



**Working together.  
Making a difference.**

# The Annual Report and Accounts of the **Northern Ireland Social Care Council**

April 2018 – March 2019

26 June 2019



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26 June 2019

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**The Northern Ireland Social Care Council Accounts  
for the Year ended 31 March 2019**

Laid before the Northern Ireland Assembly under Paragraph  
12(4) of Schedule 1 to the Health and Personal Social Services  
Act (Northern Ireland) 2001 by the Comptroller and Auditor  
General for Northern Ireland on

30 August 2019



# Putting pride and purpose in social care

Northern Ireland



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## Terms and Definitions Used in this Report

This report is also available on the Northern Ireland Social Care Council website [www.niscc.info](http://www.niscc.info). Copies can be made available in a range of different formats on request through our Communications Team at [comms@niscc.hscni.net](mailto:comms@niscc.hscni.net)

<b>Advocacy Groups</b>	Groups and networks representing and involving people who use services and carers
<b>AYE</b>	Assessed Year in Employment – the first year in assessed practice for newly qualified social workers
<b>Board</b>	This is the Board of the Northern Ireland Social Care Council who provide strategic oversight and direction, and comprises a Chair and 12 Members.
<b>BSO</b>	Business Services Organisation – provides a range of services for Health and Social Care organisations
<b>Council</b>	Refers to the Northern Ireland Social Care Council – also described as the ‘Social Care Council’
<b>CPD</b>	Continuing Professional Development – ongoing learning and training
<b>DoH</b>	Department of Health – the government body responsible for Health and Social Care in Northern Ireland
<b>DRILL</b>	Disability Research on Independent Living & Learning – is a four Nation Research Project which delivers the world’s first major research programme led by disabled people
<b>ECHO</b>	Extension for Community Healthcare Outcomes - Project to build groups of people to use video conferencing to share learning and good practice
<b>ENGAGE</b>	ENGAGE is a central resource for involvement in Health and Social Care (HSC) in Northern Ireland
<b>FtP</b>	Fitness to Practise – a registrant’s suitability to work in social work or social care
<b>GDPR</b>	General Data Protection Regulation – the legislation around holding and using personal information
<b>HR</b>	Human Resources – manages staff well-being, development and their employment
<b>HSC</b>	Health and Social Care – the people, systems and facilities that provide medical and personal care and support
<b>ICO</b>	Information Commissioners Office – the organisation that upholds information rights for the public.
<b>IAR</b>	Individual Assessment Route – an option for social workers to have their learning and practice assessed and get a Northern Ireland Social Care Council Award

<b>ICT</b>	Information and Communications Technology –computers, networks, websites and Apps we use
<b>IFSW</b>	International Federation of Social Workers – a worldwide body representing social work
<b>IIP</b>	Investors in People – an award for good standards in staff and organisation management and development
<b>ISO</b>	Interim Suspension Order – temporary action to stop a registrant working while we make enquiries about a very serious complaint
<b>KPI</b>	Key Performance Indicator – standards we use to measure how well we are doing our job
<b>KSF</b>	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.
<b>NI</b>	Northern Ireland
<b>PiP</b>	Professional in Practice – the framework for social workers’ on-going learning and qualifications
<b>PPI</b>	Personal Public Involvement – describes the scheme through which we engage service users and carers.
<b>PRTL</b>	Post Registration Training and Learning – 90 hours of learning that all registrants must do to keep their registration up to date
<b>Registrant</b>	A person approved for registration on the Social Care Register – social workers, social care workers and social work students
<b>RQIA</b>	Regulation and Quality Improvement Authority – checks Health and Social Care organisations are doing their job well
<b>SSSC</b>	Scottish Social Services Council – registers social workers and social care workers working in Scotland
<b>Sector Skills Council</b>	The 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
<b>VBR</b>	Values Based Recruitment – ensuring that people entering social care and social work roles have the right qualities for the job
<b>UK</b>	United Kingdom

## Chair's Introduction



### Welcome to the Northern Ireland Social Care Council's Annual Report and Accounts for 1 April 2018 - 31 March 2019

This report provides an insight into how we have successfully delivered on our responsibilities to regulate and support the development of a strong and professional social work and social care workforce that meets the complex needs of our society.

We believe that people in Northern Ireland should experience a better quality of social care services as a result of our work to regulate and develop workforce standards and we are committed to working closely with providers of health and social care services so that they can deliver improved care.

We are measuring the impact of our work and using feedback from our stakeholders to ensure that what we do is continuing to make a difference to help achieve our strategic aim to: ***“...protect the public from poor standards of social care, raise the standards of social work practice and strengthen the professionalism and practice of the social care workforce...”***

This year we welcomed the Department of Health Permanent Secretary, Richard Pengelly, along with Sean Holland, Chief Social Work officer, to join one of our Board Strategic Sessions. This was a valuable opportunity to share information with them about our organisation and the outcomes we are creating for the social care sector.

It is a significant challenge for the Northern Ireland Social Care Council (the Council) to ensure the 42,000 people registered with us have the knowledge, skills and training required to support the transformation of

social care envisaged by the Department of Health in NI. The Permanent Secretary's positive endorsement of the Council's achievements towards our strategic outcomes was very reassuring for the Board and staff members.



Currently, with the DoH, we are reviewing our work and existing remit and are exploring opportunities to enhance our contribution to the transformation agenda and to improving our support to the dedicated workforce we regulate and to those who employ them. We remain optimistic that we can enhance our services to registrants and other key stakeholders recognising as we must the budgetary constraints of the present time.

A key element of the work undertaken by staff and the Board members this year was to deliver an extensive programme of stakeholder engagement. This focused on helping newer registrants to consolidate their standards of education, training and practice, whilst also supporting established registrants to continually reflect on and improve their

practice. We also met with individuals and groups of people who use services and carers to introduce them to the personal benefits of raising workforce standards. Feedback from those we met in person, or who we reached through our digital media, was overwhelmingly positive and we are committed to more of this outreach in 2019/20.

I would like to commend the work of the Council who, in partnership with BASW (NI), published and launched the research 'Voices of Social Work Through the Troubles'. This excellent publication gives voice to those hundreds of social workers who worked tirelessly through our most troubled times in NI, offering practical help and dedicated professional support to our most vulnerable people at a time of great need and distress. This publication we are determined to follow up as means of ensuring that the voices of all those social workers involved in our troubled history are heard.

While this Annual Report details the many achievements delivered during the year, it would be remiss of me not to recognise the significant contribution made by members of the Northern Ireland Social Care Council Board, Committees and Partnerships – the Participation Partnership, Registrants Forum, Workforce Development Partnership and Professional in Practice Partnership. The inclusivity and quality of joined up working from these individuals and Partnerships strengthen the Council as the workforce regulator; ensure that we are held to account

for what we strive to achieve; and continue to be challenged to be the best at what we do.

I wish to pay tribute to Colum Conway, former Chief Executive, who left the Council in August to head up the new regulator, Social Work England. We wish Colum well and thank him for his contributions during his five years with the Council. I also thank Patricia Higgins for taking on the role of Interim Chief Executive, successfully leading the organisation in delivering the Business Plan objectives for 2018/19.

Sadly this year we lost Kevin Mulhern our Communications Manager. In the 12 months Kevin was with us he made a huge contribution to improving our visibility and communications with all stakeholders including service users. He will be sorely missed by all who had the privilege of working with him. We are delighted that Claire Trainor agreed to join the Council and carry on the excellent work Kevin had started. Kevin's work will not be forgotten.

Finally, I thank our staff, for their ongoing commitment and dedication to meeting our objectives, and the Board for its effective governance.

Everything we do is focused on care and this commitment is the same today as it was at our inception in 2001. Together with our stakeholders, we are proud to raise the standards of care and proud to make a difference to people's lives. On behalf of the Northern Ireland Social Care Council's Board, I am pleased to present this report to you.



**Paul Martin**, Chair, Northern Ireland Social Care Council

# Section 1 – Performance Report

Organisational Performance, April 2018 – March 2019



## Statement by the Interim Chief Executive, Patricia Higgins

This Annual Report for the period April 2018 to March 2019 reflects the successful performance against our business objectives, all of which was achieved during a year of significant change for the Council; in terms of both our organisational structure and the wider social care sector. I was appointed Interim Chief Executive in September 2018, and therefore from myself and my predecessor Colum Conway, I would like to thank everyone who contributed to achievement of these outcomes.

As you will see in the Performance Report, the Council set and delivered an ambitious agenda for 2018-19. In addition to maintaining the Social Care Register of over 42,000 registrants and addressing Fitness to Practise concerns, we committed to an extensive programme of engagement with and on behalf of our stakeholders; promoting the value and contribution of social work and social care and strengthening leadership in the social care sector.

Council staff and Board members participated in external projects to inform policy and strategic workforce development. We have

also used our expert knowledge of the workforce, and our established partnerships with the sector, to lead on a number of projects in support of the Department of Health's transformation work. This included delivering training to the domiciliary care workforce to support upskilling and the development of a Systems Dynamics Model for domiciliary care.

We recognise that the expectations of the social work and social care workforces are changing rapidly as services and technologies develop. This year we undertook the Five-Year Review of the Degree in Social Work to establish whether the curriculum content, the teaching and the practice learning opportunities within the Degree in Social Work were preparing students to be able to practise confidently in their profession.



The Review of the Degree project team

We also sought views on how to 'future-proof' the Degree. Initial feedback from the

consultations has been strongly positive, indicating that the Degree is preparing students for the complexity of social work practice. The final report will be published later this year.

Social care as a job role is also changing rapidly, with staff being asked to deliver increasingly complex services to enable people to remain living within their communities. Feedback from employers has been that they need assistance to develop staff skills and knowledge for them to meet these changes. They also have highlighted issues in recruiting and retaining staff who have the right skills and values to join the workforce and who will consider social care as a long-term career prospect.



This year, five organisations participated in our pilot to test a Values-Based approach for the recruitment of social care workers which resulted in the development of an online toolkit.

The toolkit will be published on our Learning Zone later this year and will provide a valuable

resource to support employers to embed social care values into their criteria for recruitment.

We also completed a scoping exercise with the sector for a Learning and Improvement Framework for Social Care, which will support delivery of the Department of Health 'Learning and Improvement Strategy (2019-2027)'. The Social Care Learning Framework will be developed during 2019-20 and will provide a firm foundation for a recognised career structure for the social care workforce.



Development of our own technology platforms continued this year to support registrants in their learning and development. The Learning Zone now has nine interactive learning resources available, providing a wide range of free resources for registrants and their employers to help embed the Council's Standards of Conduct and Practice.

The upgrade to the registration online system and database was completed in July, providing an improved online service for registrants and employers. The new software

is streamlining registration processes, with a mobile friendly platform and automated renewals for existing registrants now available. Development of the system will continue during 2019-20, with improvements to the feature for recording CPD activities and the introduction of online Fitness to Practise referrals expected in the second half of the year.

Fitness to Practise activity continued to grow during 2018-19, with a 17% increase in the number of referrals received in 2017-18. The growth in referrals is placing a demand on the Fitness to Practise Team and the Council is therefore undertaking a review of the business trends and resources to ensure the function is appropriately resourced to continue delivering high quality work across all of its Fitness to Practise activity. I expect the outcome of this review to conclude in the coming months.

## **Financial Performance**

Despite the challenging workload undertaken this year, we fully delivered our objectives on time and within budget. The accounts for 2018-19 as set out in this Annual Report and Accounts give a detailed account of how the budget was managed and allocated throughout the year, including the break even position of an £8k surplus (0.29% of RRL) which was within the KPI target of breaking even within £20k. A summary of our performance against Key Indicators is detailed later in this section.

Our work is themed across five strategic priorities. An overview and commentary on our performance against the objectives for these strategic themes during 2018-19 is set out in the following pages.

# 1

## Standards – Putting Standards at the Heart of Social Work and Social Care Practice and Education and Training

**Our Aim:** To set and raise standards across social work and social care practice, education and training and to ensure these are at the heart of our work

### Our Actions

What we did

### Our Achievements

during 2018/19

**Delivered a programme of engagement events** to increase understanding about the benefits of registration and professional standards

**50** engagement events held involving:

- **900** Registrants
- **190** Social Care Managers
- **27** Employers
- **73** People who use services and Carers

**98%** of the people we engaged with said the sessions they took part in were “Good or Excellent “

**20% improvement** in knowledge reported by those engaged in events

**Hosted Forums for Social Care Managers** to build professional networks and update their knowledge and practice



**400** Social Care Managers participated in **4** Forum events in Belfast, Omagh, Antrim and Carrickfergus

**90%** of managers taking part in the forum events told us

*“...the learning from the event will improve my practice.”*

**Consulted with registrants and employers** about the impact of registration and standards on the quality of social care practice

**850** social care workers and **109** employers responded to our online survey for the **Evaluation of Registration Policy Project** giving feedback on how this is benefiting them and the people they care for

**50%** of social care registrants responding to the survey said they are using the Standards regularly at work

and

**47%** of employers said they are regularly using the Standards in workplace learning.”

## Surveyed social work registrants

about the impact of the Standards on professional practice and how best we can support them to develop their practice

**529** social workers responded to our survey about **Standards and Professional Regulation**

**58%** of respondents reported that the *“Standards are helping improve the quality of my practice.”*

**75%** of social workers responding to the survey said *“Standards are helping to improve quality of social work practice within my service”*

and

**76%** agreed that *“...having recognised Standards for Social Work increases public confidence in the profession”*

## Developed the Online Learning Zone

to provide accessible free learning resources for registrants and employers

**9** Learning Zone products launched including:

- *Adult Social Care,*
- *Social Care Induction,*
- *Safe and Compassionate Care*

- **700** Learning Zone users each month
- **88%** were new users

**47%** of managers and mentors said they would use the Learning Zone resources to support staff learning and development”



**58%** of registrants who had used the Learning Zone said they would use it regularly (at least once a month)

and

**72%** said the Learning Zone *“has helped me improve my skills and knowledge”*

## Outcomes – the difference this work is helping to make

- ✓ **Registrants have a greater understanding of the Standards and their application**
- ✓ **Accessible learning resources are available to support workforce registration and standards**
- ✓ **Social care managers are sharing best practice and building professional forums**
- ✓ **Employers are supported in their use of the Standards**
- ✓ **Service users and carers know what standard of care they can expect and how they will be treated**

# 2

## Regulation –Regulate the Workforce and Social Work Education and Training

**Our Aim:** To establish clear benchmarks for good social work and social care practice through our Registration, Fitness to Practise and Regulation of Social Work Education functions

### Our Actions

What we did

**Maintained the Social Care Register** and updated processes for the **new database** and **online portal** to efficiently manage registration

**Published 'Relationships Matter' research** to increase understanding of why people make complaints about social workers and to reduce causes of the complaints

### Our Achievements

during 2018/19

NI Social Care Register - End of 2018/19  
Total 42,468



■ Social Work ■ Social Care ■ Social Work Student

- **42,468** registrations maintained
- **8888** applications processed
- **307** registration suitability assessments completed
- **78** registrations updated to reflect Fitness to Practise decisions

- **37%** of registrants used the **Online Portal** to pay fees
- **34%** of registration renewal **applications** were completed through the automated online system



**Analysis of complaints** about social workers is being used in workshops/online guidance.

## Investigated and took action on Fitness to Practise Issues

ensuring appropriate action was taken to maintain the integrity of the workforce and protect the public

## Revised the Standards of Acceptance

for Fitness to Practise issues to assist people in referring appropriate concerns to the Social Care Council

## Completed audits of PRTL for social workers and social care managers, and an audit of newly qualified social workers compliance with AYE standards

- to ensure they are meeting the required Standards in their professional development

**460 individuals referred** to Fitness to Practise and the allegations assessed. – resulting in:

- **44 Interim Order** cases heard (24 reviews & 20 new)
- **401** new cases **opened**
- **307** cases **concluded**
- **70** FtP Committee sittings for **142** considerations
- **18** cases concluded through Consensual Disposal
- **22** cases concluded and **5** decisions reviewed through Fitness to Practise Hearings

## 59 Sanctions

applied regarding registrant's Fitness to Practise

- **18** Interim Suspension Orders
- **15** Warnings
- **1** Undertakings
- **1** Conditions of Practice Order
- **2** Removals by agreement
- **3** Suspension Orders
- **19** Removal Orders

- **99%** of FtP referrals triaged within 3 days
- **100%** of Interim Order Hearings completed within 4 weeks
- **94%** of FtP cases closed within 15 months

## PRTL Audit – Social Workers and Social Care Managers

- **64** registrants in sample
  - **47** met the standards and **2** required additional information
  - **13** deferred
  - **2** voluntarily removed from the Register

**40** social care workers worked with us on the Social Care PRTL Audit Pilot in preparation for 2019/20 audit schedule

## AYE Audit

- **18** AYE submissions sampled & all confirmed to have met the standards for assessment and consistency

## Outcomes – the difference this work is helping to make

- ✓ **The Social Care Register provides an accurate public record of the registered workforce**
- ✓ **Registrants and employers are using our registration systems and materials to support their registration**
- ✓ **Employers and registrants have greater awareness about Fitness to Practise for social work and social care**
- ✓ **Social work education and training is current and relevant to service needs**

# 3

## Workforce Development – Developing the Social Work and Social Care Workforce

**Our Aim:** To support workforce learning and development to deliver safe, effective and values-led care which will help improve outcomes for people who use services

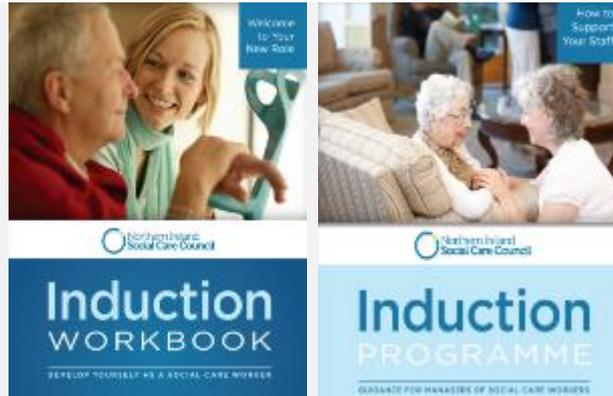
### Our Actions

What we did

### Our Achievements

during 2018/19

**Revised and launched the Social Care Induction Standards Guidance and Manager's Programme** to support managers and new members of the workforce



### Induction

Standards and Programme for Managers published in the Online Learning Zone and promoted at manager/employer engagement events.

