

Title: Draft Annual Report 2022-23

Date: 26 April 2023

Presented by: Declan McAllister, Director of Registration & Corporate Services

ACTION REQUIRED

This Paper is	For Review
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SUMMARY

The Social Care Council has started the early development of its Annual Report for 2022-23. The draft Annual Report reflects on the extensive range of work delivered by the Social Care Council over the previous business year.

The draft Annual Report is an outline draft only at this stage, to enable the Board to see the developing structure and content. A more final draft of the Annual Report will be brought to the Board at their June meeting – and in the meantime, the Board is invited to review the draft outline and return to officials with any feedback or comments over the next three weeks. Quarter 4 performance report is also being provided today for information and provides additional information relating to the business year performance. There will be a further opportunity to comment on the emerging draft for the June Board meeting.

BACKGROUND

The Social Care Council is required to produce an Annual Report and Accounts for each business year. The Report is shared with the Audit and Risk Assurance Committee before final sign off by the Board at their June meeting.

The DoH set the timetable for the production of the Annual Report and accounts including scrutiny by External Audit.

The timetable for the production of the Annual Report and Accounts is attached at **Appendix I**.

KEY ISSUES AND IMPLICATIONS

The draft outline Annual Report contains the draft outline of section 1 (business performance) – the draft is attached [**Appendix II**]. As can be seen some of the key data is not available this early into the new Business Year and will be added. In addition, the Public and Personal Involvement Report will be drafted in partnership with the Participation Forum and will be added once available.

At the same time, the Chair and Chief Executive will have an opportunity to draft their introductions to help frame the context and content of the Report.

The full timetable for the production of the Report is attached [Appendix I] – however the organisation is working towards the key date set out in the programme below –

Board Approval & FINAL Changes	
Audit Committee recommend and Board approve accounts for Accounting Officer signature	Between Mon 12 Jun – Wed 12 Jul

At this stage, as the Board are being engaged now on the draft, the Social Care Council is inviting the Board to share any views or comments on the indicative draft over the next three weeks (by 17 May 2023).

ENGAGEMENT AND CONSULTATION

Operational Leadership Team and project leads have been involved in drafting this report. The Participation Partnership will collaborate on the Annual PPI Report.

RECOMMENDATIONS

The Board is invited to review the draft Annual Report and share comments with officials by 17 May 2021.

ATTACHED DOCUMENTS AND/OR LINKS HERE

Appendix I – Draft Annual Report 2022-23

Northern Ireland

Social

Care

Council

DRAFT

Annual Report and Accounts

1 April 2022 - 31 March 2023



Published by:
Northern Ireland Social Care Council
4th Floor, James House
2 Cromac Avenue Street
Belfast
BT7 2JA

Tel: 028 9536 2600
Website: www.niscc.info

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Northern Ireland Social Care Council Accounts for the year ended 31 March 2023

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

DD Month 2023

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Glossary - Words we use to describe our work

ALB	Arms' length body.
AYE	Assessed Year in Employment – the first year in assessed practice for newly qualified social workers.
BASW NI	The professional association for social work and social workers in Northern Ireland.
Board	This is the Board of the Northern Ireland Social Care Council who provide strategic oversight and direction, and is made up of a Chair and 12 Members.
BSO	Business Services Organisation – provides a range of services for health and social care organisations.
CEO	Chief Executive Officer.
CORU	The regulator for health and social care professionals in Ireland.
CPD	Continuing Professional Development – ongoing learning and training.
DoH	Department of Health – the government body responsible for health and social care in Northern Ireland.
ECHO	Extension for Community Healthcare Outcomes – is a programme of learning, sharing and support that uses video conferencing to share learning and good practice.
FtP	Fitness to Practise – a registrant's suitability to work in social work or social care.
FReM	The Department of Finance's Financial Reporting Manual.
GDPR	General Data Protection Regulation – the legislation around holding and using personal Information.
HEI's	Higher Education Institutions.
HR	Human Resources – manages staff well-being, development and their employment.
HSC	Health and social care – the people, systems and facilities that provide medical and personal care and support.
IAR	Individual Assessment Route – an option for social workers to have their learning and practice assessed and get a Northern Ireland Social Care Council Award.
IASW	Irish Association of Social Workers.
ICT	Information and Communications Technology –computers, networks, websites and Apps we use.
IFSW	International Federation of Social Workers – a worldwide body representing social work.
IIP	Investors in People – an award for good standards in staff and organisation management and development.

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

Chair's Introduction

Welcome

DRAFT FOR REVIEW



As Chair of the Northern Ireland Social Care Council, I am proud to be able to present in this Annual Report on the delivery of a significant programme of work to manage standards and registration for the 44,000 people approved by the Council to provide social work and social care services across Northern Ireland. As the regulatory body for social workers and social care workers practising here, everything we do is focused on high quality, safe and effective care. This report evidences the difference that our work has made towards developing a thriving, capable and compassionate social work and social care workforce that makes a unique contribution to the care and protection of people in need.

On behalf of the Social Care Council Board members and staff, I would like to acknowledge the valuable contribution made by each of the social workers and social care workers registered on our Social Care Register who continue to provide vital services every day across NI, regardless of the circumstances around them. Social workers and social care workers are delivering high quality care to everyone in Northern Ireland at an extremely difficult time for all of us – and the value of these roles could not be more important than it is today.

Social Work and Social Care matters – it matters to the thousands of children and adults who receive care and support every day. As we continue to navigate our way through the impact of Covid19 and the increasing financial pressures faced by society, this care and support is even more vital. The challenge, however, is how to deliver safe, quality care in a system that is under strain. Financial and workforce pressures are prevalent across the Health and Social Care (HSC) System and impact on the delivery of social work and social care services. Strategies to support social work and social care workforce recruitment and retention are vital to secure the delivery of safe, quality care and protect the health and wellbeing of our registrants. The Social Care Council must be responsive to these challenging and changing circumstances. Our focus is on the safety, quality and improvement of social work and social care services through a well-trained and supported workforce.

During 2022-23, we consulted with our stakeholders to develop our Strategic Plan for 2023-27. Our Strategic Plan for 2023- 2027 sets out our ambitions and priorities for the next four years. We are ambitious for the Social Care Council and for our registrants and through our work we will seek to support the HSC Improvement and Transformation Programme positioning social work and social care as key enablers in transforming our health and social care services. We have worked in collaboration with the Department of Health (DoH) to established a new 'Social Care Collaborative Forum' whose purpose is to deliver reform, address service pressures, promote co-ordinated activity and collaboration, and provide strategic oversight, direction and governance. Our Strategic Plan was developed at a significant period in the history of the Social Care Council. In addition to reaching its 21st birthday milestone in October 2022, the organisation participated in a review of our services by the DoH. This review confirmed our role and function as the regulator for social work and social care in Northern Ireland and set some progressive recommendations supporting our ambitions, which we will deliver through this Strategic Plan.

Partnership is at the heart of our work. We will deliver our strategic priorities through the invaluable and enduring partnership arrangements we have in place, working with our registrants, people who use services and carers, providers of social work and social care services, education and training providers, and with Government, all of whom have contributed to the progress we have made to date. Our ambition is to be a regulator of excellence, one we and our registrants can be proud of. The new strategy will be flexible and relevant, and it will shape our work for the next four years as we seek to make a difference for our registrants and the people who use social work and social care services. I would like to thank everyone who took the time to give their views and helped to shape the 2023-27 Strategic Plan.

Chair's introduction

This is the third year in which the Social Care Council had to deliver most of its services remotely as a result of the COVID pandemic restrictions. Along with stakeholders, we have adapted to new ways of working, with tasks being delivered online, and engagement through video conferencing and webinars. Throughout the year, as restrictions eased, it was possible to reinstate some face-to-face engagement with our stakeholders and partner organisations. These small advances have been a welcome step

We have continued to listen to our stakeholders and developed our services and resources to support them in delivering social care services. The online registration system was refreshed to provide further guidance for employers and new applicants, as well as for those maintaining their registration. During the year, the Learning Zone was moved online resources on the Learning Zone have been updated and new resources added to assist registrants in their ongoing learning and development. Our digital communications channels have been key in reaching our registrants, employers and stakeholder groups to ensure they were kept connected with the services, events and resources we were providing. We also provided support for the Department of Health (DoH), delivering communications campaigns for the Reform of Adult Social Care. Successful media campaigns were delivered online, in print and on local media to share stories about the valuable contribution that social care makes to individuals, families and communities. Social work careers were promoted online and on local radio to encourage more people to join the profession.

On behalf of the Social Care Council Board Members, I would like to commend all of the staff for their efforts and their undoubted commitment to our vision of quality social care services and outcomes for everyone. I also want to put on record my appreciation of the leadership, support and direction provided during this most challenging year by our senior leadership team; Patricia Higgins, Interim CEO, Declan McAllister, Director of Registration and Corporate Services and Marian O'Rourke, Interim Director of Regulation and Standards.

Finally, on behalf of the Board members and staff, I would like to offer my sincere thanks to all involved in our key partnerships (Professional in Practice, Leaders in Social Care and Registrants), who worked tirelessly to ensure the business of the Council continued without interruption. May I also offer my sincere thanks to those involved in the Participation Partnership who, despite the challenges they faced during this pandemic, continued to support our work. This ensured that we remained fully apprised of the serious impact of the pandemic on those using social care services at this time and fully focused on our commitment to improving the quality of social care services to ensure better outcomes for our most vulnerable people into the future (further detail is [included in the PPI report on page 15](#)).

There is no doubt 2023-24 will be another challenging year for the Council, as we adapt to the new office environment, and for the wider social care sector as we adjust to the new normal. I am confident we will adapt and change together to ensure that the social work and social care workforce has the skills and values required to deliver high quality services for the people of Northern Ireland.

SIGNATURE

Paul Martin

Chair, Northern Ireland Social Care Council

Our Role

There are 44,000 people working in social work or social care in Northern Ireland, and registered with the Social Care Council. The Social Care Council is responsible for:

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

Our Vision

To improve 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 together and 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 Work

Our core activities are focused on Standards of Conduct and Practice (the Standards), 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.



Section 1: Performance report

The Northern Ireland Social Care Council (the Social Care Council) is a public body, established by the Department of Health to raise the standards of practice in social work and social care. This performance report provides information about the Social Care Council and the strategies it must implement to deliver its business priorities safely and effectively.

The information is presented in four sections:

1. **Chief Executive's Statement on performance for 2022-23** - setting out the Chief Executive's perspective on performance against objectives and the risks to the achievement of those objectives;
2. **Personal and Public Involvement report** – summary of the partnerships and projects involving people who use services and carers in our work;
3. **Performance analysis** - providing a balanced and comprehensive analysis of performance during the year, impact of COVID on service delivery, trends identified and actions identified for the coming year;
4. **KPI summary** – Achievement against objectives and key performance indicators for 2022-23

Our work is themed around five key areas. An overview and commentary on how we performed against the objectives for these strategic themes during 2022-23 is set out in the following pages.

Theme 1 - Standards

Putting standards at the heart of social work and social care practice, education and training

Setting and raising standards in social work and social care practice, education and training.

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.

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.

Theme 4 - 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.

Theme 5 - Communication and engagement

Communicating, connecting and engaging

Creating and delivering effective and meaningful communication and engagement to support delivery of the Corporate and Business Plans.

Infrastructure – people, resources, governance, quality and systems

Our five strategic themes are supported by an overarching corporate objective to 'ensure the Social Care Council has the necessary infrastructure i.e. the people, resources, governance and estate management arrangements in place to deliver its strategic objectives.'

Chief Executive's Statement on organisational performance for 2022-23

UPDATE FOR REVIEW



This Annual Report for the period April 2022 to March 2023 reflects a successful achievement of our business objectives across a very challenging year. It includes commentary on the supports provided for the registered workforce to ensure they continued to provide front line social care services. It is encouraging to see the difference that our work has made in the last year for both the registered workforce and for people receiving care. Our plans for the next few years will build on these achievements. With our partners and stakeholders, we will continue our work to support and develop the social work and social care workforce.

Planning for 2022-23 was based on a flexible approach to service delivery, applying a combination of remote working and face-to-face engagement as public health restrictions permitted. There were many positive outcomes such as the increased use of digital engagement, which enabled us to involve a wider range of registrants and stakeholders in our seminars and events. We have drawn on the learning from the changes we have made and are committed to integrating the best of these new practices as we move forward into the new business year. Efficiencies gained from technology will be invaluable in the coming year. The Council, similar to most other organisations will be working within very tight financial constraints in 2023-24 and stringent assessments will be carried out to ensure that resources are used in the areas they will provide the greatest benefit.

During 2022-23, there was significant time invested in developing campaigns to raise awareness of the valuable contribution social workers and social care workers make to our community and our economy. The social work advertising campaign in the Autumn challenged people to 'Think Social Work' and the social care campaign has shone a light on the positive difference made by social care workers every day to the lives of people and in our communities. The communications team provided support to practitioners, researchers and service commissioners to encourage stakeholders to engage with their work. Council staff and Participation Partnership members have played a key role in the UK wide review of social care, providing feedback to focus groups and supporting engagement events for the UK Impact project for social care.

I too would like to acknowledge the commitment made by my staff in delivering services throughout this year. Each person has played their part to help make a difference for our registrants, their employers and the people they provide services for. We worked very closely with social work and social care leaders to understand what supports were needed for the workforce and, through partnership working, we adapted our services and developed resources to meet their needs. We will continue to work in partnership with providers of social work and social care services, with government departments and education providers to ensure our registrants are supported to carry out their work safely and effectively and are recognised for the contribution they make every day on the front line of social work and social care.

Our assessment of progress against business objectives is made using an 'outcomes-based approach'. The benefit of this approach is that our plans clearly describe what we are trying to achieve and the difference we want to make. Alongside recording achievement against performance targets, we used qualitative methods to find out about the difference this work is making for our stakeholders, including: surveys, emails and telephone interviews. Some of the 2022-23 highlights are illustrated overleaf. More detailed commentary for progress against Key Performance Indicators is **included in page xx**.

Business Highlights for 2022-23 include:

 <p>59,291 customers supported with registration queries 93% positive feedback on the service provided</p>	<p>Register maintained for *44,461 registrants: 37,148 social care workers 6539 social workers 774 social work students 101 decisions uploaded</p> <p><i>*Register totals 31 March 2023</i></p>
<p>Registration applications</p>  <p>19,962 registration applications/renewals processed 88% processed within 20 days 86% of fees paid online</p>	<p>Social work education standards assured</p>  <p>3 Degree courses 21 Designated practice learning providers 16 PiP Programmes 24 AYE Audits</p>
<p>Social work and social care careers promoted</p>  <p>22 In-person careers events 14 online careers information sessions 8,243 hits on Learning Zone careers resource 292 students enrolled on Degree</p>	<p>Expertise and Leadership provided to support strategic projects</p> <ul style="list-style-type: none"> • Social Care Collaborative Forum • UK Social Care Impact • NI Local Impact • Social Care Echo • Leaders in Social Care • Social Work Leaders • Social Work Strategy Subgroup • Apprenticeships & Trainees Panel
<p>Fitness to Practise concerns addressed</p>  <p>493 referrals triaged (95% within 3 days) 341 cases closed (94% closed consensually) 27 Interim Orders granted 21 Fitness to Practise committees/hearings</p>	<p>Finances managed effectively</p>  <p>Break-even achieved - (£10k underspend) 92% of invoices paid within 10 days 99% of invoices paid in 30 days</p>

Chief Executive's Statement on organisational performance for 2022-23

Assurance on the management of issues and risks

Effective governance systems are in place to support the regular review of issues and risks which could affect business delivery. As part of the Risk Management Strategy, the Board set the strategic risks and appetite for the organisation. The Risk Appetite Statement and Matrix in Appendix 3 of this report sets out the level of risk with which the Social Care Council aimed to operate across the key areas of finance, compliance, safety, service delivery and reputation in order to deliver on the strategic business themes in 2022-23.

During the year, we monitored closely those risks which had been identified as having the potential to impact on the achievement of the Business Plan objectives. Risks, controls and actions have been reviewed regularly by the Risk Management Committee. Summary of the assurances provided by our risk management processes is detailed in the Governance Statement on [page 54](#). The Board Audit and Risk Assurance Committee have reviewed the Risk Register and Assurance Framework at each of their meetings. This provides assurance to the Board, our sponsor department and our stakeholders on the organisation's ability to deliver its organisational objectives. The most significant risks identified during 2022-23 included:

- **COVID** – requirement to maintain standards of service whilst delivering work in alternate formats.
- **Fitness to Practise** – Resources and Capacity (impact of COVID restrictions upon delivery and difficulties in recruiting additional staff resource).
- **Finance** - impact of COVID and the move to James House on financial management
- **Registration** – impact of high demand for customer support from the Registration function alongside staffing pressures and training needs.
- **Recruitment** – BSO Shared Services (delays in progressing recruitments)
- **Workforce development** – impact of short-term contracts used to resource the staff team.
- **Development of social care policy and resourcing of the social care workforce** – external risk in the wider sector requiring support for a programme of work focused on developing a sustainable workforce, communicating positively about the sector and using workforce data to inform policy and planning.

COVID - Risk management

As already noted, the Business Plan for 2022-23 was developed within the context of uncertain timescales for the removal of COVID restrictions on service delivery. Delivery of business activities was continually reviewed and adapted to ensure progress continued towards strategic objectives. For each of the business themes, the Risk Appetite Statement and Matrix were used as a reference to introduce changes to business priorities and service delivery methods.

A strategic risk in relation to the management of the impact of the COVID pandemic has been included on the Risk Register since March 2020. The risk is currently rated as MEDIUM. The Board had allowed for an 'Open' appetite for risk in terms of service delivery, recognising that adaptations were required to help deliver substantial benefits to service users, registrants, employers and the wider social work and social care sector. The Business review Group continued to meet 1-2 times per week as required. The Board have been updated throughout the year about COVID and its impact on the business.

Fitness to Practise – Risk management

A priority for the Social Care Council during 2021-22 was to deliver the statutory functions of workforce registration and regulation through remote working practices. The Board had set the risk

appetite for these statutory functions as 'Cautious' in terms of compliance with legal obligations and also the standards expected of social care registrants in order to ensure public safety. The Board had also allowed for an 'Open' appetite for risk in terms of service delivery which allowed the management team to adapt systems and processes for the remote delivery of these key functions and the introduction of new technologies to facilitate online engagement. The Management Team provided assurance that Fitness to Practise Committees and Hearings were delivered effectively through alternative arrangements.

Funding was approved by DoH in 2020-21 to recruit the additional staff required to ensure the effective management of referrals, cases, committees and hearings. This was in response to the increase in the number of Fitness to Practise referrals and also the increasing complexity of cases which had been identified as pressures on capacity to assess and manage cases within the required timescales. Administrative and Committee staff were appointed in Quarters 1 and 2. Recruitment of permanent Fitness to Practise Officers proved difficult throughout the year, with only limited numbers of suitably skilled people available. Temporary staff were engaged to support ongoing service delivery. At year-end, one permanent officer had been appointed and temporary officers retained whilst recruitment activities are completed in May/June 2022.

Finance – Risk management

The appetite for financial risk is set as 'Cautious'. Throughout the year, reviews of financial performance were undertaken with the DoH. This ensured the risks to the financial position and sustainability of the Social Care Council was effectively managed. Variances in budgets were reflected in monthly finance reports. These included costs incurred to equip staff for remote working and to amend online registration/online learning services. Savings were also generated in budgeted amounts for travel, office running costs and meetings support.

Most significant risk to delivery of financial break-even was a £102,780 shortfall against budgeted fee income of £1.5m as a result of DoH policy to defer fee collection in 2020-21. In July 2021, a summary of all unrecovered fees was prepared for the DoH and adjustments made to the financial projections. Fee income was also impacted by movement of registrants on and off the register during COVID. Support was provided by the DoH to address the fees shortfall. A review of the registration database was carried out in Quarter 3 and approximately 2600 'out of date' registrations were removed from the Register in January 2022. From this point, automated processes were introduced to remove registrants that were overdue a fee payment or a renewal declaration for more than seven days. The application of these new processes has assisted in the management of fee income in the final Quarter of 2021-22 and successful achievement of break-even surplus of £7,013 against RRL, which was within financial guidelines of £20k/0.25% RRL.

Registration – Risk management

Delivery of registration functions to support registrants and employers in maintaining workforce registration experienced severe pressures in the first six months of 2021-22. The projects to re-introduce deferred fees and manage those who registered as emergency workers in the early part of the pandemic generated high volumes of customer support requests. As a result of these increased pressures, the risk to effective delivery of the statutory function to register the workforce escalated to 'Extreme' in October 2021. A project team was established to manage the adaptations required to reduce the pressures on the system. Additional staff were recruited and trained to provide additional customer support during Quarters 3 and 4. An external review of registration processes and structures was undertaken in December 2021 and recommendations to improve workflow are being implemented. Following significant improvement within this area, the impact of the risk was reduced by the Audit and Risk Committee in January 2022. Performance has been sustained during Quarter 4, with all customer emails triaged within one working day and 90% of customer queries resolved between 1-3 working days.

Workforce Development – Risk management

Pressures on staff resource for the Workforce Development Team has been identified as a high-level risk during the year. Issues within the recruitment process had resulted in a delay in filling a permanent vacancy within the team. There are also a number of staff members employed on temporary contracts, which creates risks in terms of longer-term service development. There have been increased external demands for the team to support employers in delivering workforce learning and development and staff have been required to provide expertise for strategic projects in the reform of adult social care services. The risk to being able to fulfil workforce development functions was reduced in in Quarter 4 with the appointment of a new Professional Adviser and the refresh of the sessional list for social work advisers. This area still remains a risk to the team until more permanent solutions are developed.

Development of social care policy and resourcing of the social care workforce – Risk management

The Social Care Council Leaders in Social Care Partnership was established to bring together key representatives to inform social care workforce development. Workforce reviews have identified external risks within the sector in terms of recruiting and retaining social workers and social care workers with the right skills and values to deliver services to the standards we require. The Social Care Council has taken a proactive approach to support social care providers to meet the pressures experienced as a result of increasing demand for services against an environment of growing financial pressures. We have worked closely with social work and social care leaders to provide a network where issues, risks and opportunities can be explored and collaboration with policy leads and service commissioners can be facilitated to provide sustainable solutions. The Leaders in Social Care Partnership have developed a programme of work which focuses on reviewing workforce needs, communications and using key workforce data to inform policy development and workforce planning. This work will continue to reduce the impact of this risk. The risk is currently assessed as high level.

I am satisfied that the Social Care Council has performed well against the objectives set out in the 2022-23 Business Plan. Further narrative on performance against each of the objectives is contained within the performance analysis and in the annual accounts within this report.

SIGNATURE

Patricia Higgins,
Chief Executive,
Northern Ireland Social Care Council

Personal and Public Involvement (PPI) report for 2022-23

UPDATE TO FOLLOW

The Participation Partnership (the Partnership) members are all people who receive social care services or who are a carer for someone. Their role is to influence, advise and challenge the work of the Social Care Council, ensuring that people who use social care services and their carers have an opportunity to shape and contribute to all of our work. 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.

The Partnership is chaired by a Board Member and supported by the Director of Registration and Corporate Services, together with a small group of other staff. These staff ensure that the members are supported in all areas of their work. Participation members are committed to meeting at least every three months and they report back to the Board on their progress. They agree their own agenda and all meetings are minuted. The Social Care Council recognises the significant amount of personal time and expertise contributed by the Participation members, which provides assurance that all activities are focused on the needs and experiences of those who use social care services.

Throughout the year, members held their meetings and carried out project work using Zoom, telephone calls and emails. The flexible approach of the members ensured that the connections and relationships that are fundamental to delivering on the shared Participation agenda were sustained. As well as engaging in the business agenda for the Social Care Council, Participation members shared their personal experience and expertise in projects to provide insight for those planning and delivering social care services, and providing learning and development, including regional and UK-wide reforms for social care services.

Highlights from 2022-23:

- Development of a promotional event to raise awareness of the role carried out by the members and encourage more people to get involved with the Participation Partnership. A short film has been prepared to feature the members and their work. This will be used at the promotional event which should take place in June 2022. Following this pilot event, the members plan to host a larger event later in the year to further engage with people who use services and carers.
- Business Plan development - Members fed back their views on the draft Business Plan and shared views about how the new Corporate Strategy could be developed to engage people who use services and their carers.
- Ongoing review of the Open University Social Work Degree in NI. Members are actively involved in workshops for social work students.
- Social Work Awards – participating in shortlisting and judging panels.
- Reviewing materials produced by the Social Care Council to support them in delivering on their commitment to use straightforward language and produce more accessible information.
- Social Care Transformation Project and the development of the Social Care Qualifications-Based Register.
- Review of the Workforce Development Team workplan for 2021-22 to identify the key pieces of work Participation Partnership members will be directly involved in and where evidence of appropriate engagement with Service Users and Carers will be sought to support workforce education, training and development activity.
- Support for the Regional PPI Forum to provide personal experiences and expertise to address issues with HSC service delivery.

