPR).

Tracy Reid
Chief Executive

Date: 22 June 2026

Accountability and Audit Report

Accountability Report – Assembly Disclosure Notes

i) Losses and Special Payments (Audited)
The Social Care Council had no losses or special payments, including special severance payments during 2025-26 or 2024-25.

ii) Fees and Charges (Audited)
There were no other fees and charges during 2025-26 or 2024-25.

iii) Remote Contingent Liabilities (Audited)
In addition to contingent liabilities reported within the meaning of IAS 37, the NISCC also reports liabilities for which the likelihood of a transfer of economic benefit in settlement is too remote to meet the definition of contingent liability. The NISCC had no remote contingent liabilities during 2025-26 or 2024-25.

iv) Charitable Donations (Audited)
The Northern Ireland Social Care Council did not make any charitable donations during the year and there were no personal data related incidents requiring disclosure during 2025-26 or 2024-25.

Regularity
In 2025-26 mechanisms were maintained in order to assure the Department of Health and the public of the effective performance of the Council in delivering its functions. The Accounting Officer provides assurance that all income and expenditure is in line with the principles of propriety and regularity as set out in Managing Public Money published by Department of Finance and that expenditure plans are in line with capital and revenue funding rules and regulations. Department of Health guidance on expenditure is implemented as appropriate and forms part of the Standing Financial Instructions of the Social Care Council.

The Accounting Officer confirms that the annual report and accounts as a whole is fair, balanced and understandable and that he takes personal responsibility for the annual report and accounts and the judgements required for determining that it is fair, balanced and understandable.

Tracy Reid
Chief Executive

Date: 22 June 2026

NORTHERN IRELAND SOCIAL CARE COUNCIL

THE CERTIFICATE AND REPORT OF THE COMPTROLLER AND AUDITOR GENERAL TO THE NORTHERN IRELAND ASSEMBLY

Opinion on financial statements

I certify that I have audited the financial statements of the Northern Ireland Social Care Council (NISCC) for the year ended 31 March 2026 under the Health and Personal Social Services Act (Northern Ireland) 2001. The financial statements comprise: the Statements of Comprehensive Net Expenditure, Financial Position, Cash Flows, Changes in Taxpayers' Equity; and the related notes including significant accounting policies.

The financial reporting framework that has been applied in their preparation is applicable law and UK adopted international accounting standards as interpreted and adapted by the Government Financial Reporting Manual.
I have also audited the information in the Accountability Report that is described in that report as having been audited.

In my opinion the financial statements:

- give a true and fair view of the state of NISCC's affairs as at 31 March 2026 and of NISCC's net expenditure for the year then ended; and
- have been properly prepared in accordance with the Health and Personal Social Services Act (Northern Ireland) 2001 and Department of Health directions issued thereunder.

Opinion on regularity

In my opinion, in all material respects the expenditure and income recorded in the financial statements have been applied to the purposes intended by the Assembly and the financial transactions recorded in the financial statements conform to the authorities which govern them.

Basis for opinions

I conducted my audit in accordance with International Standards on Auditing (ISAs) (UK), applicable law and Practice Note 10 'Audit of Financial Statements and Regularity of Public Sector Bodies in the United Kingdom'. My responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of this certificate.

My staff and I are independent of NISCC in accordance with the ethical requirements that are relevant to my audit of the financial statements in the UK, including the Financial Reporting Council's Ethical Standard, and have fulfilled our other ethical responsibilities in accordance with these requirements. I believe that the audit evidence obtained is sufficient and appropriate to provide a basis for my opinions.

Conclusions relating to going concern

In auditing the financial statements, I have concluded that NISCC's use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work I have performed, I have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on NISCC's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

The going concern basis of accounting for NISCC is adopted in consideration of the requirements set out in the Government Financial Reporting Manual, which require entities to adopt the going concern basis of accounting in the preparation of the financial statements where it is anticipated that the services which they provide will continue into the future.

My responsibilities and the responsibilities of the Board and the Accounting Officer with respect to going concern are described in the relevant sections of this certificate.

Other Information

The other information comprises the information included in the annual report other than the financial statements, the parts of the Accountability Report described in that report as having been audited, and my audit certificate and report. The Board and the Accounting Officer are responsible for the other information included in the annual report. My opinion on the financial statements does not cover the other information and except to the extent otherwise explicitly stated in my report, I do not express any form of assurance conclusion thereon.

My responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements, or my knowledge obtained in the audit, or otherwise appears to be materially misstated. If I identify such material inconsistencies or apparent material misstatements, I am required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work I have performed, I conclude that there is a material misstatement of this other information, I am required to report that fact.

I have nothing to report in this regard.

Opinion on other matters

In my opinion the part of the Remuneration and Staff Report to be audited has been properly prepared in accordance with Department of Finance directions issued under Health and Personal Social Services Act (Northern Ireland) 2001.

In my opinion, based on the work undertaken in the course of the audit:

- the parts of the Accountability Report to be audited have been properly prepared in accordance with Department of Health directions made under the Health and Personal Social Services Act (Northern Ireland) 2001; and
- the information given in the Performance Report and Accountability Report for the financial year for which the financial statements are prepared is consistent with the financial statements.

Matters on which I report by exception

In the light of the knowledge and understanding of NISCC and its environment obtained in the course of the audit, I have not identified material misstatements in the Performance Report and Accountability Report. I have nothing to report in respect of the following matters which I report to you if, in my opinion:

- adequate accounting records have not been kept; or
- the financial statements and the parts of the Accountability Report to be audited are not in agreement with the accounting records; or
- certain disclosures of remuneration specified by the Government Financial Reporting Manual are not made or parts of the Remuneration and Staff Report to be audited is not in agreement with the accounting records and returns; or
- I have not received all of the information and explanations I require for my audit; or the Governance Statement does not reflect compliance with the Department of Finance's guidance.

As explained more fully in the Statement of Accounting Officer Responsibilities, the Board and the Accounting Officer are responsible for

- maintaining proper accounting records;
- the preparation of the financial statements in accordance with the applicable financial reporting framework and for being satisfied that they give a true and fair view;
- ensuring such internal controls are in place as deemed necessary to enable the preparation of financial statements to be free from material misstatement, whether due to fraud of error;
- ensuring the annual report, which includes the Remuneration and Staff Report, is prepared in accordance with the applicable financial reporting framework; and
- assessing NISCC's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Accounting Officer anticipates that the services provided by NISCC will not continue to be provided in the future.

Auditor's responsibilities for the audit of the financial statements

My responsibility is to audit, certify and report on the financial statements in accordance with the Health and Personal Social Services Act (Northern Ireland) 2001.

My objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error and to issue a certificate that includes my opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

I design procedures in line with my responsibilities, outlined above, to detect material misstatements in respect of non-compliance with laws and regulation, including fraud.

My procedures included:

- obtaining an understanding of the legal and regulatory framework applicable to NISCC through discussion with management and application of extensive public sector accountability knowledge. The key laws and regulations I considered included: The Health and Personal Social Services Act (Northern Ireland) 2001 and the Department of Health directions issued thereunder;
- making enquires of management and those charged with governance on NISCC's compliance with laws and regulations;
- making enquiries of internal audit, management and those charged with governance as to susceptibility to irregularity and fraud, their assessment of the risk of material misstatement due to fraud and irregularity, and their knowledge of actual, suspected and alleged fraud and irregularity;
- completing risk assessment procedures to assess the susceptibility of NISCC's financial statements to material misstatement, including how fraud might occur. This included, but was not limited to, an engagement director led engagement team discussion on fraud to identify particular areas, transaction streams and business practices that may be susceptible to material misstatement due to fraud. As part of this discussion, I identified potential for fraud in the posting of unusual journals;
- engagement director oversight to ensure the engagement team collectively had the appropriate competence, capabilities and skills to identify or recognise non-compliance with the applicable legal and regulatory framework throughout the audit;

- documenting and evaluating the design and implementation of internal controls in place to mitigate risk of material misstatement due to fraud and non-compliance with laws and regulations;
- designing audit procedures to address specific laws and regulations which the engagement team considered to have a direct material effect on the financial statements in terms of misstatement and irregularity, including fraud. These audit procedures included, but were not limited to, reading board and committee minutes, and agreeing financial statement disclosures to underlying supporting documentation and approvals as appropriate;
- addressing the risk of fraud as a result of management override of controls by:
  - performing analytical procedures to identify unusual or unexpected relationships or movements;
  - testing journal entries to identify potential anomalies, and inappropriate or unauthorised adjustments;
  - assessing whether judgements and other assumptions made in determining accounting estimates were indicative of potential bias; and
  - investigating significant or unusual transactions made outside of the normal course of business.

A further description of my responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website www.frc.org.uk/auditorsresponsibilities. This description forms part of my certificate.

In addition, I am required to obtain evidence sufficient to give reasonable assurance that the expenditure and income recorded in the financial statements have been applied to the purposes intended by the Assembly and the financial transactions recorded in the financial statements conform to the authorities which govern them.

Report
I have no observations to make on these financial statements.

Dorinnia Carville
Comptroller and Auditor General
Northern Ireland Audit Office
106 University Street
BELFAST
BT7 1EU

02 July 2026

Section 3: Annual ACCOUNTS FOR THE YEAR ENDED 31 March 2026

NORTHERN IRELAND SOCIAL CARE COUNCIL

ACCOUNTS FOR THE YEAR ENDED 31 March 2026

FOREWORD

The accounts for the year ended 31 March 2026 have been prepared in a form determined by the Department of Health based on guidance from the Department of Finance Financial Reporting manual (FReM) and in accordance with the requirements of the Health and Social Care (Reform) Act (Northern Ireland) 2009.

CERTIFICATE OF THE CHAIRMAN AND CHIEF EXECUTIVE

I certify that the annual accounts set out in the financial statements and notes to the accounts (pages 120 -161) which I am required to prepare on behalf of the Northern Ireland Social Care Council have been compiled from and are in accordance with the accounts and financial records maintained by the Northern Ireland Social Care Council and with the accounting standards and policies for HSC bodies approved by the DoH.

Tracy Reid
Chief Executive

Date: 22 June 2026

I certify that the annual accounts set out in the financial statements and notes to the accounts (pages 120 -161) as prepared in accordance with the above requirements have been submitted to and duly approved by the Board.

Gerard Guckian
Acting Chairman

Date: 22 June 2026

Tracy Reid
Chief Executive

Date: 22 June 2026

STATEMENT of COMPREHENSIVE NET EXPENDITURE for the year ended 31 March 2026

This account summarises the expenditure and income generated and consumed on an accruals basis. It also includes other comprehensive income and expenditure, which includes changes to the values of non-current assets and other financial instruments that cannot yet be recognised as income or expenditure.