**Piloted Open Badges for social care training** to support social care CPD and recognise in-service training and learning



- **2 Open Badges** developed for 'PRTL' and 'Deprivation of Liberty'
- **4** members of the Open Badges Pilot successfully achieved Open Badges

**Reviewed and developed learning opportunities and qualifications** for the social care workforce

**Level 4 Certificate** in Leadership and Management for Adult Social Care launched

**230** registrants participated in 4 lunchtime Seminars and **19** watched online

**100%** of participants reported the training delivery was good - Excellent

**Project Echo** established for Social Care – using video technology to build hubs to share social care knowledge among

- **57** people participated in **3** ECHO hubs
- **91%** of participants rated ECHO learning experience as high quality
- **96%** of participants said they had learnt something useful for their service or practice

<p><b>Managed a programme of enhanced training</b> for the domiciliary care workforce to support HSC Transformation</p>	<ul style="list-style-type: none"> <li>• <b>23</b> training events hosted by the Social Care Council</li> <li>• <b>131</b> in-house training events delivered by social care organisations</li> <li>• <b>£69.5k</b> funding disbursed to support training costs</li> </ul>	<p><b>Priority topics</b> included:</p> <ul style="list-style-type: none"> <li>• Dysphagia, Frailty</li> <li>• Continence Management</li> <li>• Medication Management</li> <li>• Mental Health Awareness</li> <li>• Palliative Care</li> <li>• Reablement</li> <li>• Fundamentals of Autism</li> </ul>
<p><b>Supported and developed recruitment and employability programmes</b> to help build a sustainable workforce</p>	<ul style="list-style-type: none"> <li>• <b>58</b> Ambassador presentations to 380 students</li> <li>• <b>1254</b> young people engaged at Skills NI event</li> <li>• <b>350</b> careers teachers engaged at <b>2</b> regional conferences</li> </ul>	<ul style="list-style-type: none"> <li>• <b>51</b> people engaged at <b>3</b> Employment Academies</li> <li>• <b>22</b> people engaged in Belfast City Council Social Care taster sessions</li> <li>• <b>17</b> people new to social care gained employment</li> </ul>
<p><b>5</b> organisations engaged in six month pilot to develop Values-Based Recruitment programme which will be launched in 2019/20</p>		
<p><b>Reviewed the Degree in Social Work</b> to ensure <b>its' quality and curriculum</b> delivers newly qualified social workers ready to meet service and sector needs.</p>	<p><b>Positive</b> Review Report is due Summer 2019</p> <ul style="list-style-type: none"> <li>• <b>225</b> Degree social work students graduated</li> <li>• <b>177</b> new social workers employed started AYE</li> </ul>	<ul style="list-style-type: none"> <li>• <b>280</b> social workers engaged in PiP information sessions</li> <li>• <b>176</b> social workers achieved PiP Awards</li> <li>• <b>546</b> social workers achieved part PiP Awards</li> </ul>
<p><b>Developed and approved learning opportunities for PiP Framework</b> to support social work CPD</p>	<p><b>PiP Work Based Learning Route developed</b> to recognise in-service learning and development</p>	<p><b>PiP Award at Doctorate level developed</b> extending the range of PiP Awards</p>

### Outcomes – the difference this work is helping to make

- ✓ Positive promotion of social work and social care careers
- ✓ Recruitment is supported for social work and social care
- ✓ Social care training is maximised
- ✓ Social work training meets professional standards
- ✓ Career development is improved

# 4

## Systems Leadership – Promoting a Systems Leadership Approach Across the Sector

**Our Aim:** Through collaborative working, to facilitate new thinking and fresh perspectives to reduce harms, minimise risks and improve quality in the delivery of social care services

### Our Actions

What we did

### Our Achievements

during 2018/19

**Strengthened connections between social care leaders** to support collective leadership

**3 roundtable workshops** hosted for voluntary sector leaders to establish connections.

Participants have committed to establishing a network to influence social work and social care strategic priorities

**Leadership workshop** facilitated for our Workforce Development Partnership to support development of collective leadership culture that recognises and promotes collaboration and quality improvement.

**Engaged sector leaders in workforce modelling and use of technology** to support service improvement

**Workforce planning and sustainability** supported through workshops with social care managers and leaders for the **Domiciliary Care Systems Modelling project**

**Hosted ‘Social Care & Connected Health Matters’ conference** on behalf of the Northern Ireland Connected Health Ecosystem, a member of the ECH Alliance International Connected Health Ecosystem Network.

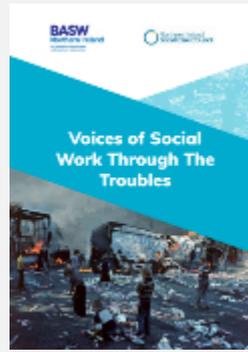
**Participated in DoH transformation and Brexit projects and work streams** to provide expert knowledge and facilitate social care workforce engagement

**30** Domiciliary Care Workers involved in **3** focus groups for ‘Power to People’ consultation to share their views and experiences of front line practice with the project team.

**Social Work Strategy work streams and evaluations** supported and sector intelligence provided to inform strategic workforce development

**Brexit** scenario planning undertaken within the HSC project board to manage transition effectively.

**Shared knowledge with local, national and international colleagues** to promote best practice and innovation



**Commissioned internationally renowned research** - 'Voices of Social Work Through The Troubles' - exploring social workers' role during the Northern Ireland conflict.

**Facilitated** meetings and workshops with UK and Ireland regulators to monitor standards of education and regulation and share learning.

**Shared our experience and knowledge** with approx. **800** social work influencers from across 30 different countries including CLEAR Educational conference and IFSW Dublin seminar

**Engaged and informed Local Council Community Planning** about social care economic and community contribution

**4** local Council Community Planning Leads have increased awareness of the benefits of including social care provision in community planning.

### **Outcomes – the difference this work is helping to make**

- ✓ **Leaders in the sector collaborate to influence the development of the workforce and services**
- ✓ **Strategic workforce development is informed by our sector intelligence to ensure the workforce is skilled and able to respond to changing service needs**
- ✓ **Our model of regulation is informed by and influences best practice in professional workforce regulation**

# 5

## Communication and Engagement– Communicating, Connecting and Engaging with our stakeholders

**Our Aim:** Meaningful and effective engagement with our stakeholders will support us in delivering our plans

### Our Actions

What we did

### Our Achievements

during 2018/19

**Delivered communications campaigns** to promote our business

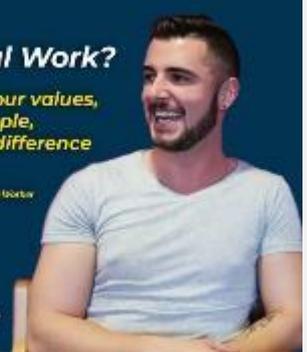
**Campaigns** delivered across our website, social media and e-zines including:

- World Social Work Day
- Social Work and Social Care Careers
- Workforce Registration
- Social Work Awards
- Professional In Practice

#### Why Social Work?

*'It's all about your values, supporting people, and making a difference in their lives'*

Michael Egan, Social Worker



**Extended our digital platforms** to include Instagram and Linked In

Communications and Engagement Team won Skills NI **'Best Stand'** for social media promotion of the event.

**5,254** social media followers across all platforms

**82** videos produced to promote social work and social care achievements on digital platforms

- **14,000** website visits (average) per month
- **49,000** monthly page views (average) on our website for social work and social care news and resources.

**#Yes2SocialCare** Video campaign celebrating careers in care reached 27,980 people across digital channels.

**E-zines** produced for social work and social care registrants to keep them in touch with our work



**Engaged with employers, careers advisers and education providers**

to promote social work and social care careers



**#Yes2SocialWork #Yes2SocialCare**

**Social media straplines** developed to encourage sharing of careers and recruitment activity supported by staff, Ambassadors and sector partners

**Engaged with local representatives**

to increase understanding of our role as social care regulator

**Briefings** provided to Health representatives on the role of regulation and the value of the social care sector.

**Supported stakeholders to engage with our services**

and access information about what we do

**82,380** people supported by our Customer Services Team through our enquires service and fees lines

**79%** of people responding to the Customer Survey reported positive satisfaction with the service

**Developed our capacity to involve people who use services and carers**

in our work

**4** new members recruited to the Participation Partnership to inform and advise on our work

**60** people who use services engaged through partner events to extend our capacity to involve people who uses services and carers in our work

**Outcomes – the difference this work is helping to make**

- ✓ Improved public perception of social work and social care as a workforce that is committed to high standards
- ✓ Increased confidence in the contribution of regulation and workforce standards towards strengthening public protection
- ✓ The views and experiences of service users, carers, registrants and employers informs and shapes what we do to ensure we are effective in raising standards to meet their needs

### Strategic Theme 1 - Standards

**Putting Standards at the heart of social work and social care practice and education and training** - Setting and raising standards in social work and social care practice, education and training and ensuring these are at the heart of our work.

Standards are the cornerstone of everything the Council does to strengthen the professionalism of the registered workforce across NI. Our focus continued on providing the supports to ensure that registrants, their employers and stakeholders are aware of the standards and how they apply in daily practice.

Our Workforce Engagement team delivered 50 information sessions in social care settings; talking to registrants and managers about the responsibilities of professional registration. They also met with over 70 people who use services and their carers to raise awareness about workforce registration and how the Standards can help improve the quality of the services they receive.

We extended the range of online resources to support registrants and employers with the launch of the Learning Zone. During the year, nine learning products were published on the site, providing interactive resources which will help registrants and employers develop their understanding of the standards.

Together with members of our Participation Partnership, we shared the Easy Read version of the Council's Standards of Conduct and Practice and accompanying leaflet 'What I Need from my Social Care Worker' with people in social care settings to help increase their understanding of the work being done through workforce regulation to ensure they receive the best standards of care.

Jointly with the system regulator, RQIA, we promoted the Council's Standards for registrants and employers and evidenced the links with best practice at forums with social care managers across Northern Ireland. We also worked with RQIA to identify mechanisms to monitor employer's compliance with their Standards and how they are being implemented with the workforce. This will continue into 2019/20 to help integrate the Standards into inspection and reporting.

This year we used our Evaluation Framework, to identify the incremental improvements in the use and application of the Standards for Workers and Employers. This tracking of development towards embedding the Standards will continue into 2019/20.

## Strategic Theme 2 – Regulation

**Regulating the Workforce and Social Work Education and Training** – Ensuring the functions of Registration, Fitness to Practise and Regulation of Social Work education establish clear benchmarks for good social work and social care practice

2018/19 has been our first full year of business since completing the roll out of registration to the domiciliary and day care workforce. The register continued to grow in 2018-19, numbering just over 42,000 at year end and is likely to remain at this level in the longer term.

Social care workers occupy the largest proportion of the register with 35,500 registrants on the register (over 80%). During the year, our registration team processed 8,888 applications (new and renewals). The new registration database which was introduced in July 2018 has functionality to automate online registration renewal applications, therefore the majority of manual processing work now centres on new applications, or those that are not submitted online.

To ensure that registrants are meeting our requirements for standards in their learning and development, we sampled 61 social workers and social care managers for PRTL Audit during the year. 44 successfully completed their submissions and the reflection on their practice was of a high standard. 13 were granted approval to defer and 2 applied

for voluntary removal from the register as they were no longer practising.

During the year, we continued with the project with the Department of Health and the Social Care Institute for Excellence to evaluate the impact of registering the social care workforce. In this second year of the project, employers have indicated 73% positive endorsement that registration and standards are helping to improve quality of services and reduce risks to service users.

The longer term focus for registration is now on helping registrants maintain their registration and develop their professional practice and working with employers to take forward their responsibilities in supporting their workforce to meet these requirements. Our Communications and Workforce Engagement staff have delivered a programme of information and engagement to support registrants and their employers throughout the year and this will continue.

As a regulator, the Council has responsibility for workforce standards and standards of social work education and training. This year, our Fitness to Practise team received 460 allegations against registrants and in that time, assessed and concluded 307 cases.

This was a 17% increase on referrals received in 2017/18 (384). Referrals also experienced an increase between 2016/17 and 2017/18 of 30%; all of which largely reflects growth in

numbers on the register. Despite this increase, the overall volume of complaints against registrants remains at less than 1% of the registered workforce.

The Standards of Acceptance for Fitness to Practise referrals were revised this year. These provide guidance on the type of concerns that are appropriate to refer to the Fitness to Practise team. Currently 87% of referrals result in a Fitness to Practise case. Those that did not meet the threshold may not have had sufficient grounds for investigation, or there may not be adequate evidence provided to support this action. Further engagement will be taken forward with employers during 2019/20 to raise awareness about the thresholds to reduce the number of unnecessary referrals.

The new Model of Regulation, which includes the opportunity to consensually apply Warnings or Conditions in cases where there are minor breaches of the standards, is now well established. 18 cases were concluded consensually; providing resolution for complainants and registrants in a less stressful process. More details of Fitness to Practise activity is included in the KPI analysis at page 30.

## **Strategic Theme 3 - Workforce Development**

**Developing the Social Work and Social Care Workforce** - Better outcomes for people who use social care services will be achieved

by a regulated workforce that delivers safe, effective and values led care.

The Workforce Development Team led an extensive range of engagement to deliver on our objectives to develop the workforce and the training needed to further their skills and knowledge. Following a detailed review of qualifications for social care, the new Level 4 Certificate in Leadership and Management for Social Care was launched in 2018/19. This new qualification will assist career progression into social care management.

At the opposite end of the career spectrum, the revised Induction Programme and accompanying programme for Managers was launched at the Social Care Managers Forum in May 2018 and has been welcomed by employers in developing new workers and aligning their training with the Standards.

Commitment to development of Social Care Managers as a professional network continued in 2018/19 with four Managers Forum events in May and November. 400 managers took part in the events to discuss registration and practice issues. 90% said that it helped improve their practice.

The lunchtime seminars for social workers and social care workers also proved popular, with a wide range of themes including 'Respectful Sharenting' and 'Three Steps to Positive Practice'. These seminars are an opportunity for our registrants to share their learning and practice with their colleagues. Videos and

presentations from the seminars are available from our website for those who want to catch up. A rolling programme of dates and topics is published on the Events section of our website and shared in registrant e-zines.

Entry to the social work profession remains healthy with 225 new social workers graduating this year. The project team for the Five Year Review of the Degree completed an extensive series of surveys, interviews and focus groups to review the curriculum and delivery of the Degree. The final report is currently being drafted. Initial feedback is positive, indicating the Degree is developing social work students to be reflective practitioners who are able to effectively build relationships with people who use services.

The Review included discussions on 'future-proofing' the Degree to ensure it meets service needs. This focused largely on developing digital skills and techniques to manage personal well-being. The feedback will be included in the actions within the Review report.

Social workers are committed to continuing their learning and developing their practice. 176 social workers achieved Professional in Practice Awards for their CPD with a further 546 having achieved part of an award.

## **Strategic Theme 4 - Leadership**

### **Promoting a Systems Leadership Approach across the Social Care Sector -**

Through collaborative partnership working, facilitating new thinking and fresh perspectives to reduce harms, minimise risks and improve quality in the delivery of social care services

The Council has a key contribution to make to leadership at a systems level across Health and Social Care. We work to both contribute and influence the development and transformation of the system as well as being a connector for many parts of the system that do not always have a prominent position.

Through the Workforce Development Partnership, the Council brings together key interests from across the social care sector to discuss strategic issues and identify opportunities for shared working to improve recruitment and retention, development, profile and positioning of the workforce.

This year, the Council had a focus on supporting and strengthening social work leadership networks. Creating connections for and with the Voluntary sector forms part of this work, in an effort to ensure that voice is heard and reflected in strategic development for social work and social care.

The Council has taken forward two key projects on behalf of the Health and Social Care Board to support transformation of the social care workforce. A project to support and deliver enhanced training to front line domiciliary care staff on priority learning areas began in September 2018. This training is being delivered in-house within social care organisations and through regional sessions

organised by the Council. In the first six months, over 2,000 people have accessed training and funding of £69.5k has been released to assist employers with training and backfill costs. This project will continue until March 2020.

Staff also provided engagement with front line social care staff to consult on recommendations within the 'Power to People' report. Jointly with UNISON, 30 social care registrants were engaged in 3 focus groups to share their experiences of front line practice. Feedback from these groups will be key in the final report from the Department of Health.

In our role as the NI partner of Skills for Care and Development, the sector skills council for social work, social care and early years, we have continued to work with our UK partners on issues affecting strategic workforce development, in particular improving recruitment and retention rates across the social care sector. Shared learning came from work on the impact of values based recruitment approaches leading to the development of a suite of resources for NI employers. The NI voice of domiciliary care was used in another UK wide project where we worked together to further develop 'A Question of Care – A Career for You', an online tool to help people explore if they have the right attributes for working in social care.

We have also worked closely with education and regulatory partners here in NI and in the

Republic of Ireland to share best practice, making a significant contribution to the International Federation of Social Work when almost 2,000 social workers from across the world came to Dublin. We have also shared our work at a national and international level with other workforce regulators where we learn and influence the future direction of regulation.

We recognise our organisation is uniquely placed to develop intelligence about the shape, size and composition of the entire social work and social care workforce. To ensure that we can use our data effectively towards developing the sector, we have invested capabilities to generate reports to maximise the data held in our database and will continue to develop our expertise in information management through 2019/20.

## **Strategic Theme 5 - Communication and Engagement**

**Communicating, Connecting and Engaging** - Effective and meaningful communication and engagement will support the delivery of the Corporate and Business Plans

As this report shows, Council staff, Board members and our partners have undertaken a wide range of engagement to promote workforce regulation and standards.

We have directly engaged with 1600 of our stakeholders through workshops and events. We have indirectly engaged with another 2000 stakeholders by participating and presenting

at conferences and events hosted by our partners. Feedback from this engagement has been very positive, with 90% telling us that they welcome this practical approach to engagement and they appreciate the opportunity to 'meet the Council'.

The Communications Team lead on a programme of briefings to inform local politicians at Assembly and local Council level about our role as a regulator and the positive contribution of social care. We met with Community Planning leads to build links to support future Community Development.

Throughout the year, we produced news features for our website, e-news and social media; sharing information about training opportunities and celebrating successes like World Social Work Day, International Association of Social Work Conference (Dublin 2018) and the commendation by the International Federation for Social Work for the publication of 'Voices of Social Work Through The Troubles'.

We committed to extending our digital platforms in 2018/19; building a stronger image for the Council and engaging a wider audience. A refreshed colour palette was introduced for our corporate materials to reflect this and work is underway to integrate this through all our print and digital materials.

This work will continue during the 2019/20, and will include the launch of our new website

which will provide a more streamlined service that reflects feedback from those who currently access our services and information through the website.

## Infrastructure

Our strategic objectives are supported by an overarching corporate objective to 'ensure we have the necessary infrastructure i.e. the people, resources, governance and estate management arrangements in place to deliver its strategic objectives'.

**Resources** – The Council manages a number of its Business Support functions through Service Level Agreements with the Business Services Organisation (BSO) – these include, finance, HR, audit, procurement, IT, legal, information governance, estates management and equality.

We are also a customer of the Shared Services Centres for payroll, income, recruitment, estates management and health and safety.

The accounts of the Northern Ireland Social Care Council are set out in the Accountability and Audit Report of this Annual Report and Accounts for 2018-19. The Council managed its accounts through a robust framework and within guidelines and broke even at year end with a surplus of £8k (0.29% of Revenue Resource Limit).

**People** - In order to meet our strategic objectives, we must manage our systems and resources effectively. The most important of these resources are our people. We have a well embedded appraisal system which includes the Knowledge and Skills Framework (KSF) and all staff had a performance appraisal carried out under the KSF framework including the development of new objectives and a Personal Development Plan for the year ahead. As a result of this work 98% of staff had an annual appraisal completed by June 2018 using KSF.