PPI Report for 2022-23

- Contributions to HSC PPI Regional Forum workshops - learning from people's experiences during COVID and planning how the PPI Forum should review processes and actions.
- DoH 'Dragon's Den' event for Social Work and Social Care project funding applications.
- DoH Co-Production Review and Guidance –Membership of the writing group responsible for the development of the DoH Reflections publication 'Social Work and Co-Production.'
- Social Work Digital Resource Reference Group – developing an online resource to guide social workers on applying the Standards of Conduct and Practice in their daily work.
- Supporting implementation of the Review of the Degree actions to support students in integrating digital technology and social work interaction.
- Duty of Candour consultation to develop an open and honest culture within the HSC.
- Impact Assembly on the future of adult social care across the UK – participating in the online events and engaging with the project team tasked to deliver £15 million funding to various adult social care projects throughout the UK through evidence-based delivery models.
- Contributing to the Social Care Council Lunchtime Seminars promoting service user and carer experience.
- Engaging with social care workers and employers to learn more about their views on qualifications and a career structure for social care.
- Contributing to the development and content of SCC digital learning resources for social care staff and social workers.
- DoH NI 'Future Services' group, focused on adult social care in NI.

CHANGE TO IN YOUR SHOES GRAPHIC



PPI Report for 2022-23

2021-22 was a period of further growth for the Partnership, with the establishment of the new role of Vice-Chair. Members had discussed development of this new role and agreed that this role would be a joint appointment, with the responsibilities shared by two Partnership members. Anne Mallon and Gerard McWilliams are the first Vice-Chairs for the Partnership and they will be in post until December 2022. It is planned that this role will be rotated to enable all members to develop skills in planning and chairing meetings.

The support of the Vice-Chairs will be invaluable to the group during 2022-23 as the current Chair, Brenda Maitland, will be finishing her term of appointment with the Social Care Council and handing over her role to fellow Board Member, Sarah Browne, in the autumn. Brenda has been a long-serving member of the Partnership, having been involved with their work since 2015 and then taking up the role of Chair in 2017. Her passion for participation and involvement has helped ensure that the voices of service users and carers are heard in every aspect of the Social Care Council's work.

Looking Ahead – Plans for Participation in 2023-24

The members recognise that social workers and social care workers face immense challenges as we, hopefully, begin to move out of lockdown and into a period of recovery. This will require Government and the DoH to learn from the experiences of service users and carers and from frontline staff. The Participation members will support and challenge the Social Care Council to make sure that change is driven by the experience and knowledge of service users and carers. The Participation Partnership looks forward to playing a key role in delivery of the Social Care Council Business Plan 2022-23 and the wider social care improvement agenda. Key projects will include:

- DoH Consultation on the Reform of Adult Social Care - responding to the key priorities and the challenges within adult social care.
- Regional PPI Forum review of remuneration and reimbursement for service users and carers.
- Social Care Council Lunchtime Seminar 'Shining a Light on Social Work and Co-Production.'
- Development of the next Social Care Council Corporate Plan.
- Impact Assemblies for 2022-23.
- Development of a career structure for social care.
- Social work digital resources for the Standards of Conduct and Practice.
- Degree in Social Work improvement plans.

Anne Mallon
Co-Chair

Gerard McWilliams
Co-Chair

Performance Analysis for 2022-23

To ensure that our work to support registration, regulation, education and development is effective, the Social Care Council applies a regular cycle of monthly reporting, quarterly evaluation and reflection; learning from experiences and adapting to changing workforce needs to shape how our work is developed and delivered. This performance analysis highlights achievements for the year across each of the strategic themes in our 2022-23 Business Plan. It includes key learning outcomes gained from our review of performance and provides a summary of the success indicators identified for 2022-23. Further information on our objectives for the coming year are published in our Business Plan for 2023-24 (available from our website www.niscc.info).

Strategic Theme 1 – Standards

Standards are the cornerstone of everything the Social Care Council does to strengthen the professionalism of the registered workforce across Northern Ireland. Plans for our standards work in 2022-23 were underpinned by a programme of face-to-face engagement with registrants, employers and key stakeholder groups to raise awareness and understanding of the Standards. With the limitations of working amidst COVID, the engagement programme used digital technology to continue with our objectives to provide information and support for registrants, their employers and stakeholders, to develop their understanding of the Standards and how they apply in daily practice. These alternative engagement channels included:

- Zoom information sessions with groups of registrants in their work or home setting.
- Telephone contacts and virtual meetings with teams and management boards to ensure employers and managers were able to support their workers in maintaining the Standards.
- Online presentations and discussions with employers, managers and governance leads in the HSC Trusts to promote the Standard of Acceptance and to share learning from Fitness to Practise cases and referrals to ensure that appropriate Fitness to Practise concerns arising during the pandemic were reported and addressed in a timely manner.
- Information, videos and seminars about registration and Standards shared via social media and e-zines.
- Social Care ECHO virtual sessions hosted every month for social care managers and supervisors to connect, support and share best practice.
- 'Making the Right Decision' online learning resource was promoted to encourage employers and registrants to use this as guidance on applying the standards in work-based scenarios.
- Registration Matters' resources were promoted throughout the year. These include case studies, presentations and discussions on the Standards and maintaining registration.
- Small-scale face-to-face engagements with registrants and employers were re-introduced in Quarter 4.
- Online surveys with social workers to ask them about the topics that would be useful to them within learning resources to support them in using their Standards.

Performance analysis for 2022-23

Standards – Objectives for 2022-23

We said we would

- Deliver a programme of engagement with social care workers to raise awareness about the Standards and how to apply them in their work.
- Deliver a programme of engagement with social workers to support the use of the Standards in their work and in their professional development.
- Deliver a programme of engagement to raise awareness with people who use services and their carers about the role of the Social Care Council and their confidence in the social care sector.
- Work with employers and RQIA to develop ways to monitor use of the Employer Standards.

Standards –The difference this made in 2022-23

- Social work and social care registrants are being made aware of the Standards and how they should be used in their daily practice.
- Social work students are being introduced to the role of the Social Care Council and their responsibilities as a registrant.
- Employers and managers are being made aware of how they can support their staff to meet their professional Standards and can access resources to help them do this.
- Information and engagement with registrants and employers have helped to make the Standards of Conduct and Practice relevant, trusted, understood and embedded. Registrants have the opportunity to improve their understanding of their responsibilities on being a registered worker and have had the opportunity to see the resources available to help them maintain their Standards.
- Social care managers are being connected through the Social Care ECHO Network and the Social Care Manager’s Forum, updating their knowledge and sharing best practice in supporting staff to the meet the Standards.

UPDATE IMAGES??



UPDATE IMAGE



NISCC ECHO Network - Final YR2

-  To promote engagement between domiciliary care managers and provide a source of peer support.
- To establish a shared understanding of a new model for the provision of domiciliary care.
- To establish a shared understanding of the role of the domiciliary care manager and their staff.



9 ECHO sessions



34 participants on average



18 Presentations

What benefits were reported?



95% agreed the Quality of the Education was High to Very High.



86% of participants have attended 1-6 ECHO sessions.



81% agreed that they have applied knowledge gained through the ECHO network & applied it their practice.



95% Agreed or Strongly Agreed that Case Based learning as the focus for discussion is an impactful way of learning.



95% agreed or strongly agreed that participation in this ECHO network has helped them to feel more supported in their role.



100% of participants would like to participate in this Network again.



95% would recommend ECHO as a useful learning tool to others.



90% of participants agreed they have shared ECHO learning with other members of staff or service.

At the Year 4 midpoint evaluation, ECHO participants told us:

"I have found the ECHO Network invaluable"

"It has been useful to have access to this platform of like-minded people."

Performance Analysis for 2022-23

Standards – What we have learned in 2022-23

- Awareness, understanding and use of the Standards is improving across the stakeholder groups.
- There is movement towards more regular use of the Standards and for these to become part of everyday practice stakeholders are at different stages in their understanding and use of the Standards and how they support good practice.
- People who use services and their carers have less awareness of the Standards but know how to report any concerns about a registered worker.
- We need to increase our engagement and support to move all stakeholders from ‘awareness’ to ‘embedding’ the Standards.

- 92% of social workers said they ‘know and understand the Standards.’*
- 87% of social workers said they ‘use the Standards to inform and guide their practice.’*
- 51% of social workers said ‘the Standards are referenced in in-house training.’*
- 30-35% of social workers said they ‘use the Standards in team meetings/appraisals.’*
- 42% of social care workers said they ‘receive regular training on the Standards’** (face-to-face and online).
- 40% of social care managers said they ‘receive regular training on the Standards’*** (face-to-face and online).

*(based on n=505 responses to Feb 2022 Social Care Council Learning Resources survey).

** (based on n=373 responses to Sep 2021 Social Care Council Workforce Experience survey).

*** (based on n=66 responses to Sep 2021 Social Care Council Manager Experience survey).

Looking ahead -

We have set the following indicators of success for Standards in the 2023-24 Business Plan

- At least 70% of social care workers are reporting that they are aware of the Standards and know how to apply them in their practice.
- At least 90% of social workers are reporting that the Standards are helping improve the quality of their social work practice.
- A benchmark is established for the level of awareness about the role of the Social Care Council and confidence in the social care sector among people who use services and their carers.
- Joint working with Regulatory and Quality Improvement Authority (RQIA) is in place, supported by Terms of Reference.

Performance analysis for 2022-23

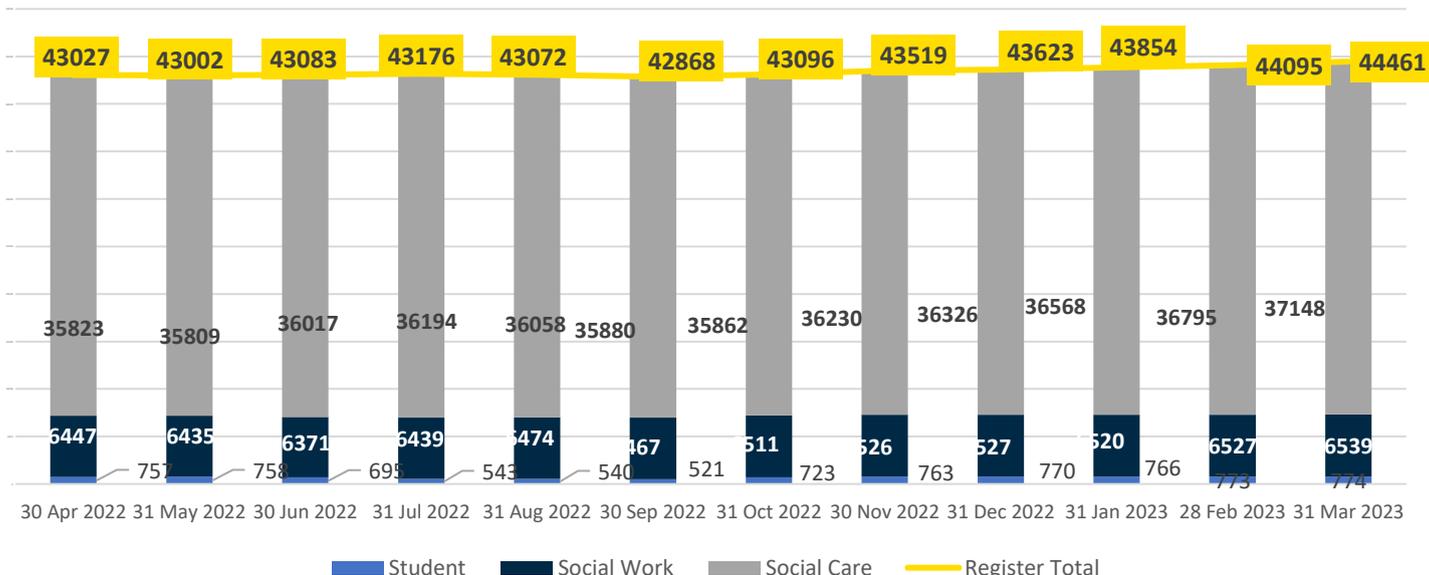
Strategic theme 2 – Regulation

Regulation activity spans the three functions of workforce registration, regulation of social work education and workforce fitness to practise. Together, these establish and maintain clear benchmarks for good social work and social care practice. The regulation activity planned for 2021-22 included an extensive programme of work which was adapted to reflect the change to remote working and successfully delivered to ensure standards of social work and social care were maintained effectively. Significant time and resource was invested in reviewing and developing the people, systems, processes and partnerships that enable us to deliver a model of regulation that responds to the changes in stakeholder and environmental needs.

Regulation –Workforce registration 2022-23

44,461 people were registered with the Social Care Council at 31 March 2023. The Register had experienced steady growth following the completion of compulsory registration for social care in 2018-19. During 2020-21, the Register experienced a 16% increase and this continued into Quarter 1 of 2021-22, peaking at 53,285 in June 2021. This marked increase in the number of registrants was a result of workforce movement during the pandemic. In order to reduce pressure on the sector, actions to remove people for non-payment of fees, or failure to complete renewals were delayed until Quarter 2 of 2021-22. A programme of communication and engagement was undertaken with registrants and employers during Quarter 2 and 3 to identify those who were no longer working in social work or social care and to assist them in removing themselves from the register. This work was completed in Quarter 4 and the register totalled 42,807 people at 31 March 2022.

Social Care Register 2022-23

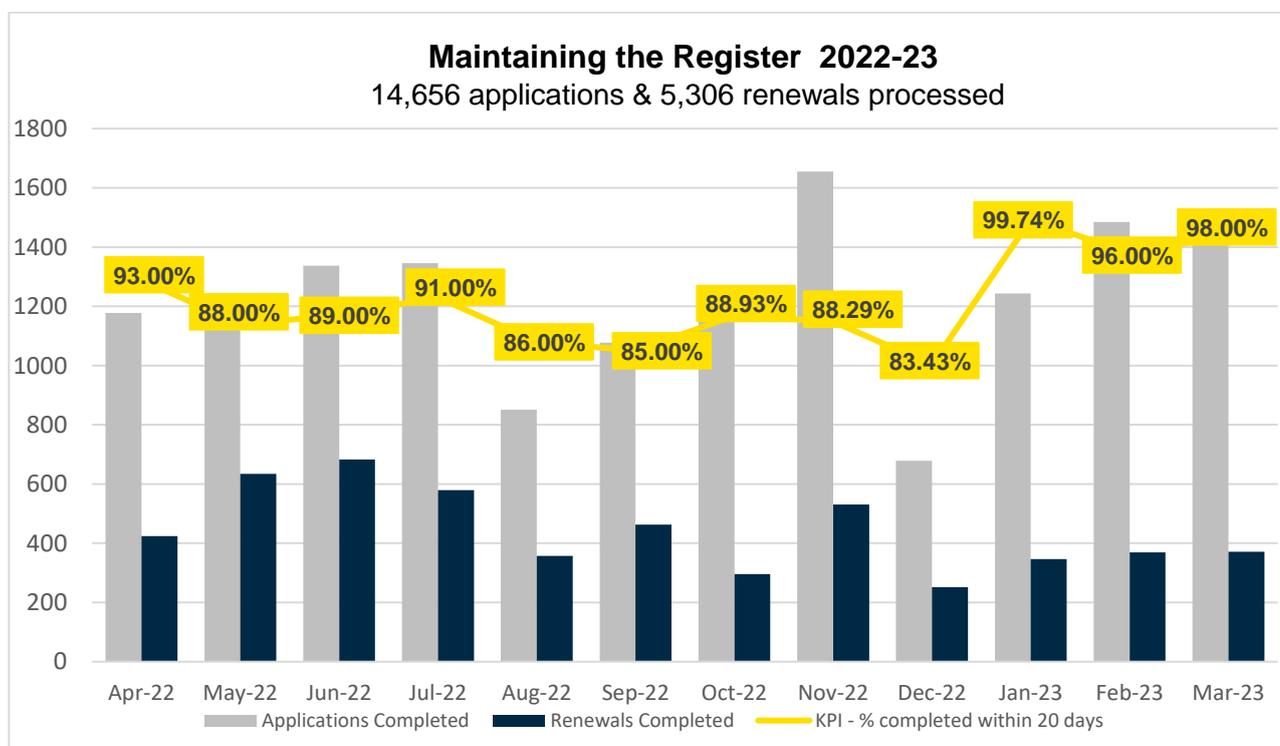


Performance analysis for 2022-23

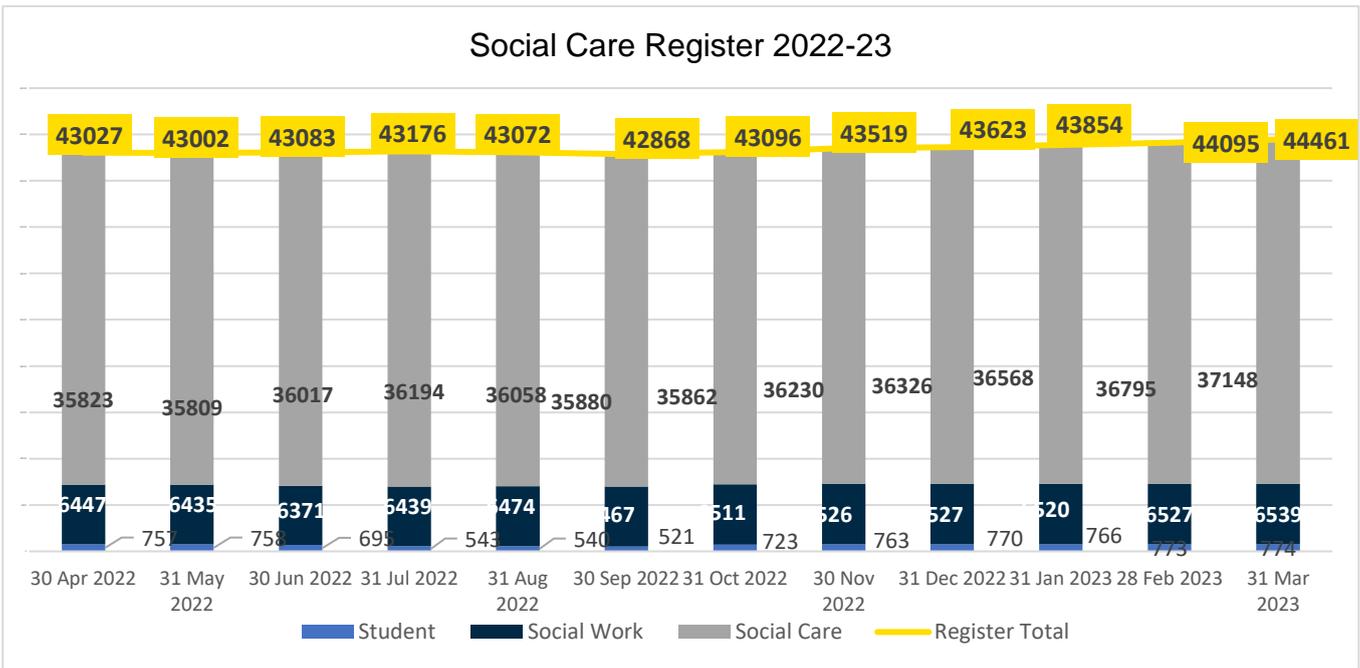
During 2022-23, workforce registration services were delivered primarily through the online registration portal for registrants and employers. Email was the main channel for providing customer support, with 37.5k emails responded to in the year. As noted earlier, strong demand for customer support created pressures in Quarters 2 and 3 and resources were allocated to improve response times. A dedicated Employer email was introduced in November 2021 to fast-track bulk queries for endorsers and registration leads within social care organisations. Telephone helplines were re-introduced in June 2021, with staff providing inbound and outbound support for registrations for four hours each day. 15k telephone calls were managed, with an average of 91% handling rates at year-end.

There has been a continued focus on managing our resources to ensure that we have the resources and systems in place to support the needs and expectations of the workforce. The ongoing development of the registration database and integration of new technologies for online registration services has been a key element in our successful delivery of the registration function using remote technology in 2021-22.

Ongoing improvements to the online registration portal have facilitated 18k people to complete new applications, or renew existing applications in the year – which is an increase of 40% in applications processed compared to 2020-21. The 3,000 people who registered under emergency arrangements for COVID, were offered the opportunity to update their registration on a permanent basis as part of the programme and approximately half of these people have chosen to remain on the Register. The Register is not expected to experience such significant changes in size 2022-23 unless additional staff groups are required to be registered, or a further workforce appeal is required to address COVID pressures.

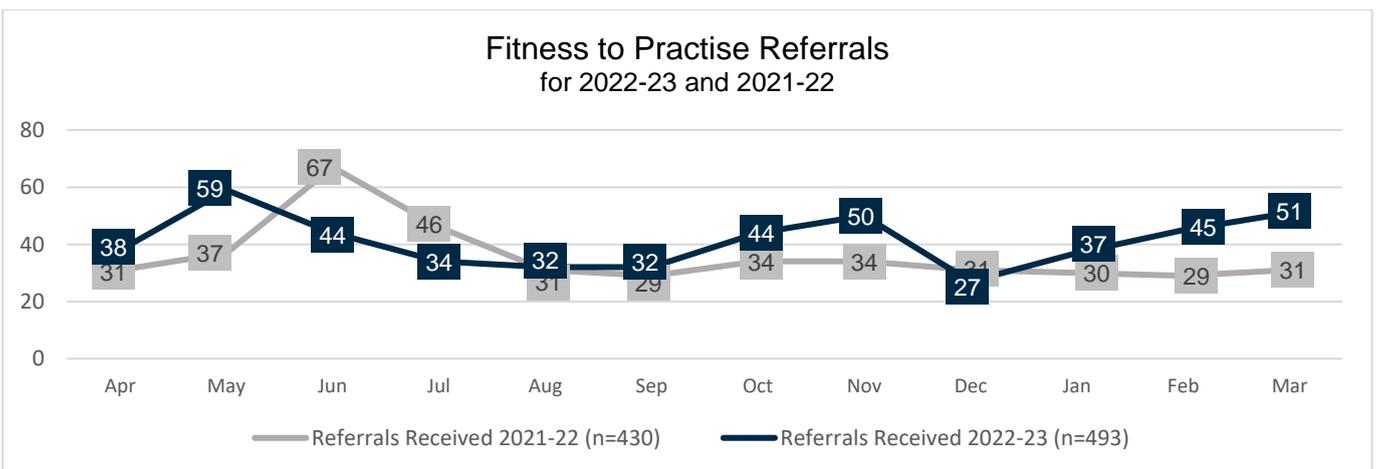


Performance analysis for 2022-23



Regulation – workforce fitness to practise 2022-23

Although less than 1% of the workforce is referred to us with regard to their fitness to practise, the significant movements in the Register have increased the overall number of allegations we receive about registrants’ fitness to practise. 430 referrals about registrants were received in 2021-22. 84 of these concerns did not meet the Standard of Acceptance and were screened out at the triage stage. 13% of referrals were screened out after Provisional Enquiries were undertaken and 62% (269) resulted in a new Fitness to Practise case being opened for investigation. Regular engagement activity was undertaken with employers to promote understanding of our Standard of Acceptance Policy and referral criteria and thresholds.

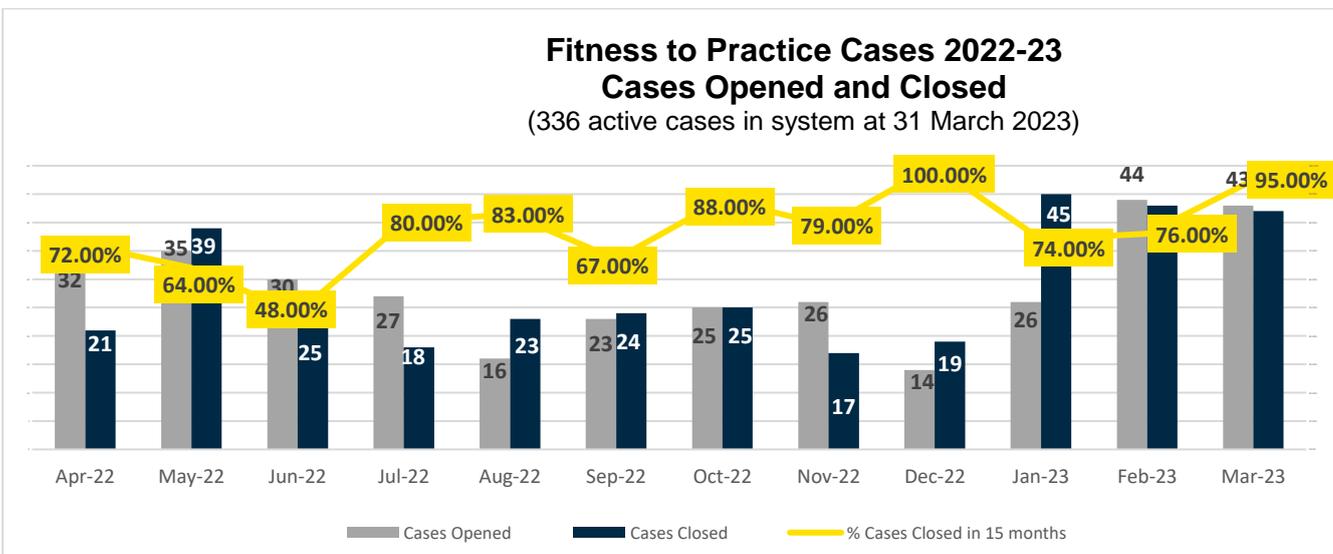


Performance analysis for 2022-23

Fitness to Practise referral rates averaged 30-35 per month, with peaks in June and July 2021 of 67 and 46 respectively. These trends mirrored the growth in the register and largely were not unexpected. Referral rates reduced slightly in Quarter 4, with an average of 30 received per month. During 2021-22, the Registration Team referred 331 applications for registration to the Fitness to Practise Team for suitability assessments. This was a 12% decrease on 2020-21 which experienced high numbers of assessment due to the introduction of the Emergency Register in May 2020. During 2021-22, we received 23 COVID related referrals. These related to serious/continued breaches of use of personal protective equipment (PPE) as well as breaches of COVID regulations resulting in Police fines.