	NOTE	2026	2025
		£	£
Revenue from contracts with customers	4.1	1,897,093	1,745,781
Other Income (excluding interest)	4.2	50,282	28,353
Total operating income		**1,947,375**	**1,774,134**
Expenditure			
Staff costs	3	(3,898,184)	(3,558,464)
Purchase of goods and services	3	(33,550)	(22,522)
Depreciation, amortisation and impairment charges	3	(196,201)	(222,965)
Provisions credit/(expense)	3/15	(3,734)	7,016
Other expenditure	3	(2,822,786)	(2,668,938)
Total operating expenditure		**(6,954,455)**	**(6,465,873)**
Net Expenditure		**(5,007,080)**	**(4,691,739)**
Finance income	4.2	-	-
Finance expense	3	-	-
Net expenditure for the year		**(5,007,080)**	**(4,691,739)**
Adjustment to net expenditure for non-cash items		234,435	249,349
Net expenditure funded from RRL		(4,772,645)	(4,442,390)
Revenue resource limit (RRL)	23.1	4,789,210	4,452,548
Add back charitable trust fund net expenditure		-	-
Surplus/(Deficit) against RRL		**16,565**	**10,158**

OTHER COMPREHENSIVE EXPENDITURE

	NOTE	2026 £	2025 £
Items that will not be reclassified to net operating costs:			
Net gain/(loss) on revaluation of property, plant and equipment	5.1/8/5.2/9	-	-
Net gain/(loss) on revaluation of intangibles	6.1/8/6.2/9	231	500
Net gain/(loss) on revaluation of financial instruments	7/9	-	-
Items that may be reclassified to net operating costs:			
Net gain/(loss) on revaluation of investments		-	-
TOTAL COMPREHENSIVE EXPENDITURE for the year ended 31 March 2026		**(5,006,849)**	**(4,691,239)**

The notes on pages 125-161 form part of these accounts.

STATEMENT of FINANCIAL POSITION as at 31 March 2026

This statement presents the financial position of the Social Care Council. It comprises three main components: assets owned or controlled; liabilities owed to other bodies; and equity, the remaining value of the entity.

	NOTE	2026 £	2026 £	2025 £	2025 £
Non-current Assets					
Property, plant and equipment	5.1/5.2	76,566		77,861	
Right-of-use assets	17.1	162,576		250,748	
Intangible assets	6.1/6.2	236,589		306,704	
Financial assets	7	-		-	
Trade and other receivables	13	-		-	
Other current assets	13	-		-	
Total Non-current Assets			475,731		635,313
Current Assets					
Assets classified as held for sale	10	-		-	
Inventories	11	-		-	
Trade and other receivables	13	29,787		53,110	
Other current assets	13	33,288		38,599	
Intangible current assets	13	-		-	
Financial assets	7	-		-	
Cash and cash equivalents	12	61,995		100,266	
Total Current Assets			125,070		191,975
Total Assets			**600,801**		**827,288**
Current Liabilities					
Trade and other payables	14	(1,549,158)		(1,608,204)	
Other liabilities	14	-		-	
Intangible current liabilities	14	-		-	
Financial liabilities	7	-		-	
Provisions	15	(35,194)		(34,194)	
Total Current Liabilities			(1,584,352)		(1,642,398)
Total assets less current liabilities			**(983,551)**		**(815,110))**
Non-current Liabilities					
Provisions	15	(48,717)		(45,983)	
Other payables > 1 yr	14	-		-	
Financial liabilities	7	-		-	
Total Non-current Liabilities		-	(48,717)		(45,983)
Total assets less total liabilities			**(1,032,268)**		**(861,093)**
Taxpayers' Equity and other reserves					
Revaluation reserve		38,348		38,117	
SoCNE reserve		(1,070,616)		(899,210)	
Total equity			**(1,032,268)**		**(861,093)**

The financial statements on pages 120-124 were approved by the Board on 22 June 2026 and were signed on its behalf by:

Signed  (Chief Executive)

Date 22 June 2026

Signed  **(**Acting Chairman)

Date 22 June 2026

STATEMENT of CASH FLOWS for the year ended 31 March 2026

The Statement of Cash Flows shows the changes in cash and cash equivalents of the Northern Ireland Social Care Council during the reporting period. The statement shows how the Northern Ireland Social Care Council generates and uses cash and cash equivalents by classifying cash flows as operating, investing and financing activities. The amount of net cash flows arising from operating activities is a key indicator of service costs and the extent to which these operations are funded by way of income from the recipients of services provided by the Northern Ireland Social Care Council. Investing activities represent the extent to which cash inflows and outflows have been made for resources which are intended to contribute to the Northern Ireland Social Care Council's future public service delivery.

	NOTE	2026	2025
Cash flows from operating activities		**£**	**£**
Net surplus after interest/Net operating expenditure		(5,007,080)	(4,691,739)
Adjustments for non-cash costs	3	234,435	249,349
(Increase)/decrease in trade and other receivables		28,634	(27,737)
Less movements in receivables relating to items not passing through the NEA			
Movements in receivables relating to the sale of property, plant and equipment		-	-
Movements in receivables relating to the sale of intangibles		-	-
Movements in receivables relating to finance leases		-	-
Movements in receivables relating to PFI and other service concession arrangement contracts			-
(Increase)/decrease in inventories		-	-
Increase/(decrease) in trade payables		(59,046)	(89,302)
Less movements in payables relating to items not passing through the NEA		(36,388)	
Movements in payables relating to the purchase of property, plant and equipment			69,900
Movements in payables relating to the purchase of intangibles		23,880	(22,813)
Movements in payables relating to finance leases		-	-
Movements on payables relating to PFI and other service concession arrangement contracts			-
Use of provisions	15	-	-
Net cash (outflow)/inflow from operating activities		**(4,815,565)**	**(4,512,342)**
Cash flows from investing activities			
(Purchase of property, plant and equipment)	5	-	(83,700)
(Purchase of intangible assets)	6	(23,880)	(1,067)
Proceeds of disposal of property, plant and equipment		-	-
Proceeds on disposal of intangibles		-	-
Proceeds on disposal of assets held for resale		-	-
Net cash outflow from investing activities		**(23,880)**	**(84,767)**
Cash flows from financing activities			
Grant in aid		4,801,174	4,612,890
Cap element of payments - finance leases and on balance sheet (SoFP) PFI and other service concession arrangements			-
Net financing		**4,801,174**	**4,612,890**
Net increase/(decrease) in cash and cash equivalents in the period		(38,271)	15,781
Cash and cash equivalents at the beginning of the period	12	100,266	84,485
Cash and cash equivalents at the end of the period	12	**61,995**	**100,266**

The notes on pages 125-161 form part of these accounts.

STATEMENT of CHANGES in TAXPAYERS EQUITY for the year ended 31 March 2026

This statement shows the movement in the year on the different reserves held by Northern Ireland Social Care Council, analysed into 'Statement of Comprehensive Net Expenditure Reserve' (i.e. those reserves that reflect a contribution from the Department of Health). The Revaluation Reserve reflects the change in asset values that have not been recognised as income or expenditure. The SoCNE Reserve represents the total assets less liabilities of the Northern Ireland Social Care Council, to the extent that the total is not represented by other reserves and financing items.

	NOTE	SoCNE Reserve £	Revaluation Reserve £	Total £
Balance at 31 March 2024		**(853,761)**	**37,617**	**(816,144)**
Changes in Taxpayers Equity 2024-25				
Grant from DoH		4,612,890	-	4,612,890
Other reserves including transfers			-	-
(Comprehensive net expenditure for the year)		(4,691,739)	500	(4,691,239)
Transfer of Asset Ownership		-		-
Non-cash charges – auditors remuneration	3	33,400	-	33,400
Balance at 31 March 2025		**(899,210)**	**38,117**	**(861,093)**
Changes in Taxpayers Equity 2025-26				
Grant from DoH		4,801,174	-	4,801,174
Other reserves movements including transfers		-	-	-
(Comprehensive net expenditure for the year)		(5,007,080)	231	(5,006,849)
Transfer of asset ownership		-	-	-
Non-cash charges – auditors remuneration	3	34,500	-	34,500
Balance at 31 March 2026		**(1,070,616)**	**38,348**	**(1,032,268)**

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026
STATEMENT OF ACCOUNTING POLICIES

1. Authority

These financial statements have been prepared in a form determined by the Department of Health based on guidance from the Department of Finance's Financial Reporting manual (FReM) and in accordance with the requirements of Article 90(2) (a) of the Health and Personal Social Services (Northern Ireland) Order 1972 No 1265 (NI 14) as amended by Article 6 of the Audit and Accountability (Northern Ireland) Order 2003.

The accounting policies contained in the FReM apply International Financial Reporting Standards (IFRS) as adapted or interpreted for the public sector context. Where the FReM permits a choice of accounting policy, the accounting policy which has been judged to be most appropriate to the particular circumstances of the Northern Ireland Social Care Council for the purpose of giving a true and fair view has been selected. The particular policies adopted by the Northern Ireland Social Care Council are described below. They have been applied consistently in dealing with items considered material in relation to the accounts.

In addition, due to the manner in which the Northern Ireland Social Care Council is funded, the statement of financial position will show a negative position. In line with FReM, sponsored entities such as the Social Care Council that show total net liabilities, should prepare financial statements on a going concern basis. The cash required to discharge these net liabilities will be requested from the Department when they fall due and is shown in the Statement of Changes in Taxpayers' Equity.

1.1 Accounting convention

These accounts have been prepared under the historical cost convention modified to account for the revaluation of property, plant and equipment, intangible assets inventories and certain financial assets and liabilities.

1.2 Property, Plant and Equipment

Property, plant and equipment assets comprise Land, Buildings, Dwellings, Transport Equipment, Plant and Machinery, Information Technology, Furniture and Fittings, and Assets under Construction. This includes donated assets.

Recognition

Property, plant and equipment must be capitalised if:

- it is held for use in delivering services or for administrative purposes;
- it is probable that future economic benefits will flow to, or service potential will be supplied to, the entity;
- it is expected to be used for more than one financial year;
- the cost of the item can be measured reliably; and
- the item has cost of at least £5,000; or
- collectively, a number of items have a cost of at least £5,000 and individually have a cost of more than £1,000, where the assets are functionally interdependent, they had broadly simultaneous purchase dates, are anticipated to have simultaneous disposal dates and are under single managerial control; or
- items form part of the initial equipping and setting-up cost of a new building, ward or unit, irrespective of their individual or collective cost.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026
STATEMENT OF ACCOUNTING POLICIES

On initial recognition property, plant and equipment are measured at cost including any expenditure such as installation, directly attributable to bringing them into working condition. Items classified as "under construction" are recognised in the Statement of Financial Position to the extent that money has been paid or a liability has been incurred.

