Modernisation Directorate
Department of Health, Social Services and Public Safety
Room 1
Annex 6
Castle Buildings
Stormont Estate
Upper Newtownards Road
Belfast
BT4 3SQ

12th May 2008

Dear Colleague

Barnardo’s NI welcomes this opportunity to respond to the Department’s consultation on ‘Proposals for Health and Social Care Reform’ and broadly supports the intention to implement new structures which tackle health inequalities and deliver better care for patients. We will not respond to individual questions in the consultation, but make a number of key comments which we specifically would like to bring to your attention and which we hope will be helpful.

As the largest voluntary children’s organisation in NI, Barnardo’s works with over 10,000 children, young people and their families here every year, providing a range of services including for disabled children, children in care and families in need of support. We have previously highlighted our concerns about the direct impact of efficiency savings on services for children and families, in particular that the efficiencies required will result in a net deficit investment in children’s services with the most vulnerable and disadvantaged children likely to be affected. We are therefore disappointed that the current proposals for health and social care reform do not adequately discuss the impact of efficiencies and how they will be implemented in the restructuring process.

In relation to the constitution of Local Commissioner Groups (LCGs), Barnardo’s suggests that, as well as citing mental health and learning
disability as aspects of health and social care programs that require appropriate professional experience (p.19), the proposals should also specifically state ‘children’s services’. It is our view that membership of LCGs should be appropriately balanced across relevant agencies and key stakeholders. We are therefore concerned at the absence of representation amongst the community and voluntary sector and that membership appears to be heavily weighted towards the medical profession.

With regards to the proposals under Public Health and Regional Public Health Agency (pp.31-37), Barnardo’s NI has some further concerns about roles and accountability and would like clarity with regards where the commissioning process will fit in the new system. It is not clear, as one example in relation to the needs of children and young people, how the current role of Drug and Alcohol Teams (DACTs) will sit in the new structure and to what degree they will be staffed. DACTs are aware of all the current and relevant issues at a local level and we would have some concerns that their expertise would be lost to some extent within a larger commissioning body. We believe it would be helpful to provide detailed information as to what plans are in place to effectively utilise the vast knowledge and experience within the community and voluntary sector.

In relation to the new Safeguarding Board, it is not clear if there will be an individual Board within each Health and Social Care Trust, or whether there will be one Board in operation across all five Trusts.

On proposals to replace the HSS Councils, Barnardo’s NI favours a single, independent, regional body, as outlined in Option 1, as being the more clear way forward in comparison to the establishment of five separately constituted independent local bodies.

We would also like to raise some concerns regarding a smaller DHSSPS. While we appreciate the need to reduce administration, we are concerned that NI has often fallen behind in terms of the legislative programme linked to services for children and young people and that a smaller department may not provide the scope to ensure we catch up in legislative terms. We also think that the document should clarify the position in relation to those children’s services that are currently regionally commissioned, for example,
young carers and what would happen to these under the new arrangements.

A further area of concern is the extent to which a policy focused DHSSPS could ensure that funding allocated to Trusts will be spent within the programmes of need identified and in the way required. There is a danger that we could find disparity of service and more postcode lotteries. It would be helpful to clarify how this will be prevented.

In conclusion, Barnardo’s is in general agreement with the processes and structures but, as outlined, we do have some concerns around roles and accountability and, in particular, how the reforms will be rolled out in practice. Given their potential impact on children’s services, we would request that Health and Social Care Trusts provide the necessary detail about how efficiencies will be implemented.

We look forward to reading the final outcomes of this consultation process and for clarity on the issues that we have raised. In the meantime, if you have any queries please do not hesitate to contact me directly.

Yours sincerely

Margaret Kelly
Assistant Director of Policy