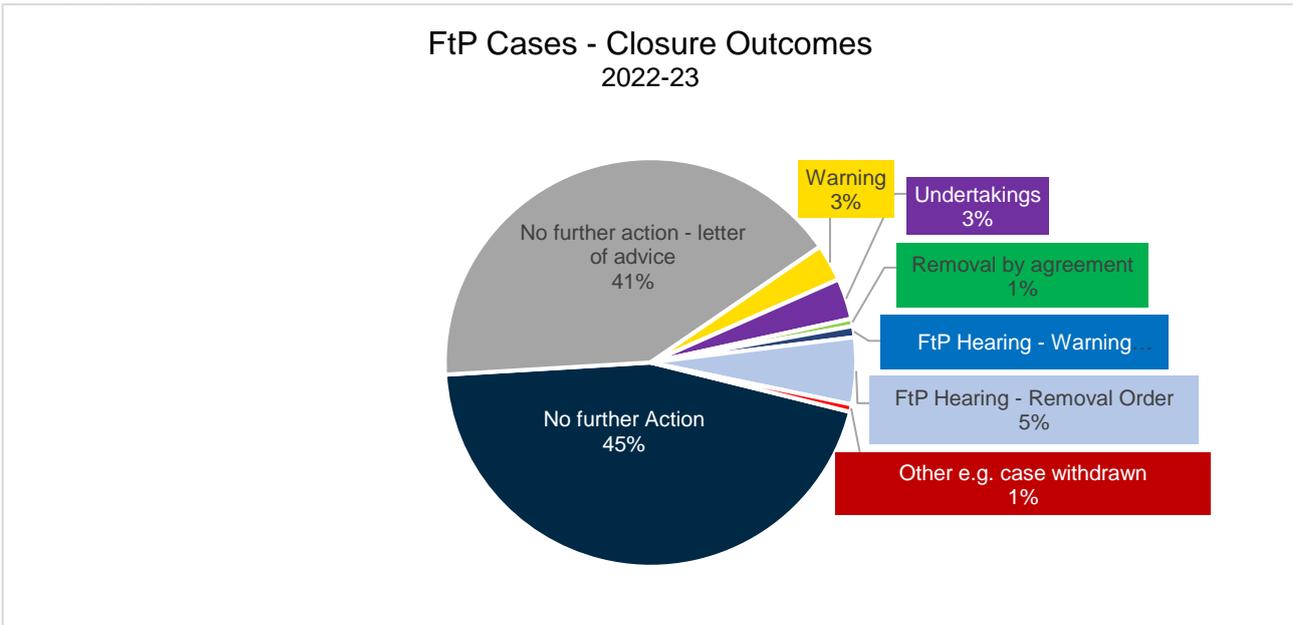
Our Fitness to Practise Model of Regulation provides us with a wide range of disposal options including Consensual Disposals. This approach supports engagement with the registrant to address less serious concerns and offers the opportunity to apply a proportionate and timely sanction that can support remediation and improvement in practice. It is important to highlight that all Consensual Disposal decisions are public facing and subjected to regular external audit to ensure openness and transparency. During 2021-22 an independent audit of all cases ‘closed or disposed of without referral to Fitness to Practise Committee’ was commissioned from Fieldfisher UK. Fieldfisher audit team reported a ‘satisfactory’ level of assurance and an action plan was developed to implement associated recommendations.

341 Fitness to Practise cases were closed during 2021-22. The KPI standard for closure of Fitness to Practise cases is for 90% to be closed within 15 months. 73% of cases closed in-year met the KPI Standard. This KPI has been affected by long-running cases which have taken between 16 and 48 months to conclude. Case closure times have been affected by factors outside the Council’s control such as delays in employer investigations, criminal investigations and court processes. Performance throughout the year has also been impacted by workload pressures both within the Fitness to Practise team and the BSO Legal Services team. This KPI is being kept under review and may be revised to reflect the ongoing impact of the pandemic on the wider system and the challenges this presents in relation to case progression.



Performance analysis for 2022-23

151 cases were referred to Fitness to Practise Committees during 2021-22. Committees made 137 decisions involving registration applications, Interim Order applications and Fitness to Practise final orders. All of these hearings were delivered remotely. 22 Interim Order applications were made representing a 45% increase from 2020-21. 48 Interim Order reviews were held, similar to the previous year. In relation to the outcomes of 26 Fitness to Practise Hearings, 21 Removal Orders were made along with 3 Suspension Orders. 1 case resulted in 'Impairment Not Found' and 1 Suspension Order was approved to expire. During the year, one registrant made an appeal to the Care Tribunal relating to a Fitness to Practise decision; the outcome of which is still awaited.



It is not yet certain whether the level of referrals and cases will settle at current levels. Additional funding was approved by the DoH in 2021-22 to increase the staffing resource for the Fitness to Practise Team and Committee function in response to the increasing volume of work and the more complex nature of the cases being referred. Recruitment has been completed for one Fitness to Practise Officer and a Committee Clerk. Additional temporary Officers and Administrative staff have been retained whilst further recruitment is completed in 2022-23. The team is also reviewing business processes and application of technology to support case management to ensure we have the skills, systems and technology to deliver this function well.

Fitness to Practise Committee Members and Chairs participated in 360 Reviews which confirmed the high standards of the Committee function and identified opportunities to further develop the processes.

Scoping has been completed for the specification for an electronic Case Management system and this will be taken forward in 2022-23. In order to deliver Fitness to Practise functions remotely during 2021-22, the team continued to assess current best practice for managing Fitness to Practise. Fitness to Practise and Committee processes were updated and arrangements put in place to ensure that hearings could be delivered remotely without causing any detriment to those registrants or participants involved. There are no immediate plans to reintroduce face-to-face hearings in the current COVID environment although an evaluation of the effectiveness of remote hearings will be undertaken with key stakeholders in the 2022-23 business year to determine our default position going forward.

Performance analysis for 2022-23

Regulation – Social work education and training 2022-23

The Social Care Council has a statutory responsibility to set standards for social work education and training at both qualifying and post qualifying levels. In 2021-22, there was extensive engagement with course providers, tutors, practice teachers and employers to ensure the continued delivery of Degree in Social Work teaching and practice learning throughout the pandemic. We have worked closely with employers and the DoH to ensure the required supports are in place for new social workers as they commenced their first Assessed Year in Employment (AYE). Strategic and operational meetings have continued throughout the year to plan for the recruitment of new students to courses and to co-ordinate the teaching and practice learning for existing students. Following approval of the first Open University (OU) distance learning course for the Social Work Degree in NI in March 2020, support has been provided to ensure the course meets the required standards, with the second cohort of OU students in place for autumn 2021.

The PiP Partnership met online during 2021-22 to review progress for the framework and to provide an expert view on issues affecting employers, educators and candidates. Assessment for the full suite of Professional in Practice Awards continued throughout the pandemic. 283 newly qualified social workers completed the 2 PiP requirements of the Consolidation Award through taught programmes. In the Work Based Learning Route, 25 candidates satisfied the Requirements and one person achieved a full PiP Award. The Individual Assessment Route (IAR) Panel received 26 submissions for consideration at the March 2022 assessment point. 160 social workers used the Credit Accumulation Route (CAR) to log credits for their learning and 9 submitted applications for recognition through CAR. The External Assessor Report confirmed consistency across all three routes for PiP submission assessments. The annual PiP Awards to recognise social workers' achievements on the Framework was held virtually in August 2021, with 115 Awards delivered, including one recipient of the Advanced Scholarship Award.

The Strategic Advisory Group for qualifying and post qualifying education and training in social work has met on a regular basis to ensure continued safe and effective delivery of the Degree and provision within the PiP Framework, and to approve modifications for contingency plans. Considerable effort by all partners has ensured that all Degree programmes including Practice Learning are on track and PiP programmes delivered alongside sustained engagement with other assessment routes. All scheduled regulatory functions including approval, monitoring and quality assurance activity have been successfully delivered.

The Social Care Council continued to support the Open University in establishing their Social Work Degree in Northern Ireland. It is anticipated that COVID pressures will impact on the number of social workers who will have capacity to complete PiP courses in the 2022-23 year, however work is continuing with the PiP Partnership and social work training teams to encourage and support social workers in fulfilling their CPD responsibilities. A project Team was established to review the Credit Accumulation Route and use QI to improve social worker's engagement with this part of the PiP Framework.

Key elements of social work education adaptations and developments for 2021-22 included:

- Review of student places on Degree courses to reflect COVID pressures.
- Review and monitoring of interim arrangements for the delivery of the Degree including Practice Learning.
- Monitoring of student progress whilst they are receiving new methods of teaching delivery.

Performance analysis for 2022-23

- Development of processes and supports for new social workers, including a tracking survey to assess the impact of the new AYE arrangements (reporting will run into 2022-23).
- Review of practice teaching and learning provision.
- Suite of new handbooks developed for the Individual Assessment Route and published on the Learning Zone to support social workers making submissions.
- Monthly review of social workers who are due to complete PiP Two Requirements for their registration and provision of support for those requiring extensions in the current circumstances.
- PiP Credit Accumulation Panel held to review submissions for social worker PRTL.
- Standardisation training held online for new and existing PiP Assessors.

Regulation – Objectives for 2022-23

We said we would

- Support registrants and employers to meet their responsibilities in maintaining social care registration.
- Deliver an improvement programme to develop the online registration system so that it meets the needs of registrants.
- Review the FtP Rules and processes against best regulatory practice to ensure the continued delivery of a proportionate and efficient system of workforce regulation.
- Through engagement with the DoH, ensure our Fitness to Practise function has the right level of resource to effectively carry out our statutory duties.
- Approve and assure standards of social work education and training at qualifying and post qualifying levels.

Regulation: The difference this made in 2022-23

- Social work and social care registration is valued and trusted.
- The Social Care Register is accurate and registration systems are being adapted to meet the needs of the workforce and the sector.
- The Social Care Council is an agile regulator able to respond to changing need and demand.
- Fitness to Practise decisions are trusted and concerns about an applicant's suitability to work in social care are managed efficiently.
- Social work education and training meets the needs of registrants and employers.
- Professional in Practice Framework provides valued CPD Opportunities for social workers.

Regulation - What we have learned in 2022-23

- We need to meet increasing demands on the registration and fitness to practise functions, which will require ongoing review of systems and application of ICT.
- We need to continue to review and develop the Degree in Social Work to ensure it will support the development of new social workers.
- We need to engage front line social workers and their managers to increase use of the PiP credit system and framework.

Performance analysis for 2022-23

- 98% of registrants maintained their registration.
- Letters of Advice, Conditions of Practice Orders were used to enable registrants to improve their practice.
- Fitness to Practise Committee Members and Chairs participated in training sessions and '360' reviews to support consistency and quality in decision-making.
- 60+ people were supported by telephone, email and Zoom to enable them to contribute effectively in Committees and Hearings (registrants, employers, and witnesses).
- 100% of the workforce sampled for PRTL met the requirement of 90 hours CPD (December 2021 Audit point).
- 115 social workers attained PiP Awards, including 1 Doctorate Level Award (Summer 2021 assessment point).
- Audits of AYE assessments were completed to confirm standards of assessment for new social workers are consistent across employment sectors.

Looking Ahead –

We have set the following indicators of success for regulation in the 2023-24 Business Plan

- A minimum of 97% of registrants successfully maintain their registration throughout the year.
- A minimum of 85% of registrants use the online system to maintain their registration.
- Social work education meets the required standards.
- Referrals and cases are managed efficiently in line with best practice, FtP Rules and key performance indicators.
- Our Register and its data can be relied upon.

Performance analysis for 2022-23

Strategic theme 3 – Workforce development

Central to our workforce development activity is partnership working to develop education, training and learning to future-proof the workforce. All registrants are required to complete ongoing training and learning to support their registration. COVID placed extensive restrictions on face-to-face training for the workforce and created a demand for a wider range of online learning resources to support induction and training. This support for workforce learning and development was delivered primarily through the Social Care Council Learning Zone. Engagement with the Learning Zone has remained strong, with 3.5-4k users engaged every month and 112.5k people using the platform since it was first launched.

We delivered 15 presentations to promote and raise awareness of learning zone resources. Our learning in relation to the application of design thinking to develop learning resources was shared at the European Social Services Network event, 'Powering Digital Transformation in Social Services' and the regional social work 'Time for Change' project.

Online Lunchtime Seminars, Social Care ECHO network and Social Care Manager's Forum events also provided opportunities to connect registrants with their peers and to share knowledge and best practice. Social Care ECHO has proved to be a valuable support for social care managers and support will continue for this network meeting virtually each month to share information about managing services and supporting good practice. In February 2022, the Social Care Council hosted the first Social Care Manager's Forum event since the onset of the pandemic, with keynote speaker Professor Michael West presenting on 'Compassionate Leadership, Transforming Social Care.'

Social work and social care careers were promoted during the year through the website, digital platforms and online information sessions. Virtual careers fairs enabled the team to reach out to prospective students and career changers considering social work and social care options. As part of a commissioned report into increasing diversity in social work, consultations were held with 12 groups representing ethnically minoritised groups in Northern Ireland to learn their views on social work as a career.

Accessibility to the Professional in Practice CPD Framework for Social Work was reviewed to help ensure social workers have access to a wide range of learning to support existing and new practice and the Centre for Effective Services was commissioned to scope proposals for consultation on a system of revalidation to link Post Registration Training and Learning (PRTL) requirements with the Professional in Practice Framework for the social work profession. Analysis from this work is being reviewed and will be used to inform further work to support social worker continuing professional development in 2022-23.

The Social Care Council supported and delivered programmes to help recruit, develop and retain social workers and social care workers. Engagement has continued with local Councils and Social Care Skills Academies to help support workforce recruitment. The team has worked closely with the DoH and the Leaders in Social Care Partnership to take forward a programme of work for the development of proposals that will support a career structure, CPD framework and qualifications-based register for the social care workforce. Workshops were facilitated with frontline social care staff to ascertain their experience and view of qualifications and career pathways. Social care managers were surveyed in relation to their staff skills gaps and training needs. We also worked in partnership with the further education sectors through the curriculum hub to shape future social care qualifications. This work continues and initial reports were presented to the DoH early in 2021-22 business year.

Performance analysis for 2022-23

Three new digital resources were developed for the Social Care Council Learning Zone: 'Grief and Bereavement', 'Loneliness and Staying Connected,' and 'Mental Health Awareness in the Workplace for Managers'. These resources were developed in partnership with a range of stakeholders from statutory, independent and third sector organisations and funded by the DoH. Four existing resources were refreshed: 'Promoting Good Nutrition', 'Infection Prevention and Control', 'Health and Safety for Childminders' and 'A Career in Social Work'. A new PiP digital guide and AYE content for the Learning Zone were developed. Content of the Child Development Apps was reviewed to support development of new resources in 2022-23.

During Quarters 3 and 4, the second social work careers campaign was delivered across radio and digital media. Funded by the DoH, this built on the previous campaign to coincide with the UCAS applications timetable. Funding was also administered on behalf of the DoH to support 207 social care workers onto accredited training for Level 3 Award in Education and Training, Level 3 Certificate in Assessing Vocational Achievement, Level 4 Certificate in Principles of Leadership and Management in Adult Social Care, Level 4 Diploma in Adult Care and Level 2 Diploma Health and Social Care.

The registered workforce is made up of a wide and disparate group of professionals. The learning and development needs of social workers and social care workers are significantly different and we will continue to deploy our resources to support their specific needs and priorities. Changes in service delivery will require them to grow in confidence and adapt their skills base to use emerging technology and apply new ways of working that focus on personalised and compassionate care. It is anticipated that there will be a continuing need for digital learning resources that can be accessed from a variety of mobile devices and used to support induction and development of the workforce.

Key achievements for workforce development in 2022-23 included:

- Providing direct support for workforce learning and development leads in key organisations to support their continued workforce development during the pandemic.
- Researching the range of qualifications held by social care registrants and mapping the qualifications recognised for the various job roles across the sector.
- Surveying social care registrants and managers to learn more about attitudes and capacity for learning and career development.
- Delivering the series of lunchtime seminars with over 1200 people participating online.
- Developing 3 new online resources and refreshing 4 existing resources on the Learning Zone.
- Presenting PiP Information sessions online to social workers in work-based forums and team meetings in a range of sectors to share information about CPD, standards, registration and regulatory responsibilities.
- Disbursing funding to support 207 social care workers to complete accredited training to develop skills in leadership, management, assessment and 'Train the Trainer.'

Performance analysis for 2022-23

Workforce development – Objectives for 2022-23

We said we would

- Develop proposals for consultation on a system of revalidation to link PRTL requirements with the Professional in Practice Framework for the social work profession.
- Work in partnership with stakeholder organisations to deliver careers and recruitment campaigns for social work and social care.
- Develop a learning and improvement framework for social care workers which will support the development of a career structure.
- Develop our digital learning platform to provide registrants and employers with greater access to learning and employment resources.

Workforce development – The difference this made in 2022-23

- Social care workers, social workers, managers and allied professionals have access to free, and up to date training and guidance to support safe and effective delivery of care.
- Accessible events, information sessions and seminars are connecting registrants and supporting them to share best practice.
- Social workers are being offered a growing range of opportunities to fulfil their CPD through the PiP Framework.
- Managers are supported to build networks and alliances with colleagues.
- Employers and educators are being connected to ensure qualifications and training courses meet the needs of the sector.
- Social care workers are provided with access to digital learning resources that support them to continuously learn and develop at a time and pace that suits them and to embed standards into their practice.
- Our collaborative approach with employers, registrants, social care educators and Awarding Bodies has been effective in supporting workforce learning and development throughout the pandemic.

Workforce development - What we have learned in 2022-23:

- We need to focus our resources on consolidating and promoting the Learning Zone so registrants are supported to continuously learn and embed standards into their practice.
- Engaging with registrants will help us to understand how we can best recognise their learning and development within the PiP framework.
- Establishment of a Learning Framework for Social Care and a recognised career structure would attract more people to the workforce.
- We need to promote domiciliary care training to support upskilling of the workforce.
- Information and awareness sessions will help build digital confidence and improve digital skills in the workforce. Virtual learning networks will support social care managers to share learning and develop innovative approaches to service delivery.

Performance analysis for 2022-23

- 4 Learning Zone resources updated Promoting Good Nutrition, Infection Prevention and Control, Health and Safety for Childminders and Career in Social Work
- 3 new Learning Zone resources developed: Grief and Bereavement, Loneliness and Staying Connected, Mental Health Awareness in the Workplace for Managers.
- A new PiP digital guide was developed.
- Learning from the co-design user centred design approach used to build Learning Zone resource has been shared with sector partners and digital forums.
- 3.5k users on the Learning Zone each month.
- 162k visits to the Learning Zone made by 112.5k users since site was first launched.
- 87% of users said the resources would help them in their social care role and 97% said they would recommend to a colleague.
- 50+ social care managers actively engaged in the Social Care ECHO network.
- 86% of ECHO participants agreed it provided peer support (2021 ECHO evaluation).
- 12 lunchtime seminars hosted in-year, engaging 1500+ registrants and employers.
- 81% of Lunchtime Seminar attendees said the learning would improve their practice.
- 150+ people participated in the Spring Social Care Managers Forum (Keynote Speaker Michael West – Compassionate Leadership).
- 83% of Social Care Managers said the learning would improve their practice.
- Qualifications profile of the registered workforce was reviewed and a Career Framework for Social Care is being developed.
- Social Work and Social Care careers were promoted through the regional 2021 Virtual Careers fair and over 6,740 career in social work Learning Zone users (only 4,414 end of last year)..

Looking Ahead -

We have set the following indicators of success for workforce development in the 2023-24 Business Plan

- A proposal is agreed for promoting the PiP Framework as a means of meeting PRTL requirements for social workers.
- A minimum of 85% of participants who engage with the events and campaigns report an increased awareness of social work and social care careers.
- The DoH is supported in building a sustainable social care workforce.
- Uptake in the number of people undertaking learning through the e-enabled technology available on our Learning Zone is maintained.

Performance analysis for 2022-23

Strategic theme 4 – Systems leadership

In recognising the value of collective leadership across the Health and Social Care system, as well within the regulatory system, we work with a range of networks of people who collaborate on development and improvement. Our work to connect social work and social care leaders is helping to shape social work and social care as health and social care transformation moves forward. Now, more than ever, insight from sector leaders is needed to inform strategic workforce planning and development. As the workforce regulator, the information and intelligence we hold about the social work and social care workforce is unique and we are able to use this information to help inform strategic decisions to support the sector. Our continued ambition remains to use our workforce intelligence to support leaders in their decision-making, as they respond to workforce challenges in social work and social care.

During 2021-22, work continued towards building our skills and capacity to analyse the information we gather about our registered workforce and to share trends and knowledge with the DoH and our sector partners to help develop the workforce. Live information about the workforce is essential for the Social Care Council and our sector partners for forecasting and planning. A suite of database reports were built to generate information about the profile of our registered workforce with the ability to map our data to where people work and where services are required. We will continue to invest in our capacity and capability to analyse and report on our unique workforce information in 2022-23.

As part of the Department of Health programme to reform adult social care, the Social Care Council's Leaders in Social Care Partnership have worked closely with the DoH to draft a Compact Agreement for formal engagement between Government Departments and the Independent Social Care Sector. Work also continued with the Social Work Leadership Network. Established under the auspices of the DoH Social Work Strategy, this network comprises leaders from the statutory, voluntary, education and justice sectors. The network is key in raising the profile of social work in all sectors, and developing a collaborative approach on strategic issues impacting on the social work workforce. Support was also provided to the 3rd Sector Social Work Leadership Network, ensuring that issues pertinent to social workers in this sector are identified and raised appropriately within the wider leadership network and with the DoH.

Emerging technologies are key to transforming social work and social care service delivery to meet the changing needs of our communities. The Social Care Council is a member of the Digital Health and Care NI project team to develop digital capability for health and social care in NI. DHCNI strategy focuses on enabling health and social care staff to have the right information in the right place at the right time to ensure effective, efficient and safe decision-making. The vision further seeks to enhance research, innovation and collaboration across sectors. It recognises that digital health can be a game-changer as it improves the efficiency and cost-effectiveness of care, allowing for new models in the delivery of services.

The project brings health and social care leads together with IT specialists to plan the development of the digital capacity and capability of the workforce. The Social Care Council is providing insight into digital capabilities and attitudes towards the use of technology to inform the development of the Digital Capability Strategy and forthcoming Digital Capability Framework. Together with our digital partners, we are seeking to motivate and support a workforce that can confidently use digital health technologies to deliver health and social care.

Performance analysis for 2022-23

Staff have contributed to project boards and initiatives to ensure social work and social care is reflected in strategic development within and outside the HSC system, including: The Social Work Workforce Review project group and Implementation Board, the Reform of Adult Social Care Project Board, Social Care Fair Work Forum, the Enhancing Clinical Care Framework (Care Homes) Project Board and workforce project group, the Governance Framework for Multi-Disciplinary Delegation Project Board, the NI Bereavement Network and Education and Training Subgroup, Education Welfare Service Transformation Project Reference Group and Project Board, the NI Joint Regulators Forum, the NI Regional Ethics Forum and the City and Guilds Industry Skills Board. We have met regularly and held joint events with RQIA, the regulator for Health and Social Care services. Engagement with DoH and CORU, the social work regulator in Ireland, continued to agree arrangements for the regulation of social workers post Brexit. Regular meetings with regulatory and workforce skills partners in the UK and Ireland continued online to ensure learning was shared to support standards in regulatory and workforce practice, including participation in Social Work England's Decision Review Group.

Systems Leadership – Objectives for 2022-23

We said we would

- Work with the DoH and other Government Departments, Community Planning Leads and employers to inform strategic workforce planning and policy development.
- Continue to develop our capacity and capability to analyse and report on our data for workforce demographics, qualifications, training and learning.
- Through the Leaders in Social Care Partnership, support the transformation and development of the social care workforce in Northern Ireland.
- Continue to chair and participate in the Social Work Leadership Network to support the development of a collective leadership approach for social work.

Systems Leadership – The difference this made in 2022-23

- Worked with sector leaders, government bodies and representative organisations to influence the development and transformation of the system as well as being a connector and facilitator for many parts of the system that do not always have a prominent position.
- The impact of Brexit on mobility, recruitment and retention for the social work and social care workforce was reflected in DoH planning and policy development.
- Delivered integrated communications campaigns to support the HSC COVID vaccination programme.
- Contributed our unique knowledge of the registered workforce to local, national and international contacts to promote best practice and innovation.
- Shared knowledge and best practice with UK and EU regulators to promote consistency in standards of education, training and practice.
- Provided contributions and support for strategic meetings and networks.

Systems Leadership - What we have learned in 2022-23:

- The Social Care Council's workforce intelligence reports inform stakeholders about the trends in the social work and social care workforce.
- The Social Care Council has provided a range of opportunities for registrants, service users and carers, social care providers and other stakeholders to connect and share learning, helping to build relationships across the sector.
- The Social Care Council continues to develop its skills and resource as a systems leader for the social care workforce and wider sector.

Performance analysis for 2022-23

- Joint work with UK and Ireland social work and social care regulators to benchmark standards and share learning.
- Developing a UK-wide perspective on workforce skills through the Skills for Care Board and Directors meetings.
- 2021 Social Work Awards promoted and supported to recognise and celebrate quality in social work practice.
- NICON 2021 – presentations to HSC peers on social work and social care standards, regulation and development.
- Participation in DoH EU Exit Project Team.
- Collaboration with TUSLA to support dual registration of Irish social workers delivering regulated services in Northern Ireland.
- Presentation to the European Social Services Network on co-design of online learning resources.
- Presentation to the Social Work England 'World Social Work Day' event on Social Work Regulation and Professional Identity.
- Promoting the NI Social Work and Social Care Regional Research Programme Radical Social Work project.
- Financial Wellbeing Tools and Supports - joint seminars with DoH and the Money and Pension Service.
- Presentation to the Chief Executive's Forum – 'Partnership in Practice: How the NI Social Care Council collaborated effectively to deliver during the pandemic.'
- Participating in the Social Work England Decision-making Group – to share knowledge of regulation and standards.