Valuation of Land and Buildings

NISCC's land and buildings relate to office space at James House, Belfast held under licence agreement with the Department of Finance.

The latest valuation date for the right of use asset held is 31 January 2025 and was carried out by Land and Property Services (LPS) in accordance with IFRS16 requirements.

Modern Equivalent Asset

DoF has adopted a standard approach to depreciated replacement cost valuations based on modern equivalent assets and, where it would meet the location requirements of the service being provided, an alternative site can be valued. Land and Property Services (LPS) have included this requirement within the latest valuation.

Assets Under Construction (AUC)

Assets classified as "under construction" are recognised in the Statement of Financial Position to the extent that money has been paid or a liability has been incurred. They are carried at cost, less any impairment loss. Assets under construction are revalued and depreciation commences when they are brought into use.

Short Life Assets

Short life assets are not indexed. Short life is defined as a useful life of up to and including 5 years. Short life assets are carried at depreciated historic cost as this is not considered to be materially different from fair value and are depreciated over their useful life.

Where estimated life of fixtures and equipment exceeds 5 years, suitable indices will be applied each year and depreciation will be based on indexed amount.

Revaluation Reserve

An increase arising on revaluation is taken to the revaluation reserve except when it reverses an impairment for the same asset previously recognised in expenditure, in which case it is credited to expenditure to the extent of the decrease previously charged there. A revaluation decrease is recognised as an impairment charged to the revaluation reserve to the extent that there is a balance on the reserve for the asset and, thereafter, to expenditure.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026
STATEMENT OF ACCOUNTING POLICIES

1.3 Depreciation

No depreciation is provided on freehold land since land has unlimited or a very long-established useful life. Items under construction are not depreciated until they are commissioned. Properties that are surplus to requirements and which meet the definition of "non-current assets held for sale" are also not depreciated.

Otherwise, depreciation is charged to write off the costs or valuation of property, plant and equipment and similarly, amortisation is applied to intangible non-current assets, less any residual value, over their estimated useful lives, in a manner that reflects the consumption of economic benefits or service potential of the assets. Assets held under finance leases are also depreciated over the lower of their estimated useful lives and the terms of the lease. The estimated useful life of an asset is the period over which the Northern Ireland Social Care Council expects to obtain economic benefits or service potential from the asset. Estimated useful lives and residual values are reviewed each year end, with the effect of any changes recognised on a prospective basis. The following asset lives have been used.

Asset Type	Asset Life
Freehold buildings	25-60 years
Leasehold property	Remaining period of lease
IT Assets	3 – 10 years
Intangible assets	3 – 10 years
Other Equipment	3 – 15 years

Impairment loss

If there has been an impairment loss due to a general change in prices, the asset is written down to its recoverable amount, with the loss charged to the revaluation reserve to the extent that there is a balance on the reserve for the asset and, thereafter, to expenditure within the Statement of Comprehensive Net Expenditure. If the impairment is due to the consumption of economic benefits, the full amount of the impairment is charged to the Statement of Comprehensive Net Expenditure and an amount up to the value of the impairment in the revaluation reserve is transferred to the Statement of Comprehensive Net Expenditure Reserve. Where an impairment loss subsequently reverses, the carrying amount of the asset is increased to the revised estimate of the recoverable amount but capped at the amount that would have been determined had there been no initial impairment loss. The reversal of the impairment loss is credited firstly to the Statement of Comprehensive Net Expenditure to the extent of the decrease previously charged there and thereafter to the revaluation reserve.

1.4 Subsequent expenditure

Where subsequent expenditure enhances an asset beyond its original specification, the directly attributable cost is capitalised. Where subsequent expenditure which meets the definition of capital
restores the asset to its original specification, the expenditure is capitalised and any existing carrying value of the item replaced is written-out and charged to operating expenses.

The overall useful life of the Northern Ireland Social Care Council's buildings takes account of the fact that different components of those buildings have different useful lives. This ensures that depreciation is charged on those assets at the same rate as if separate components had been identified and depreciated at different rates.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026
STATEMENT OF ACCOUNTING POLICIES

1.5 Intangible assets

Intangible assets include any of the following held - software, licences, trademarks, websites, development expenditure, Patents, Goodwill and intangible assets under construction. Software that is integral to the operating of hardware, for example an operating system is capitalised as part of the relevant item of property, plant and equipment. Software that is not integral to the operation of hardware, for example application software, is capitalised as an intangible non-current asset. Internally-generated assets are recognised if, and only if, all of the following have been demonstrated:

- the technical feasibility of completing the intangible asset so that it will be available for use;
- the intention to complete the intangible asset and use it;
- the ability to sell or use the intangible asset;
- how the intangible asset will generate probable future economic benefits or service potential;
- the availability of adequate technical, financial and other resources to complete the intangible asset and sell or use it; and
- the ability to measure reliably the expenditure attributable to the intangible asset during its development.

Recognition

Intangible assets are non-monetary assets without physical substance, which are capable of sale separately from the rest of the Northern Ireland Social Care Council's business or which arise from contractual or other legal rights. Intangible assets are considered to have a finite life. They are recognised only when it is probable that future economic benefits will flow to, or service potential be provided to, the Northern Ireland Social Care Council; where the cost of the asset can be measured reliably. All single items over £5,000 in value must be capitalised while intangible assets which fall within the grouped asset definition must be capitalised if their individual value is at least £1,000 each and the group is at least £5,000 in value.

The amount recognised for internally-generated intangible assets is the sum of the expenditure incurred from the date of commencement of the intangible asset, until it is complete and ready for use.

Intangible assets acquired separately are initially recognised at fair value.

Following initial recognition, intangible assets are carried at fair value by reference to an active market, and as no active market currently exists depreciated replacement cost has been used as fair value.

1.6 Inventories

Inventories are valued at the lower of cost and net realisable value and are included exclusive of VAT. This is considered to be a reasonable approximation to fair value due to the high turnover of stocks.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026
STATEMENT OF ACCOUNTING POLICIES

1.7 Income

Income is classified between Revenue from Contracts and Other Operating Income as assessed in line with organisational activity, under the requirements of IFRS 15 and as applicable to the public sector. Judgement is exercised in order to determine whether the 5 essential criteria within the scope of IFRS 15 are met in order to define income as a contract.

Income relates directly to the activities of the Northern Ireland Social Care Council and is recognised on an accruals basis when, and to the extent that a performance obligation is satisfied in a manner that depicts the transfer to the customer of the goods or services promised.

Where the criteria to determine whether a contract is in existence is not met, income is classified as Other Operating Income within the Statement of Comprehensive Net Expenditure and is recognised when the right to receive payment is established.

Income is stated net of VAT.

Registration fee income - NISCC has adopted IFRS 15 Revenue from Contracts with Customers (IFRS 15). NISCC receives the following types of registration fee income and accounts for them as follows:

- One off fees - One off fees comprise application, renewal and restoration fees. These fees are paid at the point of application, renewal or restoration and are non-refundable and are accounted for in full on receipt.

- Annual fees - Annual fees are due annually on the date the registrant was confirmed to the register. They are collected in advance, are non-refundable and are apportioned over the year the annual fee covers.

Under IFRS 15, the point of recognition of fees is based upon when the performance obligation of the contract is satisfied, and the benefits have been fully received by the registrant. NISCC fulfils its performance obligation by maintaining a social worker's and social care practitioner's registration over the annual registration period, therefore the annual fees are recognised in the statement of financial position as deferred income and are released to the statement of comprehensive net expenditure proportionately over the period that the fee relates to. Deferred registration fee income that is recognised within the statement of financial position relates to the following financial year only and is recognised as a current liability.

In accordance with FReM adaptation of IAS 20, Government grant income is in relation to notional rent in respect to the licence for office premises at James House, Belfast capitalised under IFRS16.

1.8 Grant in aid

Funding received from other entities, including the Department, are accounted for as grant in aid and are reflected through the Statement of Comprehensive Net Expenditure Reserve.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026
STATEMENT OF ACCOUNTING POLICIES

1.9 Investments

The Northern Ireland Social Care Council does not have any investments.

1.10 Research and Development expenditure

Research and development (R&D) expenditure is expensed in the year it is incurred in accordance with IAS 38.

Following the introduction of the 2010 European System of Accounts (ESA10), and the change in budgeting treatment (from the revenue budget to the capital budget) of R&D expenditure, additional disclosures are included in the notes to the accounts. This treatment was implemented from 2016-17.

1.11 Cash and cash equivalents

Cash is cash in hand and deposits with any financial institution repayable without penalty on notice of not more than 24 hours. Cash equivalents are investments that mature in 3 months or less from the date of acquisition and that are readily convertible to known amounts of cash with insignificant risk of change in value.

1.12 Leases

Under IFRS 16 Leased Assets which the Northern Ireland Social Care Council has use/control over and which it does not necessarily legally own are to be recognised as a 'Right-Of-Use' (ROU) asset. There are only two exceptions:

- short term assets – with a life of up to one year; and
- low value assets – with a value equal to or below the Department's threshold limit which is currently £5,000.

Short term leases

Short term leases are defined as having a lease term of 12 months or less. Any lease with a purchase option cannot qualify as a short-term lease. The lessee must not exercise an option to extend the lease beyond 12 months. No liability should be recognised in respect of short-term leases, and neither should the underlying asset be capitalised.

Lease agreements which contain a purchase option cannot qualify as short-term. Examples of short-term leases are software leases, specialised equipment, hire cars and some property leases.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026
STATEMENT OF ACCOUNTING POLICIES

Low value assets

An asset is considered “low value” if its value, when new, is less than the capitalisation threshold. The application of the exemption is independent of considerations of materiality. The low value assessment is performed on the underlying asset, which is the value of that underlying asset when new. Examples of low value assets are, tablet and personal computers, small items of office furniture and telephones.

Separating lease and service components

Some contracts may contain both a lease element and a service element. DoH bodies can, at their own discretion, choose to combine lease and non-lease components of contracts, and account for the entire contract as a lease. If a contract contains both lease and service components IFRS 16 provides guidance on how to separate those components. If a lessee separates lease and service components, it should capitalise amounts related to the lease components and expense elements relating to the service elements. However, IFRS 16 also provides an option for lessees to combine lease and service components and account for them as a single lease. This option should help DoH bodies where it is time consuming or difficult to separate these components.

The Northern Ireland Social Care Council as lessee

The ROU asset lease liability will initially be measured at the present value of the unavoidable future lease payments. The future lease payments should include any amounts for:

- Indexation;
- amounts payable for residual value;
- purchase price options;
- payment of penalties for terminating the lease;
- any initial direct costs; and
- costs relating to restoration of the asset at the end of the lease.