This year saw a considerable change in staffing, with Colum Conway, our Chief Executive, who had been with the Council for five years, leaving to take up position as the Chief Executive of the new regulator 'Social Work England'. On behalf of the Council staff and Board members, I would like to thank Colum for all his endeavours in raising the profile of the Council and our sector. We wish him every success in this challenging new role.

To accommodate my appointment as interim Chief Executive, while the Department of Health undertakes a Landscape Review of the Council, there have been temporary internal appointments, with Marian O'Rourke stepping in as Interim Director of Regulation and Standards and Catherine Maguire acting as Interim Head of Workforce Development. These arrangements will ensure business is managed with minimum disruption. Longer

term arrangements will be advertised when the Review is completed.

The Council has supported staff health and wellbeing by promoting a series of awareness sessions and also providing opportunities to take part in team sessions and classes with Anytime Fitness to encourage healthy exercise, eating and work life balance.

At the end of 2018-19, our staff absence rate was 2.79% which was below our target of 3.5%. Following the successful achievement of both the Investors in People Silver and Health and Well Being Awards, our staff worked together to take forward the actions from the liP assessment to further develop our culture and values. Staff also participated in a number of fund raising activities during the year and raised £2,000 for charities such as Chest Heart and Stoke, Children's Cancer Fund and Autism NI.

**Quality** - As a staff group, we worked together on a number of projects to review our work and improve how we do it. All staff meetings were held quarterly to improve communication between teams and to ensure everyone was involved in the development of the 2019/20 Business Plan.

A Quality Improvement project involving staff from all areas of the business has been working on improving registrants' engagement with online services and applying interventions to generate changes in behaviours. This will

continue into 2019/20. Quality Improvement was also used in the pilot for Social Care Worker PRTL and learning from this will be used to inform the main Social Care PRTL Audit which is due in 2019/20.

**Governance** - The Council complied with its governance arrangements and framework during 2018-19 which included regular oversight and review of the Risk Register and the overarching Assurance Framework. In doing so, the Council also provided risk management and General Data Protection Regulation (GDPR) training for staff.

The Board continued to provide oversight of the risk management infrastructure and identified the strategic risks and risk appetite for the organisation.

The Risk Management Committee (which is chaired by the Director of Registration and Corporate Services) and which reports to the Audit and Risk Assurance Committee, regularly reviewed the risk register and worked to introduce a new ICT supported risk environment which provided for greater transparency and accountability, together with improved reporting arrangements.

During the year the Council continued to ensure compliance with all areas of Information Governance. As part of its preparations for GDPR, the Council (with support from Shared Services in BSO) developed a GDPR action plan to identify all

the actions it needed to take to be GDPR ready. This included a training and awareness programme, a review of policies and procedures and the appointment of a Data Protection Officer. The Council also reviewed its Information Asset register to identify information flows and developed a Privacy Policy and Statement.

### **Estates**

The Council applied good governance in managing its estate to deliver best value for money in relation to its premises at Millennium House. It did so with the support of the Estates Management in BSO. This included ensuring compliance with fire and health and safety regulations and the delivery of an annual estates management action plan.

The Council is committed to working closely with stakeholders to ensure they are supported in contributing their views and experiences to improve our business. The contribution of people who use social care services and carers is a valued and integral part of planning, implementing and reviewing all areas of work and projects across the organisation.

Over the past year, we have continued to deliver on our participation agenda through our Participation Forum by ensuring people who use social care services and carers have an opportunity to challenge, influence and advise the work of the Council.

The Participation Forum is chaired by a Council Board member and comprises carers and people who use social care services. The group is supported by the Director of Registration and Corporate Services, together with a small group of other staff. These staff ensure that the Partnership is supported in all areas of its work and its priorities.

The Participation Forum contributed directly to Business Planning for the new 2019/20 business year and reports regularly to Council meetings. Members of the Forum also took part in a joint consultation with Board members and staff to review the new draft Business Plan for 2019/20. Feedback from this event showed strong support for

working together in the future on key pieces of work. The event demonstrated strong collaborative working and we will want to do more of this in the new business year.

### **Direct engagement with service user and carer groups in 2018-19**

Between July and November we met with a number of people who use services and carers in an effort to recruit additional Forum members. This resulted in four new members joining the Participation Forum.

We attended two regional events delivered by



the Patient Client Council and hosted an information stand. This offered the opportunity to disseminate promotional material in particular the easy read standards and the 'What I want from my social care worker' card. We made connections with members of the public more generally about the role of the Council and where possible used table discussions to outline our role. Approximately 240 members of the public attended these events, a great opportunity for us to engage more widely.

We were involved in more targeted engagement, which included visits to three organisations and meetings with other service user and carer groups to share information about workforce standards – resulting in direct conversations about the role of the Council to approximately 70 service users.

We also attended a ‘café conversation’ event organised by the Belfast Health and Social Care Trust to follow World Social Work Day (2018) and engaged directly with social workers and service users and carers. Three further ‘café conversations’ were arranged through the South Eastern Trust where the local Engagement Partnership’ aims to encourage people who have had experience of social work services to get involved with the local engagement partnership.

This engagement activity underpins our longer term objective to enable more service users and carers to contribute effectively to Council projects and activities. Although it has been difficult to measure the impact of all of this engagement given the varied nature of our approach, the events that involved more direct engagement with service users and carers groups provided evidence that service users had an improved understanding of the role of the Council and the fact that registrants are working to Standards of Conduct and Practice. The successful recruitment of four new members to the Participation Forum is also a strong positive endorsement of the energy invested by the Forum and Council staff in

building links with existing Participation and Involvement networks.

Our plans for 2019/20 are to increase our direct engagement with service user and carer groups and to make effective use of representative groups and PPI networks including as the Patient Client Council Membership Scheme and the 10,000 Voices programme.

### **Promoting PPI with the Social Care workforce**

Over the year, the Workforce Development team have had extensive involvement with the workforce. This has directly reached approximately 1,170 registrants. At these events we have disseminated information about the Standards of Conduct and Practice, where appropriate, incorporated the views and experiences of service users and carers (either they have spoken specifically at events or their voice has been incorporated in films shown to registrants as part of an overall presentation).

### **Council Projects Involving People who use Services and Carers**

- Learning Zone Resources
- Induction Programme for social care workers managers
- Values Based Recruitment Toolkit
- Review of NI Social Work Degree
- DRILL four nations research (disability research on independent living & learning

All of these resources incorporate the voice of the person receiving the service or their carer either through film and animation or through case study scenarios for learning.

Joanne Sansome (member of the Forum) and Dr Joe Duffy (Queens University Belfast) recorded on film a 'conversation' that details Joanne's learning and involvement journey. This includes how she influenced the delivery of social work education along with her academic endeavours, completion of an MSc in Social Research, and subsequent publications focussing on disability rights. The focus for the new business year will be to work with our Communications and Engagement team to promote use of the resources as widely as possible. We will also evaluate the effectiveness and impact of these resources.

### **Public and Personal Involvement Forum (PPI)**

The Council is represented at this HSC forum by Declan McAllister, Brenda Horgan (staff) and Gerard McWilliams (Participation Forum member). The main focus of the Forum this year has been on

- monitoring adherence to PPI standards within the Health and Social Care Trusts'

- development and promotions of training for HSC staff on involvement, development;
- Promotion of the ENGAGE website; and
- Work to progress updates to policy and guidance in relation to reimbursement for service use and carer involvement.

### **Looking Forward to 2019-20**

- Engage with the Department of Health on the social care registrants survey to ensure the service user and carer perspective is included;
- Work along with Council staff to ensure the Use of Plan English is incrementally incorporated into the Council;
- Workshop to include the Participation Forum, members of the Workforce Development team members and Business Support team as well as Board members to evaluate our effectiveness Forum;
- Audit the quality of our participation and engagement activities;
- Support the delivery of the 2019 Social Work Awards organised by the South Eastern Trust, on 15<sup>th</sup> November 2018. Members of the Participation Forum are invited to be judges on the various categories.

## Performance Analysis – Objectives and KPIs

41 business objectives were set to support delivery of the strategic objectives in 2018-19. Although the business was impacted during the year with the implementation of the new registration ICT system; the high volume of registrants requesting assistance with their registration and the growth in Fitness to Practise referrals, all of the objectives were achieved.

Performance was managed against a wide range of performance indicators and KPI's across all aspects of the business. Achievement against KPIs is set out below:

KPI - Performance Measure	Cumulative Achievement
95% of applications/ renewals are processed within 20 working days of receiving the completed application.	88% Cumulative KPI of 88% was marginally below KPI at year end, with 1067 out of 8888 applications taking longer than 20 days to process.
100% of Fitness to Practise decisions updated on the Register within 2 working days of receipt of the information.	100% 78 registrations amended during the year to reflect FtP Decisions
100% of all referrals to the Fitness to Practise Team will be triaged within 3 working days.	99% Cumulative KPI was marginally below target with 4 out of 406 referrals across the year each taking 5 days to triage. None of these cases were classed as high risk.
90% of Fitness to Practise cases concluded within 15 months of opening the case.	94% 306 cases closed during the year
100% of Interim Order hearings concluded within 4 weeks of referral.	100% 20 Interim Orders concluded
95% availability of the Online Registration Portal during the year.	99%
85% minimum customer satisfaction provided through quality customer services.	79% Cumulative KPI for satisfaction was impacted by Quarter 4 feedback when customers experienced longer response times for emails and calls. This was a result of higher volume of registrant requests to pay registration fees by telephone. 82,380 customers supported during the year (average 6,500 each month).
3.5% maximum for staff absence levels not exceeded	2.79%
95% of undisputed invoices paid within 30 days	96.13%
75% of invoices paid within 10 days	80.51%
0.25% or £20k target for financial breakeven	Financial breakeven achieved with £8k surplus (0.29% RRL).

**Registration** The Council developed a new ICT system to support its regulatory and registration functions. The system was launched in July 2018 following a detailed period of development and testing. The introduction of the new system impacted on our ability to meet our KPI's during the implementation phase and staff worked to ensure that registrants and employers were supported during time. Staff and registrants feedback during the implementation proved critical to making developmental changes to the system to ensure it could meet the needs of its users. A significant training programme was also delivered for staff to build their knowledge and competence in using the new system effectively. During the year, 8,888 applications and renewals were processed. This was delivered slightly outside our KPI at 88% turnover (KPI is 95%). Registration services and standards were closely monitored throughout the year and an action plan put in place to bring this area of work back within the target.

With the new system we want to encourage more registrants to go online to complete their registration and renew. A communications campaign has therefore been developed to promote online as the main way to register and renew registration. Work is also underway to use Quality Improvement tools to improve the user experience of the system and encourage user to use the online service. A programme

of engagement with registrants and employers is a major element of the 2019/20 Business Plan to develop registrant understanding of the Standards and the responsibilities of maintaining registration.

**Fitness to Practise – Referrals and Investigations** Fitness to Practise referrals continued to increase, with a 17% increase on last year. This has been coupled with the cases that are presented being increasingly complex and are therefore taking more investigation to resolve. This impacted on the capacity to triage all referrals within the 3 day KPI target. Performance was marginally below target at 99% with 4 out of 460 referrals taking an additional 2 days to triage. Suitability Assessments for Registration remained high at 307 during the year. This has been monitored throughout the year to ensure sufficient resources are available to assure the integrity of Fitness to Practise functions. Although a growth in the volume of assessment and referrals was anticipated with the increase in the register total, it is higher than predicted. A detailed review is therefore being undertaken to identify the immediate to longer term capacity and resources required to manage the volume of referrals and assessments effectively.

**Fitness to Practise – Committees and Hearings** Fitness to Practise Committee activity increased by around 35% compared to

the previous year, with 70 Committee sittings held to consider 142 cases during the year. These considerations included registration suitability assessments, Interim Orders and pre-hearing committees/reviews.

This year, 27 Fitness to Practise Hearings were heard across 41 days. The Committee team worked closely with those parties involved in hearings to ensure that hearings were progressed as efficiently as possible in line with its Fitness to Practise rules and regulations. Business volume will be further monitored during 2019-20 to ascertain whether the impact of the growth in Fitness to Practise referrals on the volume of cases being transferred to Committees and Hearings.

### **Workforce Development**

The Workforce Development Team delivered a significant programme of engagement during 2018/19, meeting with over 1,600 stakeholders to promote registration, our standards of conduct and practice and social work and social care education, training and development. Feedback has been strongly positive and the team is committed to continuing with this activity in 2019/20.

The range of Council resources available to support registrants and employers was developed with nine interactive resources now available on the Learning Zone website, including the new Induction Standards and the GAIN Safe and Compassionate Care

resources. User engagement with the Learning Zone is growing steadily with an average of 700 users per month (88% of whom were new users).

As a Sector Skills Council, we work with employers and education to address issues affecting recruitment and development for the sector. Social work and social care careers were promoted in schools/colleges and at local careers and recruitment events. Local Councils were supported to develop Employment Academies to attract new entrants to social care to the sector. Pilot projects were implemented to develop the Values-Based Recruitment toolkit (which aims to help employers recruit staff who are suited to social care) and Open Badges (which are digital methods of recognising learning undertaken in the workplace). Both of these products will be launched and promoted during 2019/20.

Quality Assurance activity for social work training at Degree and Post Qualifying levels was undertaken and good quality across the courses was evidenced. The Five-Year Review of the Degree was completed; assessing whether the curriculum, teaching and practice learning which make up the Degree are preparing students to meet service needs. Initial feedback has been very positive and the final report with improvement actions to 'future-proof' the Degree will be published in summer 2019.

Promotion of the Professional in Practice CPD Framework for social workers continued during the year. 176 social workers achieved full awards in 2018 and 546 part achievements were also credited. Work continued on widening the range of routes available for social workers to achieve PiP Awards. A pilot for PiP achievement through work-based learning was carried out and the recommendations endorsed by the Board to establish this option. Development continued on the Doctorate level award for PiP which should open for applicants in the next year.

### **Communications and Engagement**

Communications and engagement delivered a wide range of communications to support the Council teams in delivering their objectives.

Recognising that digital media is a growing communications channel across all business, the team focused on building graphics and video resources to support development of digital communications across the website, emails and social media. Social media followers grew to 5,254 and website users traffic averaged 14,000 visits per month.

Feedback from stakeholders showed that 70% of people preferred the website as their primary reference point to access our resources. They also said that due to the large amount of information available on the site, it can be difficult at times to find information easily. Initial scoping has been completed to improve the website and

recommendations for development to match 'user journeys' on the site will be implemented by autumn 2019.

### **Infrastructure and Leadership**

The Council had 8 objectives across its Infrastructure and Leadership theme linked to the areas of People, Resources, Systems, Governance and Quality.

In each of these areas –

**People** – the Council was accredited as an IIP Silver employer and was also the first public sector body to be awarded the IIP Health and Wellbeing Award.

**Resources** – the Council successfully managed its budget during 2018/19 with a break-even position at year end with a surplus of £8k (0.29% of RRL) against the break even KPI target of £20k. Prompt payment targets were achieved, with 97% of bills paid within 30 days and 81% paid within 10 days.

**Systems** – the Council successfully launched its new ICT Regulation and Registration System (in July 2018) following an extensive period of development and staff and user engagement. Council staff have been trained on the system, and have established a development group to ensure the system continues to meet the needs of those who use it.

**Governance** – the Council, with support and direction from its Board and the Audit and Risk Assurance Committee, fundamentally reviewed the way in which it manages its risks, with the Board setting the strategic risks and risk appetite for the organisation.

**Quality** – In addition to meeting statutory obligations to complete Annual Quality reports, the Council continued with work streams to integrate Quality 2020 attributes across the organisation. Quality Improvement groups brought together staff from each business area to develop solutions to improve registrant uptake of online services and to pilot PRTL audit for social care workers. Each of these projects have been an opportunity for staff to learn Quality Improvement techniques alongside implementing service improvements. These will continue in 2019/20 and a new project will be delivered by a staff member as part of the Scottish Quality Improvement programme.

### **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 Council continues to be committed to ensuring it makes an active contribution to those areas which it can influence. Prominence is therefore given to the way in which the Council conducts its work to minimise, where relevant, a negative impact on these duties, but more importantly to make sustainable improvements wherever possible.

The Council has put in place a number of positive actions across the following areas:

- Office Issues
- Remote and Flexible Working
- Estate Management

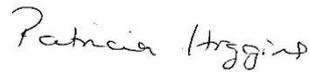
- People/Health & Wellbeing
- Procurement
- Travel

This has included clear procedures on the minimisation of waste and paper production. The continued promotion of the online Portal has also led to a significant reduction in printing, copying and posting of registration and renewal paperwork. A copy of the Council's Sustainable Development Report and Plan can be found on the website, [www.niscc.info](http://www.niscc.info)

### **Positioning**

The Council is well placed to deliver solid and reliable performance during the next business year, 2019/20. It has a sustainable and skilled workforce and strong business continuity systems in place including those required at a governance level.

It has however identified a resource risk to its Fitness to Practise function arising from the increase in the number of those now registered with the Council. The Council management team is working with the Board and the DoH to agree sustainable solutions going forward, and has escalated this matter to its risk register and reflected same in its Governance Statement (Internal Controls 2018/19).



**Patricia Higgins**  
Interim Chief Executive  
Northern Ireland Social Care Council

**Date** 26 June 2019

# Section 2 – Accountability Report

## Corporate Governance Report - Director's Report

The overall vision for the Council focuses on improving standards in social work and social care. This vision will be achieved through the delivery of our core values of –

- Promoting respect;
- Working with integrity;
- Partnership working; and
- Excellence.

### Our Vision - Improved standards in social work and social care

#### Our Values

There are four key values which underpin our culture that set a foundation for how we work with those around us.

#### **Respect**

#### **Integrity**

#### **Partnership**

#### **Excellence**

#### **We promote Respect**

We are trusted by the sector to support good social work and social care practice. We respect the rights, dignity and inherent worth of individuals.

#### **We work with integrity**

We work with integrity and are mindful of our responsibilities and hold ourselves and others to account. We are open, honest and respectful with all our stakeholders.

#### **We believe in Partnership**

We are a people focused organisation that is committed to doing what is right. Through genuine partnership, we work to ensure what we do makes a difference.

#### **We strive for Excellence**

We take a professional approach in putting standards at the heart of social work and social care. We proactively support the development of the social care workforce and we proactively support the development of our staff.

**Our Purpose - To protect the public and safeguard service users through the regulation and development of social work and social care workforce**

## **Strategic Themes, Objectives, Aim and Principles**

Through our work and the work of our partners, we expect to see the registered workforce becoming more confident and skilled in using new knowledge, applying new ways of working that focus on personalised and compassionate care.

As the regulator for social work and social care, our core activities are focused on Standards of Conduct and Practice, working to see that they are consistently applied across all areas of social work and social care practice, improving public protection and helping to improve quality and outcomes for people who use services.