Looking Ahead -

We have set the following indicators of success for systems leadership in the 2023-24 Business Plan

- The Social Care Council actively participates in strategic projects and work streams for social work and social care workforce planning and development.
- The Social Care Council produces workforce intelligence reports which inform business and strategic planning, including a State of the Nation Report.
- The Leaders in Social Care Partnership programme of work for 2022-23 is delivered across the strategic priorities of vision, inclusion and innovation. The Social Care Council actively participates in a collective and collaborative social work leadership approach to address workforce issues.

Strategic theme 5 – Communication and engagement

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

Our focus for 2021-22 was to invest further in our digital communications to compensate for the restrictions placed on our capacity to deliver on face-to-face engagement. Communications were delivered through email marketing, Facebook, Twitter, Instagram, LinkedIn and our website. Recognising that the workforce was under pressure during the pandemic, campaigns were co-ordinated to ensure key messages were delivered to the target groups in proportionate volumes and at optimum times. We took time to develop quality artwork, images and videos that would attract and engage our stakeholders with the Social Care Council brand and message. This integrated approach has been particularly effective when using Email campaigns together with social media (especially Twitter). Development of e-zines tailored to specific groups has increased 'open-rates' to 50/60%. Our campaigns have been supported and shared by DoH and our HSC partners, helping to extend our reach to those interested in social work and social care.

The new Social Care Council website www.niscc.info was launched in October 2020, alongside a review of the content and branding on the online registration portal to provide a seamless transition between the two platforms. The platforms have been further developed during 2021-22 to improve the user journey and increase accessibility. On average 60k people visit the website every month. The website, Learning Zone and Online Registration Portal all offer Browsealoud software, supporting 10.5k with tools for translation, visual aids and audio assistance.

Approximately 150k emails were sent every month in our aim to keep our stakeholders connected with our work. Direct email marketing has proven vital in keeping registrants and employers up to date with service changes throughout the pandemic. They were also used successfully to promote the HSC Workforce Appeal, which attracted over 3.6k people to support the workforce during COVID pressures.

The social media platforms and website remain key to sharing information and also continue to provide opportunities for the DoH and other partners to connect with the registered workforce and their employers. We led on campaigns to promote Public Health messages such as Infection Control and supporting those who were isolated or shielding. The HSC Vaccination Campaign was supported with email and social media campaigns, culminating with the videos developed with local celebrity Paddy Raff to break down some of the myths about vaccination amongst the most resistant groups.

We developed and delivered campaigns to recognise the significant contribution of social workers and social care workers on the front-line. A key highlight was the Social Care 'Making a Difference' campaign that shone a light on a career in social care and was supported with the promotion of 13 videos and unique career stories, secured media coverage both online and in press and was promoted with paid for campaigns across all our media channels.

Performance analysis for 2022-23

To support DoH in raising awareness of social work as a positive career choice, we refreshed the social work advertising campaign that had been produced in 2019. Advertisements were broadcast on radio and digital channels to encourage applications to Degree in Social Work courses in autumn 2021. Social Care Council digital audiences grew significantly during 2021-22, with Audience growth at 30% for Facebook, 20% for Twitter and 123% for YouTube. Our campaigns and messaging reached over 864,300 people on social media platforms (Facebook 334,300 and Twitter 530,000). This shows the effectiveness of videos and interactive pieces to attract and engage people.

The Communications team continues to support all areas of work across the organisation to create engaging and informative digital and design communications and experiences. While it is anticipated that COVID restrictions will continue to limit our access to face-to-face engagement in 2022-23, integrated digital communications will be the major element of our activity to keep listening to our stakeholders, learning from their experiences and sharing our knowledge and expertise with them.

Communication and engagement – Objectives for 2022-23

We said we would

- The Social Care Council – we will deliver our *Communications and Engagement Plan for 2021-22* to build an understanding of the role and purpose of the Social Care Council.
- Social workers – we will deliver our *Communication and Engagement Plan for 2021-22* to engage the profession and raise the profile of social workers.
- Social care workers – we will deliver our *Communication and Engagement Plan for 2021-22* to support the transformation and development of the social care workforce.

Communication and Engagement – The difference this made in 2022-23

- Campaigns raised awareness of social care as a front-line service.
- Public health projects and initiatives were promoted to target groups.
- Education and training for social work and social care was promoted and achievements recognised.

Communication and Engagement - What we have learned in 2022-23:

- A communication and engagement strategy will support and co-ordinate our key efforts and messages communications must be clear and easy to understand.
- People who use services and their carers involvement in our work must be evidenced and the outcomes shared with other stakeholders.
- Online resources are essential in reaching such a large and disparate stakeholder group.
- Improving public perception is a long-term outcome.
- More work is required to solidify communication and engagement with our immediate stakeholders – registrants, employers, people who use services and their carers.

Performance analysis for 2022-23

- 6.5k people were attracted to the Career in Social Work online resources.
- Online events recognised and celebrated the achievements of 115 social workers receiving PIP Awards.
- 500+k people use our website each year, making 675k page views.
- 10.3k people are following our social media conversations: Twitter 5k, Instagram 1.2k, Facebook 4.1k.
- Browsealoud is helping 10.5k people to access our online platforms each month: 9.2k on the Registration Portal, 900 on the Learning Zone, 360 on the website.
- Registrants received targeted email invitations to take part in our monthly Lunchtime Seminars, ECHO or information sessions to support their CPD/registration.
- Registrants and employers receive attractive and user-friendly guidance to help them maintain registration and their standards.
- Social workers and social care workers shared their experiences of working in the sector to help encourage new people to consider these as a positive career choice.

Looking Ahead -

We have set the following indicators of success for communication and engagement in the 2023-24 Business Plan

- The role, purpose and vision of the Social Care Council is clearly mapped out and enables the organisation to meet the needs of registrants, interested public and the sector.
- Consistent messages on the value of social work are established, and further embedding of the Standards is evident.
- Baselines are established for awareness levels of the value of social care as an attractive career choice.

Performance analysis for 2022-23

Infrastructure and leadership

Infrastructure is about the people, systems and processes that guide and deliver our work. Our objectives in relation to promoting a healthy workplace, developing staff, improving quality and managing our finances were successfully achieved.

The Social Care Council is committed to engaging staff in regular events for all staff to learn more about the business. Based on feedback from the staff survey and in-house events, we learned that some staff felt we could do more to improve connections within the organisation. The Leadership Team used monthly Townhall meetings for updates and staff development. The new appraisal scheme of quarterly 'Check-Ins' which was introduced in spring 2020 was embedded during the year, with a greater focus on the conversation rather than the paperwork. This was also used as an opportunity to check in on an individual's wellbeing.

The Social Care Council's Health and Wellbeing Committee would normally deliver a busy calendar of health and wellbeing events to support staff in their physical and mental health wellbeing, encouraging people to participate in book groups, walking clubs and charity fundraisers. Remote working limited the opportunity to engage people in activities, but most staff engaged in coffee breaks, quizzes, challenges and charity events through the year. Feedback from the 2021-22 programme was very positive and the team invited staff to share suggestions for the 2022-23 programme.

The Social Care Council is an IIP (Gold) accredited employer and retains the IIP Good Practice Award for Health and Wellbeing. Staff are engaged in a range of activities, supporting the overall delivery of the Social Care Council's Business Plan. The Senior Leadership Team, chaired by the Interim Chief Executive, has worked with staff to ensure the staffing resource is deployed to support business priorities. During the year, staff participated in the pulse surveys, mostly focused on their experiences of remote working. The outcomes from the survey were very positive with good and strong indicators throughout. The survey reflected the positive culture of the organisation and its leadership.

Throughout 2021-22, online systems were the only route for applying for new or renewed registration. A continuous programme of improvement and development was delivered to ensure the registration database and the online registration portal supported our registration and regulation functions. Changes made to the online registration application process in April 2020 to reflect the DoH policy to defer registration fees and support Emergency Applications were removed. System development was undertaken to streamline the application journey and functionality for payment of fees/updating registrant information. The re-registration process was refined to assist people to return to the register swiftly. The new functions and refreshed registration portal were launched in October 2020 in line with the timetable to reintroduce registration fees. Improvements to the system and the provision of support and guidance on using the online system have assisted in the delivery of a predominantly online service.

Performance analysis for 2022-23

The Social Care Council is committed to promoting equality and diversity; providing the systems and culture to meet the duties set out within Section 75 of the Equality Act. The Social Care Council developed and delivered the annual Equality Action Plan and annual Disability Action Plan for 2021-22, in addition to a broad range of equality founded policies and procedures. (The Equality Scheme is reviewed every five years). The Equality Unit in the Business Services Organisation, provided guidance and expertise on delivering on Equality Action Plans and supported statutory reporting to the Equality Commission. Details of what the organisation has done to deliver its equality, diversity, disability, human rights and good relations actions are set out in the Annual Equality Progress Reports which can be found on our website at www.niscc.info. Due to the impact of COVID, the Equality Progress Report for 2019-20 was delayed. The 2021-22 Equality Progress Report was completed in Quarter 3 and all requirements satisfied.

Infrastructure – Objectives for 2022-23

We said we would

- People - Deliver the actions identified for 2021-22 business year arising from the Investors in People Report.
- Resources - Manage our resources to maximum effect and within regulatory and statutory guidelines and legislation.
- Governance - Deliver effective governance including risk and information management in line with relevant legislation and guidance.
- Quality -Deliver on our Quality 2020 commitments for 2021-22 as set out in the Annual Quality Action Plan.
- Systems - Deliver our 2021-22 ICT Improvement Plan to further enhance the user experience of our registration and regulation system.

Infrastructure – The difference this made in 2022-23

- Staff were supported to manage their health and wellbeing.
- Internal communications strengthened and staff connection with the business objectives improved through quarterly staff business events.
- Resources were managed to ensure services could be delivered effectively.
- Business was delivered in line with legislation and Good Governance guidelines.
- ICT Improvement Plan was delivered to further enhance the user experience of our registration and regulation system.
- Quality 2020 reporting confirmed met our obligations to provide equal opportunities and fair treatment for all staff and stakeholders.

What we have learned in 2022-23

- A QI approach to reviewing specific business functions/activities can lead to positive change and improvements.
- The system to support staff and managers in managing absences is fit for purpose.
- It is important to use a range of methods to engage and involve staff in delivery of the business.
- Health and wellbeing activities are having a positive impact on our staff, board and partners.

Performance analysis for 2022-23

People

- Staff absence rate was 3.79% (slightly above the KPI of 3.5%).
- Intranet updated regularly with news and useful resources including self-care.
- Staff engaged in the development of agile working arrangements.
- All staff Townhalls and business briefings held monthly.
- News and updates for staff via CEO email bulletins.
- Health and Wellbeing Committee programme of exercise, social support, fund raising and events to recognise staff contributions.
- Quarterly Check in System embedded.

Resources

- Break even achieved with a surplus of £7,013.
- Funding was secured for additional staff and recruitment activity partially completed within year.
- 10 day and 30-day prompt payment targets were met.
- Online registration portal refreshed.
- Office plan reviewed to support pilot for agile working.
- Plans for move to James House developed and delivered to ensure smooth transition in Quarter 2.

Governance

- Business was planned for 2021-22 with objectives and KPIs approved by the leadership team.
- Business reporting was stepped up to produce weekly reports to provide assurance on the delivery of business and monitoring of staff welfare during remote working for COVID.
- Risk management processes and Risk Registers updated - providing assurance on the good governance of our business.
- Audit and Risk Assurance Committee met quarterly to review assurance reports and risks that were reported.
- Audit schedule was completed and satisfactory assessments were received across all audits.

Quality

- Quality 2020 commitments for 2021-22 delivered.
- Staff were engaged in activities to promote and deliver good practice in equality and diversity.
- Information sessions delivered on disability and mental health awareness, ensuring we are compliant with good governance and equality legislation.
- Staff have been trained and supported to take an active role in quality improvement for their own work and for the team.
- Quality Improvement techniques for improving customer response times and increasing engagement with the PiP Credit Accumulation Route have involved staff and external partners.

Performance Analysis for 2022-23

Systems

- Registration and Regulation ICT system developed to improve user experience.
- All staff and Board members supported with the IT equipment and training to carry out their role remotely.
- Preparations completed for upgrade to Office365, new CRM and Microsoft Teams in Quarter 1.
- Registration system developed to support automated processes for removals.
- Power-BI dashboards developed to present live registration data on the website .
- SOCRATES Change Board reviewed system development and improvement.
- Refreshed the Learning Zone, website and Registration Portal.
- Reports developed to provide analysis of information held within the registration database.
- Online Registration Services available 99% of the time (45k users on the portal each month).

Looking Ahead -

We have set the following indicators of success for infrastructure and leadership in the 2023-24 Business Plan

- Social Care Council is placed to retain its IIP Gold status.
- Social Care Council has the right skills, structure and resources to support it over the next four years.
- Business Plan for 2022-23 is successfully delivered and the Social Care Council achieves its break even target at the end of the financial year.
- The Board receives assurance through audit and governance reports that the Social Care Council is delivering safe and effective governance.
- Staff are supported to engage in quality improvement activity within their own business area and as part of projects working across the organisation.
- Registrants, employers and others have access to an app, digital identity, online Portal and fully enabled IT to engage with us on their mobile phones and other devices.

Performance Analysis for 2022-23

Performance in relation to environmental matters

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

The six priority areas are:

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

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

A number of positive actions have been implemented:

- The Social Care Council is participating in the Belfast Optimisation Project to move to James House (currently scheduled for autumn 2022) alongside a number of other ALBs and organisations.
- Agile working is now in place with staff working remotely from home (as a result of the impact of the COVID pandemic) and this has reduced the need for travel to the workplace and meetings are taking place using video-conferencing software.
- As a result of agile working the production of printing and photocopying has reduced as staff use ICT support including One Note.
- The Social Care Council's Board also moved to digital working and use Decision Time software to manage their Board and other meetings.
- E-Resources – investment in the Learning Zone as an alternative to printed learning resources.

This has included clear procedures on the minimisation of waste, colour photocopying and paper production. The continued promotion of the online Portal has also led to almost negligible use of printed materials for registration application paperwork.

Performance analysis – Key performance indicators

On 19 March 2020, the Northern Ireland Social Care Council transferred all business operations to be delivered via remote working as a response to provide a safe and effective service during the COVID lockdown period. This continued through 2022-23 Business Year. Business continuity was co-ordinated by the Business Review, with achievement of critical business objectives, including staff well-being, monitored and reported at weekly online meetings and in monthly performance reports.

The 2022-23 Business Plan was delivered against 26 objectives and 12 KPIs. Progress against Business Plan objectives was monitored by the Leadership Team throughout the year. Monthly performance reports for the Senior Leadership Team and Quarterly reports for the Social Care Council Board included successes, opportunities for improvement and details of mitigating action undertaken for areas that were at risk of not meeting required outcomes.

The Senior Leadership Team is satisfied that delivery of the 26 objectives and performance against the 12 KPIs set out in the 2022-23 Business Plan meet the standards required to confirm achievement of year end outcomes in line with the 2017-21 Corporate Plan despite the challenges of delivering our services through remote and then agile working arrangements.

At the end of Quarter 4/Month 12 (31 March 2023):

- 10 KPIs were rated **GREEN**
- 2 KPIs were rated **AMBER** (registration processing and conclusion of Fitness to Practise cases at 15 months). Further detail is provided oveleaf.

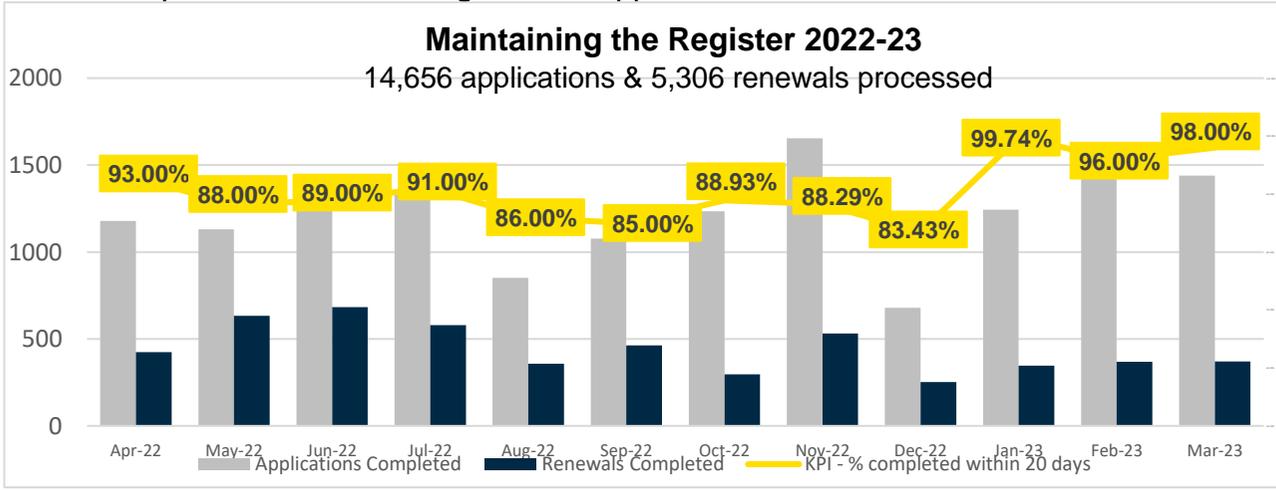
Performance Analysis for 2022-23 – Key performance indicators

KPI Overview at 31 March 2023

KPI	Performance		Comment on any highlights/risks/mitigation																																																			
1. Customer experience – 85% of those using our services, report a positive experience	Cum 93% Number of Survey responses (n=1063)	Month 1 92% (n=64)	Across months 1-12 of 2022-23 <ul style="list-style-type: none"> • 59,291 people supported by Registration Advisers • 93% positive experience reported (rolling customer survey - 1063 responses) • 24,235 calls handled (60% of calls presented were handled) • 35,056 emails managed (269 emails awaiting resolution at closing) <p>GREEN rating for 93% cumulative KPI reflects positive experiences reported by those supported through the services. It is recognized that the survey responses represent 2% of customers. Further work will be done in 2023-24 to promote the survey more widely.</p>																																																			
		Month 2 93% (n=77)																																																				
	Month 12 97% (n=104)	Month 3 92% (n=62)																																																				
	Month 11 95% (n=62)	Month 4 93% (n=105)																																																				
	Month 10 92% (n=127)	Month 5 97% (n=104)																																																				
	Month 9 90% (n=78)	Month 6 89% (n=73)																																																				
	Month 8 94% (n=130)	Month 7 92% (n=77)																																																				
	<p>Customer Service 2022-23 59,291 people supported by phone and email</p> <table border="1"> <caption>Customer Service 2022-23 Data</caption> <thead> <tr> <th>Month</th> <th>Customer Satisfaction - Positive Ratings (%)</th> <th>Emails Resolved</th> <th>Calls Handled</th> </tr> </thead> <tbody> <tr><td>Apr-22</td><td>92%</td><td>~2000</td><td>~1800</td></tr> <tr><td>May-22</td><td>93%</td><td>~2800</td><td>~2500</td></tr> <tr><td>Jun-22</td><td>92%</td><td>~3200</td><td>~2300</td></tr> <tr><td>Jul-22</td><td>93%</td><td>~2800</td><td>~2200</td></tr> <tr><td>Aug-22</td><td>97%</td><td>~2000</td><td>~1800</td></tr> <tr><td>Sep-22</td><td>89%</td><td>~3500</td><td>~2500</td></tr> <tr><td>Oct-22</td><td>92%</td><td>~2800</td><td>~2200</td></tr> <tr><td>Nov-22</td><td>94%</td><td>~2800</td><td>~2200</td></tr> <tr><td>Dec-22</td><td>90%</td><td>~2500</td><td>~1500</td></tr> <tr><td>Jan-23</td><td>92%</td><td>~3000</td><td>~2000</td></tr> <tr><td>Feb-23</td><td>95%</td><td>~3000</td><td>~2000</td></tr> <tr><td>Mar-23</td><td>97%</td><td>~3500</td><td>~2000</td></tr> </tbody> </table>			Month	Customer Satisfaction - Positive Ratings (%)	Emails Resolved	Calls Handled	Apr-22	92%	~2000	~1800	May-22	93%	~2800	~2500	Jun-22	92%	~3200	~2300	Jul-22	93%	~2800	~2200	Aug-22	97%	~2000	~1800	Sep-22	89%	~3500	~2500	Oct-22	92%	~2800	~2200	Nov-22	94%	~2800	~2200	Dec-22	90%	~2500	~1500	Jan-23	92%	~3000	~2000	Feb-23	95%	~3000	~2000	Mar-23	97%	~3500
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Performance Analysis for 2022-23 – Key performance indicators

KPI	Performance		Comment on any highlights/risks/mitigation
2. We will process 100% of completed applications/ renewals within 20 working days of submission	Cum 88% Number of applications/ renewals completed (n=19,962)	Month 1 93% (n=1602)	44,461 people on the register at 31 March 2023 (increase of 4% across the year) <ul style="list-style-type: none"> • 37,148 social care workers (increase of 4.2% in year) • 6,539 social workers (increase 1.5% in year) • 774 social work students (increase of 2.5% in year) <p>Across months 1-12 of 2022-23</p> <ul style="list-style-type: none"> • 19,962 registrations completed (14,656 applications and 5,306 renewals) • 88% of applications/renewals processed within 20 days of completed materials being received (1,887 applications in the system at closing) • 95% of renewals processed automatically through the online system • 45,691 fees paid (86% paid online) <p>AMBER rating for 88% cumulative KPI reflects strong performance in Quarter 4 after significant pressures on staff resource to progress applications processing in months 1-9, with 12% of completed applications taking more than 20 days to process. Management activities to recruit and develop staff and to involve staff in improving work processes improved performance in months 10-12. Team leader and staff development work will continue into 2023-23. Service improvements are also anticipated following the May 2023 system upgrade and development of the new Registration App.</p>
		Month 2 88% (n=1764)	
		Month 3 89% (n=2020)	
		Month 4 91% (n=1925)	
		Month 5 86% (n=1208)	
		Month 6 85% (n=1540)	
		Month 7 89% (n=1531)	
		Month 8 88% (n=2186)	
		Month 9 84% (n=931)	
		Month 10 99% (n=1590)	
		Month 11 96% (n=1854)	
		Month 12 98% (n=1811)	



KPI	Performance		Comment on any highlights/risks/mitigation																																							
<p>3. We will update the register for all Fitness to Practise decisions within 2 working days of receipt of the information</p>	<p>Cum 100% Number of registration records updated (n=101)</p>	<p>Month 1 100% - (n=6)</p>	<p>Across months 1-12 of 2022-23</p> <ul style="list-style-type: none"> • 101 registrant records were updated to reflect decisions made by Fitness to Practise Officers and Committees. • 100% of updates were completed within the 2 day timescale. <p>GREEN rating for 100% cumulative KPI reflects the benefit achieved from training that was completed in 2021-22 to increase capacity within the team to amend registration records with fitness to practise and committee decisions.</p> <p>The chart below tracks case closure volumes against registration amendments for the year. The chart shows that there can be significant variations at times in the proportion of cases closed that require an amendment to a registration record. This illustrates how the decision reached in each case can be affected by a number of factors, including: seriousness of the allegation, mitigation presented, level of impairment, impact on others, or whether the alleged poor standards were proven.</p> <div data-bbox="835 699 2179 1353"> <p style="text-align: center;">Updating the Register 2022-23 101 registration records updated with FtP Officer and Committee Decisions</p> <table border="1"> <caption>Monthly Case Closure and Registration Amendment Data</caption> <thead> <tr> <th>Month</th> <th>FtP & Committee Decisions Added to Register</th> <th>Cases Closed</th> </tr> </thead> <tbody> <tr><td>Apr-22</td><td>6</td><td>21</td></tr> <tr><td>May-22</td><td>10</td><td>39</td></tr> <tr><td>Jun-22</td><td>10</td><td>25</td></tr> <tr><td>Jul-22</td><td>5</td><td>19</td></tr> <tr><td>Aug-22</td><td>6</td><td>23</td></tr> <tr><td>Sep-22</td><td>14</td><td>23</td></tr> <tr><td>Oct-22</td><td>10</td><td>25</td></tr> <tr><td>Nov-22</td><td>6</td><td>17</td></tr> <tr><td>Dec-22</td><td>3</td><td>19</td></tr> <tr><td>Jan-23</td><td>8</td><td>45</td></tr> <tr><td>Feb-23</td><td>8</td><td>43</td></tr> <tr><td>Mar-23</td><td>15</td><td>42</td></tr> </tbody> </table> </div>	Month	FtP & Committee Decisions Added to Register	Cases Closed	Apr-22	6	21	May-22	10	39	Jun-22	10	25	Jul-22	5	19	Aug-22	6	23	Sep-22	14	23	Oct-22	10	25	Nov-22	6	17	Dec-22	3	19	Jan-23	8	45	Feb-23	8	43	Mar-23	15	42
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<p>Month 12 100% - (n=15)</p>																																										