The lease liability is discounted using the rate implicit in the lease.

Lease payments are apportioned between finance charges and reduction of the lease obligation so as to achieve a constant rate on interest on the remaining balance of the liability. Finance charges are recognised in calculating the ALB’s surplus/deficit.

The difference between the carrying amount and the lease liability on transition is recognised as an adjustment to taxpayer’s equity. After transition the difference is recognised as income in accordance with IAS 20.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026
STATEMENT OF ACCOUNTING POLICIES

Subsequent measurement

After the commencement date (the date that the lessor makes the underlying asset available for use by the lessee) a lessee shall measure the liability by;

- Increasing the carrying amount to reflect interest;
- Reducing the carrying amount to reflect lease payments made; and
- Re-measuring the carrying amount to reflect any reassessments or lease modifications, or to reflect revised in substance fixed lease payments.

There is a need to reassess the lease liability in the future if there is:

- A change in lease term;
- change in assessment of purchase option;
- change in amounts expected to be payable under a residual value guarantee; or
- change in future payments resulting from change in index or rate.

Subsequent measurement of the ROU asset is measured in same way as other property, plant and equipment. Asset valuations should be measured at either ‘fair value’ or ‘current value in existing use’.

Depreciation

Assets under a finance lease or ROU lease are depreciated over the shorter of the lease term and its useful life, unless there is a reasonable certainty the lessee will obtain ownership of the asset by the end of the lease term in which case it should be depreciated over its useful life.

The depreciation policy is that for other depreciable assets that are owned by the entity.

Leased assets under construction must also be depreciated.

Peppercorn leases

Peppercorn leases are defined as leases for which the consideration paid is nil or nominal and are within scope of IFRS16 if they meet the definition of a lease in all aspects apart from containing consideration. Peppercorn leases are recognised as right of use assets measured in accordance with IFRS16 as interpreted by the FReM. In accordance with IFRS16 requirements, the right of use asset is held at latest valuation, the latest valuation date for the right of use asset held is 31 January 2025 and was carried out by Land and Property Services (LPS). Government grant income equal to the valuation has been recognised in full in the year of inception in accordance with IAS 20 as interpreted by the FReM.

1.13 Private Finance Initiative (PFI) transactions

The Northern Ireland Social Care Council has had no PFI transactions during the year.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026
STATEMENT OF ACCOUNTING POLICIES

1.14 Financial instruments

A financial instrument is defined as any contract that gives rise to a financial asset of one entity and a financial liability or equity instrument of another entity.

The Northern Ireland Social Care Council has financial instruments in the form of trade receivables and payables and cash and cash equivalents.

Financial assets

Financial assets are recognised on the Statement of Financial Position when the Northern Ireland Social Care Council becomes party to the financial instrument contract or, in the case of trade receivables, when the goods or services have been delivered. Financial assets are derecognised when the contractual rights have expired or the asset has been transferred.

Financial assets are initially recognised at fair value. IFRS 9 requires consideration of the expected credit loss model on financial assets. The measurement of the loss allowance depends upon the Northern Ireland Social Care Council's assessment at the end of each reporting period as to whether the financial instrument's credit risk has increased significantly since initial recognition, based on reasonable and supportable information that is available, without undue cost or effort to obtain. The amount of expected credit loss recognised is measured on the basis of the probability weighted present value of anticipated cash shortfalls over the life of the instrument, where judged necessary.

Financial assets are classified into the following categories:

- financial assets at fair value through Statement of Comprehensive Net Expenditure;
- held to maturity investments;
- available for sale financial assets; and
- loans and receivables.

The classification depends on the nature and purpose of the financial assets and is determined at the time of initial recognition.

Financial liabilities

Financial liabilities are recognised on the Statement of Financial Position when the Northern Ireland Social Care Council becomes party to the contractual provisions of the financial instrument or, in the case of trade payables, when the goods or services have been received. Financial liabilities are de-recognised when the liability has been discharged, that is, the liability has been paid or has expired.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026
STATEMENT OF ACCOUNTING POLICIES

Financial risk management

IFRS 7 requires disclosure of the role that financial instruments have had during the period in creating or changing the risks a body faces in undertaking its activities. Because of the relationships with HSC Commissioners, and the manner in which they are funded, financial instruments play a more limited role in creating risk than would apply to a non-public sector body of a similar size, therefore the Northern Ireland Social Care Council is not exposed to the degree of financial risk faced by business entities.

There are limited powers to borrow or invest surplus funds and financial assets and liabilities are generated by day-to-day operational activities rather than being held to change the risks facing its activities. Therefore, the Northern Ireland Social Care Council is exposed to little credit, liquidity or market risk.

Currency risk
The Northern Ireland Social Care Council is principally a domestic organisation with the great majority of transactions, assets and liabilities being in the UK and Sterling based. There is therefore low exposure to currency rate fluctuations.

Interest rate risk
The Northern Ireland Social Care Council has limited powers to borrow or invest and therefore has low exposure to interest rate fluctuations.

Credit risk
Because the majority of the Northern Ireland Social Care Council's income comes from contracts with other public sector bodies, there is low exposure to credit risk.

Liquidity risk
Since the Northern Ireland Social Care Council receives the majority of its funding through its principal Commissioner, which is voted through the Assembly, there is low exposure to significant liquidity risks.

1.15 Provisions

In accordance with IAS 37, provisions are recognised when there is a present legal or constructive obligation as a result of a past event, it is probable that the Northern Ireland Social Care Council will be required to settle the obligation, and a reliable estimate can be made of the amount of the obligation. The amount recognised as a provision is the best estimate of the expenditure required to settle the obligation at the end of the reporting period, taking into account the risks and uncertainties.

Where a provision is measured using the cash flows estimated to settle the obligation, its carrying amount is the present value of those cash flows using the relevant discount rates provided by HM Treasury.

When some or all of the economic benefits required to settle a provision are expected to be recovered from a third party, the receivable is recognised as an asset if it is virtually certain that reimbursements will be received, and the amount of the receivable can be measured reliably.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026
STATEMENT OF ACCOUNTING POLICIES

1.16 Contingent liabilities/assets

The Northern Ireland Social Care Council had no contingent assets or liabilities at either 31 March 2026 or 31 March 2025.

1.17 Employee benefits

Short-term employee benefits

Under the requirements of IAS 19: Employee Benefits, staff costs must be recorded as an expense as soon as the organisation is obligated to pay them. This includes the cost of any untaken leave that has been earned at the year end. This cost has been determined using individual's salary costs applied to their unused leave balances determined from a report of the unused annual leave balance as at 31 March 2026. To ensure staff didn't lose annual leave during the 2025-26 year, employees were granted permission to carry over additional unused leave above the usual maximum of 5 days, to be taken within the next financial year. Untaken flexi leave is estimated to be immaterial to the Northern Ireland Social Care Council and has not been included.

Retirement benefit costs

Past and present employees are covered by the provisions of the HSC Superannuation Scheme.

The Northern Ireland Social Care Council participates in the HSC Superannuation Scheme. Under this multi-employer defined benefit scheme both the ALB and employees pay specified percentages of pay into the scheme and the liability to pay benefit falls to the DoH. The Northern Ireland Social Care Council is unable to identify its share of the underlying assets and liabilities in the scheme on a consistent and reliable basis.

The costs of early retirements are met by the Northern Ireland Social Care Council and charged to the Statement of Comprehensive Net Expenditure at the time the Northern Ireland Social Care Council commits itself to the retirement.

As per the requirements of IAS 19, full actuarial valuations by a professionally qualified actuary are required with sufficient regularity that the amounts recognised in the financial statements do not differ materially from those determined at the reporting period date. This has been interpreted in the FReM to mean that the period between formal actuarial valuations shall be four years.

The actuary reviews the most recent actuarial valuation at the statement of financial position date and updates it to reflect current conditions. The scheme valuation data provided for the 2020 actuarial valuation will be used in the 2025-26 accounts. The 2020 valuation assumptions will be retained for most demographic assumptions, apart from the assumption for future longevity improvements, which are assumed to be in line with the 2022-based population projections for the United Kingdom published by the Office of National Statistics (ONS) on 28 January 2025. Financial assumptions are updated to reflect recent financial conditions. The 2024 valuation is underway, but not sufficiently progressed to be used in the 2025-26 accounts.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026
STATEMENT OF ACCOUNTING POLICIES

1.18 Value Added Tax

Where output VAT is charged or input VAT is recoverable, the amounts are stated net of VAT. Irrecoverable VAT is charged to the relevant expenditure category or included in the capitalised purchase cost of fixed assets.

1.19 Third party assets

Assets belonging to third parties (such as money held on behalf of patients) are not recognised in the accounts since the Northern Ireland Social Care Council has no beneficial interest in them. Details of third party assets are given in Note 22 to the accounts.

1.20 Government Grants

The note to the financial statements distinguishes between grants from UK government entities and grants from European Union.

1.21 Losses and Special Payments

Losses and special payments are items that the Assembly would not have contemplated when it agreed funds for the health service or passed legislation. By their nature, they are items that ideally should not arise. They are therefore subject to special control procedures compared with the generality of payments.

They are divided into different categories, which govern the way that individual cases are handled.

Losses and special payments are charged to the relevant functional headings in expenditure on an accruals basis, including losses which would have been made good through insurance cover had DoH bodies not been bearing their own risks (with insurance premiums then being included as normal revenue expenditure). However, the note on losses and special payments is compiled directly from the losses and compensations register which reports amounts on an accruals basis with the exception of provisions for future losses.

1.22 Charitable Trust Account Consolidation

Northern Ireland Social Care Council held no charitable trust accounts at 31 March 2026 or 31 March 2025.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026
STATEMENT OF ACCOUNTING POLICIES

1.23 Accounting Standards that have been issued but have not yet been adopted

IFRS 18 Presentation and Disclosure in Financial Statements:

IFRS 18 Presentation and Disclosure in Financial Statements was issued in April 2025, replaced IAS 1 Presentation of Financial Statements, and is effective for accounting periods beginning on or after 1 January 2027. IFRS 18 will be implemented, as interpreted and adapted for the public sector if required, from a future date (not before 2027-28) that will be determined by the UK Financial Reporting Advisory Board in conjunction with HM Treasury following analysis of this new standard.
The International Accounting Standards Board have issued the following new standards, but which are either not yet effective or adopted. Under IAS 8 there is a requirement to disclose these standards together with an assessment of their initial impact on application.

1.24 New accounting standards adopted in 2025-26

IFRS 17 Insurance Contracts:

This standard has been reviewed and considered as part of the preparation of the financial statements.