**Strategic Themes** - Our work is themed around five key areas:

### **Standards**

**Putting Standards at the heart of social work and social care practice and education and training** - Setting and raising standards in social work and social care practice, education and training and ensuring these are at the heart of the work of the Social Care Council.

### **Regulation**

**Regulating the Workforce and Social Work Education and Training** – Ensuring the functions of Registration, Fitness to Practise and Regulation of Social Work education establish clear benchmarks for good social work and social care practice.

### **Workforce Development**

**Developing the Social Work and Social Care Workforce** - Better outcomes for people who use social care services will be achieved by a regulated workforce that delivers safe, effective and values led care.

### **Systems Leadership**

**Promoting a Systems Leadership Approach across the Social Care Sector** - Through collaborative partnership working, facilitating new thinking and fresh perspectives to reduce harms, minimise risks and improve quality in the delivery of social care services.

### **Communication and Engagement**

**Communicating, Connecting and Engaging** - Effective and meaningful communication and engagement will support the delivery of the Corporate and Business Plans.

**Infrastructure** – the Council’s strategic objectives are supported by an overarching corporate objective to ‘ensure the Council has the necessary infrastructure i.e. the people, resources, governance and estate management arrangements in place to deliver its strategic objectives’.

## The Northern Ireland Social Care Council

The Northern Ireland Social Care Council (the 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 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 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 Council also works collaboratively with its counterparts in England, Scotland, Wales and Ireland.

The Council is a partner in Skills for Care and Development (SfCD), a Sector Skills Council responsible for social care and children's services throughout the UK. Sector Skills Councils are independent, UK-wide organisations licensed by the Department for Education and Skills to support employers in the training and development of the workforce.

The Council is led by a Board which comprises a Chair and 12 non-Executive Members who have responsibility for ensuring the Board's strategic policies as agreed with the DoH are successfully delivered. Details of the Boards' structure and its membership can be found at **Appendix 1** of this Annual Report.

The Council's organisational structure is headed by a Chief Executive who is also the designated Accounting Officer (this position is currently held on an interim appointment). She is supported by two Directors – the Director of Registration and Corporate Services, and the Director of Regulation and Standards. The Council's organisational structure can be found at **Appendix 2**.

The Council delivers its services from Millennium House, 7<sup>th</sup> Floor, 19-25 Great Victoria Street, in Belfast.

### Equality

The 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 Council's Equality Progress Report which can be found on its website at [www.niscc.info](http://www.niscc.info). The 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.

## **Staff Communication**

The Council uses a range of methods to communicate with its staff. These include monthly team meetings which enable the sharing of corporate information together with updates on business and team performance, and team development. During the year, the Council developed and launched an Intranet to improve information sharing across all its staff. The new Intranet enables staff to access useful information such as policies and procedures in one place, together with an interactive calendar and group forums.

The Council also holds a number of information sharing sessions to openly discuss matters which impact the organisation such as funding pressures, business delivery and strategic policy directions. The Council also produces an internal e-newsletter on a regular basis which keeps staff informed about business matters and other events.

## **Public Sector Payment Policy – Measure of Compliance**

Details of compliance with better payments practice are set out in the Annual Accounts.

## **Information Governance**

The Council worked with Shared Services BSO during the year in preparation for the introduction of the General Data Protection Regulation (GDPR) in May 2018. This included the appointment of a Data Protection Officer, a review of policies and procedures, training staff in GDPR, and the development of Privacy Statements.

There were no data breaches during the year.

## **Complaints**

The Council received seven written complaints about its services during 2018/19. Of these six complaints were upheld and one was not. Feedback from the complaints received was used to change the Council's written communication with registrants and to review its opening hours for its customer services line. It also developed its website to make it easier to signpost people to the complaints section on how to make a complaint.

None of the complaints received were escalated to the next internal stage for review. The Council did not receive any complaints from the Northern Ireland Public Services Ombudsman.

## Senior Leadership Team

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



**Patricia Higgins**  
Interim Chief Executive\*\*



**Declan McAllister**  
Director of Registration  
& Corporate Services



**Marian O'Rourke**  
Interim Director of Regulation  
& Standards

**Patricia Higgins** (Interim Chief Executive) has overall responsibility for the Council. She works with the Chair of the Council Board and the Board Members in the delivery of the Council's strategic direction, leadership and accountability.

**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.

**Marian O'Rourke** (Interim Director of Regulation and Standards) has responsibility for regulation of social work education and training at qualifying level and the Professional in Practice CPD framework for social workers, development of the social work and social care workforces.

**\*\* Up until 31 August 2018, the Chief Executive was Colum Conway.**

# Northern Ireland Social Care Council Board

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 workers, eligible for inclusion in the Social Care Register, which is maintained by the Council.

**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 is chaired by Mr Paul Martin and he is supported by 12 Board Members –**

<b>Noelle Barton</b>	<b>Christine Hunter</b>
<b>Neil Bodger</b>	<b>Brenda Maitland</b>
<b>Sarah Browne</b>	<b>Jacqueline McGarvey</b>
<b>Roslyn Dougherty</b>	<b>Catherine McPhillips</b>
<b>Gerard Guckian</b>	<b>Anne O'Reilly</b>
<b>David Hayes</b>	<b>Lee Wilson</b>

Mr Paul Martin, was appointed as Chair of the Northern Ireland Social Care Council on 1 April 2018 following a public appointments exercise which was 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 in the press and at the Council's reception in Millennium House. The agenda and minutes of Board meetings are also published on the Council's website [www.niscc.info](http://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.



Pictured with the Board at the October 2018 meeting are Richard Pengelly (DoH Permanent Secretary), Sean Holland (Chief Social Work Officer) and Jackie McIlroy (Deputy Chief Social Work Officer)

The Board carried out a 'Board Self-Assessment' during 2018-19 to ensure itself that it demonstrates good practice in all areas of governance and accountability and developed an action plan to strengthen and improve its governance arrangements within the Council.

The Council holds a Register of Directors' Interests which contains the declared interests of both Executive and Non-Executive Directors. This is available to view at:

Chief Executive's Office  
The Social Care Council  
7<sup>th</sup> Floor  
19-25 Great Victoria Street  
Belfast, BT2 7AQ,  
Tel 028 9536 2600

## Northern Ireland Social Care Council Committees

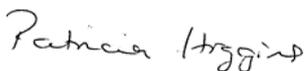
The Board has established two Committees to support it in the delivery of its strategic functions, each of which is chaired by a Board Member:

- **The Audit and Risk Assurance Committee** (chaired by Gerry Guckian) assists the Board in the discharge of its functions by providing independent and objective review of the 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 59.
- **The Remuneration Committee** (chaired by Mr Paul Martin) 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

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 Council.
- **Registrants Forum** consists of registrants and workforce representatives and its role is to ensure effective engagement with and by Registrants in the work of the Council
- **Workforce Development Partnership** consists of social care employers and its role is to inform and influence the strategic development of the social care workforce.
- **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.



**Patricia Higgins**  
Interim Chief Executive

**Date:** 26 June 2019

### Accounts for the Year Ended 31 March 2019

Under the Health and Personal Social Services Act (Northern Ireland) 2001, the Department of Health has directed the Northern Ireland Social Care Council (the 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 financial statements are prepared on an accruals basis and must provide a true and fair view of the state of affairs of the Council, of its income and expenditure, changes in taxpayers equity and cash flows for the financial year.

In preparing the financial statements, 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 (NI), including relevant accounting and disclosure requirements, and apply suitably 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 financial statements.
- Prepare the financial statements on the 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 Principle Accounting Officer for health and personal social services resources in Northern Ireland has designated Patricia Higgins of the Council, as the Interim Accounting Officer for the 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 Council’s assets, are set out in Managing Public Money published by HM Treasury.

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

## Accounts for Year Ended 31 March 2019

### Certificates of the Chair and Interim Chief Executive

I certify that the annual accounts set out in the financial statements and notes to the accounts (pages 78-112) 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 Council and with the accounting standards and policies for HSC bodies approved by the DoH.



**Patricia Higgins**  
Interim Chief Executive

**Date:** 26 June 2019

I certify that the annual accounts set out in the financial statements and notes to the accounts (pages 78-112) as prepared in accordance with the above requirements have been submitted to and duly approved by the Board.



.....  
**Paul Martin**  
Chair

**Date:** 26 June 2019



**Patricia Higgins**  
Interim Chief Executive

**Date:** 26 June 2019

### **1. Introduction / Scope of Responsibility**

The Northern Ireland Social Care Council (the Council) is accounting for internal control. As Accounting Officer and Chief Executive of the 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 Council is an Arm's-Length Body, sponsored by the DoH and works in partnership with all the Health and Social Care (HSC) organisations including the other Regional Organisations sponsored by the DoH.

In particular the 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 Council also works closely with CORU, the Social Care authority in the Republic of Ireland, to share best practice in regulation and registration of social workers and social care workers.

The Council has a Management Statement and Financial Memorandum in place which sets out the strategic control framework within which the 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 Council apprise the DoH at the highest level of engagement through twice-yearly Accountability Meetings, and at the same time the Council works in partnership with the DoH's Government Liaison Officer to ensure operational and strategic issues are raised appropriately with the DoH throughout the year.

As part of the HSC sector, the Council is expected to face significant financial challenges and therefore extensive budget planning work to support the 2019-20 financial plan is ongoing between the Council and the DoH. In addition, the Council has identified specific resources pressures for its Fitness to Practise regulatory function, which are highlighted in its Internal Control Issues as part of this Governance Statement. Overall, however, and in line with other financial years the Council remains committed to achieving financial break-even.

### **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 does this by undertaking continuous assessment of its compliance with Corporate Governance best practice by the Board's completion of an annual Board self-assessment. The Board completed its self-assessment for year ended 31 March 2019 and developed a new Action Plan which it will continue to review on a quarterly basis to ensure continual improvement in governance and best practice.

The Board agreed that –

- 13 indicators were assessed as Green (all good practices are in place);
- 1 indicator was assessed as Amber/Red (some elements of good practice are in place but at least two red flags have been identified);
- 3 indicators were assessed as Amber/Green (some elements of good practice are in place but at least one red flag has been identified).

The indicator assessed as Amber/Red was in relation the high turnover of Board appointments and the CEO position being filled on an interim basis, both of which were outside of the control of the Council. An action plan has however been put in place to manage any gaps in assurance and improve the effectiveness of the Board.

The summary for the Board’s self-assessment is set out below.

Indicator		Board’s Assessment	
<b>1.</b>	<b>Board Composition and Commitment</b>		
1.1	Board positions and size	Amber	Red
1.2	Balance and calibre of Board members	Amber	Green
1.3	Role of the Board	Green	
1.4	Committees of the Board	Green	
1.5	Board member commitment	Green	
<b>2.</b>	<b>Board Evaluation, Development and Learning</b>		
2.1	Effective Board level evaluation	Green	
2.2	Whole Board development programme	Amber	Green
2.3	Board induction, succession and contingency planning	Amber	Green
2.4	Board member appraisal and personal development	Green	
<b>3.</b>	<b>Board Insight and Foresight</b>		
3.1	Board performance reporting	Green	
3.2	Efficiency and Productivity	Green	
3.3	Environmental and strategic focus	Green	
3.4	Quality of Board papers and timeliness of information	Green	
3.5	Assurance and risk management	Green	
<b>4.</b>	<b>Board Engagement and Involvement</b>		
4.1	External stakeholders	Green	
4.2	Internal stakeholders	Green	
4.3	Board profile and visibility	Green	

### 3. Governance Framework

The Board provides strategic leadership to the Council and comprises a Chair and 12 Members who are a combination of registrants, lay members and others who are key stakeholders in social care services. Operational responsibilities are delivered by the Chief Executive. The duties and functions of the Chair and Board Members are set out in the Management Statement and Financial Memorandum and also in the Council's Standing Orders, Scheme of Delegation and Standing Financial Instructions.

The Board reviewed the Management Statement and Financial Memorandum (MSFM) in conjunction with the DOH during 2017. Meetings of the Board were held in open session four times during the year and records are maintained of the Board attendance. In addition, the Board held four Strategic Planning Sessions. During 2018/19 the Board attendance for the open sessions were:

<b>Chair/ Member</b>	<b>Attendance at Board During 2018/19 (%)</b>
Paul Martin, Chair	100%
Noelle Barton, Member	100%
Neil Bodger, Member	100%
Sarah Browne, Member	100%
Roslyn Dougherty, Member	100%
Gerry Guckian, Member	100%
David Hayes, Member	100%
Christine Hunter, Member	100%
Brenda Maitland, Member	50%
Jacqueline McGarvey, Member	50%
Catherine McPhillips, Member	100%
Anne O'Reilly, Member	100%
Lee Wilson, Member	75%

Attendance at Board Strategic Days, Committees and Partnerships during 2018/19 is set out below:

	Board Strategic	Audit & Risk Assurance Committee	Remuneration Committee	Participation Partnership	Workforce Development Partnership	Professional in Practice Partnership
<b>FREQUENCY OF MEETINGS IN 2018/19</b>	5	4	1	5	3	4
P Martin	100%	N/A	100%	N/A	N/A	N/A
N Barton	100%	N/A	N/A	100%	N/A	N/A
N Bodger	60%	N/A	100%	N/A	25%	N/A
S Browne	100%	N/A	N/A	N/A	50%	N/A
R Dougherty	80%	N/A	N/A	N/A	N/A	100%
G Guckian	25%	100%	N/A	N/A	N/A	N/A
D Hayes	60%	N/A	N/A	75%	N/A	N/A
C Hunter	80%	N/A	N/A	N/A	N/A	100%
B Maitland	80%	75%	N/A	50%	N/A	N/A
J McGarvey	80%	100%	N/A	N/A	N/A	N/A
C McPhillips	100%	N/A	N/A	N/A	N/A	100%
A O'Reilly	80%	100%	N/A	N/A	66%	N/A
Lee Wilson	80%	100%	100%	75%	N/A	N/A

Note - The appointments of Jackie McGarvey, Noelle Barton, Sarah Browne, Davy Hayes, Roslyn Doherty and Christine Hunter commenced in April 2018 and Gerard Guckian in May 2018 therefore their attendance is based on the meetings they were in post to attend.

The Board's performance is reviewed as part of the annual Board Self-Assessment and the performance appraisal system.

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 Council and assists the Board in the discharge of its functions by providing independent and objective review of the 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 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.

#### **4. 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 Council has produced a four-year Corporate Plan following engagement with staff and stakeholders including, in particular, people who use social care services and carers as is described in the Council's Personal and Public Involvement (PPI) Consultation Scheme. The Corporate Plan takes account of recent developments in social care strategy including the Minister of Health's strategy 'Health and Wellbeing 2026'. The Corporate Plan describes at a strategic level how the 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 Corporate Plan is available on the Council's website.

At the same time, the Council develops an annual Business Plan which provides further detail on how the Council will deliver its Corporate Plan, focusing on the outcomes of delivering its objectives. The same process of engagement and consultation is applied as with the development of the Corporate Plan. The Business Plan is approved by the Board and ultimately by the DoH before being circulated and published. The Corporate Plan and Business Plan are compliant with the requirements set out in the Council's Management Statement and Financial Memorandum. The corporate planning process is led by the Director of Registration and Corporate Services while the Chief Executive has overall responsibility for delivering the Corporate and Business Plans, and is supported by her Directors and operational team.

To give effect to the Corporate and Business Plans, the Council develops an Operational Plan and Key Performance Indicators which also ensure that all staff can clearly understand their role in delivering the Council's objectives and ensures their own personal and team objectives and learning plans are aligned to the Council's business objectives. The Operational Plan and Business Plan are reviewed on a quarterly basis by Senior Managers which informs reporting to the Senior Management Team and ultimately to the Board.

A Business Performance Management Report is presented to the Board for scrutiny at each of their meetings detailing how the Council is performing against its annual Business Plan. This includes further assurance reports such as an evaluation on how the Council is delivering on 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. At the beginning of April 2018, a new Chair was appointed and 7 new Members were appointed during April/May 2018. The Board therefore held four strategic sessions during 2018/19 to support the induction of the new Members.

The Chair and the Chief Executive also have accountability meetings with the Department of Health's Permanent Secretary.

Ultimately, the 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 Council's website. It also reports how it delivers against Quality 2020 in a separate Annual Quality Progress Report which is again available on the website.

## **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 Council. During the year, the Board engaged in a number of workshops to agree the strategic risks for the organisation, set the strategic appetite for risk management and agree a risk appetite statement. The Board also identified how it wanted risks reported in its Assurance Framework. This work took account of the HSC Regional Model for Risk Management.

All staff receive training on risk management and are required to complete an e-learning module on risk management awareness and are also provided with detailed Risk Management Procedures. In addition risk management training forms part of induction for all new staff.

The 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 Assurance Framework.

### Risk Management Framework

The 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 Council has also developed detailed Risk Management Procedures which break down how to report and manage risks for all staff.

The Council details its risks through a Risk Register and 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 Management 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 Risk Management Strategy was reviewed during the year to take account of the strategic direction being set by the Board in relation to strategic risks and risk appetite.

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

## **Fraud**

The 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 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. During the year the Fraud Policy Statement and Fraud Response Plan were revised to take account of templates developed by the Counter Fraud and Probity Service. All staff are provided with mandatory fraud awareness training in support of the Fraud Policy Statement and Fraud Response Plan, and all managers will receive to face to face Fraud Awareness Training provided by the Counter Fraud and Probity Service early in the new business year.

## **5. Information Risk**

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

The Council holds a range of personal data in respect of registrants (c.42,000) 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 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 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 Council's SIRO and 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.

During the year, the Council worked with Information Governance Shared Services in the BSO to put in place measures to support the introduction of the General Data Protection Regulations (GDPR) which came into effect on 25 May 2018. This included –

- The appointment of a Data Protection Officer;
- GDPR awareness training sessions for all staff;
- Review of Information Assets Register to identify information flows and sources;
- An overarching GDPR Readiness Action Plan;
- Communication and Handling Plan.

The Council also commissioned Information Governance Shared Services to carry out a due diligence exercise to review the robustness of the procedures it put in place to support its GDPR State of Readiness Programme. This work will be completed during 2019/20.

The 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

## **6. Public Stakeholder Involvement**

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

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

- The Participation Partnership (comprising people who use social care services and carers)
- The Registrants Forum (comprising registrants)
- The Workforce Development Partnership (comprising employers of the social care workforce)
- The Professional in Practice Partnership (comprising employers and the Higher Education Institutions (HEI's) who are key to the delivery of the PiP Framework).

These Partnerships meet regularly throughout the year and are kept informed of the 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 Partnerships. This holistic approach to engagement ensures that any risks identified by stakeholders are brought to the attention of the Board.

The Council ensures all papers presented to its Audit and Risk Assurance Committee and to the 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 Audit and Risk Assurance Committee and the Board can therefore clearly challenge the Council in how it has engaged service users, carers and other stakeholders in the development of policy and other initiatives.

