



September 2nd, 2022

Chairman: Councillor M Gregg

Vice-Chairman: Councillor C McCready

Aldermen: J Baird, D Drysdale, M Henderson MBE and S P Porter

Councillors: F Cole, A P Ewing, A Givan, S Lee, S Lowry, A McIntyre, R McLernon, T Mitchell and S Skillen

Ex Officio:

The Right Worshipful the Mayor, Councillor S Carson

Deputy Mayor, Councillor M Guy

Notice Of Meeting

A meeting of the Environmental Services Committee will be held on **Wednesday, 7th September 2022 at 6:00 pm** for the transaction of the undernoted Agenda.

For those Members attending this meeting remotely, the Zoom details are included in the Outlook invitation that has been issued.

A light buffet will be available in Lighters Restaurant from 5.30pm.

David Burns
Chief Executive

Agenda

1.0 Apologies

2.0 Declaration of Interests

- (i) conflict of interest on any matter before the meeting (Members to confirm the specific item)
- (ii) pecuniary or non-pecuniary interest (Member to complete disclosure of interest form)

3.0 Report by the Director of Environmental Services

3.1 Environmental Services Performance Report

- 📄 *Item 3.1 - ES Performance Report Q1 KPI's 2022 23.pdf* Page 1

- 📄 *Item 3.1 - Appendix 1 - ES Management Accs Summary Report.pdf* Page 4

- 📄 *Item 3.1 - Appendix 2 ES Service KPIs.pdf* Page 7

- 📄 *Item 3.1 - Appendix 3 ES Performance KPIs.pdf* Page 11

4.0 Report by the Head of Service (Building Control)

4.1 Street Naming - Off Old Kilmore Road, Moira

- 📄 *Item 4.1 -Street Naming- Fortwilliam Lodge.pdf* Page 14

- 📄 *Item 4.1 - Appendix 1 BC - Fortwilliam Lodge.pdf* Page 17

4.2 Street Naming - Off Derriaghy Road, Lisburn

- 📄 *Item 4.2 -Street Naming- Boomers Hall.pdf* Page 19

- 📄 *Item 4.2 - Appendix 2 BC - Boomers Hall.pdf* Page 22

5.0 Report by the Head of Service (Environmental Health)

5.1 Service Level Agreement with NI Drinking Water Inspectorate

- 📄 *Item 5.1 - DWI Service Level Agreement.pdf* Page 24

- 📄 *Item 5.1 - Appendix 1 EH - DWI - Final SLA with Councils.pdf* Page 27

5.2 The Child and Adult Safeguarding Policy - Prevention and Protection in Partnership

- 📄 *Item 5.2 - Child and Adult Safeguarding Policy.pdf* Page 55

	Item 5.2 - Appendix 2AEH - LCCC Child and Adult Safeguarding Policy v4 Aug 22-changes highlighted.pdf	Page 57
	Item 5.2 - Appendix 2BEH - Equality Screening of LCCC SG Policy August 2022.pdf	Page 72
5.3	Northern Ireland Local Government Partnership on Traveller Issues	
	Item 5.3 - Northern Ireland Local Government Partnership on Traveller Issues.pdf	Page 95
5.4	Environmental Health Service Unit Food Service Plan 2022/2023	
	Item 5.4 - Food Service Plan 2022-23.pdf	Page 98
	Item 5.4 - Appendix 3 EH - Lisburn and Castlereagh City Council 2022 2023 FSP.pdf	Page 101
5.5	Consultation on the Food Standard Agency's Food Hygiene Rating (Online Display) Regulations (NI) 2023	
	Item 5.5 - Consultation on the Food Standards Agency's Food Hygiene Rating (Online Display) Regulations.pdf	Page 124
	Item 5.5 - Appendix 4 EH - The FH Rating (Online Display) Regulations 2023 Consultation Response.pdf	Page 127
5.6	Regulation of Cosmetic Treatments	
	Item 5.6 - Regulation of Cosmetic Treatments.pdf	Page 131
	Item 5.6 - Appendix 5 EH - Regulation of Cosmetic Treatments - letter from Chair of HSLG.pdf	Page 134
5.7	Consultation on the Draft National Air Pollution Control Programme (NAPCP)	
	Item 5.7 - Consultation on the review of the UK's National Air Pollution Control.pdf	Page 135
	Item 5.7 - Appendix 6 EH Consultation Response on the review of the UK's National Air Pollution Control.pdf	Page 139

6.0 Confidential Report from the Director of Environmental Services

All items are confidential due to containing information relating to the financial or business affairs of any particular person (including the Council holding that information)

- 6.1 Commercially Sensitive Contract and Procurement Issues NWP - Request for Uplift - Fuel Duty and Fuel & Energy Prices Update**

- 6.2 Commercially Sensitive Contract and Procurement Issues: Extension of Contract for the Treatment and Disposal of Street Sweepings**

- 6.3 Commercially Sensitive Contract and Procurement Issues: Extension of Contract for the Provision of a Dry Material Recovery Facility - Lot1**

- 6.4 Update on Residual Waste Treatment & Disposal and Landfill Capacity**

7.0 Any Other Business



Environmental Services Committee

7th September 2022

Report from:

Director of Environmental Services

Item for Decision

TITLE: **Item 3.1 - Environmental Services Performance Report**

Background and Key Issues:

1. This paper deals with the following areas:

- Budget Summary Reports covering the period 1st April 2022 to 30th June 2022
- Q1 2022/23 – Environmental Services – Operational metrics/Service KPI's
- Q1 2022/23 – Environmental Services – Performance Improvement KPI's

2. Environmental Services Budget Summaries – Q1

Budget Summary reports for quarter 1 (April to June 22) are attached. This reflects the Environmental Services Directorate's draft budget reports for the first quarter of the financial year and is subject to review.

Final management accounts for periods 1 to 4 (April to July) will be presented at Corporate Services Committee in September.

Attached as Appendix 1 are the following year to date budget summaries:

- YTD Period 1 (1st April – 30th April 2022)
- YTD Period 2 (1st April – 31st May 2022)
- YTD Period 3 (1st April – 30th June 2022)

3. Q1 2022/23 Environmental Services KPI's

The Council operates a broad range of KPI's including statutory targets, for example, percentage of household waste collected that is sent for recycling (set externally and reported internally via Council Committees), performance improvement targets (set by Council and reported through Governance & Audit Committee) and operational metrics/service KPIs (set by Council and reported internally via Council Committees).

- Appendix 2 provides an outline of performance for Q1 (April - June 22) for the Environmental Services operational metrics/service KPIs.
- Appendix 3 provides an outline of performance for Q1 (April – June 22) for the Environmental Services performance improvement targets KPIs.

Recommendation:

It is recommended that Members note and scrutinise:

1. Budget Summary reports covering the period 1st April 2022 to 30th June 2022 – Appendix 1.
2. The outturn of operational metrics/service KPIs for Q1 (April to June 22) – Appendix 2.
3. The outturn of performance improvement KPIs for Q1 (April to June 22) – Appendix 3.

Finance and Resource Implications

None

Screening and Impact Assessment

1. Equality and Good Relations

Has an equality and good relations screening been carried out on the proposal/project/policy?

No

If no, please provide explanation/rationale

N/A

If yes, what was the outcome?:

Option 1

Screen out without mitigation

Yes/No

Option 2

Screen out with mitigation

Yes/No

Option 3

Screen in for a full EQIA

Yes/No

Rationale for outcome/decision (give a brief explanation of any issues identified including mitigation and/or plans for full EQIA or further consultation)

Insert link to completed Equality and Good Relations report:

2. Rural Needs Impact Assessment:

Has consideration been given to Rural Needs?

No

Has a Rural Needs Impact Assessment (RNIA) template been completed?

No

If no, please given explanation/rationale for why it was not considered necessary:

N/A

If yes, give brief summary of the key rural issues identified, any proposed actions to address or mitigate and include the link to the completed RNIA template:

SUBJECT TO PLANNING APPROVAL:

No

If Yes, "This is a decision of this Committee only. Members of the Planning Committee are not bound by the decision of this Committee. Members of the Planning Committee shall consider any related planning application in accordance with the applicable legislation and with an open mind, taking into account all relevant matters and leaving out irrelevant consideration".

APPENDICES:

- Appendix 1 Budget Summary Reports for Q1 (April to June 22)
- Appendix 2 Operational metrics/Service KPIs for Q1 (April to June 22)
- Appendix 3 Performance improvement KPIs for Q1 (April to June 22)

HAS IT BEEN SUBJECT TO CALL IN TO DATE?

No

If Yes, please insert date:

Environmental Services - April 2022 to March 2023

Month:-

Apr-22

Department

Annual Budget	Budget to date	Total Actual & Committed	Total Variance
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Expenditure:

Payroll

Director's Office	250,280	20,093	20,197	104
Environmental Health	2,681,990	193,503	173,924	(19,579)
Operational Services	6,896,980	529,630	525,855	(3,775)
Building Control	1,326,650	108,600	95,470	(13,130)
Total Payroll Expenditure:	11,155,900	851,826	815,446	(36,380)

Non-Payroll

Director's Office	372,920	272,341	239,098	(33,243)
Environmental Health	852,570	35,950	21,973	(13,977)
Operational Services	11,162,230	1,053,048	1,123,116	70,068
Building Control	92,290	7,069	2,903	(4,166)
Total Non-Payroll Expenditure:	12,480,010	1,368,408	1,387,090	18,682

Total Expenditure

23,635,910	2,220,234	2,202,536	(17,698)
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Income:

Environmental Health	(1,772,540)	(101,705)	(85,460)	16,245
Operational Services	(617,470)	(23,163)	28,732	51,895
Building Control	(1,094,780)	(78,654)	(144,765)	(66,111)
Total Income:	(3,484,790)	(203,522)	(201,493)	2,029

Overall Net Position:

Director's Office	623,200	292,434	259,295	(33,139)
Environmental Health	1,762,020	127,748	110,437	(17,311)
Operational Services	17,441,740	1,559,515	1,677,703	118,188
Building Control	324,160	37,015	(46,392)	(83,407)
Net Overall Position	20,151,120	2,016,712	2,001,043	(15,669)
Total Net Overall Position	20,151,120	2,016,712	2,001,043	(15,669)

Environmental Services - April 2022 to March 2023

Month:-

May-22

Department

Annual Budget	Budget to date	Total Actual & Committed	Total Variance
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Expenditure:

Payroll

Director's Office	250,280	41,713	42,723	1,010
Environmental Health	2,681,990	449,546	417,070	(32,476)
Operational Services	6,896,980	1,104,738	1,088,350	(16,388)
Building Control	1,326,650	221,108	212,891	(8,217)
Total Payroll Expenditure:	11,155,900	1,817,105	1,761,034	(56,071)

Non-Payroll

Director's Office	372,920	301,053	323,024	21,971
Environmental Health	852,570	321,632	349,323	27,691
Operational Services	11,162,230	2,075,834	2,164,301	88,467
Building Control	92,290	10,173	11,035	862
Total Non-Payroll Expenditure:	12,480,010	2,708,692	2,847,683	138,991

Total Expenditure

23,635,910	4,525,797	4,608,717	82,920
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Income:

Environmental Health	(1,772,540)	(188,046)	(215,902)	(27,856)
Operational Services	(617,470)	(328,673)	(333,619)	(4,946)
Building Control	(1,094,780)	(193,431)	(167,087)	26,344
Total Income:	(3,484,790)	(710,150)	(716,608)	(6,458)

Overall Net Position:

Director's Office	623,200	342,766	365,747	22,981
Environmental Health	1,762,020	583,132	550,491	(32,641)
Operational Services	17,441,740	2,851,899	2,919,032	67,133
Building Control	324,160	37,850	56,839	18,989
Net Overall Position	20,151,120	3,815,647	3,892,109	76,462
Total Net Overall Position	20,151,120	3,815,647	3,892,109	76,462

Environmental Services - April 2022 to March 2023

Month:-

Jun-22

Department

	Annual Budget	Budget to date	Total Actual & Committed	Total Variance
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Expenditure:

Payroll

Director's Office	250,280	62,570	64,083	1,513
Environmental Health	2,681,990	670,570	614,854	(55,716)
Operational Services	6,896,980	1,651,527	1,631,888	(19,639)
Building Control	1,326,650	331,661	320,938	(10,723)
Total Payroll Expenditure:	11,155,900	2,716,328	2,631,763	(84,565)

Non-Payroll

Director's Office	372,920	302,680	325,640	22,960
Environmental Health	852,570	479,506	521,082	41,576
Operational Services	11,162,230	3,023,292	2,991,788	(31,504)
Building Control	92,290	17,335	(2,037)	(19,372)
Total Non-Payroll Expenditure:	12,480,010	3,822,813	3,836,473	13,660

Total Expenditure

23,635,910	6,539,141	6,468,236	(70,905)
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Income:

Environmental Health	(1,772,540)	(290,104)	(334,600)	(44,496)
Operational Services	(617,470)	(384,801)	(367,621)	17,180
Building Control	(1,094,780)	(316,750)	(310,739)	6,011
Total Income:	(3,484,790)	(991,655)	(1,012,960)	(21,305)

Overall Net Position:

Director's Office	623,200	365,250	389,723	24,473
Environmental Health	1,762,020	859,972	801,336	(58,636)
Operational Services	17,441,740	4,290,018	4,256,055	(33,963)
Building Control	324,160	32,246	8,162	(24,084)
Net Overall Position	20,151,120	5,547,486	5,455,276	(92,210)
Total Net Overall Position	20,151,120	5,547,486	5,455,276	(92,210)

Performance Summary

Environmental Services

(Type = 'Service')

Tuesday 2nd of August 2022



Red = Target missed or measure overdue
 Amber = Measure due but not complete
 Green = Target met or exceeded
 Grey = Measure not yet due

Planning Enforcement	1 Green
Environmental Health	1 (R) 2 Green 2 Grey
Operational Services	5 Grey

PLANNING ENFORCEMENT			DUE 1ST JUL 22		
29 : Enforcement Cases Enforcement cases processed to a target conclusion within 39 weeks of receipt of complaint. Enforcement cases processed within 39 weeks			TARGET 70	ACTUAL 78	STATUS Green
TARGET	70				
ACTUAL	78				
Notes:					

ENVIRONMENTAL HEALTH			DUE 1ST JUL 22		
101 : Planning Consultation % of general planning consultations responded to as a statutory consultee . % responded to within 15 working days of receipt by Environmental Health			TARGET 100%	ACTUAL 100%	STATUS Green
TARGET	100%				
ACTUAL	100%				
Notes: Total number of Planning Consultations received by EHSU = 160. Total responded to within 15 working days = 160 = 100%. Target achieved.					

ENVIRONMENTAL HEALTH			DUE 1ST JUL 22		
102 : Health & Safety Health & Safety . Response times to Corporate Health & Safety requests within 3 working days			TARGET 100%	ACTUAL 99.3%	STATUS Red
TARGET	100%				
ACTUAL	99.3%				
Notes: In Q1 there were 151 individual work requests, one of which involved reviewing an EMP. This was not completed immediately due to resource issues. This request took one week to reply, therefore, the average was 99.3% for Q1.					

ENVIRONMENTAL HEALTH			DUE 1ST JUL 22		
102 : Health & Safety Health & Safety . Has each facility had a H&S inspection?			TARGET Yes	ACTUAL Yes	STATUS Green
TARGET	Yes				
ACTUAL	Yes				
Notes: Health and safety inspections have recommenced and the 8 main facilities have been inspected. Health and safety spot checks are now underway.					

ENVIRONMENTAL HEALTH		DUE 1ST APR 23		
205 : Cemeteries Implementation of the Cemetery Strategy. Tender and award works contract for Blaris Phase 1 cemetery extension (approximately 140 burial plots)		TARGET Yes	ACTUAL No	STATUS Grey
TARGET	Yes			
ACTUAL	No			
Notes:				

ENVIRONMENTAL HEALTH		DUE 1ST APR 23		
205 : Cemeteries Implementation of the Cemetery Strategy. Planning application for Phase 2 cemetery extension to be submitted (approximately 480 burial plots)		TARGET No	ACTUAL No	STATUS Grey
TARGET	No			
ACTUAL	No			
Notes:				

OPERATIONAL SERVICES		DUE 1ST APR 23		
165 : Recycling % of household waste collected by District Councils that is sent for recycling . % of household waste collected by District Councils that is sent for recycling		TARGET 50%	ACTUAL	STATUS Grey
TARGET	50%			
ACTUAL				
Notes:				

OPERATIONAL SERVICES		DUE 1ST APR 23		
214 : Waste Collection Local Authority Collected municipal waste preparing for reuse, dry recycling and composting rate. 55% recycling by 2025		TARGET 55%	ACTUAL	STATUS Grey
TARGET	55%			
ACTUAL				
Notes:				

OPERATIONAL SERVICES		DUE 1ST APR 23		
215 : Waste Landfill Rate Local Authority Collected municipal waste landfill rate. Reduced to 10% or less of the total amount of municipal waste generated by 2035		TARGET 10%	ACTUAL	STATUS Grey
TARGET	10%			
ACTUAL				
Notes:				

OPERATIONAL SERVICES		DUE 1ST OCT 22		
204 : Waste Kerbside model for collection, treatment, and disposal of household waste. Finalise the Outline Business Case for the kerbside model and progress Full Business Case for final approval		TARGET Yes	ACTUAL No	STATUS Grey
TARGET	Yes			
ACTUAL	No			
Notes: Outline Business Case approved by ESC and ratified by Council in June 2022. Full Business Case tender to be issued in July 2022.				

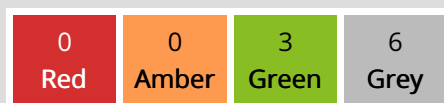
OPERATIONAL SERVICES		DUE 1ST APR 23		
58 : Landfill The amount (Tonnage) of biodegradable Local Authority Collected Municipal Waste that is landfilled. Tonnage of biodegradable waste landfilled.		TARGET 16,444	ACTUAL	STATUS Grey
TARGET	16,444			
ACTUAL				
Notes:				

Performance Summary

Environmental Services

(Type = 'Performance Improvement')

Wednesday 27th of July 2022



Red = Target missed or measure overdue
 Amber = Measure due but not complete
 Green = Target met or exceeded
 Grey = Measure not yet due

Environmental Services	2 Green	2 Grey
Environmental Health	1 (G)	4 Grey

ENVIRONMENTAL HEALTH			DUE 30TH JUN 23						
216 : Entertainment Licensing & Events Guidance Availability of guidance online. Entertainment Licensing guidance available online			<table border="1"> <tr> <td>TARGET</td> <td>Yes</td> </tr> <tr> <td>ACTUAL</td> <td>Yes</td> </tr> </table>	TARGET	Yes	ACTUAL	Yes		
TARGET	Yes								
ACTUAL	Yes								
<table border="1"> <tr> <td>TARGET</td> <td>Yes</td> </tr> <tr> <td>ACTUAL</td> <td>Yes</td> </tr> </table>			TARGET	Yes	ACTUAL	Yes	<table border="1"> <tr> <td>STATUS</td> <td>Green</td> </tr> </table>	STATUS	Green
TARGET	Yes								
ACTUAL	Yes								
STATUS	Green								
Notes:									

ENVIRONMENTAL HEALTH			DUE 1ST APR 23						
216 : Entertainment Licensing & Events Guidance Availability of guidance online. Online Entertainment Licensing guidance reviewed annually			<table border="1"> <tr> <td>TARGET</td> <td>Yes</td> </tr> <tr> <td>ACTUAL</td> <td>No</td> </tr> </table>	TARGET	Yes	ACTUAL	No		
TARGET	Yes								
ACTUAL	No								
<table border="1"> <tr> <td>TARGET</td> <td>Yes</td> </tr> <tr> <td>ACTUAL</td> <td>No</td> </tr> </table>			TARGET	Yes	ACTUAL	No	<table border="1"> <tr> <td>STATUS</td> <td>Grey</td> </tr> </table>	STATUS	Grey
TARGET	Yes								
ACTUAL	No								
STATUS	Grey								
Notes:									

ENVIRONMENTAL HEALTH			DUE 1ST APR 23						
216 : Entertainment Licensing & Events Guidance Availability of guidance online. Customer engagement to assess accessibility to online Entertainment Licensing guidance			<table border="1"> <tr> <td>TARGET</td> <td>Yes</td> </tr> <tr> <td>ACTUAL</td> <td>No</td> </tr> </table>	TARGET	Yes	ACTUAL	No		
TARGET	Yes								
ACTUAL	No								
<table border="1"> <tr> <td>TARGET</td> <td>Yes</td> </tr> <tr> <td>ACTUAL</td> <td>No</td> </tr> </table>			TARGET	Yes	ACTUAL	No	<table border="1"> <tr> <td>STATUS</td> <td>Grey</td> </tr> </table>	STATUS	Grey
TARGET	Yes								
ACTUAL	No								
STATUS	Grey								
Notes:									