Northern Ireland Social Care Council has concluded that IFRS 17 is not applicable to its activities and therefore it has no impact on the recognition, measurement, or disclosure of transactions or balances within these financial statements.

ACCOUNTS FOR THE YEAR ENDED 31 March 2026

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

NOTE 2 ANALYSIS OF NET EXPENDITURE BY SEGMENT

The core business and strategic direction of the Northern Ireland Social Care Council is to protect the public through the registration and regulation of the social care workforce and to regulate the training for social workers.

The Board of the Northern Ireland Social Care Council acts as the Chief Operating Decision Maker and receives financial information on the Northern Ireland Social Care Council as a whole and makes decisions on this basis. Hence, it is appropriate that the Northern Ireland Social Care Council reports on a single operational segment basis.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026
NOTE 3 EXPENDITURE

	2026	2025
Operating expenses are as follows: -	**£**	**£**
Staff costs:[1]		
Wages and salaries	2,920,558	2,743,821
Social security costs	381,096	289,362
Other pension costs	596,530	525,281
Revenue grants to voluntary organisations	876,773	867,228
Supplies and services – general	33,550	22,522
Establishment	577,193	517,681
Transport	-	-
Premises	348,779	383,545
Rentals under operating leases	-	-
Interest charges under IFRS 16	-	-
*Miscellaneous	690,843	579,699
BSO services	294,698	287,385
Total Operating Expenses	6,720,020	6,216,524
Non-cash items		
Depreciation	125,855	137,491
Amortisation	70,346	85,474
Impairments	-	-
(Profit) on disposal of property, plant and equipment (including land)	-	-
(Profit) on disposal of intangibles	-	-
Loss on disposal of property, plant and equipment (including land)	-	-
Loss on disposal of intangibles	-	-
Increase / Decrease in provisions (provision provided for in year less any release)	3,734	(7,016)
Cost of borrowing provisions (unwinding of discount on provisions)	-	-
Auditor's remuneration	34,500	33,400
Total Non-cash items	234,435	249,349
Total	**6,954,455**	**6,465,873**

During the year the Northern Ireland Social Care Council purchased no non-audit services from its external auditor (NIAO) (2024-25: £Nil)

*In 2025-26, £532k of the miscellaneous expenditure relates to Social Care Reform and Social Work Promotion projects (2024-25: £532k)

[1] Further detailed analysis of staff costs is located in the Staff Report on page 106 within the Accountability Report.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026
NOTE 4 INCOME

4.1 Revenue from Contracts with Customers

	2026 £	2025 £
Other income from non-patient services	1,897,093	1,745,781
Total Revenue from Contracts with Customers	**1,897,093**	**1,745,781**

4.2 Other Operating Income

	2026 £	2025 £
Seconded staff	50,282	28,353
Government grant	-	-
Total Other Operating Income	**50,282**	**28,353**
Total Income	**1.947,375**	**1,774,134**

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

NOTE 5.1 Property, plant and equipment - year ended 31 March 2026

	Land £	Buildings (excluding dwellings) £	Dwellings £	Assets under Construction £	Plant and Machinery (Equipment) £	Transport Equipment £	Information Technology (IT) £	Furniture and Fittings £	Total £
Cost or Valuation									
At 1 April 2025	-	440,861	-	-	-		294,222		735,083
Indexation	-	-	-	-	-	-	-	-	-
Additions	-	-	-	-	-	-		-	
Donations / Government grant / Lottery Funding	-	-	-	-	-	-	36,388	-	36,388
Reclassifications	-	-	-	-	-	-	-	-	-
Transfers	-	-	-	-	-	,-	-	-	-
Revaluation	-	-	-	-	-	-	-	-	-
Impairment charged to the SoCNE	-	-	-	-	-	-	-	-	-
Impairment charged to revaluation reserve	-	-	-	-	-	-	-	-	-
Reversal of impairments (indexn)	-	-	-	-	-	-	-	-	-
Disposals	-	-	-	-	-	-	(79,633)	-	(79,633)
At 31 March 2026	**-**	**440,861**	**-**	**-**	**-**	**-**	**250,977**	**-**	**691,388**
Depreciation									
At 1 April 2025	-	190,113	-	-	-		216,361		406,474
Indexation	-	-	-	-	-	-	-	-	-
Reclassifications	-	-	-	-	-	-	-	-	-
Transfers	-	-	-	-	-	-	-	-	-
Revaluation	-	-	-	-	-	-	-	-	-
Impairment charged to the SoCNE	-	-	-	-	-	-	-	-	-
Impairment charged to the revaluation reserve	-	-	-	-	-	-	-	-	-
Reversal of impairments (indexn)	-	-	-	-	-	-	-	-	-
Disposals	-	-	-	-	-	-	(79,633)	-	(79,633)
Provided during the year	-	88,172	-	-	-	-	37,683	-	125,855
At 31 March 2026	**-**	**278,285**	**-**	**-**	**-**	**-**	**174,411**	**-**	**452,696**

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026
NOTE 5.1 (continued) Property, plant and equipment - year ended 31 March 2026

	Land £	Buildings (excluding dwellings) £	Dwellings £	Assets under Construction £	Plant and Machinery (Equipment) £	Transport Equipment £	Information Technology (IT) £	Furniture and Fittings £	Total £
Carrying Amount									
At 31 March 2026	**-**	**162,576**	**-**	**-**	**-**	**-**	**76,566**	**-**	**239,142**
At 31 March 2025	**-**	250,748	-	-	-	-	77,861	-	328,609
Asset financing									
Owned	-	-	-	-	-	-	76,566	-	76,566
Finance Right-of-use	-	162,576	-	-	-	-	-	-	162,576
On (SoFP) PFI and other service concession arrangements contracts	-	-	-	-	-	-	-	-	-
Carrying Amount									
At 31 March 2026	**-**	**162,576**	**-**	**-**	**-**	**-**	**76,566**	**-**	**239,142**

The total amount of depreciation charged in the Statement of Comprehensive Net Expenditure Account in respect of assets held under leases and hire purchase contracts is £278,285 (2024-25: £190,113).

The fair value of assets funded from the following sources during the year was:

	2026 £	2025 £
Donations	-	-
Government Grant	-	-
Lottery Funding	-	-

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

NOTE 5.2 Property, plant and equipment - year ended 31 March 2025

	Land £	Buildings (excluding dwellings) £	Dwellings £	Assets under Construction £	Plant and Machinery (Equipment) £	Transport Equipment £	Information Technology (IT) £	Furniture and Fittings £	Total £
Cost or Valuation									
At 1 April 2024	-	440,861	-	-	-		283,728		724,589
Indexation	-	-	-	-	-	-	-	-	-
Additions	-	-	-	-	-	-	13,800	-	13,800
Donations / Government grant / Lottery Funding	-	-	-	-	-	-	-	-	-
Reclassifications	-	-	-	-	-	-	-	-	-
Transfers	-	-	-	-	-	,-	-	-	-
Revaluation	-	-	-	-	-	-	-	-	-
Impairment charged to the SoCNE	-	-	-	-	-	-	-	-	-
Impairment charged to revaluation reserve	-	-	-	-	-	-	-	-	-
Reversal of impairments (indexn)	-	-	-	-	-	-	-	-	-
Disposals	-	-	-	-	-	-	(3,306)	-	(3,306)
At 31 March 2025	**-**	**440,861**	**-**	**-**	**-**	**-**	**294,222**	**-**	**735,083**
Depreciation									
At 1 April 2024	-	101,941	-	-	-		170,348		272,289
Indexation	-	-	-	-	-	-	-	-	-
Reclassifications	-	-	-	-	-	-	-	-	-
Transfers	-	-	-	-	-	-	-	-	-
Revaluation	-	-	-	-	-	-	-	-	-
Impairment charged to the SoCNE	-	-	-	-	-	-	-	-	-
Impairment charged to the revaluation reserve	-	-	-	-	-	-	-	-	-
Reversal of impairments (indexn)	-	-	-	-	-	-	-	-	-
Disposals	-	-	-	-	-	-	(3,306)	-	(3,306)
Provided during the year	-	88,172	-	-	-	-	49,319	-	137,491
At 31 March 2025	**-**	**190,113**	**-**	**-**	**-**	**-**	**216,361**	**-**	**406,474**

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026
NOTE 5.2 (continued) Property, plant and equipment - year ended 31 March 2025

	Land £	Buildings (excluding dwellings) £	Dwellings £	Assets under Construction £	Plant and Machinery (Equipment) £	Transport Equipment £	Information Technology (IT) £	Furniture and Fittings £	Total £
Carrying Amount At 31 March 2025	**-**	**250,748**	**-**	**-**	**-**	**-**	**77,861**	**-**	**328,609**
At 31 March 2024	**-**	338,920	-	-	-	-	113,380	-	452,300
Asset financing									
Owned	-		-	-	-	-	77,861		328,609
Finance Right-of-use	-	250,748-	-	-	-	-	-	-	-
On (SoFP) PFI and other service concession arrangements contracts	-	-	-	-	-	-	-	-	-
Carrying Amount At 31 March 2025	**-**	**250,748**	**-**	**-**	**-**	**-**	**77,861**		**328,609**
Asset financing									
Owned	-		-	-	-	-	113,380		113,380
Finance Right-of-use	-	338,920-	-	-	-	-	-	-	338,920
On (SoFP) PFI and other service concession arrangements contracts	-	-	-	-	-	-	-	-	-
Carrying Amount At 1 April 2024	**-**	**338,920**	**-**	**-**	**-**	**-**	**113,380**		**452,300**

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

NOTE 6.1 Intangible assets- year ended 31 March 2026

	Software Licenses £	Information Technology £	Websites £	Development Expenditure £	Licences, Trademarks and Artistic Originals £	Patents £	Goodwill £	Payments on Account and Assets under Construction £	Total £
Cost or Valuation									
At 1 April 2025	25,600	701,198	-	-	-	-	-	*118,441	845,239
Indexation	-	8,222	-	-	-	-	-	-	8,222
Additions	-	-	-	-	-	-	-	-	-
Donations / Government grant / Lottery Funding	-	-	-	-	-	-	-	-	-
Reclassifications	-	-	-	-	-	-	-	-	-
Transfers	-	118,440	-	-	-	-	-	(118,440)	-
Revaluation	-	-	-	-	-	-	-		-
Impairment charged to the SoCNE	-	-	-	-	-	-	-	-	-
Impairment charged to revaluation reserve	-	-	-	-	-	-	-	-	-
Disposals	(13,601)	(461,500)	-	-	-	-	-	-	(475,101)
At 31 March 2026	**11,999**	**366,360**	-	-	-	-	-	**1**	**378,360**
Amortisation									
At 1 April 2025	20,803	517,732	-	-	-	-	-	-	538,535
Indexation	-	7,991	-	-	-	-	-	-	7,991
Reclassifications	-	-	-	-	-	-	-	-	
Transfers	-	-	-	-	-	-	-	-	
Revaluation	-	-	-	-	-	-	-	-	
Impairment charged to the SoCNE	-	-	-	-	-	-	-	-	
Impairment charged to the revaluation reserve	-	-	-	-	-	-	-	-	
Disposals	(13,601)	(461,500)	-	-	-	-	-	-	(475,101)
Provided during the year	2,400	67,946	-	-	-	-	-	-	70,346
At 31 March 2026	**9,602**	**132,169**	-	-	-	-	-	-	**141,771**