## **7. Assurance**

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

The Council's Standing Orders require the setting up of an Audit and Risk Assurance Committee, as directed by HSS (PDD) 8/94 to reassure Council 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 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 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 Council's objectives;
- identify, assess and manage the risks to achieving the Council's objectives;
- ensure the economical, effective and efficient use of resources;
- ensure compliance with established policies, procedures, laws and regulations; and
- safeguard the 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 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.

### **Controls Assurance Standards**

The Permanent Secretary, Richard Pengelly, wrote to ALB Chief Executives on 30 March 2018 to indicate that, following a review of Controls Assurance Standards (CAS), more comprehensive and proportionate assurance would be put in place. The Council has incorporated assurance reports into its reporting regime and carried out a review of assurance across the previous CAS dimensions using a RAG system to highlight the level of assurance in place and/or where actions for improvement were required. Outcomes from this review have been incorporated in the Risk Assurance Framework and Risk Register which are managed using the updated Risk Management software.

## **8. Sources of Independent Assurance**

The Council obtains Independent Assurance from the following sources:

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

### **Internal Audit**

The 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 2018/19 Internal Audit reviewed the following systems:

- Registration Review, providing a satisfactory assurance
- Financial Review, providing a satisfactory assurance

- Travel Review, providing satisfactory assurance
- ICT Review, providing satisfactory assurance
- Risk Management Review, providing satisfactory assurance
- Board Effectiveness Review, providing satisfactory assurance
- Assurance Process – Post Controls Assurance standards, providing satisfactory assurance

In her annual report, the Internal Auditor reported that the Council's system of internal control was adequate and effective. There were no priority 1 weaknesses in control identified, however a number of priority 2 weaknesses were identified and action plans are in place to resolve all matters.

The priority 2 areas arising from the Financial Review audit were in relation to travel and updating the Travel Policy to ensure compliance with the policy and recommendations arising from the Travel Review audit.

The Risk Management Audit noted that the Risk Management Strategy and Procedures require updating following a review by the Board to identify the strategic risks facing the organisation and the adoption of a more expanded risk appetite matrix.

The Council is confident that the recommendations arising from each of the audits carried out will be delivered during 2019/20.

## **External Audit**

The Financial Statements of the 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 Council 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 2017-18.

## **9. 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 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 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.

## **10. Internal Governance Divergences**

### **Internal Control Issues now Resolved 2017/18**

In 2018/19, Recruitment Shared Services received a satisfactory assurance (increased from limited assurance) with performance against Key Performance Indicators remaining the primary area of concern. All other audits, excluding the Payroll Shared Services audit (see Internal Control Issues below) remain satisfactory.

### **Internal Control Issues 2018/19**

The Payroll Shared Services audit continued again to receive limited assurance from Internal Audit with 21 (81%) recommendations not yet implemented – of which four are priority 1 recommendations. The Council continues to engage with BSO Shared Services to gain assurance on the progress in fully implementing all outstanding recommendations.

Financial pressures for the Council remain a concern, and the Council has submitted a Savings Plan to the DoH and awaits the outcome of the negotiations with the DoH. The Council has highlighted the impact of potential further savings on the Council's ability to effectively discharge its statutory functions with a reduced Resource Revenue Limit. The Council has also highlighted a risk to its Fitness to Practise function due to an increase in the register to over 42,000 and an associated increase in the level of referrals. This in excess of its capacity to manage that area of business without risk, delay or slippage in quality. The Council is working with the DoH to identify a sustainable solution to bring this risk under control in the immediate and longer term future.

Following the resignation of the Chief Executive during 2018/19, arrangements were put in place to fill this position through the appointment of an Interim Chief Executive, pending the outcome of a Landscape Review which was commissioned by the DoH. It is anticipated that this position will be filled on a substantive basis during 2019/20.

The Council implemented its new Information system during 2018/19, which resulted in an impact on meeting its Key Performance Indicators in this area. An issues log has been in place with matters being resolved in a timely manner, however to oversee planned change controls the Council established a Change Control Board to manage the business process change needs and the impact of the system on the business in a controlled and governed way. System developments and improvements are being planned for the next 12 months.

With regard to the wider control environment, the Council has in place a range of organisational controls commensurate with the current assessment of risk which is designed to ensure the efficient and effective discharge of its business in accordance with the law and Departmental direction. Every effort is made to ensure that the objectives of the Council are pursued in accordance with the recognised and accepted standards of public administration.

## **11. Budget Position and Authority**

In the continuing absence of an Executive and a sitting Assembly the Northern Ireland Budget Act 2018 was progressed through Westminster, receiving Royal Assent on 20th July 2018, followed by the Northern Ireland Budget (Anticipation and Adjustments) Act 2019 which received Royal Assent on 15th March 2019. The authorisations, appropriations and limits in these Acts provide the authority for the 2018-19 financial year and a vote on account for the early months of the 2019-20 financial year as if they were Acts of the Northern Ireland Assembly.

## **12. EU Exit**

The Council is working alongside the Department of Health and the other Arms-Length bodies to identify and minimise the impact of the EU Exit across a range of potential outcomes. The Council is satisfied that it is able to operate its business in the normal manner in the various deal scenarios. The UK Government has agreed a further extension to the Article 50 period until the 31<sup>st</sup> October 2019. This process will continue to be kept under review as more clarity emerges on the detail of the final agreement.

## **13. Conclusion**

The 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 Council and in conjunction with assurances given to me by the Head of Internal Audit, I am content that the Council has operated a sound system of internal governance during the period 2018/19.



**Patricia Higgins**

Interim Chief Executive

Northern Ireland Social Care Council

26 June 2019

The Council's Audit and Risk Assurance Committee is made up of Board Members. The Committee met on the following dates during 2018-19:

- 22 May 2018
- 20 June 2018
- 3 October 2018
- 6 February 2019

During the 2018/19 financial year, membership of the Audit and Risk Assurance Committee was as follows:

<i>APRIL 2018 – MARCH 2019</i>	<i>ATTENDANCE AT AUDIT &amp; RISK ASSURANCE COMMITTEE (%)</i>
Mr Gerry Guickan	100%
Mrs Brenda Maitland	75%
Ms Jacqui McGarvey	100%
Mrs Anne O'Reilly	100%
Mr Lee Wilson	100%

Internal Audit, External Audit and representatives from the Business Services Organisation (BSO) attend the Audit and Risk Assurance Committee. The Interim Chief Executive of the Social Care Council, Patricia Higgins, attends along with the Director of Registration and Corporate Services, Declan McAllister. Mr McAllister 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 2018/19 financial year, the Audit and Risk Assurance Committee undertook the following tasks:

- Agreed an Internal Audit Plan.
- Considered an External Audit Strategy.
- Implemented a review of risk management including identifying the strategic risks and risk appetite for the organisation.
- Reviewed the Council's Assurance Framework.
- Reviewed the Risk Management Strategy.
- Reviewed the Risk Management Procedures.
- Reviewed and endorsed the Council's Fraud Policy Statement and Fraud Response Plan.
- Ensured the production of the Council's Final Accounts were in accordance with relevant statutory regulations.

- Considered the Council's mid-year Assurance Statement and Governance Statement.
- Reviewed a number of Internal Audit Reviews of key aspects of the Council's business during 2018/19.
- Considered the Report to Those Charged with Governance.
- Reviewed the Council's Procurement Report, including the Contract Register and Direct Award Contract Report for 2018/19.
- Reviewed the Council's Controls Assurance Self-Assessment Analysis.

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 Interim 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 Interim 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, both Internal and External 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 Interim 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 2018/19, 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 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 Report for the Year Ended 31 March 2019 (Audited)

### SCOPE OF THE REPORT

The Remuneration Report summarises the Remuneration Policy of the Council and particularly its application in connection with senior managers. The Report also describes how the 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.

### 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. The Remuneration Committee is chaired by the Chair, Mr Paul Martin. The Remuneration Committee is entirely comprised of Non-Executive Directors, namely, Neil Bodger and Lee Wilson. The Remuneration Committee met in this form in June 2018.

### REMUNERATION POLICY

The SCS remuneration arrangements are based on a system of pay scales for each SCS grade containing a number of pay points from minima to maxima, allowing progression towards the maxima based on performance. In 2012, upon creation, there were 11 points on each scale. This was subsequently reduced to 10 points in 2014 and 9 points in 2015 to allow progression through the pay scales within a reasonable period of time.

### SERVICE CONTRACTS

Civil service appointments are made in accordance with the Civil Service Commissioners' Recruitment Code, which requires appointment to be on merit on the basis of fair and open competition but also includes the circumstances when appointments may otherwise be made.

Unless otherwise stated below, the officials covered by this report hold appointments which are open-ended. Early termination, other than for misconduct, would result in the individual receiving compensation as set out in the Civil Service Compensation Scheme.

Further information about the work of the Civil Service Commissioners can be found at [www.nicscommissioners.org](http://www.nicscommissioners.org)

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

#### CHAIR

NAME	POSITION	DATE OF APPOINTMENT
Paul Martin	Chair	1 April 2018

#### NON-EXECUTIVE DIRECTORS

NAME	POSITION	DATE OF APPOINTMENT
Neil Bodger	Council Member	18 July 2011
Noelle Barton	Council Member	1 April 2018
Sarah Browne	Council Member	1 April 2018
Roslyn Dougherty	Council Member	1 April 2018
David Hayes	Council Member	1 April 2018
Christine Hunter	Council Member	1 April 2018
Gerard Guckian	Council Member	1 May 2018
Brenda Maitland	Council Member	1 October 2014
Jacqueline McGarvey	Council Member	1 April 2018
Catherine McPhillips	Council Member	3 November 2014
Anne O'Reilly	Council Member	1 December 2014
Lee Wilson	Council Member	1 September 2014

#### EXECUTIVE DIRECTORS

NAME	POSITION	DATE OF APPOINTMENT
Mr Colum Conway	Chief Executive	20 May 2013 (until 31 August 2018)
Mrs Patricia Higgins	Interim Chief Executive	From 3 September 2018 ( <i>substantive position Director of Regulation and Standards from 1 June 2002</i> )
Mr Declan McAllister	Director of Registration and Corporate Services	17 July 2017
Mrs Marian O'Rourke	Interim Director of Regulation and Standards	From 8 October 2018

#### 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**

Currently, employees are required to retire at age 65 years and occupational pensions are normally effective from age 60 years. With effect from 1 October 2006, with the introduction of the Equality (Age) Regulations (Northern Ireland) 2006, employees are able to request to work beyond age 65 years.

## **COMPENSATION FOR PREMATURE RETIREMENT**

In accordance with the DoH circular HSS (S) 11/83 and subsequent supplements, there is provision within the HSC Superannuation 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

Section 16 of the Agenda for Change Terms and Conditions Handbook (issued on 14 February 2007 under cover of the Department's Guidance Circular HSS (Afc) (4) 2007) sets out the arrangements for early retirement on the grounds of redundancy and in the interest of the service. Further Circulars were issued by the Department HSS (Afc) (6) 2007 and HSS (Afc) (5) 2008 setting out changes to the timescale for the operation of the transitional protection under these arrangements.

Under the terms of Section 16 of the Agenda for Change Terms and Conditions Handbook individuals who were members of the HSC Superannuation Scheme prior to 1 October 2006, are over 50 years of age and have at least 5 years membership of the HSC Superannuation Scheme qualify for transitional protection. Staff who qualify for transitional protection are entitled to receive what they would have received by way of pension and redundancy payment had they taken redundancy retirement on 30 September 2006. This includes enhancement of up to 10 years additional service (reduced by the number of years between September 2006 and the actual date of retirement) and a lump sum redundancy payment of up to 30 weeks pay (reduced by 30% for each year of additional service over 6  $\frac{2}{3}$  years)

Alternatively, staff made redundant who are members of the HSC Pension Scheme, have at least two years "continuous service" and two years "qualifying membership" and have reached the minimum pension age currently 50 years can opt to retire early without a reduction in their pension as an alternative to a lump sum redundancy payment of up to 24 months. In this case the cost of the early payment of the pension is paid from the lump sum redundancy payment. However if the

redundancy payment is not sufficient to meet the early payment of pension cost, the employer is required to meet the additional cost.

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

There were no exit packages during 2018-19 or 2017-18.

Redundancy and other departure costs have been 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 Act 1972. Exit costs are accounted for in full in the year in which the exit package is approved and agreed and are included as operating expenses at note 4. Where early retirements have been agreed, the additional costs are met by the employing authority and not by the HSC pension scheme. Ill-health retirement costs are met by the pension scheme and are not included in the table.

### 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	
	2019	2018	2019	2018	2019	2018
<£10,000	-	-	-	-	-	-
£10,000-£25,000	-	-	-	-	-	-
£25,000-£50,000	-	-	-	-	-	-
£50,000-£100,000	-	-	-	-	-	-
£100,000-£150,000	-	-	-	-	-	-
£150,000-£200,000	-	-	-	-	-	-
>£200,000	-	-	-	-	-	-
<b>Total number of exit</b>	-	-	-	-	-	-
	<b>£000s</b>	<b>£000s</b>	<b>£000s</b>	<b>£000s</b>	<b>£000s</b>	<b>£000s</b>
<b>Total resource cost</b>	-	-	-	-	-	-

### Staff Benefits

Refer to pages 72 to 73

#### Retirements due to ill health

During 2018-19 there were no early retirements from the Council on the grounds of ill-health. (2017-18: Nil).

## 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 Council were as follows:

Name	2018-19				2017-18					
	Salary £000s	Bonus / Performance Pay £000s	Benefits in kind (rounded to nearest £100)	Pension Benefits (rounded to nearest £1,000)	Total £000s	Salary £000s	Bonus / Performance Pay £000s	Benefits in kind (rounded to nearest £100)	Pension Benefits (rounded to nearest £1,000)	Total £000s
<b>Non-Executive Members</b>										
Paul Martin*****	15-20	-	-	-	15-20	-	-	-	-	-
James Perry	-	-	-	-	15-20	-	-	-	-	15-20
Ruth Lavery****	0-5	-	-	-	0-5	-	-	-	-	0-5
Julie Erskine****	0-5	-	-	-	0-5	-	-	-	-	0-5
Geraldine Campbell****	0-5	-	-	-	0-5	-	-	-	-	0-5
Trevor Spratt****	0-5	-	-	-	0-5	-	-	-	-	-
Maire McMahon****	0-5	-	-	-	0-5	-	-	-	-	-
Miriam Karp****	0-5	-	-	-	0-5	-	-	-	-	-
Joseph Blake****	0-5	-	-	-	0-5	-	-	-	-	-
Neil Bodger	5-10	-	-	-	5-10	-	-	-	-	5-10
Lee Wilson	5-10	-	-	-	5-10	-	-	-	-	5-10
Brenda Maitland	5-10	-	-	-	5-10	-	-	-	-	5-10
Catherine McPhillips	5-10	-	-	-	5-10	-	-	-	-	5-10
Anne O'Reilly	5-10	-	-	-	5-10	-	-	-	-	5-10
Jacqueline McGarvey	5-10	-	-	-	5-10	-	-	-	-	-
David Hayes	5-10	-	-	-	5-10	-	-	-	-	-
Sarah Browne	5-10	-	-	-	5-10	-	-	-	-	-
Gerard Guckian	5-10	-	-	-	5-10	-	-	-	-	-
Noelle Barton	5-10	-	-	-	5-10	-	-	-	-	-
Roslyn Dougherty	5-10	-	-	-	5-10	-	-	-	-	-
Christine Hunter	5-10	-	-	-	5-10	-	-	-	-	-

Executive Members												
Colum Conway*	30-35 (Full Year Equivalent 70-75)	-	100	(19)	10-15	70-75	-	200	17	85-90		
Patricia Higgins**	70-75 (Full Year Equivalent 75-80)	-	100	37	110-115	65-70	-	100	6	70-75		
Declan McAllister	60-65	-	100	17	75-80	40-45 (Full Year Equivalent 55-60)	-	-	27	65-70		
Marian O'Rourke ***	60-65 (Full Year Equivalent 60-65)	-	-	15	75-80	-	-	-	-	-		

\* Colum Conway's last day of service was 31/08/18

\*\* Patricia Higgins was appointed Interim Chief Executive on 03/09/18 and previously held the position of Director of Regulation and Standards

\*\*\* Marian O'Rourke was appointed Interim Director of Regulation and Standards on 08/10/18

\*\*\*\* These NEDs received a back-dated pay award and they are not presently working as part of the Social Care Council's Board function

\*\*\*\*\* Paul Martin appointed new Chairperson on 01/04/2018

## 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 2018/19 or in 2017/18.

## PENSIONS OF SENIOR MANAGEMENT (AUDITED)

### Pensions of Senior Management

Name	Real increase in pension and related lump sum at age 60 £000s	Total accrued pension at age 60 and related lump sum £000s	CETV at 31/03/18 £000s	CETV at 31/03/19 £000s	Real increase in CETV £000s
Colum Conway*	(0-2.5) plus lump sum of 0-2.5	5-10 plus lump sum of 0-5	86	87	(12)
Patricia Higgins**	0-2.5 plus lump sum of 5-10	20-25 plus lump sum of 70-75	475	581	52
Declan McAllister	0-2.5 plus lump sum of 0-2.5	15-20 plus lump sum of 40-45	280	340	19
Marian O'Rourke***	0-2.5 plus lump sum of 0-2.5	10-15 plus lump sum of 0-5	42	65	20

\* Colum Conway's last day of service was 31/08/18

\*\* Patricia Higgins was appointed Interim Chief Executive on 03/09/18 and previously held the position of Director of Regulation and Standards

\*\*\* Marian O'Rourke was appointed Interim Director of Regulation and Standards on 08/10/18

As Non-Executive members do not receive pensionable remuneration, there will be no entries in respect of pensions for Non-Executive members.

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.

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

The Hutton Fair Pay Review recommended that, from 2011-12, all public service organisations publish their top to median pay multiples each year. The DoH issued Circular HSC (F) 23/2012 and subsequently issued Circular HSC (F) 23/2013, setting out a requirement to disclose the relationship between the remuneration of the most highly paid director in the organisation and the median remuneration of the organisation's workforce. Following application of the guidance contained in Circular (F) 23/2013, the following can be reported:

Disclosure (Audited)	2018-19	2017-18	2016-17
Band of the Highest Paid Director's Total Remuneration	75-80	70-75	70-75
*Median Total Remuneration	23,131	22,458	20,146
Ratio	3.29	3.18	3.5

\*Agency staff have not been included in the median calculation

## Remuneration and Staff Report – Staff Report

### Staff Report for Year Ended 31 March 2019

The cumulative sickness and absenteeism rate for the Council for 2018-19 was 2.79% which was below the Council's corporate target to maintain absences at a maximum of 3.5%.

#### Staff Composition

The Council has 63 WTE staff – 25% of whom work part-time or compressed hours. It also has a higher percentage of females in the workforce (2/3rds are female). The Council's staffing composition, is set out below –

Staffing by Pay Band\*:

<b>*Pay Band</b>	<b>% of Workforce</b>
<b>Band 3</b>	<b>34%</b>
<b>Band's 4/6</b>	<b>44%</b>
<b>Band's 7/8</b>	<b>17%</b>
<b>SMT</b>	<b>5%</b>

\*Pay Bands are on the Agenda for Change NI pay scales, with staff employed across the organisation at Bands 3-8D. Remuneration range for these pay bands is £17,406 - £85,333 per annum.