ENVIRONMENTAL HEALTH			DUE 1ST APR 23						
216 : Entertainment Licensing & Events Guidance Availability of guidance online. Events guidance available online			<table border="1"> <tr> <td>TARGET</td> <td>Yes</td> </tr> <tr> <td>ACTUAL</td> <td>No</td> </tr> </table>	TARGET	Yes	ACTUAL	No		
TARGET	Yes								
ACTUAL	No								
<table border="1"> <tr> <td>TARGET</td> <td>Yes</td> </tr> <tr> <td>ACTUAL</td> <td>No</td> </tr> </table>			TARGET	Yes	ACTUAL	No	<table border="1"> <tr> <td>STATUS</td> <td>Grey</td> </tr> </table>	STATUS	Grey
TARGET	Yes								
ACTUAL	No								
STATUS	Grey								
Notes:									

ENVIRONMENTAL HEALTH			DUE 1ST APR 23						
216 : Entertainment Licensing & Events Guidance Availability of guidance online. Online events guidance reviewed annually			<table border="1"> <tr> <td>TARGET</td> <td>Yes</td> </tr> <tr> <td>ACTUAL</td> <td>No</td> </tr> </table>	TARGET	Yes	ACTUAL	No		
TARGET	Yes								
ACTUAL	No								
<table border="1"> <tr> <td>TARGET</td> <td>Yes</td> </tr> <tr> <td>ACTUAL</td> <td>No</td> </tr> </table>			TARGET	Yes	ACTUAL	No	<table border="1"> <tr> <td>STATUS</td> <td>Grey</td> </tr> </table>	STATUS	Grey
TARGET	Yes								
ACTUAL	No								
STATUS	Grey								
Notes:									

ENVIRONMENTAL SERVICES		DUE 30TH JUN 22		
191 : Online services Impact of the services available online within the Environmental Services Directorate. Usage of the 8 services available online within the Environmental Services Directorate		TARGET Yes	ACTUAL Yes	STATUS Green
TARGET	Yes			
ACTUAL	Yes			
Notes:				

ENVIRONMENTAL SERVICES		DUE 30TH JUN 22		
191 : Online services Impact of the services available online within the Environmental Services Directorate. Development of the customer engagement methods		TARGET Yes	ACTUAL Yes	STATUS Green
TARGET	Yes			
ACTUAL	Yes			
Notes:				

ENVIRONMENTAL SERVICES		DUE 30TH SEP 22		
191 : Online services Impact of the services available online within the Environmental Services Directorate. Customer engagement carried out		TARGET Yes	ACTUAL No	STATUS Grey
TARGET	Yes			
ACTUAL	No			
Notes:				

ENVIRONMENTAL SERVICES		DUE 1ST APR 23		
191 : Online services Impact of the services available online within the Environmental Services Directorate. Report on outcomes of customer engagement and detail any improvements made or recommended		TARGET Yes	ACTUAL No	STATUS Grey
TARGET	Yes			
ACTUAL	No			
Notes:				



Environmental Services Committee

7th September 2022

Report from:

Head of Service - Building Control

Item for Decision

TITLE: Item 4.1 Street Naming – Off Old Kilmore Road, Moira

Background and Key Issues:

1. Gilmore Developments Ltd. has proposed the street name for a development of 36 dwellings off the Old Kilmore Road, Moira
2. The proposal for the street name is:
 - **FORTWILLIAM LODGE** (1st preference)
 - **FORTWILLIAM DRIVE** (2nd preference)
3. The development layout is attached in **Appendix 1 BC** for Members information. This request meets with the requirements of the Council's Street Naming Policy in that the name proposal reflects a historic reference to the named property, Fortwilliam House to the rear of the development site.
4. The Building Control Service received no objections to the proposed names from the Elected Members of the relevant District Electoral Area and no objection to the first preference name from Royal Mail Address Management Team.

Recommendation:

It is recommended that Members approve that the street name Fortwilliam Lodge to be allocated to this proposed development of 36 dwellings off the Old Kilmore Road, Moira.

Finance and Resource Implications:

Revenue budget has been provided within the 2022-23 estimates for Street Nameplates

Screening and Impact Assessment

1. Equality and Good Relations

Has an equality and good relations screening been carried out on the proposal/project/policy? Yes

If no, please provide explanation/rationale

If yes, what was the outcome? :

Option 1 Screen out without mitigation	<input type="checkbox"/> Yes	Option 2 Screen out with mitigation	<input type="checkbox"/> No	Option 3 Screen in for a full EQIA	<input type="checkbox"/> No
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Rationale for outcome/decision (give a brief explanation of any issues identified including mitigation and/or plans for full EQIA or further consultation)

With regard to the Section 75 statutory duties (of the 1998 NI Act) this item has been subject to screening and ‘screened out’ by way of application of the (previously screened) Councils Street Naming & Numbering Policy, in order to follow due process.

Insert link to completed Equality and Good Relations report:

Equality Screening has been completed and is available on request from the Head of Service – Building Control

2. Rural Needs Impact Assessment:

Has consideration been given to Rural Needs?	<input type="checkbox"/> Yes	Has a Rural Needs Impact Assessment (RNIA) template been completed?	<input type="checkbox"/> No
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If no, please given explanation/rationale for why it was not considered necessary:

The Council Street Naming and Numbering Policy is universally applicable to both the creation of both urban and rural street names throughout the Council area. There is no differentiation between rural and urbanised considerations for this process and decision impact.

If yes, give brief summary of the key rural issues identified, any proposed actions to address or mitigate and include the link to the completed RNIA template:

SUBJECT TO PLANNING APPROVAL:

No

If Yes, "This is a decision of this Committee only. Members of the Planning Committee are not bound by the decision of this Committee. Members of the Planning Committee shall consider any related planning application in accordance with the applicable legislation and with an open mind, taking into account all relevant matters and leaving out irrelevant consideration".

APPENDICES:

Appendix 1 BC – Development Layout

HAS IT BEEN SUBJECT TO CALL IN TO DATE?

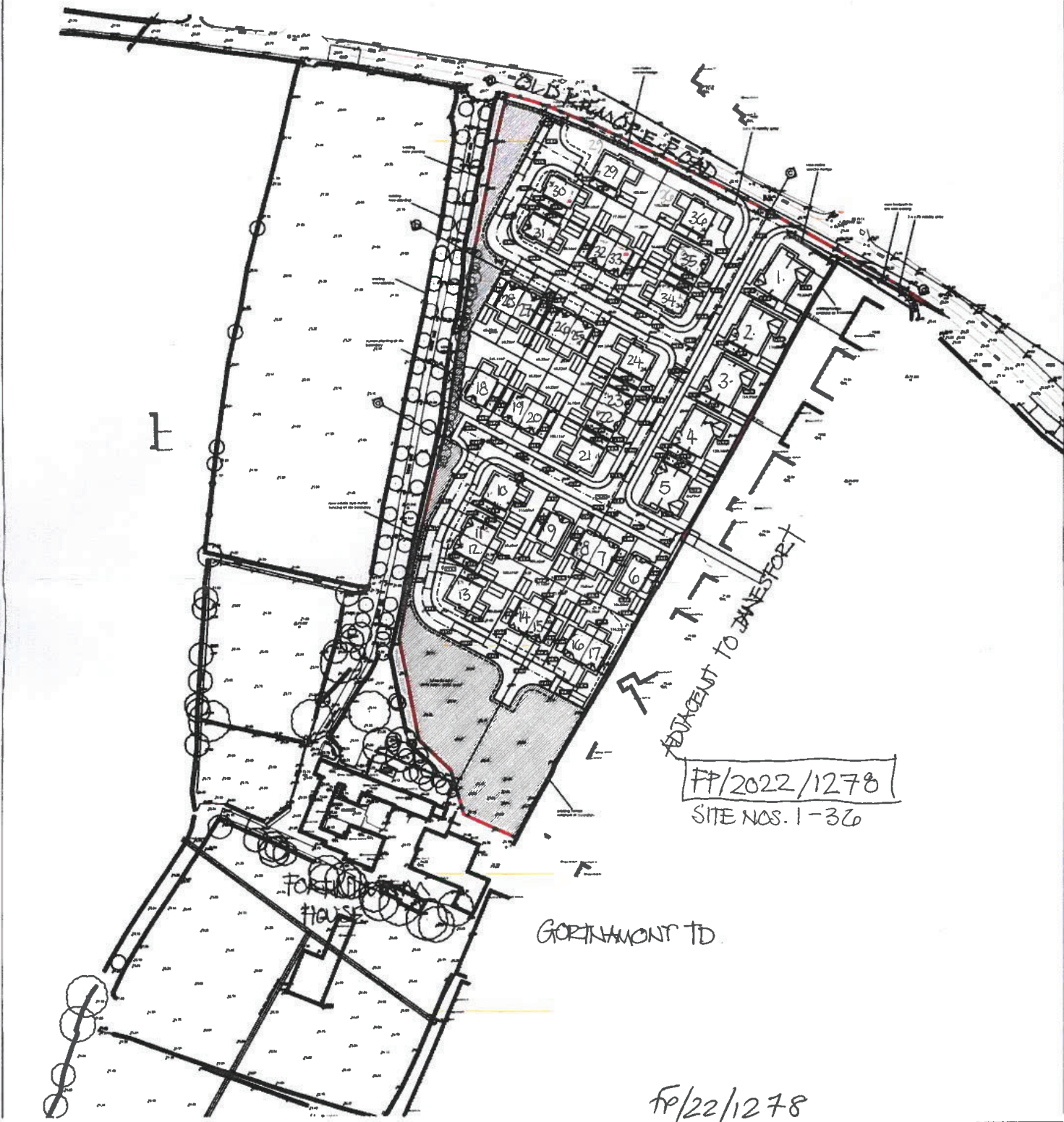
No

If Yes, please insert date:

NOTES:

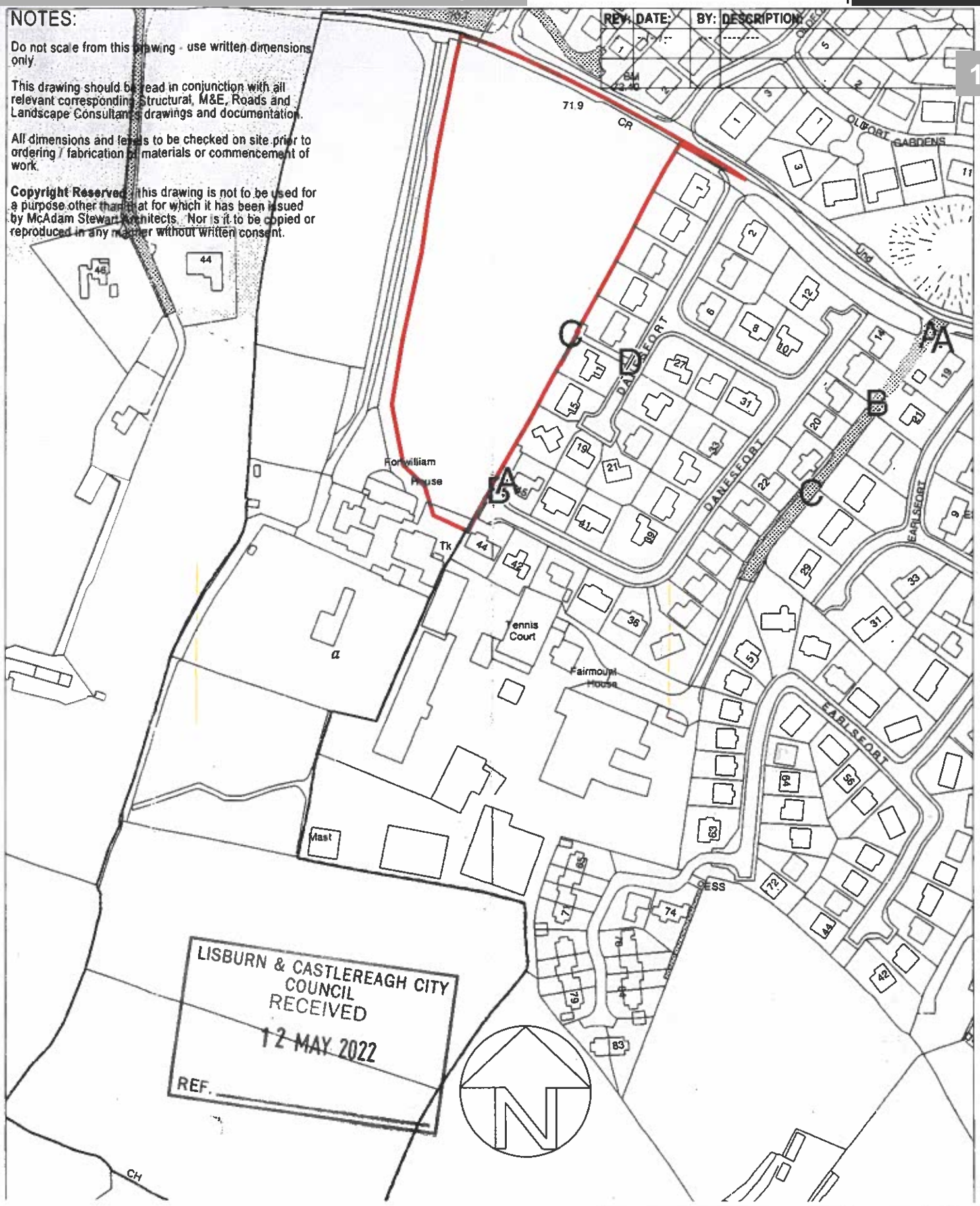
Do not scale from this drawing - use written dimensions only.
 This drawing should be read in conjunction with all relevant corresponding Structural, M&E, Roads and Landscape Consultant's drawings and documentation.
 All dimensions and levels to be checked on site prior to ordering / fabrication of materials or commencement of work.
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BUILDING CONTROL ISSUE
 FOR INFORMATION PURPOSES ONLY
 NOT FOR CONSTRUCTION



Drawing Title:
proposed development at old kilmore road, moira

Drawing Title: SITE LAYOUT - BC				Banbridge Enterprise Centre Scarva Road, Banbridge Co. Down BT32 3QQ tel. (028) 4062 3444 fax. (028) 4062 3411 e-mail. arch@msa.com website. www.mcadamstewart.com	
Project No: 18-113	Drawing No: D-02	Revision: -			
Scale: 1:1250 @ A3	Date: 10 MAY 2022	Drawn by: ---	Checked by: ---	REV: DATE: BY: DESCRIPTION:	



Project Title: proposed development at old kilmore road, moira			
Drawing Title: LOCATION MAP - BC		FP/2022/1278	
Project No: 18-113	Drawing No: B-02	Rev.:	-
Scale: 1:2500 @ A4	Date: 10 MAY 2022	Drawn by:	Checked by:

Banbridge Enterprise Centre
 Scarva Road, Banbridge
 Co. Down BT32 3QD
 tel. (028) 4062 3444
 fax (028) 4062 3411
 e-mail: architects@mcadamstewart.com
 website: www.mcadamstewart.com



Environmental Services Committee

7th September 2022

Report from:

Head of Service - Building Control

Item for Decision

TITLE: Item 4.2 Street Naming – Off Derriaghy Road, Lisburn

Background and Key Issues:

1. Loral Developments Ltd. has proposed the street name for a development of 9 dwellings off the Derriaghy Road, Lisburn
2. The proposal for the street name is:
 - **BOOMERS HALL** (1st preference)
 - **BOOMERS COURT** (2nd preference)
3. The development layout is attached in **Appendix 2 BC** for Members information. This request meets with the requirements of the Council's Street Naming Policy in that the name proposal reflects the already approved street name 'Boomers' and site locality with Boomers reservoir.
4. The Building Control Service received no objections to the proposed names from the Elected Members of the relevant District Electoral Area and no objection to the first preference name from Royal Mail Address Management Team.

Recommendation:

It is recommended that Members approve that the street name Boomers Hall to be allocated to this proposed development of 9 dwellings off the Derriaghy Road, Lisburn.

Finance and Resource Implications:

Revenue budget has been provided within the 2022-23 estimates for Street Nameplates

Screening and Impact Assessment

1. Equality and Good Relations

Has an equality and good relations screening been carried out on the proposal/project/policy? Yes

If no, please provide explanation/rationale

If yes, what was the outcome? :

Option 1 Screen out without mitigation	<input type="checkbox"/> Yes	Option 2 Screen out with mitigation	<input type="checkbox"/> No	Option 3 Screen in for a full EQIA	<input type="checkbox"/> No
--	------------------------------	---	-----------------------------	--	-----------------------------

Rationale for outcome/decision (give a brief explanation of any issues identified including mitigation and/or plans for full EQIA or further consultation)

With regard to the Section 75 statutory duties (of the 1998 NI Act) this item has been subject to screening and ‘screened out’ by way of application of the (previously screened) Councils Street Naming & Numbering Policy, in order to follow due process.

Insert link to completed Equality and Good Relations report:

Equality Screening has been completed and is available on request from the Head of Service – Building Control

2. Rural Needs Impact Assessment:

Has consideration been given to Rural Needs?	<input type="checkbox"/> Yes	Has a Rural Needs Impact Assessment (RNIA) template been completed?	<input type="checkbox"/> No
--	------------------------------	---	-----------------------------

If no, please given explanation/rationale for why it was not considered necessary:

The Council Street Naming and Numbering Policy is universally applicable to both the creation of both urban and rural street names throughout the Council area. There is no differentiation between rural and urbanised considerations for this process and decision impact.

If yes, give brief summary of the key rural issues identified, any proposed actions to address or mitigate and include the link to the completed RNIA template:

SUBJECT TO PLANNING APPROVAL:

No

If Yes, "This is a decision of this Committee only. Members of the Planning Committee are not bound by the decision of this Committee. Members of the Planning Committee shall consider any related planning application in accordance with the applicable legislation and with an open mind, taking into account all relevant matters and leaving out irrelevant consideration".

APPENDICES:

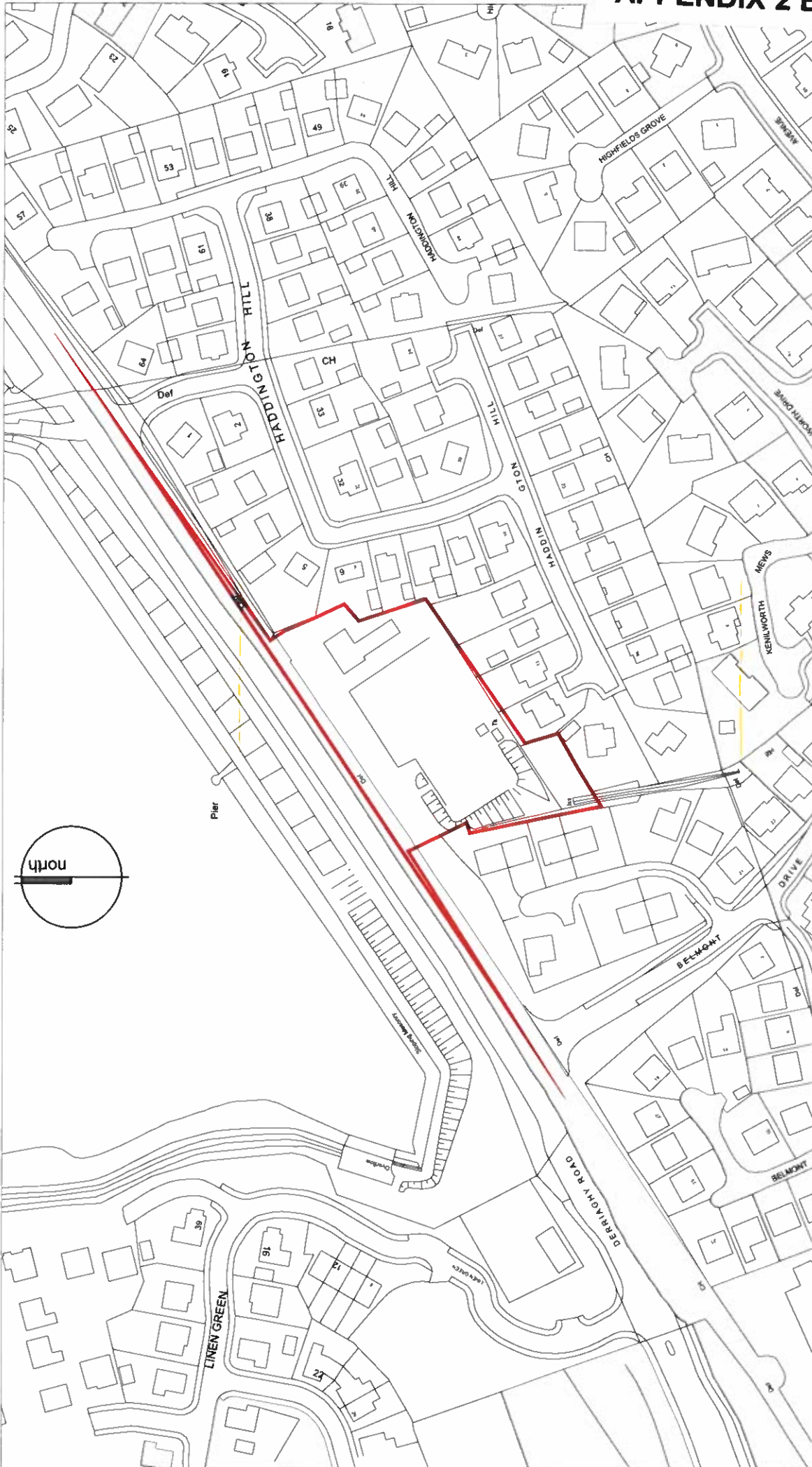
Appendix 2 BC – Development Layout

HAS IT BEEN SUBJECT TO CALL IN TO DATE?

No

If Yes, please insert date:

APPENDIX 2 BC



DWG NO. **17-207-01**



122 UPPER LISBURN ROAD, FINAGHY,
BELFAST, BT10 0BD

t. 02890 301130
e. admin@coogan.co.uk

THIS DRAWING IS TO BE READ IN CONJUNCTION WITH ALL RELEVANT ARCHITECT'S AND ENGINEER'S DRAWINGS. THIS DRAWING REMAINS THE COPYRIGHT OF THE ARCHITECT.

DRAWING TITLE
SITE LOCATION PLAN

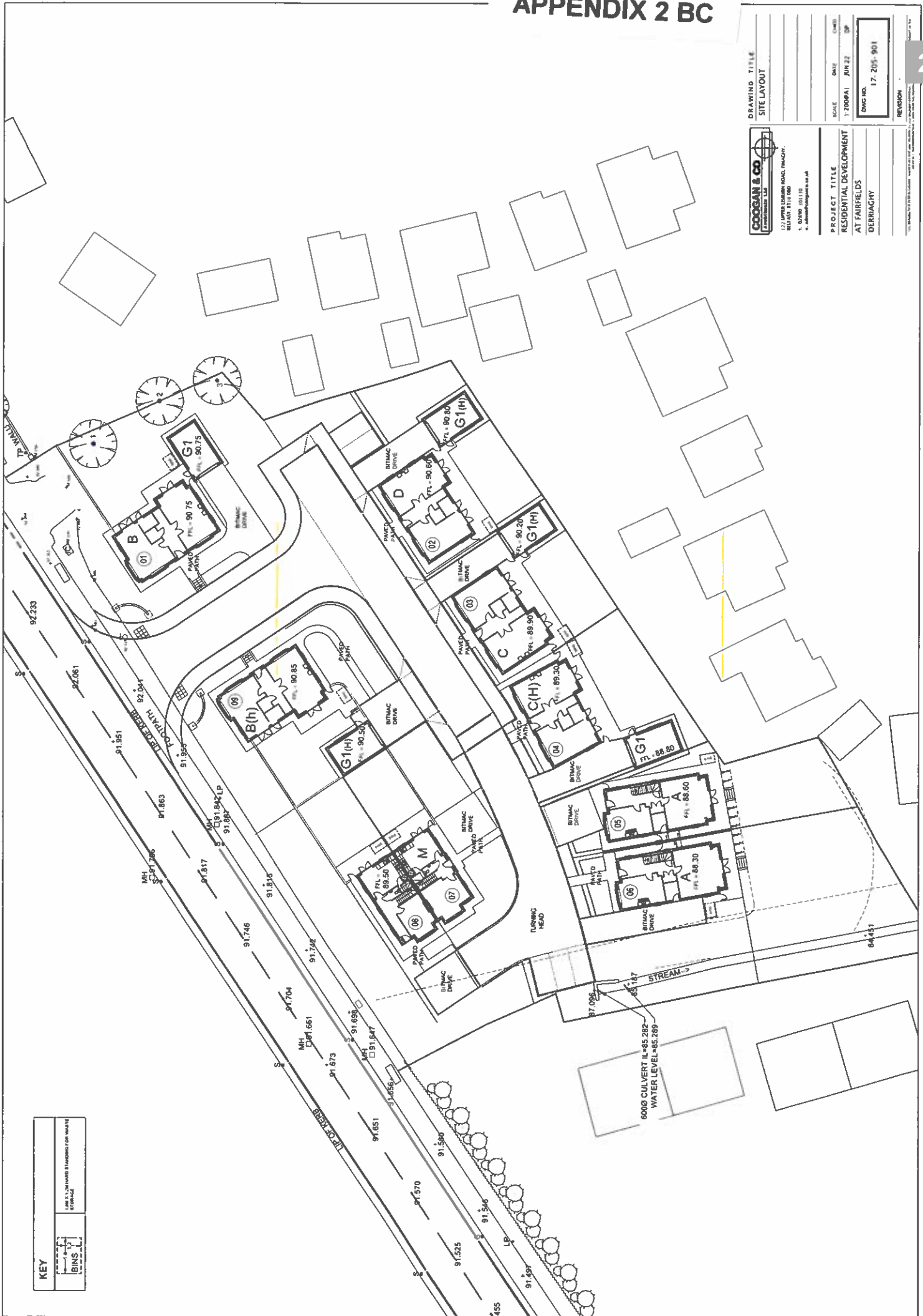
PROJECT TITLE
**RESIDENTIAL DEVELOPMENT AT
DERRIAGHY ROAD
LISBURN**

SCALE 1:1250@A3

DATE **SEPT 2018**

CHK'D SB

APPENDIX 2 BC



KEY

	BINS
	15m x 3m x 1.5m STORAGE TANKS FOR MANURE



DRAWING TITLE		SCALE	DATE	BY
SITE LAYOUT		1:2000(A)	JUN 22	DM
PROJECT TITLE		DWG NO.		
RESIDENTIAL DEVELOPMENT AT FAIRFIELDS DERRAGHY		17-205-901		
REVISION				

6000 CULVERT IL=65.282
WATER LEVEL=65.289



Environmental Services Committee

7th September 2022

Report from:

Head of Service – Environmental Health

Item for Decision

TITLE: Item 5.1 - Service Level Agreement with NI Drinking Water Inspectorate

Background and Key Issues:

1. Members are advised that the Environmental Health Unit has received an updated Service Level Agreement (SLA) with Drinking Water Inspectorate (DWI) to take into account a number of changes requested by Councils. The SLA details the agreed responsibilities of both Council and DWI in relation to Council carrying out the Risk Assessment and Sampling of Private Water Supplies (e.g. boreholes and wells used by industrial premises) on behalf of DWI at prescribed costs.
2. The previous SLA was signed on 30 June 2020 and the main changes since then are shown below;
Private Supplies Investigations:

Councils to:

- Provide points of contact to be notified in the event of failure;
- Adopt a flexible approach and liaise with DWI and the appointed contractor in the collection of resamples or other ad-hoc samples to ensure they are taken in a timely manner and in response to any public health concerns;
- Work in conjunction with DWI and other agencies in the investigation of failures as outlined in the Framework referred to in Section 1.2;
- Accompany DWI staff on request, to investigate failures;
- Follow-up with owners/users to ensure the ongoing protection of public health.

Drinking Water Inspectorate to:

- Take the lead role in private water supply investigation. Where Councils have a regulatory role (eg. food / H&S), both Parties will collaborate to achieve compliance through the most appropriate legislation;
- Notify owners / users of sample failures and provide public health advice;
- Adopt a flexible approach and liaise with councils and the appointed contractor in the collection of resamples or other ad-hoc samples to ensure they are taken in a timely manner and in response to any public health concerns;
- To notify and liaise on public health failures to Public Health Agency;
- Provide onward advice in relation to public health to councils;
- Work in conjunction with council and other agencies in the investigation of failures as outlined in the Framework referred to in Section 1.2.

Attached as **Appendix 1 EH** for Members' reference is the LCCC copy to be signed by the Head of Service (Environmental Health) on behalf of the Council.

Recommendation:

It is recommended that Members approve the signing of this SLA by Head of Service (Environmental Health).

Finance and Resource Implications:

N/A

Screening and Impact Assessment

1. Equality and Good Relations

Has an equality and good relations screening been carried out on the proposal/project/policy? N/A

If no, please provide explanation/rationale

If yes, what was the outcome?:

Option 1 Screen out without mitigation	N/A	Option 2 Screen out with mitigation	N/A	Option 3 Screen in for a full EQIA	N/A
--	-----	---	-----	--	-----

Rationale for outcome/decision (give a brief explanation of any issues identified including mitigation and/or plans for full EQIA or further consultation)

Insert link to completed Equality and Good Relations report:

[Empty text box for link]

2. Rural Needs Impact Assessment:

Has consideration been given to Rural Needs?

N/A

Has a Rural Needs Impact Assessment (RNIA) template been completed?

N/A

If no, please give explanation/rationale for why it was not considered necessary:

[Empty text box for explanation]

If yes, give brief summary of the key rural issues identified, any proposed actions to address or mitigate and include the link to the completed RNIA template:

[Empty text box for summary]

SUBJECT TO PLANNING APPROVAL:

N/A

If Yes, "This is a decision of this Committee only. Members of the Planning Committee are not bound by the decision of this Committee. Members of the Planning Committee shall consider any related planning application in accordance with the applicable legislation and with an open mind, taking into account all relevant matters and leaving out irrelevant consideration".

APPENDICES:

Appendix 1 EH – Copy of SLA with Drinking Water Inspectorate which requires signature.

HAS IT BEEN SUBJECT TO CALL IN TO DATE?