*Payments on account and assets under construction projects include: James House ICT, Registration Mobile App, Fitness to Practise Case Management System

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026
NOTE 6.1 (continued) Intangible assets- year ended 31 March 2026

	Software Licenses £	Information Technology £	Websites £	Development Expenditure £	Licences, Trademarks and Artistic Originals £	Patents £	Goodwill £	Payments on Account and Assets under Construction £	Total £
Carrying Amount									
At 31 March 2026	2,397	234,191						1	236,589
At 31 March 2025	4,797	183,466	-	-	-	-	-	118,441	306,704
Asset financing									
Owned	2,397	234,191						1	236,589
Finance Right of use	-	-	-	-	-	-	-	-	-
On (SoFP) PFI and other service concession arrangements contracts	-	-	-	-	-	-	-	-	-
Carrying Amount									
At 31 March 2026	**2,397**	**234,191**						**1**	**236,589**

Any fall in value through negative indexation or revaluation is shown as impairment.
The fair value of assets funded from the following sources during the year was:

	2026 £	2025 £
Donations	-	-
Government Grant	-	-
Lottery Funding	-	-

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026
NOTE 6.2 Intangible assets- year ended 31 March 2025

	Software Licenses £	Information Technology £	Websites £	Development Expenditure £	Licences, Trademarks and Artistic Originals £	Patents £	Goodwill £	Payments on Account and Assets under Construction £	Total £
Cost or Valuation									
At 1 April 2024	25,600	521,583	-	-	-	-	-	268,141	815,324
Indexation	-	6,035	-	-	-	-	-	-	6,035
Additions	-	-	-	-	-	-	-	23,880	23,880
Donations / Government grant / Lottery Funding	-	-	-	-	-	-	-	-	-
Reclassifications	-	-	-	-	-	-	-	-	-
Transfers	-	173,580	-	-	-	-	-	(173,580)	-
Revaluation	-	-	-	-	-	-	-	-	-
Impairment charged to the SoCNE	-	-	-	-	-	-	-	-	-
Impairment charged to revaluation reserve	-	-	-	-	-	-	-	-	-
Disposals	-	-	-	-	-	-	-	-	-
At 31 March 2025	**25,600**	**701,198**	**-**	**-**	**-**	**-**	**-**	***118,441**	**845,239**
Amortisation									
At 1 April 2024	18,403	429,123	-	-	-	-	-	-	447,526
Indexation	-	5,535	-	-	-	-	-	-	5,535
Reclassifications	-	-	-	-	-	-	-	-	-
Transfers	-	-	-	-	-	-	-	-	-
Revaluation	-	-	-	-	-	-	-	-	-
Impairment charged to the SoCNE	-	-	-	-	-	-	-	-	-
Impairment charged to the revaluation reserve	-	-	-	-	-	-	-	-	-
Disposals	-	-	-	-	-	-	-	-	-
Provided during the year	2,400	83,074	-	-	-	-	-	-	85,474
At 31 March 2025	**20,803**	**517,732**	**-**	**-**	**-**	**-**	**-**	**-**	**538,535**

*Payments on account and assets under construction projects include: James House ICT, Registration Mobile App, Fitness to Practise Case Management System

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026
NOTE 6.2 (continued) Intangible assets- year ended 31 March 2025

	Software Licenses £	Information Technology £	Websites £	Development Expenditure £	Licences, Trademarks and Artistic Originals £	Patents £	Goodwill £	Payments on Account and Assets under Construction £	Total £
Carrying Amount									
At 31 March 2025	**4,797**	**183,466**	**-**	**-**	**-**	**-**	**-**	**118,441**	**306,704**
At 31 March 2024	7,197	92,460	-	-	-	-	-	268,141	367,798
Asset financing									
Owned	4,797	183,466	-	-	-	-	-	118,441	306,704
Finance Right of use	-	-	-	-	-	-	-	-	-
On (SoFP) PFI and other service concession arrangements contracts	-	-	-	-	-	-	-	-	-
Carrying Amount									
At 31 March 2025	**4,797**	**183,466**	**-**	**-**	**-**	**-**	**-**	**118,441**	**306,704**
Asset financing									
Owned	7,197	92,460	-	-	-	-	-	268,141	367,798
Finance Right of use	-	-	-	-	-	-	-	-	-
On (SoFP) PFI and other service concession arrangements contracts	-	-	-	-	-	-	-	-	-
Carrying Amount									
At 1 April 2024	7,197	92,460	-	-	-	-	-	268,141	367,798

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

NOTE 7 FINANCIAL INSTRUMENTS

As the cash requirements of the Northern Ireland Social Care Council are met through Grant-in-Aid provided by the Department of Health, financial instruments play a more limited role in creating and managing risk than would apply to a non-public sector body.

The majority of financial instruments relate to contracts to buy non-financial items in line with the Northern Ireland Social Care Council's expected purchase and usage requirements and the Northern Ireland Social Care Council is therefore exposed to little credit, liquidity or market risk.

NOTE 8 INVESTMENTS AND LOANS

The Northern Ireland Social Care Council had no investments or loans at either 31 March 2026 or 31 March 2025.

NOTE 9 IMPAIRMENTS

The Northern Ireland Social Care Council had no impairments at either 31 March 2026 or 31 March 2025.

NOTE 10 ASSETS CLASSIFIED AS HELD FOR SALE

The Northern Ireland Social Care Council did not hold any assets classified as held for sale at either 31 March 2026 or 31 March 2025.

NOTE 11 INVENTORIES

The Northern Ireland Social Care Council did not hold any goods for resale at either 31 March 2026 or 31 March 2025.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

NOTE 12 CASH AND CASH EQUIVALENTS

	2026	2025
	£	£
Balance at 1 April	100,266	84,485
Net change in cash and cash equivalents	(38,271)	15,781
Balance at 31 March	**61,995**	**100,266**

The following balances at 31 March were held at	**2026**	**2025**
	£	**£**
Commercial Banks and cash in hand	61,995	100,266
Balance at 31 March	**61,995**	**100,266**

The bank account is operated by Business Services Organisation (BSO) on behalf of Northern Ireland Social Care Council. The account is in the legal name of the BSO.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

NOTE 13 TRADE RECEIVABLES, FINANCIAL AND OTHER ASSETS

	2026 £	2025 £
Amounts falling due within one year		
Trade receivables	29,787	53,110
Deposits and advances	-	-
VAT receivable	-	-
Other receivables – not relating to fixed assets	-	-
Other receivables – relating to property, plant and equipment	-	-
Other receivables – relating to intangibles	-	-
Trade and other receivables	29,787	53,110
Prepayments	33,288	38,599
Accrued income	-	-
Current part of PFI and other service concession arrangements prepayment	-	-
Other current assets	33,288	38,599
Carbon reduction commitment	-	-
Intangible current assets	-	-
Amounts falling due after more than one year		
Trade receivables	-	-
Deposits and advances	-	-
Other receivables	-	-
Trade and other receivables	-	-
Prepayments and accrued income	-	--
Other current assets falling due after more than one year	-	--
TOTAL TRADE AND OTHER RECEIVABLES	**29,787**	**53,110**
TOTAL OTHER CURRENT ASSETS	**33,288**	**38,599**
TOTAL INTANGIBLE CURRENT ASSETS	**-**	**-**
TOTAL RECEIVABLES AND OTHER CURRENT ASSETS	**63,075**	**91,709**

The balances are net of a provision for bad debts of £Nil (2024-25: £Nil).

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

NOTE 14 TRADE PAYABLES AND OTHER CURRENT LIABILITIES

	2026 £	2025 £
Amounts falling due within one year		
Other taxation and social security	154,082	211,366
Bank overdraft	-	-
VAT payable	-	-
Trade capital payables – property, plant and equipment	36,388	-
Trade capital payables – intangibles	-	23,880
Trade revenue payables	61,913	117,327
Payroll payables	1,145	58
Clinical Negligence payables	-	-
RPA payables	-	-
BSO payables	153,825	52,609
Other payables	26	1,733
Accruals	513,754	610,194
Accruals– relating to property, plant and equipment	-	-
Accruals – relating to intangibles	-	-
Deferred income	628,025	591,037
Trade and other payables	**1,549,158**	**1,608,204**
Current part of leases liabilities	-	-
Current part of long-term loans	-	-
Current part of imputed finance lease element of PFI and other service concession arrangements	-	-
Other current liabilities		-
Carbon reduction commitment	-	-
Intangible current liabilities	-	-
Total payables falling due within one year	**1,549,158**	**1,608,204**
Amounts falling due after more than one year		
Other payables, accruals and deferred income		-
Trade and other payables		-
Clinical Negligence payables		-
Leases		-
Current part of imputed finance lease element of PFI and other service concession arrangements		-
Long term loans		-
Total non-current other payables		-
TOTAL TRADE PAYABLES AND OTHER CURRENT LIABILITIES	**1,549,158**	**1,608,204**

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

NOTE 15 PROVISIONS FOR LIABILITIES AND CHARGES

	Pensions relating to former directors £	Pensions relating to other staff £	Clinical Negligence £	Other £	2026 £	2025 £
Balance at 1 April	-	-	-	80,177	80,177	87,193
Provided in year	-	-	-	3,734	3,734	4,399
(Provisions not required written back)	-	-	-	-	-	(11,415)
(Provisions utilised in the year)	-	-	-	-	-	--
Borrowing costs (unwinding of discount)	-	-	-	-	-	--
At 31 March	-	-	-	**83,911**	**83,911**	**80,177**

Comprehensive Net Expenditure Account Charges	**2026**	**2025**
	£	**£**
Arising during the year	3,734	4,399
Reversed unused	-	(11,415)
Cost of borrowing (unwinding of discount)	-	-
Total charge within Operating costs	**3,734**	**(7,016)**

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

NOTE 15 PROVISIONS FOR LIABILITIES AND CHARGES continued

Analysis of expected timing of discounted flows as at 31 March 2026

	Pensions relating to former directors	Pensions relating to other staff	Clinical Negligence	Other	2026	2025
	£	£	£	£	£	£
Not later than one year	-	-	-	35,194	35,194	34,194
Later than one year and not later than five years	-	-	-	48,717	48,717	45,983
Later than five years	-	-	-	-	-	-
At 31 March	**-**	**-**	**-**	**83,911**	**83,911**	**80,177**

Amounts included in other relate to a provision made for the potential liability of senior executive pay award of £30,194 (2024-25 £30,194) see Senior Executive Pay Structure Reform note within Remuneration and Staff report (provisions have only been retained for staff pre 1 April 2023), a legal provision of £5,000 (2024-25 £4,000) surrounding an ongoing case and a Holiday Pay provision of £48,717 (2024-25 £45,983). The total of provisions is estimated as £83,911 for NISCC (2024-25 £80,177).