Staffing by Function:

<b>Pay Band</b>	<b>% of Workforce</b>
<b>Registration</b>	<b>30%</b>
<b>Operations</b>	<b>13%</b>
<b>Fitness to Practise</b>	<b>13%</b>
<b>Workforce Development</b>	<b>20%</b>
<b>Communications</b>	<b>7%</b>
<b>Database</b>	<b>7%</b>
<b>Committee</b>	<b>5%</b>
<b>SMT</b>	<b>5%</b>

Staffing by Gender:

<b>Pay Band</b>	<b>Male</b>	<b>Female</b>
<b>Band 3</b>	<b>63%</b>	<b>37%</b>
<b>Band's 4/6</b>	<b>20%</b>	<b>80%</b>
<b>Band's 7/8</b>	<b>30%</b>	<b>70%</b>
<b>SMT</b>	<b>33%</b>	<b>67%</b>
<b>Overall Workforce</b>	<b>33%</b>	<b>67</b>

## Staff Numbers and Related Costs (Audited)

### Staff Costs

Staff costs comprise:	2019			2018
	Permanently employed staff	Others	Total	Total
	£	£	£	£
Wages and salaries	1,729,392	201,669	1,931,061	1,674,446
Social security costs	148,974		148,974	148,423
Other pension costs	218,182		218,182	211,092
<b>Sub-Total</b>	<b>2,096,548</b>	<b>201,669</b>	<b>2,298,217</b>	<b>2,033,961</b>
Capitalised staff costs	-	-	-	-
<b>Total staff costs reported in Statement of Comprehensive Expenditure</b>	<b>2,096,548</b>	<b>201,669</b>	<b>2,298,217</b>	<b>2,033,961</b>
Less recoveries in respect of outward secondments			-	-
<b>Total net costs</b>			<b>2,298,217</b>	<b>2,033,961</b>

The Council participates in the HSC Superannuation Scheme. Under this multi-employer defined benefit scheme both the Council and employees pay specified percentages of pay into the scheme and the liability to pay benefit falls to the DoH. The 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 at the statement of financial position date and updates it to reflect current conditions. The 2016 valuation for the HSC Pension scheme updated to reflect current financial conditions (and a change in financial assumption methodology) will be used in 2018-19 accounts.

## Average number of persons employed (Audited)

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

	2019		2018	
	Permanently employed staff	Others	Total	Total
	No.	No.	No.	No.
Administrative and clerical	54	7	61	61
Social Services	9	-	9	7
<b>Total average number of persons employed</b>	<b>63</b>	<b>7</b>	<b>70</b>	<b>68</b>
Less average staff number relating to capitalised staff costs			-	-
			-	-
Less average staff number in respect of outward secondments				
			<b>70</b>	<b>68</b>
<b>Total net average number of persons employed</b>				

The staff numbers disclosed as Others in 2018-19 relate to temporary members of staff.

**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	
	2019	2018	2019	2018	2019	2018
<£10,000	-	-	-	-	-	-
£10,000-£25,000	-	-	-	-	-	-
£25,000-£50,000	-	-	-	-	-	-
£50,000-£100,000	-	-	-	-	-	-
£100,000-£150,000	-	-	-	-	-	-
£150,000-£200,000	-	-	-	-	-	-
>£200,000	-	-	-	-	-	-
<b>Total number of exit packages by type</b>	-	-	-	-	-	-
	<b>£</b>	<b>£</b>	<b>£</b>	<b>£</b>	<b>£</b>	<b>£</b>
<b>Total resource cost</b>	-	-	-	-	-	-

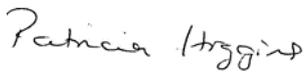
Redundancy and other departure costs have been paid in accordance with the provisions of the HSC Pension Scheme Regulations and the Compensation for Premature Retirement Regulations, statutory provisions made under the Superannuation Act 1972. Exit costs are accounted for in full in the year in which the exit package is approved and agreed and are included as operating expenses at note 3. Where early retirements have been agreed, the additional costs are met by the employing authority and not by the HSC pension scheme. Ill health retirement costs are met by the pension scheme and are not included in the table.

## **SALARY**

'Salary' includes gross salary; overtime; reserved rights to London weighting or London allowances; recruitment and retention allowances; private office allowances and any other allowance to the extent that it is subject to UK taxation and any gratia payments.

## **BENEFITS IN KIND**

The monetary value of benefits in kind covers any benefits provided by the employer and treated by HM Revenue and Customs as a taxable emolument such as any profit linked to travel expenses.



**Patricia Higgins**  
Interim Chief Executive  
Northern Ireland Social Care Council

**Date** 26 June 2019

## **Section 3 – Accountability and Audit Report**

### **Accountability Report - Accounts for the Year Ended 31 March 2019**

#### **Foreword**

These accounts for the year ended 31 March 2019 have been prepared in accordance with Schedule 1, paragraph 12 of the Health and Personal Social Services Act (Northern Ireland) 2001, in a form directed by the Department of Health.

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.

In 2018/19 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.

## Accountability Report - Assembly Accountability Disclosure Notes

### i) Losses and Special Payments (Audited)

Type of loss and special payment	2018-19		2017-18
	Number of Cases	£	£
<b>Cash</b>			
Cash Losses - Theft, fraud etc.	-	-	-
Cash Losses - Overpayments of salaries, wages and	-	-	-
Cash Losses - Other causes	-	-	-
	-	-	-
<b>Claims abandoned</b>			
Waived or abandoned claims	-	-	-
	-	-	-
<b>Administrative write-offs</b>			
Bad debts	-	-	-
Other	-	-	-
	-	-	-
<b>Fruitless payments</b>			
Late Payment of Commercial Debt	-	-	-
Other fruitless payments and constructive losses	-	-	-
	-	-	-
<b>Stores losses</b>			
Losses of accountable stores through any deliberate act	-	-	-
Other stores losses	-	-	-
	-	-	-
<b>Special Payments</b>			
Compensation payments			
- Clinical Negligence	-	-	-
- Public Liability	-	-	-
- Employers Liability	-	-	-
- Other	-	-	-
	-	-	-
Ex-gratia payments	-	-	-
Extra contractual	-	-	-
Special severance payments	-	-	-
	-	-	-
<b>TOTAL</b>	-	-	-

### **Special Payments (Audited)**

There were no other special payments or gifts made during the year.

### **Other Payments and Estimates (Audited)**

There were no other payments made during the year.

### **Losses and Special Payments over £250,000 (Audited)**

The Council had no losses or made no special payments over £250,000.

### **ii) Fees and Charges (Audited)**

There were no other fees and charges during the year.

### **iii) Remote Contingent Liabilities (Audited)**

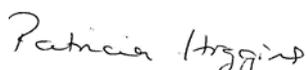
In addition to contingent liabilities reported within the meaning of IAS 37, the Council also reports liabilities for which the likelihood of a transfer of economic benefit in settlement is too remote to meet the definition of contingent liability.

The Council had no remote contingent liabilities.

As far as the Accounting Officer is aware, there is no relevant audit information of which the Social Care Councils auditors are aware, and the Accounting Officer has taken all the steps that she ought to have taken to make herself aware of any relevant audit information and to establish that the entity's auditors are aware of that information.

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 HM Treasury and that expenditure plans are in line with capital and revenue funding rules and regulations.

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



Patricia Higgins, Interim Chief Executive      Date: 26 June 2019

**Northern Ireland Social Care Council**

**Annual Accounts**

**for the  
Year Ended 31 March 2019**

**NORTHERN IRELAND SOCIAL CARE COUNCIL**  
**STATEMENT of COMPREHENSIVE NET EXPENDITURE for the year ended 31 March 2019**

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	2019 £	2018 £
Revenue from contracts with customers	4.1	1,836,989	1,477,356
Other Income (Excluding interest)	4.2	-	-
Deferred income	4.3	-	-
<b>Total operating income</b>		<b>1,836,989</b>	<b>1,477,356</b>
<b>Expenditure</b>			
Staff costs	3	(2,298,217)	(2,033,961)
Purchase of goods and services	3	(51,293)	(33,451)
Depreciation, amortisation and impairment charges	3	(172,232)	(112,147)
Provision expense	3	-	-
Other expenditure	3	(2,084,728)	(2,088,000)
<b>Total operating expenditure</b>		<b>(4,606,470)</b>	<b>(4,267,559)</b>
<b>Net Expenditure</b>		<b>(2,769,481)</b>	<b>(2,790,203)</b>
Finance income	4.2	-	-
Finance expense	3	-	-
<b>Net expenditure for the year</b>		<b>(2,769,481)</b>	<b>(2,790,203)</b>
Revenue Resource Limit (RRL) received from DoH	24.1	2,777,551	2,801,741
<b>Surplus/(Deficit) against RRL</b>		<b>8,070</b>	<b>11,538</b>
<b>OTHER COMPREHENSIVE EXPENDITURE</b>			
	NOTE	2019 £	2018 £
<b>Items that will not be reclassified to net operating costs:</b>			
Net gain/(loss) on revaluation of property, plant & equipment	5.1/8/5.2/8	-	-
Net gain/(loss) on revaluation of intangibles	6.1/8/6.2/8	3,551	5,262
Net gain/(loss) on revaluation of financial instruments	7/8	-	-
<b>Items that may be reclassified to net operating costs:</b>			
Net gain/(loss) on revaluation of investments		-	-
<b>TOTAL COMPREHENSIVE EXPENDITURE for the year ended 31 March 2019</b>		<b>(2,765,930)</b>	<b>(2,784,941)</b>

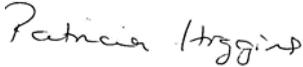
The notes on pages 82– 112 form part of these accounts.

**NORTHERN IRELAND SOCIAL CARE COUNCIL**  
**STATEMENT of FINANCIAL POSITION at 31 March 2019**

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

		2019		2018	
	NOTE	£	£	£	£
<b>Non Current Assets</b>					
Property, plant and equipment	5.1/5.2	48,748		47,191	
Intangible assets	6.1/6.2	424,489		554,115	
Financial assets	7	-		-	
Trade and other receivables	12	-		-	
Other current assets	12	-		-	
<b>Total Non Current Assets</b>			<b>473,237</b>		<b>601,306</b>
<b>Current Assets</b>					
Assets classified as held for sale	9	-		-	
Inventories	10	-		-	
Trade and other receivables	12	292,753		17,468	
Other current assets	12	60,715		63,402	
Intangible current assets	12	-		-	
Financial assets	7	-		-	
Cash and cash equivalents	11	74,103		50,642	
<b>Total Current Assets</b>			<b>427,571</b>		<b>131,512</b>
<b>Total Assets</b>			<b>900,808</b>		<b>732,818</b>
<b>Current Liabilities</b>					
Trade and other payables	13	(819,734)		(1,096,644)	
Other liabilities	13	-		-	
Intangible current liabilities	13	-		-	
Financial liabilities	7	-		-	
Provisions	15	-		-	
<b>Total Current Liabilities</b>			<b>(819,734)</b>		<b>(1,096,644)</b>
<b>Total assets less current liabilities</b>			<b>81,074</b>		<b>(363,826)</b>
<b>Non Current Liabilities</b>					
Provisions	15	-		-	
Other payables > 1 yr	13	-		-	
Financial liabilities	7	-		-	
<b>Total Non Current Liabilities</b>			<b>-</b>		<b>-</b>
<b>Total assets less total liabilities</b>			<b>81,074</b>		<b>(363,826)</b>
<b>Taxpayers' Equity and other reserves</b>					
Revaluation Reserve		35,715		32,164	
SoCNE Reserve		45,359		(395,990)	
<b>Total equity</b>			<b>81,074</b>		<b>(363,826)</b>

The financial statements on pages 78 to 112 were approved by the Board on 26 June 2019 and were signed on its behalf by:

Signed  (Chief Executive) Date 26 June 2019

Signed  (Chairman) Date 26 June 2019

**NORTHERN IRELAND SOCIAL CARE COUNCIL**  
**STATEMENT of CASH FLOWS for the year ended 31 March 2019**

The Statement of Cash Flows shows the changes in cash and cash equivalents of the Council during the reporting period. The statement shows how the 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 Council. Investing activities represent the extent to which cash inflows and outflows have been made for resources which are intended to contribute to the Council's future public service delivery.

	NOTE	2019 £	2018 £
<b>Cash flows from operating activities</b>			
Net surplus after interest/Net operating expenditure		(2,769,481)	(2,790,203)
Adjustments for non cash costs		187,572	121,497
(Increase)/decrease in trade and other receivables		(272,598)	17,916
<i>Less movements in receivables relating to items not passing through the NEA</i>			
Movements in receivables relating to the sale of property, plant & 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		(276,910)	489,380
<i>Less movements in payables relating to items not passing through the NEA</i>			
Movements in payables relating to the purchase of property, plant & equipment		-	16,652
Movements in payables relating to the purchase of intangibles		372,060	(382,060)
Movements in payables relating to finance leases		-	-
Movements on payables relating to PFI and other service concession arrangement contracts		-	-
Use of provisions	15	-	-
<b>Net cash inflow/(outflow) from operating activities</b>		<u>(2,759,357)</u>	<u>(2,526,818)</u>
<b>Cash flows from investing activities</b>			
(Purchase of property, plant & equipment)	5	(22,997)	(29,620)
(Purchase of intangible assets)	6	(390,015)	-
Proceeds of disposal of property, plant & equipment		-	-
Proceeds on disposal of intangibles		-	-
Proceeds on disposal of assets held for resale		-	-
<b>Net cash outflow from investing activities</b>		<u>(413,012)</u>	<u>(29,620)</u>
<b>Cash flows from financing activities</b>			
Grant in aid		3,195,830	2,544,641
Cap element of payments - finance leases and on balance sheet (SoFP) PFI and other service concession arrangements		-	-
<b>Net financing</b>		<u>3,195,830</u>	<u>2,544,641</u>
<b>Net increase (decrease) in cash &amp; cash equivalents in the period</b>		23,461	(11,797)
<b>Cash &amp; cash equivalents at the beginning of the period</b>	11	50,642	62,439
<b>Cash &amp; cash equivalents at the end of the period</b>	11	<u>74,103</u>	<u>50,642</u>

The notes on pages 82 to 112 form part of these accounts.

**NORTHERN IRELAND SOCIAL CARE COUNCIL**  
**STATEMENT of CHANGES in TAXPAYERS EQUITY for the year ended 31 March 2019**

This statement shows the movement in the year on the different reserves held by the 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 Council, to the extent that the total is not represented by other reserves and financing items.

	NOTE	SoCNE Reserve £	Revaluation Reserve £	Taxpayer's Equity Total £
<b>Balance at 31 March 2017</b>		<b>(159,028)</b>	<b>26,902</b>	<b>(132,126)</b>
<b>Changes in Taxpayers Equity 2017-18</b>				
Grant from DoH		2,544,641	-	2,544,641
Other reserves movements including transfers		-	-	-
(Comprehensive expenditure for the year)		(2,790,203)	5,262	(2,784,941)
Transfer of asset ownership		-	-	-
Non cash charges - auditors remuneration	3	8,600	-	8,600
<b>Balance at 31 March 2018</b>		<b>(395,990)</b>	<b>32,164</b>	<b>(363,826)</b>
<b>Changes in Taxpayers Equity 2018-19</b>				
Grant from DoH		3,195,830	-	3,195,830
Other reserves movements including transfers		-	-	-
(Comprehensive expenditure for the year)		(2,769,481)	3,551	(2,765,930)
Transfer of asset ownership		-	-	-
Non cash charges - auditors remuneration	3	15,000	-	15,000
<b>Balance at 31 March 2019</b>		<b>45,359</b>	<b>35,715</b>	<b>81,074</b>

## **STATEMENT OF ACCOUNTING POLICIES**

### **1. Authority**

These accounts 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 follow IFRS to the extent that it is meaningful and appropriate to the Northern Ireland Social Care Council (the "Council"). Where a choice of accounting policy is permitted, the accounting policy which has been judged to be most appropriate to the particular circumstances of the Council for the purpose of giving a true and fair view has been selected. The Council's accounting policies have been applied consistently in dealing with items considered material in relation to the accounts, unless otherwise stated.

#### **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.

#### **1.2 Currency**

These accounts are presented in UK Pounds sterling.

#### **1.3 Property, Plant and Equipment**

Property, plant and equipment assets comprise Land, Buildings, Dwellings, Transport Equipment, Plant & Machinery, Information Technology, Furniture & Fittings, and Assets under construction.

##### **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.

## **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**

Land and buildings are carried at the last professional valuation, in accordance with the Royal Institute of Chartered Surveyors (Statement of Asset Valuation Practice) Appraisal and Valuation Standards insofar as these are consistent with the specific needs of the HSC.

The last valuation was carried out on 31 January 2016 by Land and Property Services (LPS) which is an independent executive body within the Department of Finance. The valuers are qualified to meet the ‘Member of Royal Institution of Chartered Surveyors’ (MRICS) standard.

Professional revaluations of land and buildings are undertaken at least once in every five year period and are revalued annually, between professional valuations, using indices provided by LPS.

Land and buildings used for the Arms Length Body (Northern Ireland Social Care Council) services or for administrative purposes are stated in the statement of financial position at their revalued amounts, being the fair value at the date of revaluation less any subsequent accumulated depreciation and impairment losses.

Fair values are determined as follows:

- Land and non-specialised buildings – open market value for existing use;
- Specialised buildings – depreciated replacement cost; and
- Properties surplus to requirements – the lower of open market value less any material directly attributable selling costs, or book value at date of moving to non-current assets.

### **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)**

Properties in the course of construction for service or administration purposes are carried at cost, less any impairment loss. Assets 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 exceed 5 years, suitable indices will be applied each year and depreciation will be based on indexed amount.

## **STATEMENT OF ACCOUNTING POLICIES**

### **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.

### **1.4 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 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.

<b>Asset Type</b>	<b>Asset Life</b>
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

### **1.5 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.

## **STATEMENT OF ACCOUNTING POLICIES**

### **1.6 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 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.

### **1.7 Intangible assets**

Intangible assets includes 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 asset. Expenditure on research is not capitalised: it is recognised as an operating expense in the period in which it is incurred. 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 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 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.

## **STATEMENT OF ACCOUNTING POLICIES**

### **1.8 Non-current assets held for sale**

Non-current assets are classified as held for sale if their carrying amount will be recovered principally through a sale transaction rather than through continuing use. In order to meet this definition IFRS 5 requires that the asset must be immediately available for sale in its current condition and that the sale is highly probable. A sale is regarded as highly probable where an active plan is in place to find a buyer for the asset and the sale is considered likely to be concluded within one year. Non-current assets held for sale are measured at the lower of their previous carrying amount and fair value, less any material directly attributable selling costs. Fair value is open market value, where one is available, including alternative uses.

Assets classified as held for sale are not depreciated.