N/A

If Yes, please insert date:

[Empty text box for date]

SERVICE LEVEL AGREEMENT

For the provision of services by:

The Environmental Health Department of

Lisburn & Castlereagh City Council

to The Drinking Water Inspectorate for Northern Ireland

BETWEEN:

- (1) Lisburn & Castlereagh City Council of Civic Centre, Lagan Valley Island, Lisburn, Co. Antrim, BT27 4RL (hereinafter known as 'The Council') and**
- (2) Drinking Water Inspectorate for Northern Ireland acting on behalf of the Department of Agriculture, Environment and Rural Affairs (DAERA) of Klondyke Building, Cromac Avenue, Belfast, BT7 2JA (hereinafter referred to as DWI) together known as 'the Parties'.**

Schedule of Amendments

Version Number	Issue Date	Detail of amendments from previous version	
		Section	Amendment
1.0	17 May 2017	N/A	
2.0	27 May 2020	1.2	Updated link to most recent version of Drinking Water and Health Guidance Document
		2.1	Replace <i>'take effect from'</i> with <i>'replace the current agreement'</i>
		3.2	Insert <i>'including reviews'</i> after <i>'Private Supplies Risk Assessment'</i>
		6.3	Replace <i>'from time to time with the agreement of both Parties'</i> with <i>'in line with the review of this SLA'</i>
		7.1	Replace paragraph
		8.0	Insert <i>'A Data Sharing Agreement will be signed between the parties outlining how the information which is shared is stored and used.'</i>
		11.0	Insert <i>'pandemic'</i>
		Annex A, Page 9: Private Supplies Investigations	Replace paragraph
		Annex B	Updated references to year of Regulations
		Annex C	Replace <i>Updated Schedule of Fees</i>
		Annex D	Insert new Annex
3.0	15 December 2021	Appendix 1	<p>Amendment to Section 8.1:</p> <ul style="list-style-type: none"> • Insert wording <i>'2018 and the UK General Data Protection Regulation'</i> after <i>'Data Protection Act'</i> • Replace the wording <i>'A Data Sharing Agreement'</i> with <i>'A Data Processing Contract (Appendix 1).'</i> <p>Insert the word <i>'processed /'</i> before <i>'shared'</i></p> <p>Add Appendix 1 – Data Processing Contract</p> <p>Remove Schedule of Amendments from Annex D to front of document</p>
		Annex A	Amendments to Annex A: Private Supplies Risk Assessments; Private Supplies Investigations; Private Supply Training / Competency

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1.0 LEGISLATIVE BACKGROUND AND AUTHORISATION

- 1.1 This agreement outlines the arrangement between the Drinking Water Inspectorate for Northern Ireland and XXXX Council, appointed as a competent person, for the purpose of undertaking on behalf of the DWI risk assessments and sampling of private water supplies under The Private Water Supplies Regulations (Northern Ireland) 2017.
- 1.2 The ['Drinking water and health: a guide for public and environmental health professionals and for those in the water industry in Northern Ireland'](#)¹ document (hereinafter referred to as 'the Framework'), produced by the Drinking Water and Health Liaison Group outlines the roles and responsibilities of the key partner organisations and provides the basis for this agreement.

2.0 TERMS OF AGREEMENT

- 2.1 The Agreement shall replace the current agreement from the date of signature by both parties and shall remain in force for a period of two years (unless terminated in accordance with 2.2). At the expiry of the two year period, the parties may agree to extend the SLA on a bi-annual basis thereafter.
- 2.2 The Agreement may be terminated or not extended (as in Section 2.1) by either party on 12 months' written notice.
- 2.3 The Agreement shall be reviewed at least every two years, or on request at any time by either party (in accordance with Section 12.0). Any revised Agreement must have the approval of both Parties.
- 2.4 Any dispute in relation to the operation of the Agreement can be raised at the Annual Meeting (Section 7) for resolution. Any dispute requiring urgent resolution should be raised in writing by the relevant signatory(s) to the Chief Inspector of Drinking Water for resolution.

3.0 OBJECTIVES

¹ Drinking Water and Health – A guide for public and environmental health professionals and for those in the water industry in Northern Ireland.
<https://www.niwater.com/sitefiles/resources/pdf/reports/2020/guidancedocumentondrinkingwaterandhealth2020.pdf>

3.1 The objectives of the Agreement are to establish administrative provision under which the Council will provide the professional services of council staff in roles where they are acting as agents of the DWI. It will enable the Council to provide sampling, risk assessment, and investigatory services, including staff and resources to DWI as defined in 3.2, and to define each party's role, responsibilities and obligations as detailed in the Annex A to this document. It will enable the DWI to individually authorise the Council to carry out duties on their behalf.

3.2 The services being provided by each of the Parties hereto are as listed below hereinafter referred to as the "Services". Further detail of the exact nature of the Services being provided is set out in Annex A hereto.

- **Private Supplies Registration**
- **Private Supplies Risk Assessment (including reviews)**
- **Private Supplies Sampling**
- **Private Supplies Investigations**
- **Private Supplies Training / Competency**

4.0. OPERATING PROCEDURES FOR THE COUNCIL

4.1 The Council shall ensure that delivery of the Services is carried out expeditiously and competently, in accordance with such timescales, conditions and costs as may be agreed with DWI.

4.2 The Council shall use reasonable endeavours to ensure that the staff resources necessary to discharge the Services are available.

4.3 Both the DWI and the Council have a legal obligation for the Health and Safety of their respective staff. The Parties hereto shall take all reasonable steps to ensure that all employees involved with the Services comply with the requirements of the Health & Safety at Work (Northern Ireland) Order 1978 and such other regulations as required.

5.0. OPERATING PROCEDURES FOR DRINKING WATER INSPECTORATE (DWI)

- 5.1 DWI is responsible for specifying the exact nature of the service required of the Council; monitoring the delivery of these services in accordance with this Agreement and subject to satisfactory completion of services, ensuring payment of agreed costs within 30 days from receipt of invoice.
- 5.2 DWI will issue quarterly invoice requests to the Council detailing the sampling and risk assessments undertaken in the previous quarter (3 months).
- 5.3 An annual programme of sampling will be issued by 31 December each year. This schedule will be subject to review and updated at least quarterly.
- 5.4 DWI will provide the Council with training, equipment and all sampling kit consumables as required to conduct sampling and risk assessments of registered private water supplies.
- 5.5 DWI will provide technical advice and guidance to the Council in relation to private water supplies.
- 5.6 All council staff carrying out duties on behalf of the DWI should be individually authorised by the DWI to perform those duties. A sample authorisation document is attached at Annex B.

6.0. BILLING ARRANGEMENTS

- 6.1 The Council will provide quarterly invoices to DWI based on the invoice requests issued by DWI for each quarter. DWI will ensure invoices are paid within 30 days of receipt.
- 6.2 The Chief Inspector of Drinking Water in consultation with the Council through Environmental Health NI (EHNI) will agree a Schedule of Fees which would be standard for all Councils.
- 6.3 The Schedule of Fees is given in Annex C and shall be updated in line with the review of this SLA, with the agreement of both Parties.

7.0 ANNUAL MEETING & ONGOING ENGAGEMENT

7.1 DWI will engage with the Council through Environmental Health (NI) (EHNI) and agree the membership and Terms of Reference for a Drinking Water Working Group. DWI will attend the EHNI every two years or as required at the request of either party. The Drinking Water Working Group will meet annually to discuss the provision of services covered by this agreement.

7.2 All day-to-day matters relating to the services covered by this Agreement shall be conducted by officers of either party operating under the terms of the Agreement.

8.0 CONFIDENTIALITY

8.1 Information relating to private drinking water supplies will be subject to the requirements of the Data Protection Act 2018 and the UK General Data Protection Regulation. All information received by or gathered by the Parties as a result of performing the Services shall be held in accordance with the Parties' respective Records Management / Information policy. A Data Processing Contract (Appendix 1) will be signed between the parties outlining how the information which is processed / shared is stored and used.

9.0 LIABILITY

Each Party shall indemnify and keep indemnified, the other, against all claims, proceedings actions, damages, legal costs, expenses, fines, penalties, demands, loss or damage and any other liabilities, howsoever arising, whether in contract, tort, under statute, common law or otherwise directly or indirectly out of or in the course of or in connection with any provision or failure to provide those Services set out in this Agreement which are the responsibility of that party.

10.0 COMPLAINTS

If a complaint is received by either party in respect of the services carried out under this agreement, the Party receiving the complaint will inform the other in writing and the Parties will agree which Party will investigate the complaint.

11.0 FORCE MAJEURE

Neither party to this Agreement shall be liable to the other or shall be held to be in breach of this Agreement to the extent that it is prevented, hindered or delayed in the performance or observation of its obligations hereunder due to any cause beyond its control (including industrial action, strike, walk out, riot, civil disobedience, inclement weather, inability to obtain supplies, accident, pandemic or any other contingency whatsoever beyond its reasonable control).

12.0 AGREEMENT VARIATIONS

Both parties may request amendments to the scope of Services at any time by submitting a written request to the other party. Any variations will be made only with the consent of both Parties in writing. PROVIDED ALWAYS that DWI can agree that a variation can be implemented across all local Councils in Northern Ireland.

13.0 DISPUTE RESOLUTION

A dispute shall be deemed to have arisen when either Party notifies the other Party in writing to that effect.

The Parties shall use all reasonable efforts to resolve any dispute that may arise under this SLA through good faith negotiations. Each party shall nominate a senior representative of its management to meet at any mutually agreed location to resolve the dispute.

Where an attempt to resolve any dispute under this SLA and where initial contact between representatives of management of either Party has failed, the matter will be escalated to a discussion between a member of senior management from both parties hereto.

14.0 CONFLICT OF INTEREST

In the circumstances where the Council is providing the Service on premises which are in the ownership or control of the Council it is acknowledged that there may be a conflict of interest arising. The Council shall inform the DWI, if it believes that there may be a conflict of interest. The DWI shall, in consultation with the Council provide

such staff as are necessary to assist with or carry on the Services in order to investigate a failure on the Council premises.

15.0 GOVERNING LAW

It is hereby agreed that this Agreement shall be governed by Northern Ireland law and that the Courts of Northern Ireland shall have exclusive jurisdiction in all matters arising hereunder.