KPI	Performance		Comment on any highlights/risks/mitigation
<p>4. We will triage all referrals to the Fitness to Practise Team within 3 working days</p> <p>(referrals are assessed against the Social Care Council 'Standard for Acceptance')</p>	<p>Cum 95%</p> <p>Number of concerns referred to fitness practice and triaged</p> <p>(n=493)</p>	<p>Month 1</p> <p>97% - (n=38)</p>	<p>Across months 1-12 of 2022-23</p> <ul style="list-style-type: none"> • 493 concerns referred about a registrant's fitness to practise were triaged • 15% of referrals were screened out at triage because they did not meet the standard, or were not within the remit of the Social Care Council • 16% of referrals were screened out following provisional enquiries • 69% of referrals resulted in investigation as a fitness to practise case • 15% increase in referrals compared to 2021-22 and 7% increase in the proportion of referrals which resulted in a case for investigation <p>GREEN rating for 95% cumulative KPI reflects strong performance in Quarter 4 and the effective management of risk in triaging referrals in-year, despite considerable increase in referrals and the proportion of these requiring further investigations. 5% of referrals across 2022-23 were outside KPI, requiring 4-5 days to complete. Delay in triaging these 25 referrals did not create an additional risk to the public. Delays were as a result of time taken by those making the referrals to respond to initial enquiries and also staff availability. Current activity levels indicate a return to referral numbers of 30-35 for April 2023.</p>
		<p>Month 2</p> <p>100%-(n=59)</p>	
		<p>Month 3</p> <p>93% - (n=44)</p>	
		<p>Month 4</p> <p>91% - (n=34)</p>	
		<p>Month 5</p> <p>100% (n=32)</p>	
		<p>Month 6</p> <p>94% - (n=32)</p>	
		<p>Month 7</p> <p>91% - (n=44)</p>	
		<p>Month 8</p> <p>84% - (n=50)</p>	
		<p>Month 9</p> <p>89% - (n=27)</p>	
		<p>Month 10</p> <p>100%-(n=37)</p>	
		<p>Month 11</p> <p>100%-(n=45)</p>	
		<p>Month 12</p> <p>100%-(n=51)</p>	



KPI	Performance		Comment on any highlights/risks/mitigation																																							
5. We will conclude 100% of Interim Suspension Order (ISO) hearings within 4 weeks of referral	Cum 93% (n=27)	Month 1 100% - (n=2)	Across months 1-12 of 2022-23 <ul style="list-style-type: none"> • 27 cases were identified as high risk and referred for Interim Order hearing • 93% (25 out of 27) of Interim Orders were concluded within 4 weeks of referral • 22% increase in Interim Order cases compared to 2021-22 <p>GREEN rating for 93% cumulative KPI reflects the agility of the FtP Officers and the Committee Management Team to implement processes respond within time constraints. 25 out of 27 ISO cases were concluded within KPI. One case concluded in May and one in October each took an additional week to complete. The small number of ISO cases concluded mean the additional time to close these two cases creates a disproportionate impact on KPI performance. There was no additional risk to the public as a result of these delays. The chart below shows the unpredictable nature of Interim Order cases. The system was robust enough to respond to within tight timescales to ensure registrants identified as posing a high risk to those receiving social care services were temporarily prevented from practising whilst investigations proceeded.</p> <div data-bbox="815 667 2101 1248"> <p style="text-align: center;">Interim Suspension Orders for 2022-23 and 2021-22</p> <table border="1"> <caption>Interim Suspension Orders Data</caption> <thead> <tr> <th>Month</th> <th>2021-22 (n=21)</th> <th>2022-23 (n=27)</th> </tr> </thead> <tbody> <tr><td>Apr</td><td>2</td><td>2</td></tr> <tr><td>May</td><td>4</td><td>3</td></tr> <tr><td>Jun</td><td>2</td><td>0</td></tr> <tr><td>Jul</td><td>3</td><td>0</td></tr> <tr><td>Aug</td><td>0</td><td>3</td></tr> <tr><td>Sep</td><td>3</td><td>5</td></tr> <tr><td>Oct</td><td>0</td><td>3</td></tr> <tr><td>Nov</td><td>2</td><td>2</td></tr> <tr><td>Dec</td><td>0</td><td>1</td></tr> <tr><td>Jan</td><td>4</td><td>1</td></tr> <tr><td>Feb</td><td>0</td><td>0</td></tr> <tr><td>Mar</td><td>1</td><td>7</td></tr> </tbody> </table> </div>	Month	2021-22 (n=21)	2022-23 (n=27)	Apr	2	2	May	4	3	Jun	2	0	Jul	3	0	Aug	0	3	Sep	3	5	Oct	0	3	Nov	2	2	Dec	0	1	Jan	4	1	Feb	0	0	Mar	1	7
		Month		2021-22 (n=21)	2022-23 (n=27)																																					
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Month 12 100% - (n=7)																																										

KPI	Performance		Comment on any highlights/risks/mitigation																																																				
<p>6. We will conclude 90% of Fitness to Practise cases within 15 months of opening the case</p>	<p>Cum 78% (n=341)</p>	<p>Month 1 72% - (n=21)</p>	<p>Across months 1-12 of 2022-23</p> <ul style="list-style-type: none"> • 341 Fitness to Practise cases concluded (336 active cases in the system at closing) • 94% of cases resolved by FtP Officers through Consensual Disposal (154 no further action, 141 letter of advice about standards, 10 warnings, 11 undertakings. 2 removal by agreement) • 16% of cases decided by FtP Hearing Committee (18 removal orders, 3 warnings) <p>AMBER rating for 78% cumulative KPI reflects the strong response in managing 10% more case closures than 2021-22 year. Performance on closure times, particularly evident in Q1, was due to delays arising from criminal proceedings, safeguarding investigations, employer investigations, health assessments and wider delays resulting from COVID, as well as staff resource. Witness/employer co-operation was also a factor. Quarter 4 showed significant level of case closures, a number of which were long running cases aged from 16-43 months. All cases are reviewed at monthly case conferences, including long-running cases. 25% of active cases in the system at closing were older than 15 months. The impact of these long-running cases on KPI is kept under review by management. It remains the aim of management to attain the standard of closing 90% of cases within 15 months.</p> <div data-bbox="815 740 2145 1241"> <p style="text-align: center;">Fitness to Practice Cases 2022-23 Cases Opened and Closed (336 active cases in system at 31 March 2023)</p> <table border="1"> <caption>Fitness to Practice Cases 2022-23 Data</caption> <thead> <tr> <th>Month</th> <th>Cases Opened</th> <th>Cases Closed</th> <th>% Cases Closed in 15 months</th> </tr> </thead> <tbody> <tr><td>Apr-22</td><td>32</td><td>21</td><td>72.00%</td></tr> <tr><td>May-22</td><td>35</td><td>39</td><td>64.00%</td></tr> <tr><td>Jun-22</td><td>30</td><td>25</td><td>48.00%</td></tr> <tr><td>Jul-22</td><td>27</td><td>18</td><td>80.00%</td></tr> <tr><td>Aug-22</td><td>16</td><td>23</td><td>83.00%</td></tr> <tr><td>Sep-22</td><td>23</td><td>24</td><td>67.00%</td></tr> <tr><td>Oct-22</td><td>25</td><td>25</td><td>88.00%</td></tr> <tr><td>Nov-22</td><td>26</td><td>17</td><td>79.00%</td></tr> <tr><td>Dec-22</td><td>14</td><td>19</td><td>100.00%</td></tr> <tr><td>Jan-23</td><td>26</td><td>45</td><td>74.00%</td></tr> <tr><td>Feb-23</td><td>44</td><td>43</td><td>76.00%</td></tr> <tr><td>Mar-23</td><td>43</td><td>43</td><td>95.00%</td></tr> </tbody> </table> </div>	Month	Cases Opened	Cases Closed	% Cases Closed in 15 months	Apr-22	32	21	72.00%	May-22	35	39	64.00%	Jun-22	30	25	48.00%	Jul-22	27	18	80.00%	Aug-22	16	23	83.00%	Sep-22	23	24	67.00%	Oct-22	25	25	88.00%	Nov-22	26	17	79.00%	Dec-22	14	19	100.00%	Jan-23	26	45	74.00%	Feb-23	44	43	76.00%	Mar-23	43	43	95.00%
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KPI	Performance		Comment on any highlights/risks/mitigation
7. We will complete 100% of Quality Assurance processes for social work education and training within timeframes agreed with providers and identify recommendations for improvement	Cum 100%	Month 1 100%	<p>Across months 1-12 of 2022-23</p> <p>The programme of monitoring, review and inspection for social work education and practice learning was delivered for 2022-23. Responses from providers at qualifying and post qualifying levels provided assurance that the Social Care Council standards were being met.</p> <ul style="list-style-type: none"> • 3 Degree in Social Work Approved Courses monitored • 21 Designated Practice Learning Providers monitored • 24 AYE Audit responses reviewed in 2022 sample and all candidates met the required standards • 16 PiP Approved Programmes monitored (included monitoring for periods 2020/21 and 2021/22 to realign monitoring post-covid) • Preparation for Ulster University PiP Programmes Re-Approval Mar-May 2023 • 255 Degree in Social Work graduates in NI (summer 2022) • 292 students enrolled on the Degree in Autumn 2022 (including 8 Open University) • 167 PiP Awards presented in autumn 2022 • 32 submissions received for PiP IAR assessment (March 2023) <p>GREEN rating for 100% cumulative KPI reflects the engagement that has been sustained with course management boards, PiP Partnership, Degree in Social Work Partnership and with employer leads for AYE and PiP to ensure programmes are supported in regular review of teaching to adapt to changing service requirements.</p>
		Month 2 100%	
		Month 3 100%	
		Month 4 100%	
		Month 5 100%	
		Month 6 100%	
		Month 7 100%	
		Month 8 100%	
		Month 9 100%	
		Month 10 100%	
		Month 11 100%	
		Month 12 100%	

8. We will ensure our staff absence levels do not exceed **3.5%** during the year

Month 11
Cum
3.55%

Month 1 -	3.95%
Month 2 -	5.43%
Month 3 -	5.52%
Month 4 -	5.58%
Month 5 -	1.01%
Month 6 -	0.24%
Month 7 -	2.27%
Month 8 -	4.42%
Month 9 -	7.06%
Month 10 -	1.84%
Month 11 -	1.84%
Month 12 -	TBC%

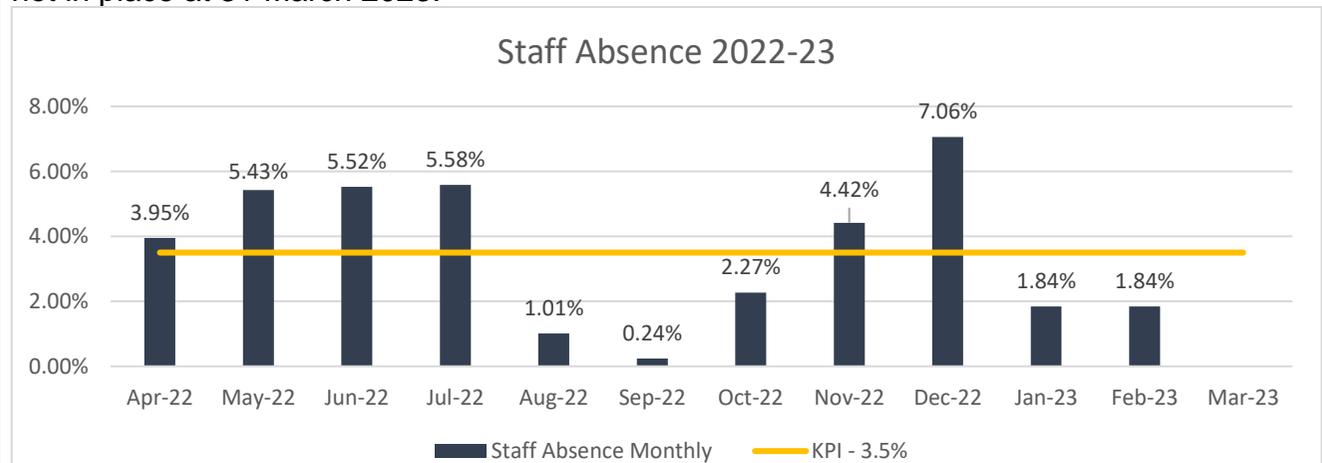
Across months 1-12 of 2022-23

Cumulative absence across months 1-12 was recorded at TBC%. Year end absence reporting not available from BSO. Figures for month 12 and 2022-23 cumulative to follow. Month 11 cumulative KPI was 3.55% - marginally outside the 3.5% KPI.

Up to the end of month 7, staff absence had remained low in comparison to absences across the HSC. COVID and seasonal illnesses had affected all staff groups during November and December, with a spike of 7.06% in December. Absence reduced significantly in January with 1.84% recorded and levels remained similar for February. Managers will continue to monitor this closely over the Autumn/Winter months whilst the risk of seasonal illness and the ongoing presence of COVID is evident within the wider community.

*Since October 2022, COVID related absences have been recorded as sickness absence (rather than Public Sector Duties Paid).

Cumulative KPI for staff absence is anticipated to achieved an assessment as GREEN circa 3%. Throughout the year, Social Care Council staff absence levels remained lower than the wider HSC. Anticipated revised DoH KPI of 4% absence rate for all HSC staff was not in place at 31 March 2023.



KPI	Performance	Comment on any highlights/risks/mitigation																																							
<p>9. We will ensure we achieve the minimum standard of paying 95% of undisputed invoices within 30 days</p>	<p>Cum (n=1310)</p> <p>30 Day KPI 98.78%</p>	<p>Month 1 (n=134)</p> <p>30 Day KPI 99.25% 10 Day KPI 97.76%</p>																																							
		<p>Month 2 (n=136)</p> <p>30 Day KPI 100% 10 Day KPI 98.53%</p>																																							
		<p>Month 3 (n=113)</p> <p>30 Day KPI 98.23% 10 Day KPI 98.23%</p>																																							
		<p>Month 4 (n=142)</p> <p>30 Day KPI 99.30% 10 Day KPI 93.66%</p>																																							
		<p>Month 5 (n=81)</p> <p>30 Day KPI 100% 10 Day KPI 83.95%-</p>																																							
		<p>Month 6 (n=121)</p> <p>30 Day KPI 99.17% 10 Day KPI 87.60%-</p>																																							
		<p>Month 7 (n=87)</p> <p>30 Day KPI 98.85% 10 Day KPI 88.51%-</p>																																							
		<p>Month 8 (n=138)</p> <p>30 Day KPI 99.28% 10 Day KPI 94.20%-</p>																																							
		<p>Month 9 (n=48)</p> <p>30 Day KPI 95.83% 10 Day KPI 95.83%-</p>																																							
		<p>Month 10 (n=82)</p> <p>30 Day KPI 92.68% 10 Day KPI 73.17%-</p>																																							
		<p>Month 11 (n=88)</p> <p>30 Day KPI 100.00% 10 Day KPI 88.64%-</p>																																							
		<p>Month 12 (n=140)</p> <p>30 Day KPI 99.29% 10 Day KPI 97.14%-</p>																																							
<p>10. We will achieve the minimum standard of paying 75% of undisputed invoices within 10 day prompt payment target</p>	<p>10 Day KPI 92.37%</p>	<p>Across months 1-12 of 2022-23</p> <ul style="list-style-type: none"> • 1,310 invoices paid, with a value of £3.29m • 92.37% of invoices paid within 10 days (£2.85m) • 98.78% of invoices paid within 30 days (£3.17m) <p>GREEN rating for 92.37% and 98.78% cumulative KPIs reflects the strong performance across procurement, processing and approval of invoices to ensure efficient processing of payments. As shown below, the KPI standards for 10 and 30 days payments was met throughout the year, except for a marginal drop below the KPI sin January 2023 (73.17% and 92.68%).</p>																																							
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KPI	Performance		Comment on any highlights/risks/mitigation																																																																
<p>11. We will manage our finances to achieve financial breakeven target of 0.25% or £20k (whichever is greater)</p>	<p>At end of Month 12 Unaudited Year-End Position £10,340</p>		<p>Month 12 finance reports indicate a £10,340 underspend at 31 March 2023. The unaudited breakeven position target has therefore been reached for the financial year 2022/23. GREEN rating for breakeven position against KPI is based on the following summary of actual income and expenditure. Further information is provided in the financial report presented to the Board April 2023 meeting. INCOME £5,735,481 (£3,435,631 Revenue Resource Limit, £1,568,486 Registration Income, £731,364 Other Income) EXPENDITURE £5,725,142 (£3,155,214 Pay, £2,569,927 Non Pay)</p>																																																																
<p>12. We will ensure the Online Registration Portal is available at least 98% of time during the year</p>	<p>Month 12 Cum 99% Number of Portal Sessions n=422k</p>	<table border="1"> <tr><td>Month 1 100% n=32900</td></tr> <tr><td>Month 2 99% n=34600</td></tr> <tr><td>Month 3 99% n=39677</td></tr> <tr><td>Month 4 99% n=30455</td></tr> <tr><td>Month 5 99% n=36176</td></tr> <tr><td>Month 6 99% n=42663</td></tr> <tr><td>Month 7 99% n=38,574</td></tr> <tr><td>Month 8 100% n=39,666</td></tr> <tr><td>Month 9 100% n=20,195</td></tr> <tr><td>Month 10 99% n=38,454</td></tr> <tr><td>Month 11 99% n=31,121</td></tr> <tr><td>Month 12 99% n=38,010</td></tr> </table>	Month 1 100% n=32900	Month 2 99% n=34600	Month 3 99% n=39677	Month 4 99% n=30455	Month 5 99% n=36176	Month 6 99% n=42663	Month 7 99% n=38,574	Month 8 100% n=39,666	Month 9 100% n=20,195	Month 10 99% n=38,454	Month 11 99% n=31,121	Month 12 99% n=38,010	<p>Across months 1-12 of 2022-23</p> <ul style="list-style-type: none"> • 99% Portal availability • 422k portal sessions • 3.27m page views <p>GREEN rating for 99% cumulative KPI reflects the robust systems in place to monitor system performance and address service issues as they are reported by users. In addition to maintaining the online system, the team managed development and testing for upgrade of the CRM system for the database and portal. CRM Upgrade Go-Live date 18-31 May. Database team provided a key role in the technical support required to clear Millennium House and install equipment in James House during Q3 & 4. Staff and stakeholders were assisted with payment issues, log-in assistance, employment details, endorser permissions/videoconferencing/printers. Registration support provided for cancelled applications/ voluntary removals/ fee generation/ bulk updates, training. Scoping work was carried out for the new Registration Mobile App which will be developed in 2023-24.</p> <div data-bbox="779 1023 2092 1353"> <table border="1"> <caption>Online Registration System Service Availability and Monthly Sessions 2022-23</caption> <thead> <tr> <th>Month</th> <th>Portal Sessions (n)</th> <th>Portal Availability (%)</th> <th>KPI - Availability (%)</th> </tr> </thead> <tbody> <tr><td>Apr-22</td><td>~15,000</td><td>100%</td><td>98%</td></tr> <tr><td>May-22</td><td>~18,000</td><td>99%</td><td>98%</td></tr> <tr><td>Jun-22</td><td>~22,000</td><td>99%</td><td>98%</td></tr> <tr><td>Jul-22</td><td>~12,000</td><td>99%</td><td>98%</td></tr> <tr><td>Aug-22</td><td>~18,000</td><td>99%</td><td>98%</td></tr> <tr><td>Sep-22</td><td>~22,000</td><td>99%</td><td>98%</td></tr> <tr><td>Oct-22</td><td>~25,000</td><td>100%</td><td>98%</td></tr> <tr><td>Nov-22</td><td>~28,000</td><td>100%</td><td>98%</td></tr> <tr><td>Dec-22</td><td>~5,000</td><td>100%</td><td>98%</td></tr> <tr><td>Jan-23</td><td>~5,000</td><td>99%</td><td>98%</td></tr> <tr><td>Feb-23</td><td>~5,000</td><td>99%</td><td>98%</td></tr> <tr><td>Mar-23</td><td>~5,000</td><td>99%</td><td>98%</td></tr> </tbody> </table> </div>	Month	Portal Sessions (n)	Portal Availability (%)	KPI - Availability (%)	Apr-22	~15,000	100%	98%	May-22	~18,000	99%	98%	Jun-22	~22,000	99%	98%	Jul-22	~12,000	99%	98%	Aug-22	~18,000	99%	98%	Sep-22	~22,000	99%	98%	Oct-22	~25,000	100%	98%	Nov-22	~28,000	100%	98%	Dec-22	~5,000	100%	98%	Jan-23	~5,000	99%	98%	Feb-23	~5,000	99%	98%	Mar-23	~5,000	99%	98%
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Performance Analysis for 2022-23

Positioning

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

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

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

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

SIGNATURE

Patricia Higgins,
Chief Executive, Northern Ireland Social Care Council

Date: dd MM 2023

Section 2: Accountability Report

Corporate Governance Report - Director's Report

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

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

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

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

The Social Care Council is led by a Board which comprises a Chair and 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 Board's structure and its membership can be found at Appendix 1 of this Annual Report. The organisational structure is headed by a Chief Executive who is also the designated Accounting Officer (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 organisational structure can be found at Appendix 2.

Equality

The Social Care Council is committed to promoting equality of opportunity for all. Details of good practice and training initiatives, including those relating to disability issues are outlined in the Annual Equality Progress Report which can be found on its website at www.niscc.info. The Social Care Council has an Equal Opportunity Policy in place that covers all aspects of equality within employment, including the obligations of the organisation under disability discrimination legislation and protecting the rights and interests of Section 75 groups.

Staff Communication

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

Director's Report**Prompt Payment Policy****Public Sector Payment Policy – Measure of Compliance**

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

	2022		2021	
	Number	Value £	Number	Value £
Total bills paid	1,124	2,724,320	1,120	2,501,857
Total bills paid within 30 day target	1,122	2,716,964	1,109	2,489,436
% of bills paid within 30 day target	99.8%	99.7%	99.0%	99.5%
Total bills paid within 10 day target	1,094	2,660,883	1,052	2,395,270
% of bills paid within 10 day target	97.3%	98%	93.9%	96%

The Late Payment of Commercial Debts Regulations 2002

Amount of compensation paid for payment(s) being late	£
Total	-

Director's Report

Information Governance

BSO provides services to the Social Care Council to assist with fulfilling responsibilities for General Data Protection Regulation (GDPR). All staff have completed the mandatory e-learning module to ensure they are aware of their role in fulfilling GDPR requirements. There were no data breaches during the year.

Health and Safety at Work

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

Complaints

The Social Care Council received one written complaint about its services during 2021-22. The complaint was not upheld. None of the complaints received were escalated to the next internal stage for review. No complaints were received from the Northern Ireland Public Services Ombudsman.

Audit Information

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

Long Term Expenditure

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

Director's Report

Senior Leadership Team



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

(Patricia Higgins, Declan McAllister and Marian O'Rourke)

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

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 the Fitness to Practise function, the regulation of social work education and training at qualifying level and the Professional in Practice CPD framework for social workers, and the development of the social work and social care workforces.

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.

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.

Director's Report

The Board is chaired by Mr Paul Martin and he is supported by 10 Board Members –

- Sarah Browne
- Roslyn Dougherty
- Gerard Guckian
- David Hayes
- Christine Hunter
- Brenda Maitland
- Jacqueline McGarvey
- Catherine McPhillips
- Anne O'Reilly
- Lee Wilson

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 on our website. The agenda and minutes of Board meetings are published on the Social Care Council's website www.niscc.info. The Board also have strategic days during the year to focus on key areas of work and strategy, for example when developing the Corporate Plan.

The Board carried out a 'Board Self-Assessment' during 2021-22 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. This is reported in the Governance Statement contained within this Annual Report and Accounts for 2022-23.

The Social Care Council holds a Register of Directors' Interests which contains the declared interests of both Executive and Non-Executive Directors. This is available by contacting the Chief Executive's Office at the Northern Ireland Social Care Council, 4th Floor James House, 2 Cromac Avenue, Belfast, BT7 2JA, 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 Gerard Guckian) assists the Board in the discharge of its functions by providing independent and objective review of the Social Care Council's control systems, financial information to the Board, risk management and information governance processes, compliance with the law, guidance and Standards of Conduct and Practice, and governance processes. The Audit and Risk Assurance Committee Report which forms part of this Annual Report can be found on page 68.
- **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.

Director's Report

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 Social Care 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 Social Care Council.
- **Leaders in Social Care Partnership** consists of providers of social care services from the statutory, private and 3rd sectors, with a focus on supporting the transformation and development of the social care workforce in Northern Ireland.
- **Professional in Practice (PiP) Partnership** consists of social work employers and Higher Education Institutions (HEI's) who are key to the delivery of the PiP Framework.

SIGNATURE

Patricia Higgins,
Chief Executive, Northern Ireland Social Care Council

Date: DD MM 2023

Corporate Governance Report - Statement of Accounting Officer Responsibilities

Accounts for the Year Ended 31 March 2023 **UPDATE – SEE EMAIL**

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

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

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

The Permanent Secretary of the Department of Health as Principal Accounting Officer for Health and Social Care Resources in Northern Ireland has designated Patricia Higgins of the Northern Ireland Social Care Council as the Interim Accounting Officer for the Northern Ireland Social Care Council. The responsibilities of an Accounting Officer, including responsibility for the regularity and propriety of the public finances for which the Accounting Officer is answerable, for keeping proper records and for safeguarding the Northern Ireland Social Care Council's assets, are set out in the formal letter of appointment of the Accounting Officer issued by the Department of Health, Chapter 3 of Managing Public Money Northern Ireland (MPMNI) and the HM Treasury Handbook: Regularity and Propriety.