The profit or loss arising on disposal of an asset is the difference between the sale proceeds and the carrying amount. The profit from sale of land which is a non depreciating asset is recognised within income. The profit from sale of a depreciating asset is shown as a reduced expense. The loss from sale of land or from any depreciating assets is shown within operating expenses. On disposal, the balance for the asset on the revaluation reserve is transferred to the Statement of Comprehensive Net Expenditure Reserve. Property, plant or equipment that is to be scrapped or demolished does not qualify for recognition as held for sale. Instead, it is retained as an operational asset and its economic life is adjusted. The asset is de-recognised when it is scrapped or demolished.

### **1.9 Inventories**

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

### **1.10 Income**

Income is classified between Revenue from Contracts and Other Operating Income as assessed necessary 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 HSC body and is recognised 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.

In year of initial application, the introduction of IFRS 15 has not impacted on the timing of satisfying performance obligations of contracts in existence therefore the transaction price determined has not changed as a result of its introduction. The current impact of its introduction has resulted in reclassification of income based on consideration of whether there is a written, oral or implied contract in existence. Note 4 Income provides initial application disclosures in line with HM Treasury application guidance on transition to IFRS 15.

#### **Grant in aid**

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

## **STATEMENT OF ACCOUNTING POLICIES**

### **1.11 Investments**

The Council does not have any investments.

### **1.12 Other expenses**

Other operating expenses for goods or services are recognised when, and to the extent that, they have been received. They are measured at the fair value of the consideration payable.

### **1.13 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.

### **1.14 Leases**

IFRS 16 Leases replaces IAS 17 Leases and is effective with EU adoption from 1 January 2019. In line with the requirements of the FReM, IFRS 16 will be implemented, as interpreted and adapted for the public sector, with effect from 1 April 2020.

Leases are classified as finance leases when substantially all the risks and rewards of ownership are transferred to the lessee. All other leases are classified as operating leases.

#### **The Council as lessee**

Property, plant and equipment held under finance leases are initially recognised, at the inception of the lease, at fair value or, if lower, at the present value of the minimum lease payments, with a matching liability for the lease obligation to the lessor. 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 Council's surplus/deficit.

Operating lease payments are recognised as an expense on a straight-line basis over the lease term. Lease incentives are recognised initially as a liability and subsequently as a reduction of rentals on a straight-line basis over the lease term.

Contingent rentals are recognised as an expense in the period in which they are incurred.

Where a lease is for land and buildings, the land and building components are separated. Leased land may be either an operating lease or a finance lease depending on the conditions in the lease agreement and following the general guidance set out in IAS 17. Leased buildings are assessed as to whether they are operating or finance leases.

## **STATEMENT OF ACCOUNTING POLICIES**

### **The Council as lessor**

Amounts due from lessees under finance leases are recorded as receivables at the amount of the Council's net investment in the leases. Finance lease income is allocated to accounting periods so as to reflect a constant periodic rate of return on the Council's net investment outstanding in respect of the leases.

Rental income from operating leases is recognised on a straight-line basis over the term of the lease. Initial direct costs incurred in negotiating and arranging an operating lease are added to the carrying amount of the leased asset and recognised on a straight-line basis over the lease term.

### **1.15 Private Finance Initiative (PFI) transactions**

The Council has had no PFI transactions during the year.

### **1.16 Financial instruments**

#### **• Financial assets**

Financial assets are recognised on the balance sheet when the 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 introduces the requirement to consider the expected credit loss model on financial assets. The measurement of the loss allowance depends upon the HSC Body'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.

#### **• Financial liabilities**

Financial liabilities are recognised on the balance sheet when the 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.

Financial liabilities are initially recognised at fair value.

#### **• 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 within the Council in creating risk than would apply to a non public sector body of a similar size, therefore the Council are not exposed to the degree of financial risk faced by business entities.

## **STATEMENT OF ACCOUNTING POLICIES**

The Council have 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 the Council in undertaking activities. Therefore the HSC is exposed to little credit, liquidity or market risk.

- **Currency risk**  
The Council is principally a domestic organisation with the great majority of transactions, assets and liabilities being in the UK and Sterling based. The Council has no overseas operations. The Council therefore has low exposure to currency rate fluctuations.
- **Interest rate risk**  
The Council has limited powers to borrow or invest and therefore has low exposure to interest rate fluctuations.
- **Credit risk**  
Because the majority of the Council's income comes from contracts with other public sector bodies, the Council has low exposure to credit risk.
- **Liquidity risk**  
Since the Council receives the majority of its funding through its principal Commissioner which is voted through the Assembly, it is therefore not exposed to significant liquidity risks.

### **1.17 Provisions**

The Council had no provisions at either 31 March 2019 or 31 March 2018.

### **1.18 Contingencies**

The Council had no contingent assets or liabilities at either 31 March 2019 or 31 March 2018.

### **1.19 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 2019. It is not anticipated that the level of untaken leave will vary significantly from year to year. [Untaken flexi leave is estimated to be immaterial to the Council and has not been included].

#### **Retirement benefit costs**

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

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

## **STATEMENT OF ACCOUNTING POLICIES**

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

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 at the statement of financial position date and updates it to reflect current conditions. The 2016 valuation for the HSC Pension scheme updated to reflect current financial conditions (and a change in financial assumption methodology) will be used in 2018-19 accounts.

### **1.20 Reserves**

#### **Statement of Comprehensive Net Expenditure Reserve**

Accumulated surpluses are accounted for in the Statement of Comprehensive Net Expenditure Reserve.

#### **Revaluation Reserve**

The Revaluation Reserve reflects the unrealised balance of cumulative indexation and revaluation adjustments to assets other than donated assets.

### **1.21 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.

### **1.22 Third party assets**

Assets belonging to third parties (such as money held on behalf of patients) are not recognised in the accounts since the Council has no beneficial interest in them. Details of third party assets are given in Note 23 to the accounts.

### **1.23 Government Grants**

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

## **STATEMENT OF ACCOUNTING POLICIES**

### **1.24 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 HSC 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.

### **1.25 Accounting Standards that have been issued but have not yet been adopted**

Under IAS 8 there is a requirement to disclose those standards issued but not yet adopted.

IFRS 16 Leases replaces IAS 17 Leases and is effective with EU adoption from 1 January 2019. In line with the requirements of the FReM, IFRS 16 will be implemented, as interpreted and adapted for the public sector, with effect from 1 April 2020.

The IASB issued new and amended standards (IFRS 10, IFRS 11 & IFRS 12) that affect the consolidation and reporting of subsidiaries, associates and joint ventures. These standards were effective with EU adoption from 1 January 2014.

Accounting boundary IFRS' are currently adapted in the FReM so that the Westminster departmental accounting boundary is based on ONS control criteria, as designated by Treasury. A similar review in NI, which will bring NI departments under the same adaptation, has been carried out and the resulting recommendations were agreed by the Executive in December 2018. With effect from 2020-21, the accounting boundary for departments will change and there will also be an impact on departments around the disclosure requirements under IFRS 12. ALBs apply IFRS in full and their consolidation boundary may change as a result of the new Standards.'

Management consider that any other new accounting policies issued but not yet adopted are unlikely to have a significant impact on the accounts in the period of the initial application.

**NOTE 2 ANALYSIS OF NET EXPENDITURE BY SEGMENT**

The core business and strategic direction of the 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 acts as the Chief Operating Decision Maker and receives financial information on the Council as a whole and makes decisions on this basis. Hence, it is appropriate that the Council reports on a single operational segment basis.

**NORTHERN IRELAND SOCIAL CARE COUNCIL  
NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2019**

**NOTE 3 EXPENDITURE**

	2019 £	2018 £
<b>Operating expenses are as follows:-</b>		
Staff costs: <sup>1</sup>		
Wages and Salaries	1,931,061	1,674,446
Social security costs	148,974	148,423
Other pension costs	218,182	211,092
Revenue grants to voluntary organisations	527,379	648,386
Supplies and services – general	51,293	33,451
Establishment	631,976	634,483
Transport	-	-
Premises	613,142	553,488
Interest charges	-	-
Miscellaneous	90,378	50,296
BSO Services	206,513	191,997
<b>Total Operating Expenses</b>	<b>4,418,898</b>	<b>4,146,062</b>
<b>Non cash items</b>		
Depreciation	21,100	21,101
Amortisation	151,132	91,046
Impairments	-	-
(Profit) on disposal of property, plant & equipment (including land)	-	-
(Profit) on disposal of intangibles	-	-
Loss on disposal of property, plant & equipment (including land)	340	750
Loss on disposal of intangibles	-	-
Increase / Decrease in provisions (provision provided for in year less any release)	-	-
Cost of borrowing provisions (unwinding of discount on provisions)	-	-
Auditors remuneration	15,000	8,600
<b>Total non cash items</b>	<b>187,572</b>	<b>121,497</b>
<b>Total</b>	<b>4,606,470</b>	<b>4,267,559</b>

During the year the Council purchased no non audit services from its external auditor (NIAO) (2017/18: £Nil).

<sup>1</sup> Further detailed analysis of staff costs is located in the Staff Report on page 69 within the Accountability Report.

**NORTHERN IRELAND SOCIAL CARE COUNCIL  
NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2019**

**NOTE 4 INCOME**

**4.1 Revenue from Contracts with Customers**

	2019 £	2018 £
Other income from non-patient services	1,836,989	1,477,356
Seconded staff	-	-
Charitable and other contributions to expenditure	-	-
Donations / Government Grant / Lottery Funding for non current assets	-	-
Profit on disposal of land	-	-
Interest receivable	-	-
<b>Total Revenue from Contracts with Customers</b>	<b>1,836,989</b>	<b>1,477,356</b>

**4.2 Other Operating Income**

	2019 £	2018 £
Other income from non-patient services	-	-
<b>Total Other Operating Income</b>	<b>-</b>	<b>-</b>
<b>Total Income</b>	<b>1,836,989</b>	<b>1,477,356</b>

**4.3 Deferred income**

The NISCC had no income released from conditional grants in 2018/19 and 2017/18.

**NORTHERN IRELAND SOCIAL CARE COUNCIL  
NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2019**

**NOTE 5.1 Property, plant & equipment - year ended 31 March 2019**

	Land £	Buildings (excluding dwellings) £	Dwellings £	Assets under Construction £	Plant and Machinery (Equipment) £	Transport Equipment £	Information Technology (IT) £	Furniture and Fittings £	Total £
<b>Cost or Valuation</b>									
At 1 April 2018	-	-	-	-	6,410	-	150,999	-	157,409
Indexation	-	-	-	-	-	-	-	-	-
Additions	-	-	-	-	-	-	22,997	-	22,997
Donations / Government grant / Lottery Funding	-	-	-	-	-	-	-	-	-
Reclassifications	-	-	-	-	-	-	-	-	-
Transfers	-	-	-	-	-	-	-	-	-
Revaluation	-	-	-	-	-	-	-	-	-
Impairment charged to the SoCNE	-	-	-	-	-	-	-	-	-
Impairment charged to revaluation reserve	-	-	-	-	-	-	-	-	-
Reversal of impairments (indexn)	-	-	-	-	-	-	-	-	-
Disposals	-	-	-	-	-	-	(22,815)	-	(22,815)
At 31 March 2019	-	-	-	-	<b>6,410</b>	-	<b>151,181</b>	-	<b>157,591</b>

<b>Depreciation</b>									
At 1 April 2018	-	-	-	-	6,410	-	103,808	-	110,218
Indexation	-	-	-	-	-	-	-	-	-
Reclassifications	-	-	-	-	-	-	-	-	-
Transfers	-	-	-	-	-	-	-	-	-
Revaluation	-	-	-	-	-	-	-	-	-
Impairment charged to the SoCNE	-	-	-	-	-	-	-	-	-
Impairment charged to the revaluation reserve	-	-	-	-	-	-	-	-	-
Reversal of impairments (indexn)	-	-	-	-	-	-	-	-	-
Disposals	-	-	-	-	-	-	(22,475)	-	(22,475)
Provided during the year	-	-	-	-	-	-	21,100	-	21,100
At 31 March 2019	-	-	-	-	<b>6,410</b>	-	<b>102,433</b>	-	<b>108,843</b>

**NOTE 5.1 (continued) Property, plant & equipment-year ended 31 March 2019**

	Land £	Buildings (excluding dwellings) £	Dwellings £	Assets under Construction £	Plant and Machinery (Equipment) £	Transport Equipment £	Information Technology (IT) £	Furniture and Fittings £	Total £
<b>Carrying Amount</b> At 31 March 2019	-	-	-	-	-	-	48,748	-	48,748
At 31 March 2018	-	-	-	-	-	-	47,191	-	47,191

**Asset financing**

Owned  
Finance leased  
On B/S (SoFP) PFI and other service  
concession arrangements contracts

**Carrying Amount**  
At 31 March 2019

-	-	-	-	-	-	-	48,748	-	48,748
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	48,748	-	48,748

Any fall in value through negative indexation or revaluation is shown as impairment.

The total amount of depreciation charged in the Statement of Comprehensive Net Expenditure Account in respect of assets held under finance leases and hire purchase contracts is £Nil (2018: £Nil).

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

	2019 £	2018 £
Donations	-	-
Government Grant	-	-
Lottery Funding	-	-

**NOTE 5.2 Property, plant & equipment - year ended 31 March 2018**

	Land £	Buildings (excluding dwellings) £	Dwellings £	Assets under Construction £	Plant and Machinery (Equipment) £	Transport Equipment £	Information Technology (IT) £	Furniture and Fittings £	Total £
<b>Cost or Valuation</b>									
At 1 April 2017	-	-	-	-	20,406	-	182,522	-	202,928
Indexation	-	-	-	-	-	-	-	-	-
Additions	-	-	-	-	-	-	12,968	-	12,968
Donations / Government grant / Lottery Funding	-	-	-	-	-	-	-	-	-
Reclassifications	-	-	-	-	-	-	-	-	-
Transfers	-	-	-	-	-	-	-	-	-
Revaluation	-	-	-	-	-	-	-	-	-
Impairment charged to the SoCNE	-	-	-	-	-	-	-	-	-
Impairment charged to revaluation reserve	-	-	-	-	-	-	-	-	-
Reversal of impairments (indexn)	-	-	-	-	-	-	-	-	-
Disposals	-	-	-	-	(13,996)	-	(44,491)	-	(58,487)
At 31 March 2018	-	-	-	-	<b>6,410</b>	-	<b>150,999</b>	-	<b>157,409</b>

<b>Depreciation</b>									
At 1 April 2017	-	-	-	-	20,406	-	126,448	-	146,854
Indexation	-	-	-	-	-	-	-	-	-
Reclassifications	-	-	-	-	-	-	-	-	-
Transfers	-	-	-	-	-	-	-	-	-
Revaluation	-	-	-	-	-	-	-	-	-
Impairment charged to the SoCNE	-	-	-	-	-	-	-	-	-
Impairment charged to the revaluation reserve	-	-	-	-	-	-	-	-	-
Reversal of impairments (indexn)	-	-	-	-	-	-	-	-	-
Disposals	-	-	-	-	(13,996)	-	(43,741)	-	(57,737)
Provided during the year	-	-	-	-	-	-	21,101	-	21,101
At 31 March 2018	-	-	-	-	<b>6,410</b>	-	<b>103,808</b>	-	<b>110,218</b>

**NOTE 5.2 (continued) Property, Plant & Equipment- year ended 31 March 2018**

	Land £	Buildings (excluding dwellings) £	Dwellings £	Assets under Construction £	Plant and Machinery (Equipment) £	Transport Equipment £	Information Technology (IT) £	Furniture and Fittings £	Total £
<b>Carrying Amount</b> At 31 March 2018	-	-	-	-	-	-	47,191	-	47,191
At 1 April 2017	-	-	-	-	-	-	56,074	-	56,074

**Asset financing**

Owned  
Finance leased  
On SOFP PFI and other service  
concession arrangements  
contracts

-	-	-	-	-	-	-	47,191	-	47,191
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
<b>Carrying Amount</b> At 31 March 2018	-	-	-	-	-	-	47,191	-	47,191

**Asset financing**

Owned  
Finance leased  
On SOFP PFI and other service  
concession arrangements  
contracts

-	-	-	-	-	-	-	56,074	-	56,074
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
<b>Carrying Amount</b> At 1 April 2017	-	-	-	-	-	-	56,074	-	56,074

**NOTE 6.1 Intangible assets- year ended 31 March 2019**

	Software Licenses £	Information Technology £	Websites £	Development Expenditure £	Licences, Trademarks & Artistic Originals £	Patents £	Goodwill £	Payments on Account & Assets under Construction £	Total £
<b>Cost or Valuation</b>									
At 1 April 2018	51,571	980,603	-	-	-	-	-	-	1,032,174
Indexation	405	8,238	-	-	-	-	-	-	8,643
Additions	-	10,000	-	-	-	-	-	7,955	17,955
Donations / Government grant / Lottery Funding	-	-	-	-	-	-	-	-	-
Reclassifications	-	-	-	-	-	-	-	-	-
Transfers	-	-	-	-	-	-	-	-	-
Revaluation	-	-	-	-	-	-	-	-	-
Impairment charged to the SoCNE	-	-	-	-	-	-	-	-	-
Impairment charged to revaluation reserve	-	-	-	-	-	-	-	-	-
Disposals	-	-	-	-	-	-	-	-	-
<b>At 31 March 2019</b>	<b>51,976</b>	<b>998,841</b>	-	-	-	-	-	<b>7,955</b>	<b>1,058,772</b>

**Cost or Valuation**

At 1 April 2018  
 Indexation  
 Additions  
 Donations / Government grant / Lottery Funding  
 Reclassifications  
 Transfers  
 Revaluation  
 Impairment charged to the SoCNE  
 Impairment charged to revaluation reserve  
 Disposals  
 At 31 March 2019

**Amortisation**

At 1 April 2018  
 Indexation  
 Reclassifications  
 Transfers  
 Revaluation  
 Impairment charged to the SoCNE  
 Impairment charged to the revaluation reserve  
 Disposals  
 Provided during the year  
 At 31 March 2019

43,467	434,592	-	-	-	-	-	-	-	478,059
391	4,701	-	-	-	-	-	-	-	5,092
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
7,363	143,769	-	-	-	-	-	-	-	151,132
<b>51,221</b>	<b>583,062</b>	-	-	-	-	-	-	-	<b>634,283</b>

**NORTHERN IRELAND SOCIAL CARE COUNCIL  
NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2019**

**NOTE 6.1 (continued) Intangible assets - year ended 31 March 2019**

Software Licenses £	Information Technology £	Websites £	Development Expenditure £	Licences, Trademarks & Artistic Originals £	Patents £	Goodwill £	Payments on Account & Assets under Construction £	Total £
755	415,779	-	-	-	-	-	7,955	424,489
8,104	546,011	-	-	-	-	-	-	554,115

**Carrying Amount**  
At 31 March 2019

At 31 March 2018

**Asset financing**

Owned  
Finance leased  
On B/S (SoFP) PFI and other service  
concession arrangements contracts

**Carrying Amount**  
At 31 March 2019

755	415,779	-	-	-	-	-	7,955	424,489
-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-
755	415,779	-	-	-	-	-	7,955	424,489