16.0 AUTHORISATION

16.1 The authorised person² within the council and the Chief Inspector of Drinking Water authorise this agreement.

Council	Print Name	Signature
Head of Service (Environmental Health) Lisburn & Castlereagh City Council	Richard Harvey	

Drinking Water Inspectorate	Print Name	Signature
Chief Inspector of Drinking Water for Northern Ireland	CATRIONA DAVIS	

16.2 The Agreement will take effect from 1st October 2022

² Chief Executive, Director or Head of Service, as appropriate

OPERATIONAL DELIVERY OF SERVICES

Private Supplies Registration

Councils to:

- Advise DWI of new private water supplies when identified;
- Inform DWI of any changes to registered private supplies;
- Provide information on the annual review of the register of supplies and potential new supplies within required timescales.

Drinking Water Inspectorate to:

- Provide private water supply registration forms for completion;
- Notify council of newly registered supplies where received directly and provide copies of completed registration forms;
- Provide details of registered sites and any known potential new supplies to councils annually for review;
- Manage and maintain register of private water supplies.

Private Supplies Risk Assessment

Councils to:

- Liaise with owner/users to collate information in preparation for the risk assessment;
- Undertake site visit to carry out risk assessment of private water supply;
- Complete/review a risk assessment of private water supply within the required timeframe (within 6 months for new supplies, and review every 5 years or sooner if circumstances change at a site or following an event or critical failure as instructed by DWI);
- Follow up with owner/user on any information outstanding to complete risk assessment/review of the supply;
- Recommend risk assessment actions to DWI.

Drinking Water Inspectorate to:

- Provide methodology and guidance for completion of risk assessments;
- Provide electronic system for collation of risk assessment information;
- Provide historical data, where available, in preparation for risk assessment;
- On request, accompany councils on completion of risk assessments;
- Verify and agree risk assessment actions;

- Issue agreed actions to supply owner;
- Follow-up with supply owner to ensure risk assessment actions implemented;
- Instruct councils on when to complete a risk assessment for new supplies and when to review a risk assessment for existing supplies (every 5 years or sooner if circumstances change at a site or following an event or critical failure).

Private Supplies Sampling

Councils to:

- Liaise with the appointed contractor on the receipt and storage of sample bottles;
- Collect, transport and store samples in accordance with guidance provided by DWI;
- Undertake on-site testing with validated instrumentation and in line with the manufacturer's instructions for equipment being used;
- Ensure accurate completion of field sheets;
- Care for and store sampling kit and meters in accordance with manufacturer's instructions;
- Provide on-site meters for annual validation by DWI and sampling kits for inspection if required;
- Ensure consumables within sample kit are within expiry date;
- Advise DWI or appointed contractor as soon as possible if unable to collect scheduled samples;
- Adopt a flexible approach and liaise with DWI and the appointed contractor in the collection of scheduled monthly compliance samples.

Drinking Water Inspectorate to:

- Provide sampling kits and appropriate meters to councils for the purpose of sampling registered private supplies;
- Replenish sampling consumables on an annual basis or sooner if required;
- Validate on-site meters annually;
- Provide guidance on sampling and identification of appropriate sample points;
- Provide annual sampling schedule for the year and at least quarterly updates;
- Through contractor, arrange the provision of the necessary sample bottles and field sheets for the collection of samples each month;
- Adopt a flexible approach and liaise with councils and the appointed contractor in the collection of scheduled monthly compliance samples.

Private Supplies Investigations

Councils to:

- Provide points of contact to be notified in the event of failure;
- Adopt a flexible approach and liaise with DWI and the appointed contractor in the collection of resamples or other adhoc samples to ensure they are taken in a timely manner and in response to any public health concerns;
- Work in conjunction with DWI and other agencies in the investigation of failures as outlined in the Framework referred to in Section 1.2;
- Accompany DWI staff on request, to investigate failures;
- Follow-up with owners/users to ensure the ongoing protection of public health.

Drinking Water Inspectorate to:

- Take the lead role in private water supply investigations. Where Councils have a regulatory duty (eg. food / H&S) both Parties will collaborate to achieve compliance through the most appropriate legislation;
- Notify owners / users of sample failures and provide public health advice;
- Adopt a flexible approach and liaise with councils and the appointed contractor in the collection of resamples or other adhoc samples to ensure they are taken in a timely manner and in response to any public health concerns;
- To notify and liaise on public health failures to Public Health Agency;
- Provide onward advice in relation to public health to councils;
- Work in conjunction with council and other agencies in the investigation of failures as outlined in the Framework referred to in Section 1.2.

Private Supplies Training/Competency

Councils to:

- Permit only competent, authorised staff to undertake sampling and risk assessments;
- Complete designated DWI training courses to ensure ongoing competency in relation to private water supplies;
- Maintain appropriate auditable training records for staff;
- Facilitate DWI audits to ensure competency under the regulations;
- Advise DWI of council staff training needs.

Drinking Water Inspectorate to:


- Authorise all individual Council staff to carry out duties on behalf of the DWI;

ANNEX A

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- Provide staff undertaking sampling and risk assessments of private water supplies with the necessary training to ensure competency;
- Provide training for council staff on request and as required to enable Council to fulfil its responsibilities and obligations under the Service Level Agreement with DWI;
- Provide technical support/guidance in relation to risk assessments and private water supplies in general;
- Conduct annual audit of the service provided within parameters of audit terms of reference.

SAMPLE AUTHORISATION DOCUMENT



Card No.PWSXXX
Expires: XX/XX/XXXX

THE WATER AND SEWERAGE SERVICES (NORTHERN IRELAND) ORDER 2006: ARTICLE 124 RIGHTS OF ENTRY

THE PRIVATE WATER SUPPLIES REGULATIONS (NORTHERN IRELAND) 2017:

REGULATION 7—RISK ASSESSMENT

REGULATION 12—SAMPLING

Issued by: The Department of Agriculture, Environment and Rural Affairs
Northern Ireland Environment Agency
Klondyke Building
Cromac Avenue
Gasworks Business Park
Belfast BT7 2JA
Tel No. 0845 302 0008

if found should be returned to this address or handed in to your local police station

This is to certify that
is authorised to act on behalf of The Department of Agriculture, Environment and Rural Affairs to exercise and perform the powers and duties conferred upon him/her by the aforementioned legislation and as detailed below:

.....
Authorised Officer (DAERA)

Rights of entry, under Article 124 of The Water & Sewage Services Order (Northern Ireland) 2006 to enter any premises for the purpose of Regulation 7 Requirement to carry out a Risk Assessment and of Regulation 12 Sampling and Analysis under The Private Water Supplies Regulations (Northern Ireland) 2017.

Each Officer's Warrant card will reflect their level of authorisation

SCHEDULE OF FEES

Activity	Unit Cost
Scheduled Sample Collection	£75/sample
Resample Collection (Investigation)	£75/sample
Completion of Full Risk Assessment	£450/risk assessment
Review of Risk Assessment (with site visit)	£200/risk assessment review
Review of Risk Assessment (without site visit)	£100/risk assessment review



DATA PROCESSING CONTRACT

Between

**Northern Ireland Environment Agency (NIEA)
Drinking Water Inspectorate (DWI)**

And

**Northern Ireland Councils'
Environmental Health Departments (EHDs)**

APPENDIX 1

44

1.0	<p>Parties to the Agreement</p> <p>DAERA, NIEA, Drinking Water Inspectorate, Klondyke Building, Cromac Avenue, Gasworks Business Park, Malone Lower, Belfast, BT7 2JA.</p> <p>(the Data Controller)</p>	<p>Northern Ireland Councils', Environmental Health Departments</p> <p>(the Data Processor)</p>
<p>HAVE AGREED on the following Contractual Clauses (the Clauses) in order to meet the requirements of the Data Protection Act 2018 (DPA 2018) and UK General Data Protection Regulation (UK GDPR) to ensure the protection of the rights of the data subject.</p> <p>Each organisation referred to in this document is a 'Party'; together 'Parties'.</p>		
2.0	<p>Introduction</p> <p>The Contract relates to the provision of Services by Northern Ireland Councils' Environmental Health Departments (EHDs) to the Drinking Water Inspectorate (DWI) for Northern Ireland as outlined in the Service Level Agreement (SLA) between the Parties.</p> <p>The Clauses set out the rights and obligations of the Data Controller and the Data Processor, when processing data, including personal data³ on behalf of the Data Controller.</p> <p>For the purpose of this agreement, the DWI is the Data Controller and EHDs are the Data Processors.</p> <p>The Clauses have been designed to ensure the Parties' compliance with Part 3 of the DPA 2018. The terms Controller and Processor are defined in Section 32 of the DPA 2018.</p> <p>The Data Controller determines the purposes and means of the processing of data, including personal data. The Data Processor will process data, including personal data on behalf of the Data Controller in accordance with the Clauses. The Clauses shall take priority over any similar provisions contained in other agreements between the Parties. The Clauses shall be retained in writing, including electronically, by both Parties.</p> <p>The Clauses shall not exempt the Data Processor from obligations to which the Data Processor is subject pursuant to the UK General Data Protection Regulation (the UK GDPR) or other legislation.</p>	
3.0	<p>Purpose</p> <p>The primary purpose for processing the information referred to in the Clauses is for law enforcement⁴ purposes as defined in Section 31 of the DPA 2018.</p> <p>The DWI has a legal vires to collect this information as the regulatory authority for:</p>	

³ 'personal data' means any information relating to an identified or identifiable living individual ('data subject'); an identifiable living individual means a living individual who can be identified, directly or indirectly, in particular by reference to an identifier such as a name, an identification number, location data, an online identifier or to one or more factors specific to the physical, physiological, genetic, mental, economic, cultural or social identity of the individual; **data subject** means 'the identified or identifiable living individual to whom personal data relates.' (S3(5) DPA 2018)

⁴ 'The prevention, investigation, detection or prosecution of criminal offences or the execution of criminal penalties, including the safeguarding against the prevention of threats to public security.'