Holiday Pay
On 4 October 2023, the Supreme Court handed down the decision in the case of the Chief Constable of the PSNI v Agnew and others. The judgement confirmed that the claimants are able to bring their claims under the 'unlawful deductions' provisions of the Employment Rights (Northern Ireland) Order 1996 and can thus claim in respect of a series of deductions potentially going back to the beginning of their employment or the implementation of the Working Time Regulations in 1998.

At the point that the Supreme Court judgement was provided, the PSNI had accepted the principle, established by a number of cases in both the European and domestic courts, that the claimants were entitled to be paid their normal pay during periods of annual leave, and that "normal pay" is not limited to basic pay but could include elements such as overtime, commission and allowances.

The outcome of this case has widespread implications for all public sector bodies in Northern Ireland in respect of both the pay elements that must be included in holiday pay calculations and the period of retrospection which means that some employees may be able to bring claims to be rectified as far back as 1998. Under Agenda for Change, the contractual provisions for Sick Pay mirror those for Holiday Pat i.e. payment includes what would have been paid had the employee been in work.

With effect from 1 April 2025, HSC employers have implemented an interim arrangement for the calculation of holiday pay to ensure employees are paid appropriately for periods of annual leave. This interim solution also covers periods of sick leave. This interim arrangement has been agreed with trade unions pending the introduction of the new HR and payroll system in 2026-27. However, a provision in respect of the retrospective payment for holiday pay is still required for the period 1998/99 to 2024/25. The Trust provision at 31 March 2026 reflects this retrospective time frame. In calculating the provision, the Trust has used payroll data available, for all eligible staff, within the current HRPTS system back to 2014 with averaging applied for the prior years and changes in staffing numbers. Actual staffing numbers are available for 2012/13. Staffing numbers prior to this have been estimated based on an assumed 1% increase per annum.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

Revised Working Time Directive (14.5%) and Employer costs rates have been factored in, and compound interest applied. A settlement year of 2028-29 has been used and as such the overall value of the provision has been discounted to determine the net present value.

The key areas of uncertainty include:

- The reliability of the data used.
- The terms of the settlement which is subject to a number of factors including:
  - the determination of a very significant number of cases currently progressing through the Industrial Tribunal;
  - the number of further Industrial Tribunal claims lodged by employees;
  - any settlement of these claims agreed with the claimants or their legal representatives;
  - the number of grievances already lodged by employees in respect of the underpayment / incorrect payment of holiday pay which require to be resolved and any settlement negotiations with trade unions;
  - the number of further grievances received; and
  - any potential requirement to include additional numbers of employees within any settlement.
- The uptake rate for current or past employees.
- The extent of attrition in the workforce.
- Delays in the time it will take to administer the payments, once agreed.
- The extent to which interest will apply.

Another year of interest has increased the provision from £45,983 in 2024-25 to £48,717. No further holiday pay accruals have been added.

A sensitivity analysis has been undertaken to determine how sensitive the total provision is to changes in a number of the assumptions. This analysis will support management in making informed decision in respect of any final settlement.

The calculation of the holiday pay and sick pay provision is sensitive to the rates applied in respect of Working Time Directive, Employers National Insurance and compound interest, as well as the potential uptake in claimants. The table below shows the potential impact of varying applicable rates.

Analysis	**Impact**	
	£	**%**
WTD rate – increase 1%	3,531	7
WTD rate – decrease 1%	-3,532	-7
NIC rate – increase 1%	443	1
NIC rate – decrease 1%	-444	-1
Compound Interest rate – increase 1%	6,102	12
Compound Interest rate – decrease 1%	5,235	-10
Uptake based on minimum 6 Claims per annum	30,723	-60
Uptake based on minimum 4 Claims per annum	22,018	-43

NOTE 16 CAPITAL COMMITMENTS

The Northern Ireland Social Care Council had no capital commitments at either 31 March 2026 or 31 March 2025.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

NOTE 17 COMMITMENTS UNDER LEASES

17.1 Quantitative disclosures around right of use assets

	Land and Buildings £	Other £	Total £
Cost or valuation			
At 1 April 2025	440,861	-	440,861
Additions	-	-	-
Impairments	-	-	-
Transfers	-	-	-
Reclassifications	-	-	-
Revaluations (cost)	-	-	-
Derecognition	-	-	-
Remeasurement	-	-	-
At 31 March 2026	**440,861**	-	**440,861**
Depreciation expense			
At 1 April 2025	190,113	-	190,113
Recognition	-	-	-
Charged in year	88,172	-	88,172
Transfers	-	-	-
Reclassifications	-	-	-
Revaluations (cost)	-	-	-
Derecognition	-	-	-
At 31 March 2026	**278,285**	**-**	**278,285**
Carrying amount at 31 March 2026	**162,576**	**-**	**162,576**
Interest charged on IFRS 16 leases	-	-	-

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

NOTE 17 COMMITMENTS UNDER LEASES continued

17.2 Quantitative disclosures around right of use assets

Under the terms of the license for James House, Belfast capitalised as an asset under IFRS16, no lease liability exists as no rent is payable under the license. Licence terms are consideration of £1 per annum if demanded. No consideration has been paid in 2025-26 (2024-25 £nil), therefore James House has been excluded from the below amounts.

Maturity analysis

	31 March 2026	31 March 2025
	£	£
Buildings		
Not later than one year	-	-
Later than one year and not later than five years	-	-
Later than five years	-	-
	-	-
Less interest element	-	-
Present value of obligations	-	-
Other		
Not later than one year	-	-
Later than one year and not later than five years	-	-
Later than five years	-	-
	-	-
Less interest element	-	-
Present value of obligations	-	-
Total present value of obligations	**-**	**-**
Current portion	**-**	**-**
Non-current portion	**-**	**-**

17.3 Quantitative disclosures around elements in the Statement of Comprehensive Net Expenditure

	31 March 2026	31 March 2025
	£	£
Variable lease payments not included in lease liabilities	-	-
Sub-leasing income	-	-
Expense related to short-term leases	-	-
Expense related to low-value asset leases (excluding short-term leases)	-	-

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

NOTE 17 COMMITMENTS UNDER LEASES continued

17.4 Quantitative disclosures around cash outflow for leases

	31 March 2026	31 March 2025
	£	£
Total cash outflow for lease	-	-

NOTE 18 COMMITMENTS UNDER PFI AND OTHER SERVICE CONCESSION ARRANGEMENT CONTRACTS

18.1 Off balance sheet PFI and other service concession arrangement schemes

The Northern Ireland Social Care Council had no commitments under PFI and other concession arrangement contracts at 31 March 2026 or 31 March 2025.

NOTE 19 OTHER FINANCIAL COMMITMENTS

The Northern Ireland Social Care Council did not have any other financial commitments at 31 March 2026 or 31 March 2025.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

NOTE 20 CONTINGENT LIABILITIES

The Northern Ireland Social Care Council did not have any quantifiable contingent liabilities at 31 March 2026 or 31 March 2025.

Unquantifiable Contingent Liabilities

Public Sector Pensions - Injury to Feelings Claims
The Department of Finance (DoF) is a named Respondent in a class action affecting employers across the public sector and is managing claims on behalf of the Northern Ireland Civil Service (NICS) Departments. This is an extremely complex case and may have significant implications for the NICS and wider public sector. However, the cases are at a very early stage of proceedings and until there is further clarity on potential scope and impact, a reliable estimate of liability cannot be provided.

Holiday Pay Liability
The Northern Ireland Social Care Council has made provision for the potential liability for claims for shortfalls to staff in holiday pay, and for breach of contract in relation to sick pay. However, the extent to which the liability may exceed this amount remains uncertain as the calculation will rely on the outworkings of legal advice, the Supreme Court judgment, the resolution of claims currently lodged with the Industrial Tribunal in Northern Ireland and will be required to be agreed as part of any negotiated settlement with Trade Unions.

20.1 Financial Guarantees, Indemnities and Letters of Comfort

The Northern Ireland Social Care Council did not have any financial guarantees, indemnities and letters of comfort at 31 March 2026 or 31 March 2025.

NOTE 21 RELATED PARTY TRANSACTIONS

The Northern Ireland Social Care Council is an arm’s length body of the Department of Health and as such the Department is a related party with which the Northern Ireland Social Care Council has had various material transactions during the year.

In addition, there were material transactions throughout the year with the Business Services Organisation who are a related party by virtue of being an arm’s length body with the Department of Health.

During the year, none of the Board members, members of the key management staff or other related parties have undertaken any material transactions with the Northern Ireland Social Care Council.

NOTE 22 THIRD PARTY ASSETS

The Northern Ireland Social Care Council held no assets at either 31 March 2026 or 31 March 2025 belonging to third parties.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

NOTE 23 FINANCIAL PERFORMANCE TARGETS

NISCC is allocated a Revenue Resource Limit (RRL) and a Capital Resource Limit (CRL) and must contain spending within these limits. The resource limits for a body may be a combination of agreed funding allocated by commissioners, the Department of Health, other Departmental bodies or other departments. Bodies are required to report on any variation from the limit as set which is a financial target to be achieved and not part of the accounting systems. Following the implementation of review of Financial Process, the format of Financial Performance Targets has changed as the Department has introduced budget control limits for depreciation, impairments, and provisions, which an Arm's Length Body cannot exceed. In 2025-26 NISCC has remained within the budget control limit it was issued. From 2022-23 onwards, the materiality threshold limit excludes non-cash RRL. NISCC has also remained within the 2025-26 materiality threshold limit.