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:

	2019 £	2018 £
Donations	-	-
Government Grant	-	-
Lottery Funding	-	-

**NOTE 6.2 Intangible assets - year ended 31 March 2018**

	Software Licenses £	Information Technology £	Websites £	Development Expenditure £	Licences, Trademarks & Artistic Originals £	Patents £	Goodwill £	Payments on Account & Assets under Construction £	Total £
<b>Cost or Valuation</b>									
At 1 April 2017	50,268	581,775	-	-	-	-	-	-	632,043
Indexation	1,303	16,768	-	-	-	-	-	-	18,071
Additions	-	-	-	-	-	-	-	382,060	382,060
Donations / Government grant / Lottery Funding	-	-	-	-	-	-	-	-	-
Reclassifications	-	-	-	-	-	-	-	-	-
Transfers	-	382,060	-	-	-	-	-	(382,060)	-
Revaluation	-	-	-	-	-	-	-	-	-
Impairment charged to the SoCNE	-	-	-	-	-	-	-	-	-
Impairment charged to revaluation reserve	-	-	-	-	-	-	-	-	-
Disposals	-	-	-	-	-	-	-	-	-
At 31 March 2018	<b>51,571</b>	<b>980,603</b>	-	-	-	-	-	-	<b>1,032,174</b>

**Amortisation**

At 1 April 2017	35,188	339,016	-	-	-	-	-	-	374,204
Indexation	1,070	11,739	-	-	-	-	-	-	12,809
Reclassifications	-	-	-	-	-	-	-	-	-
Transfers	-	-	-	-	-	-	-	-	-
Revaluation	-	-	-	-	-	-	-	-	-
Impairment charged to the SoCNE	-	-	-	-	-	-	-	-	-
Impairment charged to the revaluation reserve	-	-	-	-	-	-	-	-	-
Disposals	-	-	-	-	-	-	-	-	-
Provided during the year	7,209	83,837	-	-	-	-	-	-	91,046
At 31 March 2018	<b>43,467</b>	<b>434,592</b>	-	-	-	-	-	-	<b>478,059</b>

**NORTHERN IRELAND SOCIAL CARE COUNCIL  
NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2019**

**NOTE 6.2 Intangible assets - year ended 31 March 2018**

	Software Licenses £	Information Technology £	Websites £	Development Expenditure £	Licences, Trademarks & Artistic Originals £	Patents £	Goodwill £	Payments on Account & Assets under Construction £	Total £
<b>Carrying Amount</b> At 31 March 2018	8,104	546,011	-	-	-	-	-	-	554,115
At 1 April 2017	15,080	242,759	-	-	-	-	-	-	257,839

**Asset financing**

Owned  
Finance leased  
On B/S (SoFP) PFI and other  
service concession  
arrangements contracts

8,104	546,011	-	-	-	-	-	-	-	554,115
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
<b>Carrying Amount</b> At 31 March 2018	<b>8,104</b>	<b>546,011</b>	-	-	-	-	-	-	<b>554,115</b>

**Asset financing**

Owned  
Finance leased  
On B/S (SoFP) PFI and other  
service concession  
arrangements contracts

15,080	242,759	-	-	-	-	-	-	-	257,839
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
<b>Carrying Amount</b> At 1 April 2017	<b>15,080</b>	<b>242,759</b>	-	-	-	-	-	-	<b>257,839</b>

#### **NOTE 7 FINANCIAL INSTRUMENTS**

As the cash requirements of the 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 Council's expected purchase and usage requirements and the Council is therefore exposed too little credit, liquidity or market risk.

#### **NOTE 8 IMPAIRMENTS**

The Council had no impairments at 31 March 2019 (2017/18: £1,390)

#### **NOTE 9 ASSETS CLASSIFIED AS HELD FOR SALE**

The Council did not hold any assets classified as held for sale at either 31 March 2019 or 31 March 2018.

#### **NOTE 10 INVENTORIES**

The Council did not hold any goods for resale at either 31 March 2019 or 31 March 2018.

**NORTHERN IRELAND SOCIAL CARE COUNCIL  
NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2019**

**NOTE 11 CASH AND CASH EQUIVALENTS**

	2019 £	2018 £
Balance at 1 <sup>st</sup> April	50,642	62,439
Net change in cash and cash equivalents	23,461	(11,797)
<b>Balance at 31<sup>st</sup> March</b>	<b>74,103</b>	<b>50,642</b>

**The following balances at 31 March were held at**

	2019 £	2018 £
Commercial Banks and cash in hand	74,103	50,642
<b>Balance at 31<sup>st</sup> March</b>	<b>74,103</b>	<b>50,642</b>

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

**NORTHERN IRELAND SOCIAL CARE COUNCIL  
NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2019**

**NOTE 12 TRADE RECEIVABLES, FINANCIAL AND OTHER ASSETS**

	2019 £	2018 £
<b>Amounts falling due within one year</b>		
Trade receivables	292,753	17,468
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	-	-
<b>Trade and other receivables</b>	<b>292,753</b>	<b>17,468</b>
Prepayments	60,715	61,832
Accrued income	-	1,570
Current part of PFI and other service concession arrangements prepayment	-	-
<b>Other current assets</b>	<b>60,715</b>	<b>63,402</b>
Carbon reduction commitment	-	-
<b>Intangible current assets</b>	<b>-</b>	<b>-</b>
<b>Amounts falling due after more than one year</b>		
Trade receivables	-	-
Deposits and advances	-	-
Other receivables	-	-
<b>Trade and other receivables</b>	<b>-</b>	<b>-</b>
Prepayments and accrued income	-	-
<b>Other current assets falling due after more than one year</b>	<b>-</b>	<b>-</b>
<b>TOTAL TRADE AND OTHER RECEIVABLES</b>	<b>292,753</b>	<b>17,468</b>
<b>TOTAL OTHER CURRENT ASSETS</b>	<b>60,715</b>	<b>63,402</b>
<b>TOTAL INTANGIBLE CURRENT ASSETS</b>	<b>-</b>	<b>-</b>
<b>TOTAL RECEIVABLES AND OTHER CURRENT ASSETS</b>	<b>353,468</b>	<b>80,870</b>

The balances are net of a provision for bad debts of £Nil (2017/18: £Nil).

**NORTHERN IRELAND SOCIAL CARE COUNCIL**  
**NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2019**

**NOTE 13 TRADE PAYABLES AND OTHER CURRENT LIABILITIES**

	2019 £	2018 £
<b>Amounts falling due within one year</b>		
Other taxation and social security	-	-
Bank overdraft	-	-
VAT payable	-	-
Trade capital payables – property, plant and equipment	-	-
Trade capital payables – intangibles	-	-
Trade revenue payables	19,405	51,811
Payroll payables	73,187	-
Clinical Negligence payables	-	-
RPA payables	-	-
BSO payables	208	207
Other payables	-	126,559
Accruals	695,879	464,452
Accruals– relating to property, plant and equipment	-	-
Accruals – relating to intangibles	10,000	382,060
Deferred income	21,055	71,555
<b>Trade and other payables</b>	<b>819,734</b>	<b>1,096,644</b>
Current part of finance leases	-	-
Current part of long term loans	-	-
Current part of imputed finance lease element of PFI and other service concession arrangements	-	-
<b>Other current liabilities</b>	<b>-</b>	<b>-</b>
Carbon reduction commitment	-	-
<b>Intangible current liabilities</b>	<b>-</b>	<b>-</b>
<b>Total payables falling due within one year</b>	<b>819,734</b>	<b>1,096,644</b>
<b>Amounts falling due after more than one year</b>		
Other payables, accruals and deferred income	-	-
Trade and other payables	-	-
Clinical Negligence payables	-	-
Finance leases	-	-
Current part of imputed finance lease element of PFI and other service concession arrangements	-	-
Long term loans	-	-
<b>Total non current other payables</b>	<b>-</b>	<b>-</b>
<b>TOTAL TRADE PAYABLES AND OTHER CURRENT LIABILITIES</b>	<b>819,734</b>	<b>1,096,644</b>

**NORTHERN IRELAND SOCIAL CARE COUNCIL  
NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2019**

**NOTE 14 PROMPT PAYMENT POLICY**

**14.1 Public Sector Payment Policy - Measure of Compliance**

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

	2019 Number	2019 Value £	2018 Number	2018 Value £
Total bills paid	1,652	2,641,711	1,259	2,115,749
Total bills paid within 30 day target	1,598	2,555,884	1,210	2,048,811
<b>% of bills paid within 30 day target</b>	<b>97%</b>	<b>97%</b>	<b>96%</b>	<b>97%</b>
Total bills paid within 10 day target	1,330	1,988,876	980	1,512,429
<b>% of bills paid within 10 day target</b>	<b>81%</b>	<b>75%</b>	<b>78%</b>	<b>71%</b>

**14.2 The Late Payment of Commercial Debts Regulations 2002**

Amount of compensation paid for payment(s) being late	£ -
<b>Total</b>	<b>-</b>

**NOTE 15 PROVISIONS FOR LIABILITIES AND CHARGES**

The Council had no provisions for liabilities and charges at either 31 March 2019 or 31 March 2018.

**NOTE 16 CAPITAL COMMITMENTS**

The Council had no capital commitments at either 31 March 2019 or 31 March 2018.

**NOTE 17 COMMITMENTS UNDER LEASES**

**17.1 Operating Leases**

Total future minimum lease payments under operating leases are given in the table below for each of the following periods.

	2019 £	2018 £
<b>Obligations under operating leases comprise</b>		
<b>Land</b>		
Not later than 1 year	-	-
Later than 1 year and not later than 5 years	-	-
Later than 5 years	-	-
	<hr/> -	<hr/> -
<b>Buildings</b>		
Not later than one year	261,780	261,780
Later than one year but not later than five years	370,855	632,635
Later than five years	-	-
	<hr/> <b>632,635</b>	<hr/> <b>894,415</b>
<b>Other</b>		
Not later than 1 year	-	-
Later than 1 year and not later than 5 years	-	-
Later than 5 years	-	-
	<hr/> -	<hr/> -

**17.2 Finance Leases**

The Council had no finance leases at either 31 March 2019 or 31 March 2018.

**17.3 Operating Leases**

The Council did not issue any operating leases at either 31 March 2019 or 31 March 2018.

**NOTE 18 COMMITMENTS UNDER PFI AND OTHER SERVICE CONCESSION ARRANGEMENT CONTRACTS**

**18.1 Off balance sheet PFI and other service concession arrangement schemes.**

The Council had no commitments under PFI and other concession arrangement contracts at 31 March 2019 or 31 March 2018.

**18.2 On balance sheet (SoFP) PFI Schemes**

The Council had no on balance sheet (SoFP) PFI and other service concession arrangements schemes at 31 March 2019 or 31 March 2018.

**NOTE 19 OTHER FINANCIAL COMMITMENTS**

The Council did not have any other financial commitments at 31 March 2019 or 31 March 2018.

**NOTE 20 FINANCIAL GUARANTEES, INDEMNITIES AND LETTERS OF COMFORT**

The Council did not have any financial guarantees, indemnities and letters of comfort at 31 March 2019 or 31 March 2018.

**NOTE 21 CONTINGENT LIABILITIES**

The Council did not have any quantifiable contingent liabilities at 31 March 2019 or 31 March 2018.

**NOTE 22 RELATED PARTY TRANSACTIONS**

The Council is an arm's length body of the Department of Health and as such the Department is a related party with which the 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 arms 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 has undertaken any material transactions with the Council.

**NOTE 23 THIRD PARTY ASSETS**

The Council held no assets at either 31 March 2019 or 31 March 2018 belonging to third parties.

**NOTE 24 Financial Performance Targets**

**24.1 Revenue Resource Limit**

The Council is given a Revenue Resource Limit which it is not permitted to overspend.

The Revenue Resource Limit for Council is calculated as follows:

	2019 Total £	2018 Total £
DoH (excludes non cash)	2,578,579	2,680,244
Other Government Department (HSCB)	11,400	-
Non cash RRL (from DHSSPS)	187,572	121,497
<b>Total agreed RRL</b>	<b>2,777,551</b>	<b>2,801,741</b>
Adjustment for income received re Donations / Government grant / Lottery funding for non current assets	-	-
<b>Total Revenue Resource Limit to Statement of Comprehensive Net Expenditure</b>	<b>2,777,551</b>	<b>2,801,741</b>

**24.2 Capital Resource Limit**

The Council is given a Capital Resource Limit (CRL) which it is not permitted to overspend.

	2019 £	2018 £
Gross capital expenditure by Council (Receipts from sales of fixed assets)	40,952	395,028
Net capital expenditure	-	-
	40,952	395,028
Capital Resource Limit	41,000	395,460
Overspend/(Underspend) against CRL	(48)	(432)

**24.3 Financial Performance Targets**

The Council is required to ensure that it breaks even on an annual basis by containing its surplus to within 0.25% of RRL or £20,000, whichever is greater.

	2018-19	2017-18
	£	£
Net Expenditure	(2,769,481)	(2,790,203)
RRL	2,777,551	2,801,741
Surplus/(Deficit) against RRL	8,070	11,538
Break Even cumulative position (opening)	133,137	121,599
Break Even Cumulative position (closing)	141,207	133,137
<b>Materiality Test:</b>	<b>2018-19</b>	<b>2017-18</b>
	%	%
Break Even in year position as % of RRL	0.29%	0.41%
Break Even cumulative position as % of RRL	5.08%	4.75%

**NOTE 25 EVENTS AFTER THE REPORTING PERIOD**

There are no post balance sheet events having material effect on the accounts.

**Date of authorisation for issue**

The Accounting Officer authorised these financial statements for issue on 9 July 2019

# 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 for the year ended 31 March 2019 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. These financial statements have been prepared under the accounting policies set out within them. 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 the Northern Ireland Social Care Council's affairs as at 31 March 2019 and the Northern Ireland Social Care Council'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) Order 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 of opinions

I conducted my audit in accordance with International Standards on Auditing (UK) (ISAs) and Practice Note 10 'Audit of Financial Statements of Public Sector Entities 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 the Northern Ireland Social Care Council in accordance with the ethical requirements of the Financial Reporting Council's Revised Ethical Standard 2016, 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.

### Other Information

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

In connection with my audit of the financial statements, 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, 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 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.

## **Responsibilities of the Council and Accounting Officer for the financial statements**

As explained more fully in the Statement of Accounting Officer Responsibilities, the Council and the Accounting Officer are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view.

## **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 evidence about the amounts and disclosures in the financial statements sufficient to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or error. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs 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.

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](http://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.

## **Matters on which I report by exception**

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
- 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.

## **Report**

I have no observations to make on these financial statements.



*KJ Donnelly*  
*Comptroller and Auditor General*  
*Northern Ireland Audit Office*  
*106 University Street*  
*Belfast*  
*BT7 1EU*

9 July 2019

## Board Membership – 2018-19



*Chair, Paul Martin*



*Neil Bodger*



*Noelle Barton*



*Sarah Browne*



*Roslyn Dougherty*



*Gerard Guckian*



*David Hayes*



*Christine Hunter*



*Brenda Maitland*



*Jacqueline McGarvey*



*Catherine McPhillips*

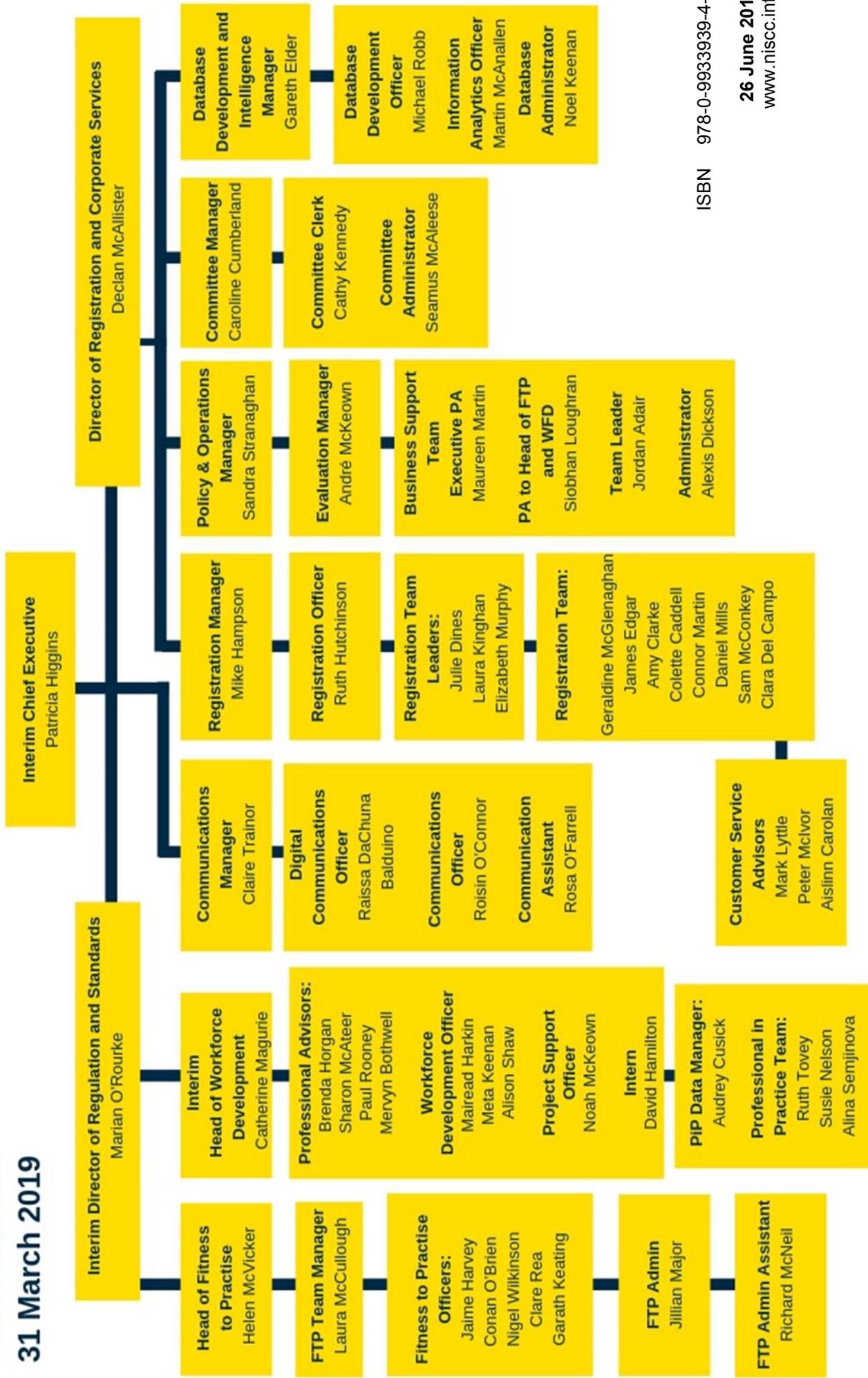


*Anne O'Reilly*



*Lee Wilson*

# Staff Structure 31 March 2019



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