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

Corporate Governance Report - Governance Statement 2022-23

UPDATE

1. Introduction / Scope of Responsibility

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

The Social Care 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 Social Care Council has a Memorandum of Understanding with the Regulation and Quality Improvement Authority (RQIA) to enable it to properly fulfil its role as a regulator of the social care workforce, and information sharing protocols are in place with the other Social Care Councils in England, Wales and Scotland. The Social Care Council also works closely with CORU, the Social Work and Social Care regulator in the Republic of Ireland, to share best practice in regulation and registration of social workers and social care workers.

The Social Care Council has a Management Statement and Financial Memorandum in place which sets out the strategic control framework within which the Social Care Council is required to operate, and the conditions under which government funds are provided as detailed in Government Accounting Northern Ireland. The Accounting Officer and Chair of the Social Care Council apprise the DoH at the highest level of engagement through twice-yearly Accountability Meetings, and at the same time the Social Care Council works in partnership with the DOH Government Liaison Officer to ensure operational and strategic issues are raised appropriately with the DoH throughout the year. It is noted that due to COVID impact the DOH again stood down the year end accountability meeting for 2021-22.

The Social Care Council remains on course to achieve financial break-even for 2021-22. As part of the HSC sector, the Social Care Council is expected to face significant financial challenges in 2022-23 and therefore extensive budget planning work to support the financial plan is ongoing between the Social Care Council and the DoH. The Social Care Council, alongside other organisations, is also managing the impact of the COVID pandemic on its business and ensuring essential/front line services are supported during this difficult time including planning for the resumption of normal business during 2022-23.

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 through completion of an annual Board self-assessment. The Board completed its self-assessment for year ended 31 March 2022 and updated the Action Plan which it will continue to review at least annually to ensure continual improvement in governance and best practice.

Governance Statement

The Board agreed that –

- 15 indicators were assessed as Green (all good practices are in place);
- 3 indicators were assessed as Amber/Green;
- 0 indicators were assessed as Red.

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

Indicator		Board's Assessment	
1.	Board Composition and Commitment		
1.1	Board positions and size	Amber	Green
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	
2.	Board Evaluation, Development and Learning		
2.1	Effective Board level evaluation	Green	
2.2	Whole Board development programme	Green	
2.3	Board induction, succession and contingency planning	Amber	Green
2.4	Board member appraisal and personal development	Green	
3.	Board Insight and Foresight		
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	
• 4.	Board Engagement and Involvement		
4.1	External stakeholders	Green	
4.2	Internal stakeholders	Green	
4.3	Board profile and visibility	Green	

The three areas assessed as Amber/Green were in relation to –

- the Chief Executive post is being filled on a temporary basis however the recruitment scheme to fill the position on a substantive basis is underway with a view to appointing in the spring/summer of 2022
- the number of Board Members with technical experience – in the Social Care Council only one Board Member has financial experience and this has been raised with the DoH and the Public Appointments Unit, and
- The induction of Board Members – the induction programme is being reviewed to strengthen the induction experience for all new Board Members.

Governance Statement**3. Governance Framework**

The Board provides strategic leadership to the Social Care 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. There are currently 3 Board Member vacancies and a further 4 Board Members contracts are due to end in the forthcoming business year, 2022-23. A Board skills audit is in progress.

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 Social Care 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 with an additional two Extraordinary meetings convened in response to the COVID pandemic and records are maintained of the Board attendance. In addition, the Board held four Strategic Planning Sessions. During 2021-22 the Board attendance for all sessions was as follows:

Chair/ Member	Attendance at Board During 2021-22 (%)
Paul Martin, Chair	100%
Sarah Browne, Member	100%
Roslyn Dougherty, Member	100%
Gerry Guckian, Member	100%
David Hayes, Member	83.3%
*Christine Hunter, Member	83.3%
Brenda Maitland, Member	100%
Jacqueline McGarvey, Member	100%
Catherine McPhillips, Member	100%
Anne O'Reilly, Member	100%
Lee Wilson, Member	100%

* Appointment ended 31st March 2022

Overall this represents a 97% attendance rate when taken collectively over the year 2021-22. Attendance at Board Strategic Days, Committees and Partnerships during 2021-22 is set out overleaf.

Governance Statement

	Board Strategic	Audit and Risk Assurance Committee	Remuneration Committee	Participation Forum	Leaders in Social Care Partnership	Professional in Practice Partnership	Registrants' Forum
FREQUENCY OF MEETINGS IN 2021-22	4	4	2	3	4	4	5
P Martin	100%	N/A	100%	N/A	N/A	N/A	N/A
S Browne	100%	N/A	100%	N/A	100%	N/A	N/A
R Dougherty	100%	N/A	100%	N/A	N/A	100%	N/A
G Guckian	100%	100%	N/A	N/A	N/A	N/A	N/A
D Hayes	50%	N/A	N/A	33.3%	N/A	N/A	N/A
C Hunter	100%	N/A	N/A	N/A	N/A	100%	100%
B Maitland	100%	75%	N/A	100%	N/A	N/A	N/A
J McGarvey	100%	100%	N/A	N/A	N/A	N/A	60%
C McPhillips	100%	N/A	N/A	N/A	N/A	100%	N/A
A O'Reilly	75%	N/A	N/A	N/A	75%	N/A	N/A
Lee Wilson	100%	100%	100%	0%	N/A	N/A	N/A

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 the Social Care Council and assists the Board in the discharge of its functions by providing independent and objective review of the Social Care Council's control systems, financial information to the Board, risk management processes, compliance with law, guidance and Codes of Conduct, and governance processes; and
- the Remuneration Committee is chaired by the Chair of the Social Care Council and advises the Board about appropriate remuneration and terms of service for the Chief Executive.

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

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 Social Care Council has 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 Social Care Council's Personal and Public Involvement (PPI) Consultation Scheme.

Governance Statement

Due to the impact of COVID the Department of Health has requested that all Business Plans and Corporate plans are rolled forward as there will be no formal Departmental approval process and that any revisions to plans are shared with the Sponsoring unit for Information only.

The current 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 Social Care Council will deliver on its overarching aim and strategic outcomes as a regulator of the social care workforce and the outcomes which it expects as a result. The Corporate Plan is available on the Social Care Council's website.

The Social Care Council started some work on the outline of a new Strategic Plan for the next four years, and will refresh that work once the timing is right to do so, and on the advice of the DoH.

The Social Care Council also develops an annual Business Plan which provides further detail on how the Social Care 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 Social Care 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 Social Care Council develops an Operational Plan and Key Performance Indicators. This ensures that all staff can clearly understand their role in delivering the Social Care Council's objectives, and ensures that their own personal and team objectives and learning plans are aligned to the Social Care Council's business objectives. The Operational Plan and Business Plan are reviewed on a quarterly basis by Senior Managers which informs reporting to the Senior Leadership Team and ultimately to the Board.

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

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

Ultimately, the Social Care Council accounts for its business performance through the production of its Annual Report and Accounts which are laid before the NI Assembly and published on the Social Care Council's website. It also reports how it delivers against Quality 2020 in a separate Annual Quality Progress Report which is again available on the website.

Governance Statement

Risk management

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

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

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

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

Risk Management Framework

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

The Social Care 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 Leadership Team, the Audit and Risk Assurance Committee and ultimately to the Board as part of a quarterly Risk Progress Report. The risk register is maintained on a regular basis and updated through risk management software which assigns risk owners, controls and actions. The risks can be tracked through the software to establish how risks are being managed and mitigated.

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

Governance Statement

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

Business Continuity

In response to the COVID pandemic, the Social Care Council activated its Command and Control Team now called the COVID Business Leadership Team (CBLT) as set out in its Business Continuity Plan. The Social Care Council also developed a Supplementary (or Surge) Plan to specifically support how it delivered front line support to the social care sector. CBLT meets twice a week to monitor how it supports the sector, manages its business and performance, and supports its staff. A COVID risk is also included on the risk register and this is regularly reviewed.

Fraud

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

5. Information Risk

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

The Social Care Council holds a range of personal data in respect of registrants (c.43,000) 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 Social Care Council maintains an Information Asset Register and Disposals Schedule which are reviewed regularly and any areas of non-compliance are brought to the attention of the Senior Information Risk Owner and Personal Data Guardian.

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

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

Governance Statement

The Information Governance function is well embedded in the organisation and forms part of the remit of the Risk Management Committee as reflected in the Committee's Terms of Reference. The Director of Registration and Corporate Services chairs the Risk Management Committee and is also the Social Care Council's SIRO 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.

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

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

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

The Social Care Council can report that there were no data breaches or cyber security incidents during the year.

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

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

The Social Care Council is currently reviewing all of the above policies and ensuring they are aligned to the HSC suite of IT and related policies.

Governance Statement

The Accounting Officer and Board receive quarterly reports through the Assurance Report on the management of all risks, including those in relation to IT, information and other potential threats. The Assurance Report highlights any gaps in assurance and how these are being remedied. In addition, an end of year Assurance Report is produced that highlights assurances (and gaps) across all areas of business. This Report is provided to the Senior Leadership Team, the Audit and Risk Assurance Committee and the Board.

6. Public Stakeholder Involvement

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

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

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

- Participation Forum (comprising people who use social care services and carers).
- Registrants Forum (comprising registrants).
- Leaders in Social Care Partnership (comprising employers of the social care workforce).
- The Professional in Practice Partnership (comprising employers of social workers, Higher Education Institutions (HEI's), and other education providers who are key to the delivery of the PiP Framework).

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

The Social Care Council ensures all papers presented to its 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 Social Care Council in how it has engaged people who use services and carers, and other stakeholders in the development of policy and other initiatives.

7. Budget Position and Authority

The Assembly passed the Budget Act (Northern Ireland) 2022 in March 2022 which authorised the cash and use of resources for all departments and their Arms' Length Bodies for the 2021-22 year, based on the Executive's final expenditure plans for the year. The Budget Act (Northern Ireland) 2022 also included a Vote on Account which authorised departments' and their Arms' Length Bodies' access to cash and use of resources for the early months of the

Governance Statement

2022-23 financial year. The cash and resource balance to complete for the remainder of 2022-23 will be authorised by the 2022-23 Main Estimates and the associated Budget Bill based on an agreed 2022-23 Budget. In the event that this is delayed, then the powers available to the Permanent Secretary of the Department of Finance under Section 59 of the Northern Ireland Act 1998 and Section 7 of the Government Resources and Accounts Act (Northern Ireland) 2001 will be used to authorise the cash, and the use of resources during the intervening period.

8. Assurance

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

The Social Care Council's Standing Orders require the setting up of an Audit and Risk Assurance Committee, as directed by HSS (PDD) 8/94 to reassure the Board that financial stewardship and corporate governance standards are being met. The Audit and Risk Assurance Committee maintains and reviews the effectiveness of the system of internal control for the Social Care Council. Full details of the Audit and Risk Assurance Committee, its role, terms of reference, and responsibilities can be found in the Standing Orders.

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

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

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

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

End of Year Assurance

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

Governance Statement

9. Sources of Independent Assurance

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

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

Internal Audit

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

In 2021-22 Internal Audit reviewed the following systems:

- Board Effectiveness, providing a satisfactory assurance.
- Retention of Board/Committee Papers, providing a satisfactory assurance.
- Financial Review, providing a satisfactory assurance.
- Risk Management, providing a satisfactory assurance.
- Information Technology, providing satisfactory assurance.
- Registration, providing a satisfactory assurance.

External Audit

The Financial Statements of the Social Care Council are audited by the Northern Ireland Audit Office (NIAO) and the results of their audit are set out in their Annual Report to those Charged with Governance. A representative from the Northern Ireland Audit Office attends the Social Care Council's Audit and Risk Assurance Committee Meetings. The External Auditor is required to certify, examine and report on each of the Statements comprising the Financial Statements of the organisation. An unqualified audit opinion was provided in 2020-21.

Other Independent Assurances

The Social Care Council was awarded IIP Gold Standard during 2021-22 and was the first HSC organisation to attain the Gold Standard.

An independent review of registration was completed by an associate of the HSC Leadership Centre as part of the return to normal registration processes following the end of the DoH policy on fee deferral. The report has identified a number of recommendations which have now a corresponding action plan in place.

An independent audit of the Social Care Council's Fitness to Practise (FtP) consensual disposal and no further action decisions was completed by Fieldfisher. This was the second independent audit of this nature and is based on the regulation standards set by the Professional Standards Authority. The audit provided the Board with an assurance that the decisions taken by FtP Officers are safe and are sufficient for the protection of the public. A number of areas of good practice were identified and some recommendations for improvement were made. An action plan is in place to address these recommendations.

Governance Statement

10. Review of Effectiveness of the System of Internal Governance

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

11. Internal Governance Divergences

Internal Control Issues Now Resolved 2020/21

Financial pressures for the Social Council remained a concern, with increased activity, in particular, for the Fitness to Practise team. Resources however were secured to support the teams in the delivery of its business.

Internal Control Issues 2021-22

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. These interim arrangements remain in place. The Landscape Review has reported, and a recruitment scheme has commenced to fill the Chief Executive position on a substantive basis during 2022.

In response to COVID the DOH introduced the interim policy decision to defer all registration fees and not to remove anyone from the register. The Social Care Council managed this interim change; however, it had a knock-on effect on fee recovery which resulted in significant pressures for the Registration team and the organisation during 2021-22.

The pressures led to backlogs in email activity and telephone response times. The organisation identified an extreme level risk and brought this to the attention of the Audit and Risk Assurance Committee and the Board. In response, the executive team developed a robust action plan for approval by the Board to address the backlogs and stabilise the work flow activity. This included improved communications, changes to processes, the appointment/re-deployment of staff, and daily monitoring of work flows.

An independent review of registration was also commissioned by an associate of the HSC Leadership Centre as part of the return to normal registration processes following the end of the DoH policy on fee deferral. The report has identified a number of recommendations which have now a corresponding action plan in place.

The collective impact of all these actions enabled the Audit and Risk Assurance Committee to approve the reduction of the level of risk in relation to this issue with normal business services resuming in Quarter 4 of the 2021-22 business year.

A number of audits have been conducted in BSO Shared Services, as part of the BSO Internal Audit Plan, including those for the Payroll Service Centre, Recruitment, Business Services and

Governance Statement

Accounts Payable. Limited Assurance was given in respect of HSC Recruitment Processes and Payroll Shared Services (Timesheets/Overpayments). While these reports are the responsibility of BSO Management to take forward, the Social Care Council will keep these matters under review to ensure they do not adversely impact on the organisation.

A managed service is provided for the HR, Payroll, Travel and Subsistence System (HRPTS) for Health and Social Care NI. This service is provided from servers hosted at data centres owned by a sub-contractor of the managed service supplier. This sub-contractor went into administration on 25 March 2022. By email on 1 April 2022, the supplier providing the managed service informed BSO of the administration. The supplier informed BSO that the sub-contractor will continue to trade as normal while the Administrators are exploring options for the company's future, including re-negotiating contractual terms with its existing customers regarding power costs associated with increasing global supply issues. The supplier has confirmed in writing that the sub-contractor is continuing to operate business as normal, as advised by the Administrator. BSO has invoked its business and technical contingency plans and set up Bronze Command. BSO has met with the Minister, Permanent Secretary, Trade Unions and all stakeholders has been informed of the situation and the contingency plans to address this issue.

With regard to the wider control environment, the Social Care 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 Social Care Council are pursued in accordance with the recognised and accepted standards of public administration.

12. EU Exit

The Social Care Council is working alongside the Department of Health and the other Arms-Length bodies following EU Exit. The Social Care Council is satisfied that it is able to operate its business effectively, however collaborative working with regulators across the UK and Ireland will continue to ensure the maintenance of standards and the right to work in Social Work and Social Care. This includes working with the Department of Health and ROI counterparts to help register ROI Social Workers and Social Care Workers who wish to work in Northern Ireland.

13. Conclusion

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

Further to considering the accountability framework within the Social Care Council and in conjunction with assurances given to me by the Head of Internal Audit, I am content that the Social Care Council has operated a sound system of internal governance during the period 2021-22.

SIGNATURE

Patricia Higgins

Chief Executive, Northern Ireland Social Care Council
DD MM 2023

Corporate Governance Report - Audit and Risk Assurance Committee Report

The Social Care Council's Audit and Risk Assurance Committee is made up of Board Members. The Committee met on the following dates during 2021-22:

- 12 May 2021.
- 16 June 2021.
- 6 October 2021.
- 26 January 2022.

During the 2022-23 financial year, membership of the Audit and Risk Assurance Committee was as follows:

APRIL 2021 – MARCH 2022	ATTENDANCE AT AUDIT and RISK ASSURANCE COMMITTEE (%)
Mr Gerry Guickan	100%
Mrs Brenda Maitland	75%
Ms Jacqui McGarvey	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, also attends when required along with the Director of Registration and Corporate Services, Declan McAllister and the Director of Regulation and Standards, Marian O'Rourke. 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 2022-23 financial year, the Audit and Risk Assurance Committee undertook the following tasks:

FEE DEFERRAL??

- Agreed an Internal Audit Plan.
- Considered an External Audit Strategy.
- Reviewed the Social Care Council's Assurance Framework.
- Reviewed the impact of COVID at each of their meetings and the actions and controls taken to mitigate against this risk.
- Reviewed the impact of the deferral of registration fees including the consequential impact on registration business volumes, and the action taken to bring this risk under control.
- Ensured the production of the Social Care Council's Final Accounts were in accordance with relevant statutory regulations.
- Considered the Social Care Council's mid-year Assurance Statement and Governance Statement.
- Reviewed a number of Internal Audit Reviews of key aspects of the Social Care Council's business during 2021-22.

Audit and Risk Assurance Committee Report

- Considered the NIAO Report to Those Charged with Governance.
- Reviewed the Social Care Council's Procurement Report, including the Contract Register and Direct Award Contract Report for 2021-22.
- Reviewed the Social Care Council's End of Year Assurance Report.

As part of its remit the Audit and Risk Assurance Committee can confirm, on reviewing the processes and related documents in relation to finance, risk, risk registers, governance and audit reports, that it is able to provide assurances to the Board and to the 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, Internal Audit provide written confirmation to the Committee that all reviews performed are in accordance with applicable auditing standards. In doing so, the Chair and the Audit and Risk Assurance Committee present the final Accounts to the Board and the 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 2022-23, based on the information available to it, that:

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

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

Remuneration and Staff Report

Remuneration Report for the year ended 31 March 2022 (Audited)

SCOPE OF THE REPORT

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

REMUNERATION COMMITTEE

The Northern Ireland Social Care Council's Board, as set out in its Standing Orders, has delegated certain functions to the Remuneration Committee, including assessing the performance of Senior Executives and, where permitted by the DoH, agreeing the discretionary level of performance related pay. The Remuneration Committee is chaired by the Chair, Mr Paul Martin. The Remuneration Committee is entirely comprised of Non-Executive Directors, namely, Lee Wilson, Roslyn Doherty and Sarah Brown. The Remuneration Committee met in this form in June 2022.

REMUNERATION POLICY

The salary, pension entitlement and the value of any taxable benefits in kind paid to both Executive and Non-Executive Directors is set out within this Report. None of the Executive or Non-Executive Directors of the Social Care Council received any other bonus or performance related pay in 2021-22.

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

The main components of the arrangements are:

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

SERVICE CONTRACTS

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

Remuneration and Staff Report

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

CHAIR

NAME	POSITION	DATE OF APPOINTMENT
Paul Martin	Chair	1 April 2018

NON-EXECUTIVE DIRECTORS

NAME	POSITION	DATE OF APPOINTMENT
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
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 (<i>substantive position Head of Workforce Development since 1 April 2014</i>)

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.

Remuneration and Staff Report

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 2020-21 or 2021-22.

Remuneration and Staff Report**Remuneration Report****Senior Employees' Remuneration (Audited)**

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

Single total figure of remuneration								
Name	Salary £000s		Benefits in kind (rounded to nearest £100)		Pension Benefits (rounded to nearest £1,000)		Total £000s	
	2021-22	2020-21	2021-22	2020-21	2021-22	2020-21	2021-22	2020-21
Non-Executive Members								
Paul Martin	15-20	15-20	-	-	-	-	15-20	15-20
Lee Wilson	5-10	5-10	-	-	-	-	5-10	5-10
Brenda Maitland	5-10	5-10	-	-	-	-	5-10	5-10
Catherine McPhillips	5-10	5-10	-	-	-	-	5-10	5-10
Anne O'Reilly	5-10	5-10	-	-	-	-	5-10	5-10
Jacqueline McGarvey	5-10	5-10	-	-	-	-	5-10	5-10
David Hayes	5-10	5-10	-	-	-	-	5-10	5-10
Sarah Browne	5-10	5-10	-	-	-	-	5-10	5-10
Gerard Guckian	5-10	5-10	-	-	-	-	5-10	5-10
Noelle Barton**	-	5-10	-	-	-	-	-	5-10
Roslyn Dougherty	5-10	5-10	-	-	-	-	5-10	5-10
Christine Hunter	5-10	5-10	-	-	-	-	5-10	5-10
Neil Bodger*	-	0-2.5	-	-	-	-	-	0-2.5

* Neil Bodger last day of service was 31/07/20.

** Noelle Barton last day of service was 31/03/21.

Remuneration and Staff Report**Senior Employees' Remuneration (Audited)**

Name	Salary £000s		Benefits in kind (rounded to nearest £100)		Pension Benefits (rounded to nearest £1,000)		Total £000s	
	2021-22	2020-21	2021-22	2020-21	2021-22	2020-21	2021-22	2020-21
Executive Members								
Patricia Higgins	75-80	75-80	-	-	9	1	85-90	75-80
Declan McAllister	75-80	70-80	-	-	48	34	120-125	105-110
Marian O'Rourke	70-75	65-70	-	-	41	23	110-115	90-95

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 2021-22 or in 2020/21.

Pensions of Senior Management (Audited)

Name	Accrued pension at pension age as at 31/3/22 and related lump sum £000	Real increase in pension and related lump sum at pension age £000	CETV at 31/03/22 £000	CETV at 31/03/21 £000	Real increase in CETV £000
Patricia Higgins	25-30 Plus lump sum 80-85	0-2.5 Plus lump sum of 2.5-5	661	651	10
Declan McAllister	20-25 Plus lump sum 50-55	2.5-5 Plus lump sum of 2.5-5	504	446	46
Marian O'Rourke	15-20 Plus lump sum of 0-2.5	2.5-5 Plus lump sum of 0-2.5	309	261	41

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

Remuneration and Staff Report

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

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

*Disclosure	2021-22	2020-21
Band of the Highest Paid Director's Total Remuneration	75-80	75-80
25 th Percentile Total Remuneration	21,776	21,142
Median Total Remuneration	32,306	31,365
75 th Percentile Total Remuneration	42,121	45,753
Ratio (25%/Median/75%)	3.6/2.43/1.86	3.6/2.43/1.66

*Agency staff are not included in the fair pay disclosure calculations.

Remuneration and Staff Report

The banded remuneration of the highest-paid director in the Social Care Council in the financial year 2021-22 was £75-80k (2021; £75-80k) which was:

- 3.6 times (2021; 3.6) the 25th percentile remuneration of the workforce, which was £21,776 (2021; £21,142).
- 2.43 times (2021; 2.43) the median remuneration of the workforce, which was £32,306 (2021; £31,365).
- 1.86 times (2021; 1.66) the 75th percentile remuneration of the workforce, which was £42,121 (2021; £45,753). The 75th percentile for 2021-22 reduced compared to the previous year due to a number of retirements of senior level staff at Band 8 in year.

In 2021-22, 0 (2020-21; 0) employees received remuneration in excess of the highest-paid director. Remuneration ranged from £20,329 to £78,367 (2021: £19,337 to £76,085). Total remuneration includes salary, non-consolidated performance-related pay, and benefits-in kind. The percentage change in remuneration in respect of the Social Care Council are shown in the following table:

Disclosure	2021-22 Vs 2020-21
*Average employee salary and allowances	3.00%
Highest paid director's salary and allowances	3.00%

*Average pay has increased in line with Pay awards actioned by DoH FY21/22.

No performance payments or bonuses were payable to Social Care Council employees in these years.

Staff Report for the year ended 31 March 2022

Staff recruitment, employment, terms and conditions are managed through a service-level agreement with the Business Services Organisation. Appointments are made on the HSC 'Agenda for Change' pay bands. Changes to staff policies, terms or conditions are consulted on and developed in collaboration with staff-side organisations and unions (Joint Negotiating Forum). The Social Care Council has an Equal Opportunity Policy in place that covers all aspects of equality within employment, including the obligations of the organisation under disability discrimination legislation and protecting the rights and interests of Section 75 groups. Details of staff engagement and equality initiatives are included on page 47 of this report.

Training and Development

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

Remuneration and Staff Report

The cumulative sickness and absenteeism rate for the Social Care Council for 2021-22 was 3.79% which was marginally above the Northern Ireland Social Care Council's corporate target to maintain absences at a maximum of 3.5%. (2020-21 cumulative absence 3.4%).

Staff Composition

At 31 March 2022, 68 people worked for the Social Care Council. 51 people were employed on permanent contracts, 6 of whom worked part-time. 8 people were employed on temporary/fixed term contracts and 9 were engaged temporarily as agency workers. 13% of contracted staff work part-time or a form of compressed hours. Total staff engaged was equivalent to 62 WTE staff.

Turnover rates for permanent staff was 5.94% in 2021-22 (5.88% in 2020-21).