23.1 Revenue Resource Limit

NISCC is given a Revenue Resource Limit which it is not permitted to overspend.
The Revenue Resource Limit for NISCC is calculated as follows:

	2026 Total	2025 Total
Revenue Resource Limit (RRL)	**£**	**£**
RRL Allocated From:		
DoH (SPPG)	4,789,210	4,452,548
DoH (Other, excludes non cash)	-	-
PHA	-	-
Other – SUMDE & NIMDTA	-	-
Total	**4,789,210**	**4,452,548**
Less RRL Issued To:		
RRL Issued		-
RRL to be Accounted For	**4,789,210**	**4,452,348**
Revenue Resource Limit Expenditure		
Net Expenditure per SoCNE	**5,007,080**	**4,691,739**
Adjustments		
Capital Grants	-	-
Research and Development under ESA10	-	-
Depreciation/ Amortisation	(196,201)	(222,965)
Impairments	-	-
Notional Charges	(34,500)	(33,400)
Movements in Provisions	(3,734)	7,016
PPE Stock Adjustment	-	-
PFI and other service concession arrangements/ IFRIC	-	-
Profit/(loss) on disposal of fixed asset	-	-
Other (specify)	-	-
Total Adjustments	**(234,435)**	**(249,349)**
Net Expenditure Funded from RRL	**4,772,645**	**4,442,390**

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2026

	2026	2025
Surplus/ (Deficit) against RRL	16,565	10,158
Break Even cumulative position (opening)	193,954	183,796
Break Even cumulative position (closing)	**210,519**	**193,954**

Materiality Test:

NISCC is required to ensure that it breaks even on an annual basis by containing its net expenditure to within 0.25% of RRL limits or £20k, whichever is greater.

	2026	2025
	%	%
Break Even in year position as % of RRL	0.35	0.23
Break Even cumulative position as % of RRL	4.40	4.36

23.2 Capital Resource Limit

The Northern Ireland Social Care Council is given a Capital Resource Limit which it is not permitted to overspend.

	2026 Total £	2025 Total £
Gross capital expenditure by the Social Care Council	36,388	37,680
(Capital grant receipt)	-	-
Net capital expenditure	**36,388**	**37,860**
Capital Resource Limit CRL allocated from Department of Health (DoH)	36,388	37,855
Adjustment for Research and Development under ESA10	-	-
Total CRL	**36,388**	**37,855**
Overspend/(Underspend) against CRL	**0**	**(175)**

NOTE 24 EVENTS AFTER THE REPORTING PERIOD

There are no post balance sheet events having a material effect on the accounts

Date of authorisation for issue

The Accounting Officer authorised these financial statements for issue on 2 July 2026

Northern Ireland Social Care Council
Board Membership – 2025-26

Board Members are appointed in a personal capacity because of the skills and experience they possess. Membership reflects three broad interest groups:

Lay People: People who have direct experience as a user of social care services, as a carer, or of unpaid work in the voluntary or community sector.

Registrants: People who are social care practitioners, eligible for inclusion in the Social Care Register.

Stakeholders: People who must be directly involved in the commissioning or delivery of social care services, the delivery of education and training in social care or as a representative of a trade union, professional or other regulatory body concerned with health and social care, or be a member of the legal profession.

Interim Chair Gerard Guckian
Non-executive (lay) board member

Bria Mongan
Non-executive (registrant) board member

Carol Diffin
Non-executive (stakeholder) board member

Denise Hunt
Non-executive (lay) board member

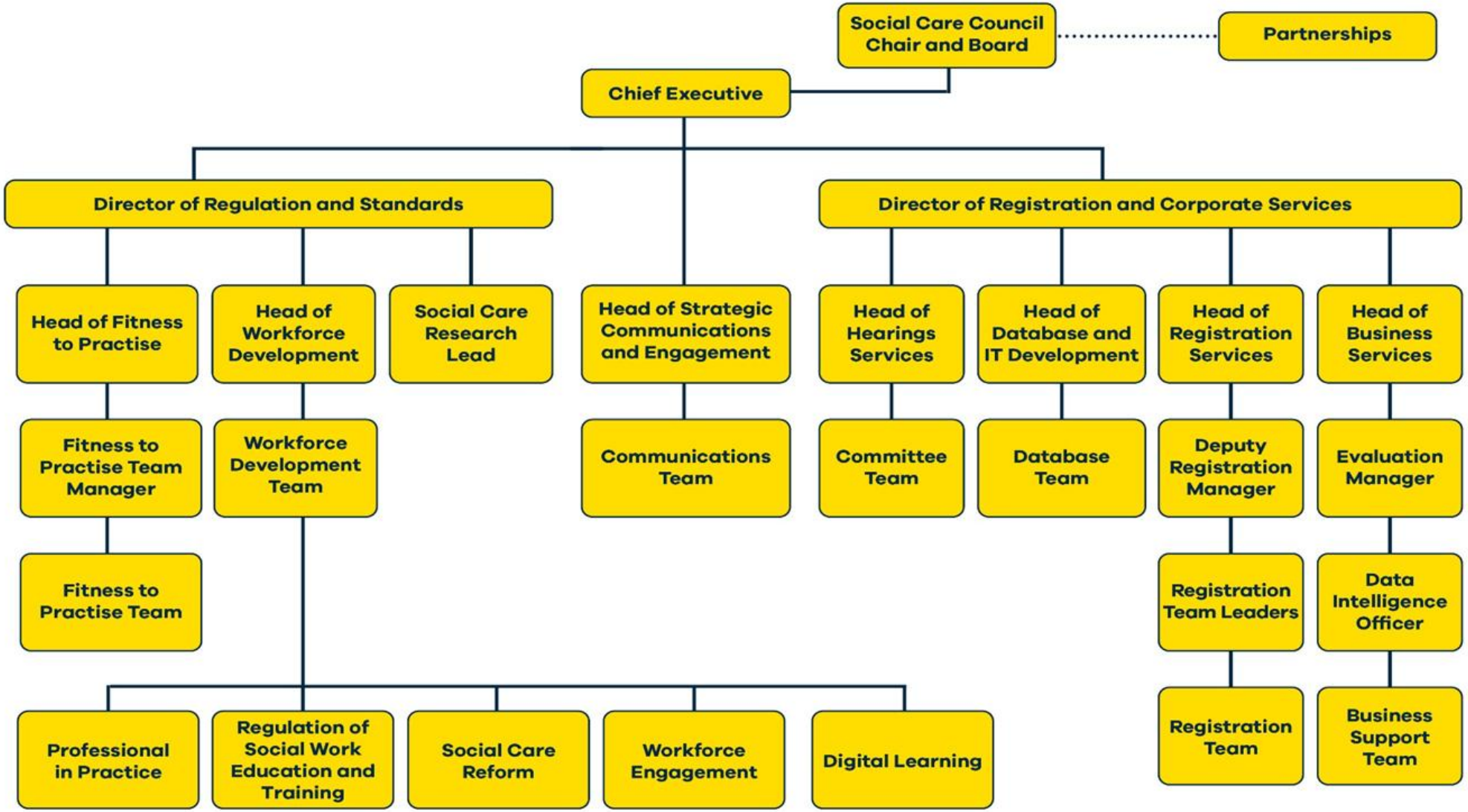
David Hayes
Non-executive (registrant) board member

Jacqueline McGarvey
Non-executive (registrant) board member

Roslyn Dougherty
Non-executive (stakeholder) board member

Sarah Browne
Non-executive (stakeholder) board member

Northern Ireland Social Care Council
Organisational Structure



Northern Ireland Social Care Council
Risk Appetite 2025-26

As noted in the Governance Report, registers of risks are maintained to ensure that business is delivered safely and effectively. The Risk Appetite Statement sets out the level of risk with which the Social Care Council aims to operate. The Council recognises that it may not always be possible, and not financially affordable, to fully remove uncertainty from a decision and that decisions should be made using the best available information and expertise. When decisions need to be made urgently, the information relied upon and the considerations applied to it should be retained; and the risk culture must embrace openness, support transparency, welcome constructive challenge and promote collaboration, consultation and co-operation.

Risk Appetite Statement

The table below, outlines the Risk Appetite across the key areas of Finance, Compliance, Safety, Service Delivery and Reputation.

Area	Statement	Risk Appetite
Finance	The organisation must comply with the statutory duty to breakeven and therefore must be protected from adverse impact from risks which threaten its financial breakeven position.	Cautious
Compliance	The organisation must be averse to risks that could impact upon its compliance with law and regulation, but should be prepared to accept moderate risk in order to achieve its objectives in relation to raising the profile of the social work and social care workforce and sector leadership.	Cautious → Moderate
Safety	The organisation must be averse to risks that could threaten the safety of users, carers, registrants and staff while recognising that the organisation should be prepare to accept a more open approach to safety risk when pursuing objectives associated with development of the workforce, communication and engagement and sector leadership.	Cautious → Open
Service Delivery	Delivery of the organisations core statutory services must be protected, however having an open to hungry approach to risk will help deliver substantial benefits to service users, registrants, employers and the wider social work and social care sector.	Open → Hungry
Reputation	Damage to the organisations reputation can undermine stakeholder confidence however the organisation is prepared to accept a moderate to hungry impact on its reputation as delivery of objectives will provide significant longer term benefit.	Moderate → Hungry

Risk Appetite Matrix

The matrix below, outlines the Risk Appetite in each of the key areas of Finance, Compliance, Safety, Service Delivery and Reputational for each of the Strategic Themes set out in the Business Plan.

Strategic Theme	Financial	Compliance	Safety	Service Delivery	Reputational
	(Impacts on the financial position and sustainability of the Social Care Council)	*(Impacts on the Social Care Council's conformance with legal obligations and stat. duties and its compliance with regulatory requirements)*	*(Impacts on the safety and wellbeing of staff, registrants, service users, partners/stakeholders and the public)*	*(Impacts on the intended/expected delivery of the Social Care Council's services)*	*(Impacts on the Social Care Council's reputation amongst all or some of its stakeholders)*
1. To put **standards** at the heart of social work and social care practice and education and training, so as to support the delivery of effective social care services both now and in the future.	**CAUTIOUS**	**CAUTIOUS**	**CAUTIOUS**	**OPEN**	**MODERATE**
2. To ensure that **regulation** is robust, agile, valued and trusted in order to support good social work and social care practice.	**CAUTIOUS**	**CAUTIOUS**	**CAUTIOUS**	**OPEN**	**MODERATE**
3. To support the **development of the social work and social care workforce** in order that they are able to deliver safe, effective, value led care.	**CAUTIOUS**	**MODERATE**	**MODERATE**	**OPEN**	**OPEN**
4. To promote a **systems leadership** approach that contributes to capacity building that supports leadership at all levels.	**CAUTIOUS**	**MODERATE**	**OPEN**	**HUNGRY**	**HUNGRY**
5. To ensure there is effective and meaningful **communication and engagement** so as to improve the understanding of what the Social Care Council does and the value of the social work and social care workforce.	**MODERATE**	**OPEN**	**OPEN**	**HUNGRY**	**HUNGRY**

Northern Ireland Social Care Council

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niscc.info

or you can follow us across our social channels.

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@NISocialCareCouncil

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@niscc.bsky.social

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