The composition of the workforce is set out below –

Staff composition by pay band (contracted staff):

Pay Band	% of Workforce	Number of Staff
Band 3	26%	15
Band's 4/6	49%	29
Band's 7/8	20%	12
SLT	5%	3

Staff composition by function (contracted Staff):

Function	% of Workforce
Registration	26%
Workforce Development (includes PiP)	25%
Fitness to Practise	18%
Business Support	9.5%
Database	6.5%
Communications	5%
Committee	5%
SLT	5%

Staff composition by gender (permanent staff only):

Pay Band (Contracted Staff)	Male		Female	
	Number	%	Number	%
Band 3	50%	6	50%	6
Band's 4/6	30%	7	70%	16
Band's 7/8	23%	3	77%	10
SLT	33%	1	67%	2
Overall (Permanent Staff)	33%	17	67%	34

Remuneration and Staff Report**Staff Report****Staff Numbers and Related Costs (Audited)**

Staff Costs

	2022		2021	
	Permanently employed staff £	Others £	Total £	Total £
Staff costs comprise:				
Wages and salaries	2,147,074	246,724	2,393,798	2,319,943
Social security costs	216,554	-	216,554	189,279
Other pension costs	412,626	-	412,626	385,710
Sub-Total	2,776,254	246,724	3,022,978	2,894,932
Capitalised staff costs	-	-	-	-
Total staff costs reported in Statement of Comprehensive Expenditure			3,022,978	2,894,932
Less recoveries in respect of outward secondments			-	-
Total net costs			3,022,978	2,894,932

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

As per the requirements of IAS 19, full actuarial valuations by a professionally qualified actuary are required at intervals not exceeding four years. The actuary reviews the most recent actuarial valuation 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 2021-22 accounts.

The Working Time (Coronavirus) (Amendment) Regulations (Northern Ireland) 2020 came into operation on 24 April 2020 and allows those workers who are unable to take annual leave as result of the pandemic to carry over up to four weeks' annual leave into the next two leave years. Any exemption will apply only to circumstances where workers are unable to take their leave as a result of the outbreak, and carryover of annual leave will be limited to the next two leave years. Requests to carry over leave under the regulations have been assessed departmental managers and accruals accounted for in the final expenditure.

Remuneration and Staff Report**Staff Report - Average number of persons employed (Audited)**

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

	2022		2021	
	Permanently employed staff No.	Others No.	Total No.	Total No.
Administrative and clerical	41*	6	47	46
Social Services	13	2	15	13
Total average number of persons employed	54	8	62	59
Less average staff number relating to capitalised staff costs			-	-
Less average staff number in respect of outward secondments			-	-
Total net average number of persons employed			62	59

The staff numbers disclosed as 'Others' in 2021-22 relate to temporary members of staff.

*Financial Year 21-22 staff numbers exclude 11 Non Executive members.

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

Exit package cost band	Number of compulsory redundancies		Number of other departures agreed		Total number of packages by cost band	
	2022	2021	2022	2021	2022	2021
<£10,000	-	-	-	-	-	-
£10,000-£25,000	-	-	-	-	-	-
£25,000-£50,000	-	-	-	-	-	-
£50,000-£100,000	-	-	-	-	-	-
£100,000-£150,000	-	-	-	-	-	-
£150,000-£200,000	-	-	-	-	-	-
>£200,000	-	-	-	-	-	-
Total number of exit packages by type	-	-	-	-	-	-
	£	£	£	£	£	£
Total resource cost	-	-	-	-	-	-

Remuneration and Staff Report

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

The table above shows the total exit cost of exit packages agreed and accounted for in 2021-22 and 2020-21. £nil exit costs were paid in 2021-22, the year of departure (2020-21 £nil). Where the Northern Ireland Social Care Council has agreed early retirements, the additional costs are met by the Northern Ireland Social Care Council and not by the HSC pension scheme. Ill health retirement costs are met by the pension scheme and are not included in the table.

Consultancy

The Social Care Council has not engaged any consultants over the period.

Off Payroll engagements

There were no off payroll engagements during the year 2021-22.

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

SIGNATURE

Patricia Higgins,
Chief Executive, Northern Ireland Social Care Council

Date: DD MM 2023

Section 3: Accountability and Audit Report

Accountability Report - Assembly Disclosure Notes

i) Losses and Special Payments (Audited)

Losses statement	2021-22		2020-21	
	Number of Cases	£000	£000	£000
Total number of losses	-	-	-	-
Total value of losses	-	-	-	-

Individual losses over £250,000	2021-22		2020-21	
	Number of Cases	£	£	£
Cash losses	-	-	-	-
Claims abandoned	-	-	-	-
Administrative write-offs	-	-	-	-
Fruitless payments	-	-	-	-
Stores losses	-	-	-	-

Special payments	2021-22		2020-21	
	Number of Cases	£000	£000	£000
Total number of special payments	-	-	-	-
Total value of special payments	-	-	-	-

Special Payments over £250,000	2021-22		2020-21	
	Number of Cases	£	£	£
Compensation payments				
- Clinical Negligence	-	-	-	-
- Public Liability	-	-	-	-
- Employers Liability	-	-	-	-
- Other	-	-	-	-
Ex-gratia payments	-	-	-	-
Extra contractual	-	-	-	-
Special severance payments	-	-	-	-
Total special payments	-	-	-	-

ii) Fees and Charges (Audited)

There were no other fees and charges during the year.

i.

iii) Remote Contingent Liabilities (Audited)

In addition to contingent liabilities reported within the meaning of IAS37, the NISCC also reports liabilities for which the likelihood of a transfer of economic benefit in settlement is too remote to meet the definition of contingent liability. The NISCC had no remote contingent liabilities.

iv) Charitable Donations (Audited)

The Northern Ireland Social Care Council did not make any charitable donations during the year and there were no personal data related incidents requiring disclosure.

Regularity

In 2022-23 mechanisms were maintained in order to assure the Department of Health and the public of the effective performance of the Council in delivering its functions. The Accounting Officer provides assurance that all income and expenditure is in line with the principles of propriety and regularity as set out in Managing Public Money published by 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.

SIGNATURE

Patricia Higgins,
Chief Executive, Northern Ireland Social Care Council
Date: DD MM 2023

NORTHERN IRELAND SOCIAL CARE COUNCIL

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

HOLD PAGES FOR NEW REPORT

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 2022 under the Health and Personal Social Services Act (Northern Ireland) 2001. The financial statements comprise: the Statements of Comprehensive Net Expenditure, Financial Position, Cash Flows, Changes in Taxpayers' Equity; and the related notes including significant accounting policies.

The financial reporting framework that has been applied in their preparation is applicable law and UK adopted international accounting standards as interpreted and adapted by the Government Financial Reporting Manual.

I have also audited the information in the Accountability Report that is described in that report as having been audited.

In my opinion the financial statements:

- give a true and fair view of the state of Northern Ireland Social Care Council's affairs as at 31 March 2022 and of 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) 2001 and Department of Health directions issued thereunder.

Emphasis of Matter

I draw attention to Note 4.3 of the financial statements, which explains the increase in deferred income to £370k in 2021-22 (£6k in 2020-21). This was due to a refinement of the deferred income estimation process and the absence of the difficulties in estimating the 2020-21 balance arising from the COVID-19 pandemic, including the temporary waiver of registration fees; volatility of registrant numbers; and registrants often paying later than the date due. My opinion is not modified in respect of this matter.

Opinion on regularity

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

Basis for opinions

I conducted my audit in accordance with International Standards on Auditing (ISAs) (UK), applicable law and Practice Note 10 'Audit of Financial Statements and Regularity of Public Sector Bodies in the United Kingdom'. My responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of this certificate. My staff and I are independent of Northern Ireland Social Care Council in accordance with the ethical requirements that are relevant to my audit of the financial statements in the UK, including the Financial Reporting Council's Ethical Standard, and have fulfilled our other ethical responsibilities in accordance with these requirements. I believe that the audit evidence obtained is sufficient and appropriate to provide a basis for my opinions.

Conclusions relating to going concern

In auditing the financial statements, I have concluded that Northern Ireland Social Care Council's use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

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

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

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

Other Information

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

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

I have nothing to report in this regard.

Opinion on other matters

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

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

Matters on which I report by exception

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

- adequate accounting records have not been kept; or

- the financial statements and the parts of the Accountability Report to be audited are not in agreement with the accounting records; or
- certain disclosures of remuneration specified by the Government Financial Reporting Manual are not made; or
- 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.

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 in accordance with the applicable financial reporting framework and for being satisfied that they give a true and fair view;
- such internal controls as the Accounting Officer determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error;
- assessing the Northern Ireland Social Care Council's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Accounting Officer anticipates that the services provided by Northern Ireland Social Care Council will not continue to be provided in the future.

Auditor's responsibilities for the audit of the financial statements

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

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

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

My procedures included:

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

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

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

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

Report

I have no observations to make on these financial statements.

NORTHERN IRELAND SOCIAL CARE COUNCIL

ACCOUNTS FOR THE YEAR ENDED 31 March 2023

FOREWORD

The accounts for the year ended 31 March 2023 have been prepared in a form determined by the Department of Health based on guidance from the Department of Finance Financial Reporting manual (FRM) and in accordance with the requirements of the Health and Social Care (Reform) Act (Northern Ireland) 2009.

CERTIFICATE OF THE CHAIRMAN AND CHIEF EXECUTIVE

I certify that the annual accounts set out in the financial statements and notes to the accounts (pages 89-118) which I am required to prepare on behalf of the Northern Ireland Social Care Council have been compiled from and are in accordance with the accounts and financial records maintained by the Northern Ireland Social Care Council and with the accounting standards and policies for HSC bodies approved by the DoH.

Chief Executive

Date: DD MM 2023

I certify that the annual accounts set out in the financial statements and notes to the accounts (pages 89-118) as prepared in accordance with the above requirements have been submitted to and duly approved by the Board.

Chairman

Date: DD MM 2023

Chief Executive

Date: DD MM 2023

**NORTHERN IRELAND SOCIAL CARE COUNCIL
ACCOUNTS FOR THE YEAR ENDED 31 March 2023**

STATEMENT of COMPREHENSIVE NET EXPENDITURE for the year ended 31 March 2023

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	2022 £	2021 £
Revenue from contracts with customers	4.1	1,280,742	1,196,149
Other Income (Excluding interest)	4.2	-	-
Deferred income	4.3	-	-
Total operating income		1,280,742	1,196,149
Expenditure			
Staff costs	3	(3,022,978)	(2,894,932)
Purchase of goods and services	3	(18,747)	(10,567)
Depreciation, amortisation and impairment charges	3	(129,393)	(123,717)
Provision expense	3	-	0
Other expenditure	3	(2,147,160)	(2,186,955)
Total operating expenditure		(5,318,278)	(5,216,171)
Net Expenditure		(4,037,536)	(4,020,022)
Finance income	4.2	-	-
Finance expense	3	-	-
Net expenditure for the year		(4,037,536)	(4,020,022)
Revenue Resource Limit (RRL) received from DoH	22.1	4,044,549	4,031,193
Surplus/(Deficit) against RRL		7,013	11,171
OTHER COMPREHENSIVE EXPENDITURE			
	NOTE	2022 £	2021 £
Items that will not be reclassified to net operating costs:			
Net gain/(loss) on revaluation of property, plant and equipment	5.1/8/5.2/9	-	-
Net gain/(loss) on revaluation of intangibles	6.1/8/6.2/9	(3,064)	(504)
Net gain/(loss) on revaluation of financial instruments	7/9	-	-
Items that may be reclassified to net operating costs:			
Net gain/(loss) on revaluation of investments		-	-
TOTAL COMPREHENSIVE EXPENDITURE for the year ended 31 March 2022		(4,040,600)	(4,020,526)

The notes on pages 89-118 part of these accounts.

STATEMENT of FINANCIAL POSITION as at 31 March 2022

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

	NOTE	2022		2021	
		£	£	£	£
Non Current Assets					
Property, plant and equipment	5.1/5.2	79,403		81,674	
Intangible assets	6.1/6.2	258,583		348,958	
Financial assets	7	-		-	
Trade and other receivables	13	-		-	
Other current assets	13	-		-	
Total Non Current Assets			337,986		430,632
Current Assets					
Assets classified as held for sale	10	-		-	
Inventories	11	-		-	
Trade and other receivables	13	14,799		2,107	
Other current assets	13	74,985		67,869	
Intangible current assets	13	-		-	
Financial assets	7	-		-	
Cash and cash equivalents	12	141,766		92,558	
Total Current Assets			231,550		162,534
Total Assets			569,536		593,166
Current Liabilities					
Trade and other payables	14	(1,462,855)		(1,132,428)	
Other liabilities	14	-		-	
Intangible current liabilities	14	-		-	
Financial liabilities	7	-		-	
Provisions	15	-		-	
Total Current Liabilities			(1,462,855)		(1,132,428)
Total assets less current liabilities			(893,319)		(539,262)
Non Current Liabilities					
Provisions	15	-		-	
Other payables > 1 yr	14	-		-	
Financial liabilities	7	-		-	
Total Non Current Liabilities			-		-
Total assets less total liabilities			(893,319)		(539,262)
Taxpayers' Equity and other reserves					
Revaluation Reserve		33,007		36,071	
SoCNE Reserve		(926,326)		(575,333)	
Total equity			(893,319)		(539,262)

The financial statements on pages 89-118 were approved by the Board on 08 July 2022 and were signed on its behalf by:

Signed _____ (Chief Executive) Date _____
 Signed _____ (Chairman) Date _____

NORTHERN IRELAND SOCIAL CARE COUNCIL
ACCOUNTS FOR THE YEAR ENDED 31 March 2023

STATEMENT of CASH FLOWS for the year ended 31 March 2022

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

	NOTE	2022 £	2021 £
Cash flows from operating activities			
Net surplus after interest/Net operating expenditure		(4,037,536)	(4,020,022)
Adjustments for non cash costs	3	159,143	141,225
(Increase)/decrease in trade and other receivables		(19,808)	10,937
<i>Less movements in receivables relating to items not passing through the NEA</i>			
Movements in receivables relating to the sale of property, plant and equipment		-	-
Movements in receivables relating to the sale of intangibles		-	-
Movements in receivables relating to finance leases		-	-
Movements in receivables relating to PFI and other service concession arrangement contracts		-	-
(Increase)/decrease in inventories		-	-
Increase/(decrease) in trade payables		330,427	258,441
<i>Less movements in payables relating to items not passing through the NEA</i>			
Movements in payables relating to the purchase of property, plant and equipment		24,499	(7,074)
Movements in payables relating to the purchase of intangibles		-	-
Movements in payables relating to finance leases		-	-
Movements on payables relating to PFI and other service concession arrangement contracts		-	-
Use of provisions	15	-	-
Net cash inflow/(outflow) from operating activities		(3,543,275)	(3,616,493)
Cash flows from investing activities			
(Purchase of property, plant and equipment)	5	(52,311)	(17,425)
(Purchase of intangible assets)	6	(11,999)	(25,000)
Proceeds of disposal of property, plant and equipment		-	-
Proceeds on disposal of intangibles		-	-
Proceeds on disposal of assets held for resale		-	-
Net cash outflow from investing activities		(64,310)	(42,425)
Cash flows from financing activities			
Grant in aid		3,656,793	3,481,465
Cap element of payments - finance leases and on balance sheet (SoFP) PFI and other service concession arrangements		-	-
Net financing		3,656,793	3,481,465
Net increase (decrease) in cash and cash equivalents in the period		49,208	(177,453)
Cash and cash equivalents at the beginning of the period	12	92,558	270,011
Cash and cash equivalents at the end of the period	12	141,766	92,558

The notes on pages 89-118 form part of these accounts.

**NORTHERN IRELAND SOCIAL CARE COUNCIL
ACCOUNTS FOR THE YEAR ENDED 31 March 2023**

STATEMENT of CHANGES in TAXPAYERS EQUITY for the year ended 31 March 2022

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

	NOTE	SoCNE Reserve £	Revaluation Reserve £	Total £
Balance at 31 March 2020		(53,676)	36,575	(17,101)
Changes in Taxpayers Equity 2020-21				
Grant from DoH		3,481,465	-	3,481,465
Other reserves including transfers			-	-
(Comprehensive net expenditure for the year)		(4,020,022)	(504)	(4,020,526)
Transfer of Asset Ownership				-
Non cash charges – auditors remuneration	3	16,900	-	16,900
Balance at 31 March 2021		(575,333)	36,071	(539,262)
Changes in Taxpayers Equity 2021-22				
Grant from DoH		3,656,793	-	3,656,793
Other reserves movements including transfers			-	-
(Comprehensive net expenditure for the year)		(4,037,536)	(3,064)	(4,040,600)
Transfer of asset ownership				-
Non cash charges – auditors remuneration	3	29,750	-	29,750
Balance at 31 March 2022		(926,326)	33,007	(893, 319)

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022
STATEMENT OF ACCOUNTING POLICIES

1. Authority

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

The accounting policies follow IFRS to the extent that it is meaningful and appropriate to the Northern Ireland Social Care 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 Northern Ireland Social Care Council for the purpose of giving a true and fair view has been selected. The Northern Ireland Social Care Council's accounting policies have been applied consistently in dealing with items considered material in relation to the accounts, unless otherwise stated.

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

1.1 Accounting convention

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

1.2 Property, Plant and Equipment

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

Recognition

Property, plant and equipment must be capitalised if:

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

**NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022
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

Northern Ireland Social Care Council did not own any Land and Building in the current 2021-22 financial year, or in the 2020-21 financial year.

Modern Equivalent Asset

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

Assets Under Construction (AUC)

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

Short Life Assets

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

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

Revaluation Reserve

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

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022 STATEMENT OF ACCOUNTING POLICIES

1.3 Depreciation

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

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

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

Impairment loss

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

1.4 Subsequent expenditure

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

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022
STATEMENT OF ACCOUNTING POLICIES

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

1.5 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 non-current asset. Internally-generated assets are recognised if, and only if, all of the following have been demonstrated:

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

Recognition

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

Intangible assets acquired separately are initially recognised at fair value.

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

1.6 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 through appropriate marketing at a reasonable price 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.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022
STATEMENT OF ACCOUNTING POLICIES

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.

1.7 Inventories

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

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

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

Income is stated net of VAT.

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

- One off fees - One off fees comprise application, renewal and restoration fees. These fees are paid at the point of application, renewal or restoration and are non-refundable and are accounted for in full on receipt.
- Annual fees - Annual fees are due annually on the date the registrant was confirmed to the register. They are collected in advance, are non-refundable and are apportioned over the year the annual fee covers.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022
STATEMENT OF ACCOUNTING POLICIES

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

Deferred registration fee income that is recognised within the statement of financial position relates to the following financial year only and is recognised as a current liability.

1.9 Grant in aid

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

1.10 Investments

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

1.11 Research and Development expenditure

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

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

1.12 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.

1.13 Leases

IFRS 16 Leases replaces IAS 17 Leases and is effective with EU adoption from 1 January 2020. 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 2022.

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 Northern Ireland Social Care 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 Northern Ireland Social Care Council's surplus/deficit.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022
STATEMENT OF ACCOUNTING POLICIES

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.

The Northern Ireland Social Care Council as lessor

Amounts due from lessees under finance leases are recorded as receivables at the amount of the Northern Ireland Social Care 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 Northern Ireland Social Care 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.

1.14 Private Finance Initiative (PFI) transactions

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

1.15 Financial instruments

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

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

- **Financial assets**

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

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

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022
STATEMENT OF ACCOUNTING POLICIES

Financial assets are classified into the following categories:

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

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

• Financial liabilities

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

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 Northern Ireland Social Care Council in creating risk than would apply to a non-public sector body of a similar size, therefore the Northern Ireland Social Care Council is not exposed to the degree of financial risk faced by business entities.

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

• Currency risk

The Northern Ireland Social Care Council is principally a domestic organisation with the great majority of transactions, assets and liabilities being in the UK and Sterling based. Northern Ireland Social Care Council has no overseas operations. The Northern Ireland Social Care Council therefore has low exposure to currency rate fluctuations.

• Interest rate risk

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

• Credit risk

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

• Liquidity risk

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

**NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022
STATEMENT OF ACCOUNTING POLICIES**

1.16 Provisions

The Northern Ireland Social Care Council had no provisions at either 31 March 2022 or 31 March 2021.

1.17 Contingent liabilities/assets

The Northern Ireland Social Care Council had no contingent assets or liabilities at either 31 March 2022 or 31 March 2021.

1.18 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 estimated using average staff numbers and costs applied to the average untaken leave balance determined from the results of a survey to ascertain leave balances as at 31 March 2022. It is not anticipated that the level of untaken leave will vary significantly from year to year. However, during the 2021-22 financial year the unused annual leave balances and therefore the cost of unused leave accounted for increased due to COVID pressures resulting in staff being unable to take planned leave. To ensure staff didn't lose annual leave during the 2021-22 year, key workers were granted permission to carry over additional unused leave above the usual maximum of 5 days, to be taken within the next 2 financial years. The Northern Ireland Social Care Council's staff have key worker status and thus were able to avail of this. Untaken flexi leave is estimated to be immaterial to the Northern Ireland Social Care Council and has not been included.

Retirement benefit costs

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

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

As per the requirements of IAS 19, full actuarial valuations by a professionally qualified actuary are required with sufficient regularity that the amounts recognised in the financial statements do not differ materially from those determined at the reporting period date. This has been interpreted in the FReM to mean that the period between formal actuarial valuations shall be four years. The actuary reviews the most recent actuarial valuation at the statement of financial position date and updates it to reflect current conditions. The scheme valuation data provided for the 2020 actuarial valuation that is currently underway will be used in the 2021-22 accounts. The 2016 valuation assumptions are retained for demographics whilst financial assumptions are updated to reflect current financial conditions and a change in financial assumption methodology. The 2016 valuation is the most recently completed valuation, since the 2020 valuation is ongoing which is why the demographics assumptions are not updated.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022
STATEMENT OF ACCOUNTING POLICIES

1.19 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.

1.20 Third party assets

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

1.21 Government Grants

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

1.22 Losses and Special Payments

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

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

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

1.23 Charitable Trust Account Consolidation

Northern Ireland Social Care Council held no charitable trust accounts at 31 March 2022 or 31 March 2021.

1.24 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.

The International Accounting Standards Board have issued the following new standards but which are either not yet effective or adopted. Under IAS 8 there is a requirement to disclose these standards together with an assessment of their initial impact on application.

IFRS10 Consolidated Financial Statements, IFRS 11 Joint Arrangements, IFRS 12 Disclosure of interests in Other Entities:

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022
STATEMENT OF ACCOUNTING POLICIES

The IASB have issued new and amended standards (IFRS 10, IFRS 11 and 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 Office of National Statistics (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 2016. With effect from 2022-23, the accounting boundary for departments will change and there will also be an impact on departments around the disclosure requirements under IFRS 12. Northern Ireland Social Care Council applies IFRS in full and their consolidation boundary may change as a result of the new Standards.

IFRS 16 Leases

IFRS 16 is effective from 1 April 2022 and has the effect of largely eliminating the current 'off-balance sheet' treatment of operating leases under IAS 17. A lessee is now required to recognise a "right-of-use" asset (the right to use the leased item) and a financial liability for any operating leases where the term is greater than 12 months, excluding those where the associated right-of-use asset is of low value.

The Social Care Council has set the low value financial threshold at £5k and from the lease agreement can determine the non-cancellable periods for which the Social Care Council has the right to use the underlying asset. One key consideration is calculating the implicit interest rate within the lease agreement.

Based on the Social Care Council's review to date of operating leases associated with buildings, equipment and other assets there is likely to be minimal financial impact on the 22/23 financial statements."

IFRS 17 Insurance Contracts:

IFRS 17 Insurance Contracts will replace IFRS 4 Insurance Contracts and is effective for accounting periods beginning on or after 1 January 2023. In line with the requirements of the FReM, IFRS 17 will be implemented, as interpreted and adapted for the public sector, with effect from 1 April 2023.

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.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022
NOTE 2 ANALYSIS OF NET EXPENDITURE BY SEGMENT

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

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

**NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH
2022**

NOTE 3 EXPENDITURE

	2022	2021
	£	£
Operating expenses are as follows:-		
Staff costs: ¹		
Wages and Salaries	2,393,798	2,319,943
Social security costs	216,554	189,279
Other pension costs	412,626	385,710
Revenue grants to voluntary organisations	404,521	452,559
Supplies and services – general	18,747	10,567
Establishment	548,067	525,543
Transport	-	-
Premises	332,470	540,285
Rentals under operating leases	315,918	315,059
Miscellaneous	271,708	114,782
BSO Services	244,726	221,219
Total Operating Expenses	5,159,135	5,074,946
Non cash items		
Depreciation	30,083	29,052
Amortisation	99,310	94,665
Impairments	-	-
(Profit) on disposal of property, plant and equipment (including land)	-	-
(Profit) on disposal of intangibles	-	-
Loss on disposal of property, plant and equipment (including land)	-	608
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	29,750	16,900
Total non cash items	159,143	141,225
Total	5,318,278	5,216,171

During the year the Northern Ireland Social Care Council purchased no non audit services from its external auditor (NIAO) (2020-21: £1,250)

¹ Further detailed analysis of staff costs is located in the Staff Report on page70 within the Accountability Report.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022

NOTE 4 INCOME

4.1 Revenue from Contracts with Customers

	2022	2021
	£	£
Other income from non-patient services	1,280,742	1,196,149
Seconded staff	-	-
Charitable and other contributions to expenditure	-	-
Donations / Government Grant / Lottery Funding for non-current assets	-	-
Profit on disposal of land	-	-
Interest receivable	-	-
Total Revenue from Contracts with Customers	1,280,742	1,196,149

4.2 Other Operating Income

	2022	2021
	£	£
Other income from non-patient services	-	-
Total Other Operating Income	-	-
Total Income	1,280,742	1,196,149

4.3 Deferred Income

The Northern Ireland Social Care Council had no income released from conditional grants in 2021-22 and 2020-21.

The higher value of deferred income at the end of March 2022 is as a result of an improvement in data management and refining the calculation. The deferred income amounts for both years is referenced at note 14. The estimation of the 2020-21 deferred income calculation was directly impacted by issues arising from COVID whereby:

- There was a temporary waiver of registration fees
- Greater volatility of registrant numbers compared to 2022
- Registrants often paying later than due date

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022

NOTE 5.1 Property, plant and equipment - year ended 31 March 2022

	Land	Buildings (excluding dwellings)	Dwellings	Assets under Construction	Plant and Machinery (Equipment)	Transport Equipment	Information Technology (IT)	Furniture and Fittings	Total
	£	£	£	£	£	£	£	£	£
Cost or Valuation									
At 1 April 2021	-	-	-	-	6,410	-	232,749	-	239,159
Indexation	-	-	-	-	-	-	-	-	-
Additions	-	-	-	-	-	-	27,812	-	27,812
Donations / Government grant / Lottery Funding	-	-	-	-	-	-	-	-	-
Reclassifications	-	-	-	-	-	-	-	-	-
Transfers	-	-	-	-	-	-	-	-	-
Revaluation	-	-	-	-	-	-	-	-	-
Impairment charged to the SoCNE	-	-	-	-	-	-	-	-	-
Impairment charged to revaluation reserve	-	-	-	-	-	-	-	-	-
Reversal of impairments (indexn)	-	-	-	-	-	-	-	-	-
Disposals	-	-	-	-	-	-	(48,909)	-	(48,909)
At 31 March 2022	-	-	-	-	6,410	-	211,652	-	218,062

Depreciation

At 1 April 2021	-	-	-	-	6,410	-	151,075	-	157,485
Indexation	-	-	-	-	-	-	-	-	-
Reclassifications	-	-	-	-	-	-	-	-	-
Transfers	-	-	-	-	-	-	-	-	-
Revaluation	-	-	-	-	-	-	-	-	-
Impairment charged to the SoCNE	-	-	-	-	-	-	-	-	-
Impairment charged to the revaluation reserve	-	-	-	-	-	-	-	-	-
Reversal of impairments (indexn)	-	-	-	-	-	-	-	-	-
Disposals	-	-	-	-	-	-	(48,909)	-	(48,909)
Provided during the year	-	-	-	-	-	-	30,083	-	30,083
At 31 March 2022	-	-	-	-	6,410	-	132,249	-	138,659

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022

NOTE 5.1 (continued) Property, plant and equipment - year ended 31 March 2022

	Land £	Buildings (excluding dwellings) £	Dwellings £	Assets under Construction £	Plant and Machinery (Equipment) £	Transport Equipment £	Information Technology (IT) £	Furniture and Fittings £	Total £
Carrying Amount At 31 March 2022	-	-	-	-	-	-	79,403		79,403
At 31 March 2021	-	-	-	-	-	-	81,674		81,674

Asset financing

Owned	-	-	-	-	-	-	79,403		79,403
Finance leased	-	-	-	-	-	-	-	-	-
On B/S (SoFP) PFI and other service concession arrangements contracts	-	-	-	-	-	-	-	-	-
Carrying Amount At 31 March 2022	-	-	-	-	-	-	79,403		79,403

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 (2021: £Nil).

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

	2022 £	2021 £
Donations	-	-
Government Grant	-	-
Lottery Funding	-	-

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022

NOTE 5.2 Property, plant and equipment - year ended 31 March 2021

	Land £	Buildings (excluding dwellings) £	Dwellings £	Assets under Construction £	Plant and Machinery (Equipment) £	Transport Equipment £	Information Technology (IT) £	Furniture and Fittings £	Total £
Cost or Valuation									
At 1 April 2020	-	-	-	-	6,410	-	213,882	-	220,292
Indexation	-	-	-	-	-	-	-	-	-
Additions	-	-	-	-	-	-	24,499	-	24,499
Donations / Government grant / Lottery Funding	-	-	-	-	-	-	-	-	-
Reclassifications	-	-	-	-	-	-	-	-	-
Transfers	-	-	-	-	-	-	-	-	-
Revaluation	-	-	-	-	-	-	-	-	-
Impairment charged to the SoCNE	-	-	-	-	-	-	-	-	-
Impairment charged to revaluation reserve	-	-	-	-	-	-	-	-	-
Reversal of impairments (indexn)	-	-	-	-	-	-	-	-	-
Disposals	-	-	-	-	-	-	(5,632)	-	(5,632)
At 31 March 2021	-	-	-	-	6,410	-	232,749	-	239,159

Depreciation

At 1 April 2020	-	-	-	-	6,410	-	127,047	-	133,457
Indexation	-	-	-	-	-	-	-	-	-
Reclassifications	-	-	-	-	-	-	-	-	-
Transfers	-	-	-	-	-	-	-	-	-
Revaluation	-	-	-	-	-	-	-	-	-
Impairment charged to the SoCNE	-	-	-	-	-	-	-	-	-
Impairment charged to the revaluation reserve	-	-	-	-	-	-	-	-	-
Reversal of impairments (indexn)	-	-	-	-	-	-	-	-	-
Disposals	-	-	-	-	-	-	(5,024)	-	(5,024)
Provided during the year	-	-	-	-	-	-	29,052	-	29,052
At 31 March 2021	-	-	-	-	6,410	-	151,075	-	157,485

**NORTHERN IRELAND SOCIAL CARE COUNCIL
ACCOUNTS FOR THE YEAR ENDED 31 March 2023**

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022

NOTE 5.2 (continued) Property, Plant and Equipment- year ended 31 March 2021

	Land £	Buildings (excluding dwellings) £	Dwellings £	Assets under Construction £	Plant and Machinery (Equipment) £	Transport Equipment £	Information Technology (IT) £	Furniture and Fittings £	Total £
Carrying Amount At 31 March 2021	-	-	-	-	-	-	81,674	-	81,674
At 1 April 2020	-	-	-	-	-	-	86,835	-	86,835

Asset financing

Owned	-	-	-	-	-	-	81,674	-	81,674
Finance leased	-	-	-	-	-	-	-	-	-
On SOFP PFI and other service concession arrangements contracts	-	-	-	-	-	-	-	-	-
Carrying Amount At 31 March 2021	-	-	-	-	-	-	81,674	-	81,674

Asset financing

Owned	-	-	-	-	-	-	86,835	-	86,835
Finance leased	-	-	-	-	-	-	-	-	-
On SOFP PFI and other service concession arrangements contracts	-	-	-	-	-	-	-	-	-
Carrying Amount At 1 April 2020	-	-	-	-	-	-	86,835	-	86,835

NORTHERN IRELAND SOCIAL CARE COUNCIL

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022

NOTE 6.1 Intangible assets- year ended 31 March 2022

	Software Licenses £	Information Technology £	Websites £	Development Expenditure £	Licences, Trademarks and Artistic Originals £	Patents £	Goodwill £	Payments on Account and Assets under Construction £	Total £
Cost or Valuation									
At 1 April 2021	59,944	1,119,841	-	-	-	-	-	1	1,179,786
Indexation	(627)	(13,759)	-	-	-	-	-	-	(14,386)
Additions	11,999	-	-	-	-	-	-	-	11,999
Donations / Government grant / Lottery Funding	-	-	-	-	-	-	-	-	-
Reclassifications	-	-	-	-	-	-	-	-	-
Transfers	-	-	-	-	-	-	-	-	-
Revaluation	-	-	-	-	-	-	-	-	-
Impairment charged to the SoCNE	-	-	-	-	-	-	-	-	-
Impairment charged to revaluation reserve	-	-	-	-	-	-	-	-	-
Disposals	-	-	-	-	-	-	-	-	-
At 31 March 2022	71,316	1,106,082	-	-	-	-	-	1	1,177,399

Amortisation

At 1 April 2021	54,886	775,942	-	-	-	-	-	-	830,828
Indexation	(627)	(10,695)	-	-	-	-	-	-	(11,322)
Reclassifications	-	-	-	-	-	-	-	-	-
Transfers	-	-	-	-	-	-	-	-	-
Revaluation	-	-	-	-	-	-	-	-	-
Impairment charged to the SoCNE	-	-	-	-	-	-	-	-	-
Impairment charged to the revaluation reserve	-	-	-	-	-	-	-	-	-
Disposals	-	-	-	-	-	-	-	-	-
Provided during the year	2,640	96,670	-	-	-	-	-	-	99,310
At 31 March 2022	56,899	861,917	-	-	-	-	-	-	918,816

**NORTHERN IRELAND SOCIAL CARE COUNCIL
ACCOUNTS FOR THE YEAR ENDED 31 March 2023**

NORTHERN IRELAND SOCIAL CARE COUNCIL

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022

NOTE 6.1 (continued) Intangible assets - year ended 31 March 2022

	Software Licenses £	Information Technology £	Websites £	Development Expenditure £	Licences, Trademarks and Artistic Originals £	Patents £	Goodwill £	Payments on Account and Assets under Construction £	Total £
Carrying Amount At 31 March 2022	14,417	244,165	-	-	-	-	-	1	258,583
At 31 March 2021	5,058	343,899	-	-	-	-	-	1	348,958

Asset financing

Owned	14,417	244,165	-	-	-	-	-	1	258,583
Finance leased	-	-	-	-	-	-	-	-	-
On B/S (SoFP) PFI and other service concession arrangements contracts	-	-	-	-	-	-	-	-	-
Carrying Amount At 31 March 2022	14,417	244,165	-	-	-	-	-	1	258,583

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:

	2022 £	2021 £
Donations	-	-
Government Grant	-	-
Lottery Funding	-	-

NORTHERN IRELAND SOCIAL CARE COUNCIL
ACCOUNTS FOR THE YEAR ENDED 31 March 2023
NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022

NOTE 6.2 Intangible assets - year ended 31 March 2021

	Software Licenses £	Information Technology £	Websites £	Development Expenditure £	Licences, Trademarks and Artistic Originals £	Patents £	Goodwill £	Payments on Account and Assets under Construction £	Total £
Cost or Valuation									
At 1 April 2020	60,021	1,096,534	-	-	-	-	-	1	1,156,556
Indexation	(77)	(1,693)	-	-	-	-	-	-	(1,770)
Additions	-	25,000	-	-	-	-	-	-	25,000
Donations / Government grant / Lottery Funding	-	-	-	-	-	-	-	-	-
Reclassifications	-	-	-	-	-	-	-	-	-
Transfers	-	-	-	-	-	-	-	-	-
Revaluation	-	-	-	-	-	-	-	-	-
Impairment charged to the SoCNE	-	-	-	-	-	-	-	-	-
Impairment charged to revaluation reserve	-	-	-	-	-	-	-	-	-
Disposals	-	-	-	-	-	-	-	-	-
At 31 March 2021	59,944	1,119,841	-	-	-	-	-	1	1,179,786

Amortisation

At 1 April 2020	52,323	685,106	-	-	-	-	-	-	737,429
Indexation	(77)	(1,189)	-	-	-	-	-	-	(1,266)
Reclassifications	-	-	-	-	-	-	-	-	-
Transfers	-	-	-	-	-	-	-	-	-
Revaluation	-	-	-	-	-	-	-	-	-
Impairment charged to the SoCNE	-	-	-	-	-	-	-	-	-
Impairment charged to the revaluation reserve	-	-	-	-	-	-	-	-	-
Disposals	-	-	-	-	-	-	-	-	-
Provided during the year	2,640	92,025	-	-	-	-	-	-	94,665
At 31 March 2021	54,886	775,942	-	-	-	-	-	-	830,828

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022

NOTE 6.2 Intangible assets - year ended 31 March 2021

	Software Licenses £	Information Technology £	Websites £	Development Expenditure £	Licences, Trademarks and Artistic Originals £	Patents £	Goodwill £	Payments on Account and Assets under Construction £	Total £
Carrying Amount At 31 March 2021	5,058	343,899	-	-	-	-	-	1	348,958
At 31 March 2020	7,698	411,428	-	-	-	-	-	1	419,127

Asset financing

Owned	5,058	343,899	-	-	-	-	-	1	348,958
Finance leased	-	-	-	-	-	-	-	-	-
On B/S (SoFP) PFI and other service concession arrangements contracts	-	-	-	-	-	-	-	-	-
Carrying Amount At 31 March 2021	5,058	343,899	-	-	-	-	-	1	348,958

Asset financing

Owned	7,698	411,428	-	-	-	-	-	1	419,127
Finance leased	-	-	-	-	-	-	-	-	-
On B/S (SoFP) PFI and other service concession arrangements contracts	-	-	-	-	-	-	-	-	-
Carrying Amount At 1 April 2020	7,698	411,428	-	-	-	-	-	1	419,127

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022

NOTE 7 FINANCIAL INSTRUMENTS

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

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

NOTE 8 INVESTMENTS AND LOANS

The Northern Ireland Social Care Council had no investments or loans at either 31 March 2022 or 31 March 2021.

NOTE 9 IMPAIRMENTS

The Northern Ireland Social Care Council had no impairments at either 31 March 2022 or 31 March 2021.

NOTE 10 ASSETS CLASSIFIED AS HELD FOR SALE

The Northern Ireland Social Care Council did not hold any assets classified as held for sale at either 31 March 2022 or 31 March 2021.

NOTE 11 INVENTORIES

The Northern Ireland Social Care Council did not hold any goods for resale at either 31 March 2022 or 31 March 2021.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022

NOTE 12 CASH AND CASH EQUIVALENTS

	2022	2021
	£	£
Balance at 1 April	92,558	270,011
Net change in cash and cash equivalents	49,208	(177,453)
Balance at 31 March	141,766	92,558

The following balances at 31 March were held at	2022	2021
	£	£
Commercial Banks and cash in hand	141,766	92,558
Balance at 31 March	141,766	92,558

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

**NORTHERN IRELAND SOCIAL CARE COUNCIL
ACCOUNTS FOR THE YEAR ENDED 31 March 2023**

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022

NOTE 13 TRADE RECEIVABLES, FINANCIAL AND OTHER ASSETS

	2022	2021
	£	£
Amounts falling due within one year		
Trade receivables	14,799	2,107
Deposits and advances	-	-
VAT receivable	-	-
Other receivables – not relating to fixed assets	-	-
Other receivables – relating to property, plant and equipment	-	-
Other receivables – relating to intangibles	-	-
Trade and other receivables	14,799	2,107
Prepayments	74,985	67,869
Accrued income	-	-
Current part of PFI and other service concession arrangements prepayment	-	-
Other current assets	74,985	67,869
Carbon reduction commitment	-	-
Intangible current assets	-	-
Amounts falling due after more than one year		
Trade receivables	-	-
Deposits and advances	-	-
Other receivables	-	-
Trade and other receivables	-	-
Prepayments and accrued income	-	-
Other current assets falling due after more than one year	-	-
TOTAL TRADE AND OTHER RECEIVABLES	14,799	2,107
TOTAL OTHER CURRENT ASSETS	74,985	67,869
TOTAL INTANGIBLE CURRENT ASSETS	-	-
TOTAL RECEIVABLES AND OTHER CURRENT ASSETS	89,784	69,976

The balances are net of a provision for bad debts of £Nil (2020/21: £Nil).

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022

NOTE 14 TRADE PAYABLES AND OTHER CURRENT LIABILITIES

	2022	2021
	£	£
Amounts falling due within one year		
Other taxation and social security	-	-
Bank overdraft	-	-
VAT payable	-	-
Trade capital payables – property, plant and equipment	-	-
Trade capital payables – intangibles	-	-
Trade revenue payables	271,581	224,556
Payroll payables	93,721	87,370
Clinical Negligence payables	-	-
RPA payables	-	-
BSO payables	-	756
Other payables	342	9,575
Accruals	727,594	779,647
Accruals– relating to property, plant and equipment	-	24,499
Accruals – relating to intangibles	-	-
Deferred income	369,617	6,025
Trade and other payables	1,462,855	1,132,428
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	-	-
Other current liabilities	-	-
Carbon reduction commitment	-	-
Intangible current liabilities	-	-
Total payables falling due within one year	1,462,855	1,132,428
Amounts falling due after more than one year		
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	-	-
Total non current other payables	-	-
TOTAL TRADE PAYABLES AND OTHER CURRENT LIABILITIES	1,462,855	1,132,428

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022

NOTE 15 PROVISIONS FOR LIABILITIES AND CHARGES

The Northern Ireland Social Care Council had no provisions for liabilities and charges at either 31 March 2022 or 31 March 2021.

NOTE 16 CAPITAL COMMITMENTS

The Northern Ireland Social Care Council had no capital commitments at either 31 March 2022 or 31 March 2021.

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.

	2022	2021
	£	£
Obligations under operating leases comprise		
Land		
Not later than 1 year	-	-
Later than 1 year and not later than 5 years	-	-
Later than 5 years	-	-
	<hr/>	<hr/>
	-	-
	<hr/>	<hr/>
Buildings		
Not later than one year	131,300	315,120
Later than one year but not later than five years	-	131,300
Later than five years	-	-
	<hr/>	<hr/>
	131,300	446,420
	<hr/>	<hr/>
Other		
Not later than 1 year	-	-
Later than 1 year and not later than 5 years	-	-
Later than 5 years	-	-
	<hr/>	<hr/>
	-	-
	<hr/>	<hr/>

17.2 Finance Leases

The Northern Ireland Social Care Council had no finance leases at either 31 March 2022 or 31 March 2021.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022

17.3 Operating Leases

The Northern Ireland Social Care Council did not issue any operating leases at either 31 March 2022 or 31 March 2021. The Social Care Council is finalising a 5 year licence agreement with the Dept of Finance to take up occupation of new premises at James House, Gasworks, Belfast before 28th February 2023.

NOTE 18 COMMITMENTS UNDER PFI AND OTHER SERVICE CONCESSION ARRANGEMENT CONTRACTS

18.1 Off balance sheet PFI and other service concession arrangement schemes

The Northern Ireland Social Care Council had no commitments under PFI and other concession arrangement contracts at 31 March 2022 or 31 March 2021.

NOTE 19 OTHER FINANCIAL COMMITMENTS

The Northern Ireland Social Care Council did not have any other financial commitments at 31 March 2022 or 31 March 2021.

NOTE 20 CONTINGENT LIABILITIES

The Northern Ireland Social Care Council did not have any quantifiable contingent liabilities at 31 March 2022 or 31 March 2021.

20.1 Financial Guarantees, Indemnities and Letters of Comfort

The Northern Ireland Social Care Council did not have any financial guarantees, indemnities and letters of comfort at 31 March 2022 or 31 March 2021.

NOTE 21 RELATED PARTY TRANSACTIONS

The Northern Ireland Social Care Council is an arm's length body of the Department of Health and as such the Department is a related party with which the Northern Ireland Social Care Council has had various material transactions during the year.

In addition, there were material transactions throughout the year with the Business Services Organisation who are a related party by virtue of being an 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 have undertaken any material transactions with the Northern Ireland Social Care Council.

NOTE 22 THIRD PARTY ASSETS

The Northern Ireland Social Care Council held no assets at either 31 March 2022 or 31 March 2021 belonging to third parties.

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022

NOTE 23 FINANCIAL PERFORMANCE TARGETS

23.1 Revenue Resource Limit

The Northern Ireland Social Care Council is given a Revenue Resource Limit which it is not permitted to overspend.

The Revenue Resource Limit for Northern Ireland Social Care Council is calculated as follows:

	2022	2021
	Total	Total
	£	£
DoH (excludes non cash)	3,885,406	3,889,968
Other Government Department (HSCB)	-	-
Non cash RRL (from DHSSPS)	159,143	141,225
	<hr/>	<hr/>
Total agreed RRL	4,044,549	4,031,193
	<hr/>	<hr/>
Adjustment for income received re Donations / Government grant / Lottery funding for non current assets	-	-
	<hr/>	<hr/>
Total Revenue Resource Limit to Statement of Comprehensive Net Expenditure	4,044,549	4,031,193
	<hr/>	<hr/>

23.2 Capital Resource Limit

The Northern Ireland Social Care Council is given a Capital Resource Limit which it is not permitted to overspend.

	2022	2021
	Total	Total
	£	£
Gross capital expenditure by the Social Care Council (Receipts from sales of fixed assets)	39,811	49,499
	-	-
Net capital expenditure	39,811	49,499
	<hr/>	<hr/>
Capital Resource Limit	39,847	49,500
	<hr/>	<hr/>
Overspend/(Underspend) against CRL	(36)	(1)
	<hr/>	<hr/>

**NORTHERN IRELAND SOCIAL CARE COUNCIL
ACCOUNTS FOR THE YEAR ENDED 31 March 2023**

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2022

23.3 Financial Performance Targets

The Northern Ireland Social Care 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.

	2022	2021
	£	£
Net Expenditure	(4,037,536)	(4,020,022)
RRL	4,044,549	4,031,19
Surplus/(Deficit) against RRL	7,013	11,17
Break Even cumulative position (opening)	161,064	149,89
Break Even Cumulative position (closing)	168,077	161,06
Materiality Test:	2022	2021
	%	%
Break Even in year position as % of RRL	0.17%	0.28%
Break Even cumulative position as % of RRL	4.16%	4.00%

NOTE 24 EVENTS AFTER THE REPORTING PERIOD

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

Date of authorisation for issue

The Accounting Officer authorised these financial statements for issue on **DD MM YYYY**

Northern Ireland Social Care Council Board Membership – 2022-23



Chair, Paul Martin



Sarah Browne



Roslyn Dougherty



Gerard Guckian



David Hayes



Christine Hunter



Brenda Maitland



Jacqueline McGarvey



Catherine McPhillips



Anne O'Reilly



Lee Wilson

Northern Ireland Social Care Council Organisational Chart at 31 March 2023



Organisation Structure

at 31 March 2022



Northern Ireland Social Care Council Risk Appetite 2022-23

As noted in the Governance Report, registers of risks are maintained to ensure that business is delivered safely and effectively. The Risk Appetite Statement sets out the level of risk with which the Social Care Council aims to operate. The Council recognises that it may not always be possible, and not financially affordable, to fully remove uncertainty from a decision and that decisions should be made using the best available information and expertise. When decisions need to be made urgently, the information relied upon and the considerations applied to it should be retained; and the risk culture must embrace openness, support transparency, welcome constructive challenge and promote collaboration, consultation and co-operation.

Risk Appetite Statement

The table below, outlines the Risk Appetite across the key areas of Finance, Compliance, Safety, Service Delivery and Reputation.

Area	Statement	Risk Appetite
Finance	The organisation must comply with the statutory duty to breakeven and therefore must be protected from adverse impact from risks which threaten its financial breakeven position.	Cautious
Compliance	The organisation must be averse to risks that could impact upon its compliance with law and regulation, but should be prepared to accept moderate risk in order to achieve its objectives in relation to raising the profile of the social work and social care workforce and sector leadership.	Cautious → Moderate
Safety	The organisation must be averse to risks that could threaten the safety of users, carers, registrants and staff while recognising that the organisation should be prepared to accept a more open approach to safety risk when pursuing objectives associated with development of the workforce, communication and engagement and sector leadership.	Cautious → Open
Service Delivery	Delivery of the organisations core statutory services must be protected, however having an open to hungry approach to risk will help deliver substantial benefits to service users, registrants, employers and the wider social work and social care sector.	Open → Hungry
Reputation	Damage to the organisations reputation can undermine stakeholder confidence however the organisation is prepared to accept a moderate to hungry impact on its reputation as delivery of objectives will provide significant longer term benefit.	Moderate → Hungry

Risk Appetite Matrix

The matrix below, outlines the Risk Appetite in each of the key areas of Finance, Compliance, Safety, Service Delivery and Reputational for each of the Strategic Themes set out in the 2021-22 Business Plan.

Strategic Theme	Financial	Compliance	Safety	Service Delivery	Reputational
	<i>(Impacts on the financial position and sustainability of the Social Care Council)</i>	<i>(Impacts on the Social Care Council's conformance with legal obligations and stat. duties and its compliance with regulatory requirements)</i>	<i>(Impacts on the safety and wellbeing of staff, registrants, service users, partners/stakeholders and the public)</i>	<i>(Impacts on the intended/expected delivery of the Social Care Council's services)</i>	<i>(Impacts on the Social Care Council's reputation amongst all or some of its stakeholders)</i>
1. To put standards at the heart of social work and social care practice and education and training, so as to support the delivery of effective social care services both now and in the future.	CAUTIOUS	CAUTIOUS	CAUTIOUS	OPEN	MODERATE
2. To ensure that regulation is robust, agile, valued and trusted in order to support good social work and social care practice.	CAUTIOUS	CAUTIOUS	CAUTIOUS	OPEN	MODERATE
3. To support the development of the social work and social care workforce in order that they are able to deliver safe, effective, value led care.	CAUTIOUS	MODERATE	MODERATE	OPEN	OPEN
4. To promote a systems leadership approach that contributes to capacity building that supports leadership at all levels.	CAUTIOUS	MODERATE	OPEN	HUNGRY	HUNGRY
5. To ensure there is effective and meaningful communication and engagement so as to improve the understanding of what the Social Care Council does and the value of the social work and social care workforce.	MODERATE	OPEN	OPEN	HUNGRY	HUNGRY

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