	<ul style="list-style-type: none"> • The Water and Sewerage Service (NI) Order 2006; • The Private Water Supplies Regulations (NI) 2017; • The Water Supply (Water Quality) Regulations (NI) 2017; and, • The Water Supply (Domestic Distribution Systems) Regulations (NI) 2010. <p>The information that is processed by the EHDs on behalf of DWI will be used to assess compliance with the legislation.</p> <p>DWI also has a duty under the legislation to provide advice and guidance to owners and users of individual private water supplies that are exempt from the monitoring requirements. This may require EHDs to share personal information to enable DWI to fulfil this duty.</p> <p>EHDs may hold similar information for the purposes of law enforcement under other statutory obligations (eg food safety legislation). This is outside the scope of these Clauses, however where the information processed by EHDs on behalf of DWI is not independently collected by councils and has the potential to impact on public health under other statutory obligations for which the council has a regulatory duty, that information will be shared in the interests of public health protection.</p>
4.0	<p>Legal purpose for Data Processing / Sharing</p> <p>As the competent authority for the enforcement of drinking water legislation, DWI is required to take appropriate enforcement action to ensure the water supplied by a ‘relevant person’⁵ in relation to a private water supply (PWS) meets the requirements of the regulations and is safe.</p> <p>Personal information is therefore required to identify a ‘relevant person’. As it can be difficult to determine the category of a private water supply owner or user, (e.g. some may be sole-traders, limited companies, public bodies and some are private householders), all information will be treated as though it is personal data.</p> <p>Information to be processed / shared will include details of owners and users of a PWS and information concerning compliance with drinking water quality regulations.</p> <p>The processed / shared information enables DWI to maintain a record of PWS sites and manage the risk assessment and monitoring programme for these supplies as required under the regulations.</p> <p>The information to be processed / shared is that which is detailed on the PWS Registration Form as detailed in Clause 6.0.</p> <p>Not sharing this data could result in an unsafe PWS being used for drinking water and other domestic uses, posing a risk to public health and a breach of the drinking water legislation.</p>

⁵ “relevant person” means – (a) the owner or occupier (who may be the same or different persons) of premises which are supplied with water for domestic or food production purposes by means of a private supply; (b) the owner or occupier (who may be the same or different persons) of land on which any part of the supply is situated; (c) any other person who exercises powers of management or control in relation to that supply. (Private Water Supplies Regulations (NI) 2017)

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5.0	<p>Organisations Involved</p> <p>The Parties to the Agreement are outlined in Clause 1.0</p> <p>EHDs will process information on behalf of, and share information with DWI and DWI will share information with EHDs.</p>
6.0	<p>Data to be Processed / Shared</p> <p>Information processed⁶ / shared in respect of and as a requirement of the SLA between DWI and EHDs is as follows:</p> <ul style="list-style-type: none"> • Contact details (including name, full address details, and telephone numbers) of PWS owners and users (or other relevant persons) for sites, of which DWI is the regulatory authority; • Location and description of the supply, including the grid reference of the PWS source; • Nature of the premises, volume used, number of persons served, purpose of the supply at the site; • Schematic layout of the supply source, treatment and distribution,; • Monitoring schedule and test results; • Risk assessment information; • Letters and general correspondence on the data subject; • All relevant information required by DWI to carry out its role as the regulatory authority; • All relevant information required by DWI for audit purposes; and, • Investigation reports and information generated relating to potential and ongoing enforcement. <p>The information is gathered from the relevant person(s) responsible for the PWS by EHDs on behalf of DWI, or it may be gathered directly by DWI and shared with EHDs.</p> <p>Information may be shared or transferred between the Parties to this agreement: on an ongoing basis; as sites are identified and require to be registered; as monitoring is required according to the annual schedule; communications are issued in relation to monitoring results; risk assessments are completed; during completion of the annual review; when advice is provided to sites etc.</p> <p>The Regulations require monitoring information to be retained for at least 30 years, however there is no such requirement to retain personal information for this period of time. Personal information will be removed from the site record where a site ceases to operate or where it is no longer relevant to the regulatory duty that DWI has in relation to the site, eg historical information of a relevant person after 10 years.</p>

⁶ 'Processing' means any operation or set of operations which is performed on information, or on sets of information, such as collection, recording, organisation, structuring, storage, adaptation or alteration, retrieval, consultation, use, disclosure by transmission, dissemination or otherwise making available, alignment or combination, restriction, erasure or destruction;

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7.0	<p>Duty of Confidence</p> <p>EHDs shall only grant access to the personal data being processed on behalf of DWI to persons under the Data Processor's authority or are under an appropriate statutory obligation of confidentiality, and only on for the purposes of law enforcement or provision of advice and guidance under drinking water legislation. The list of persons to whom access has been granted shall be kept under periodic review, and the Data Controller can withdraw such access to personal data if access is no longer necessary. Where access is withdrawn, personal data shall consequently not be accessible anymore to those persons.</p>
8.0	<p>Information use</p> <p>EHDs will process the information on behalf of DWI. DWI will primarily only use the information for the purposes for which it is collected as detailed in Clause 3.0.</p> <p>DWI may also use this information for other legitimate purposes in line with the Freedom of Information Act 2000 and The Environmental Information Regulations 2004 where such disclosure is in the public interest and in compliance with DAERA Privacy Statement referred to in Clause 4.0.</p> <p>No information collected on behalf of DWI should be released to a third party without the express written authority of DWI. EHDs will inform DWI of any information requests it receives relating to DWI data, and will refer that request to DWI for a response where that data is not publically available in accordance with Clause 11.0.</p>
9.0	<p>Responsibilities of Each Party</p> <p>9.1 The Rights and Obligations of DWI (the Data Controller):</p> <p>DWI is responsible for ensuring that the processing of personal data takes place in compliance with the UK GDPR and DPA 2018.</p> <p>DWI has the right and obligation to make decisions about the purposes and means of the processing of personal data.</p> <p>DWI shall be responsible, among others, for ensuring that the processing of personal data, which the Data Processor is instructed to perform, has a legal basis.</p> <p>9.2 The Rights and Obligations of the EHDs (Data Processor):</p> <p>The EHDs shall only process data on documented instructions from DWI. Subsequently instructions can also be given by the Data Controller throughout the duration of the processing of personal data, but such instructions shall always be documented and kept in writing, including electronically, in connection with the Clauses.</p> <p>The EHDs shall immediately inform DWI if instructions given by the Data Controller, in the opinion of the EHDs, contravene the UK GDPR or DPA 2018.</p> <p>The EHDs shall assist DWI by appropriate technical and organisation measures, insofar as this is possible, in the fulfilment of the DWI's obligations to:</p>

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- Keep personal data secure;
- Notify personal data breaches to the supervisory authority;
- Notify personal data breaches to the data subjects;
- Carry out data protection impact assessments (DPIAs) when required;
- Consult the supervisory authority where a DPIA indicates there is a high risk that cannot be mitigated; and
- Respond to subject access requests for exercising the data subject's rights laid down in Chapter III UK GDPR.

This requires that the EHDs shall, insofar as this is possible, assist DWI in the DWI's compliance with:

- The right to be informed when collecting personal data from the data subject;
- The right to be informed when personal data has not been obtained from the data subject;
- The right of access by the data subject;
- The right to rectification;
- The right to erasure (the right to be forgotten);
- The right to restriction of processing;
- Notification obligation regarding rectification or erasure of personal data or restriction of processing;
- The right to data portability;
- The right to object; and
- The right not to be subject to a decision based solely on automated processing, including profiling

In addition to the EHD's obligation to assist DWI, the EHD shall furthermore, taking into account the nature of the processing and the information available to the EHD, assist the DWI in ensuring compliance with:

- The Data Controller's obligations to notify the Competent Supervisory Authority in the event of a data breach as detailed in **Clause 14.0**;
- The Data Controller's obligation to without undue delay communicate the personal data breach to the data subject, when the personal data breach is likely to result in a high risk to the rights and freedoms of natural persons;
- The Data Controller's obligation to carry out an assessment of the impact of the envisaged processing operations on the protection of personal data (a data protection impact assessment); and
- The Data Controller's obligation to consult the competent supervisory authority, the Information Commissioner's Office prior to processing where a data protection impact assessment indicates that the processing would result in a high risk in the absence of measures taken by the Data Controller to mitigate the risk.

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<p>10.0</p>	<p>Use of Sub-processors</p> <p>The EHDs shall meet the requirements specified in Article 28(2) and (4) UK GDPR in order to engage another processor (a sub-processor).</p> <p>The EHDs shall therefore not engage another processor (sub-processor) for the fulfilment of the Clauses without the prior specific written authorisation of the DWI.</p> <p>The EHDs shall engage sub-processors solely with the specific prior authorisation of the DWI. The EHDs shall submit the request for specific authorisation at least 28 working days prior to the engagement of the concerned sub-processor. There are currently no sub-processors approved by DWI for use by EHDs.</p> <p>Where the EHDs engages a sub-processor for carrying out specific processing activities on behalf of the DWI, the same data protection obligations as set out in the Clauses shall be imposed on that sub-processor by way of a contract or other legal act under domestic law, in particular providing sufficient guarantees to implement appropriate technical and organisation measures in such a manner that the processing will meet the requirements of the Clauses and UK GDPR.</p> <p>The EHDs shall therefore be responsible for requiring that the sub-processor at least complies with the obligations to which the EHDs is subject pursuant to the Clauses and the UK GDPR.</p> <p>A copy of such a sub-processor agreement and subsequent amendments shall, at the DWI's request, be submitted to the DWI, thereby giving the DWI the opportunity to ensure the same data protection obligations as set out in the Clauses are imposed on the Sub-processor. Clauses on the business related issues that do not affect the legal protection content of the Sub-processor agreement, shall not require submission to the DWI.</p> <p>The EHDs shall agree a third-party beneficiary clause with the Sub-processor where, in the event of bankruptcy of the Data Processor, the DWI shall be a third party beneficiary to the Sub-processor agreement and shall have the right to enforce the agreement against the Sub-processor to delete or return the personal data.</p> <p>If the Sub-processor does not fulfil their data protection obligations, the EHDs shall remain fully liable to the DWI as regards the fulfilment of the obligations of the Sub-processor. This does not affect the rights of data subjects under the UK GDPR, in particular those unforeseen in Articles 79 and 82 GDPR, against the DWI and the EHDs, including the Sub-processor.</p>
<p>11.0</p>	<p>Requests for information</p> <p>DWI will retain responsibility for handling requests for information under DPA 2018, FOI, and EIR where the requested information is not publicly available. DWI will apply all necessary checks prior to the release of information to identify exemptions, including the Public Interest test.</p> <p>Where a request for information is submitted to EHDs, and that information is publicly available or published by DWI, the EHDs shall provide that information or links to where it can be found directly to the requestor and inform DWI accordingly.</p>

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	<p>It is the responsibility of the Data Processors to assist the Data Controller with responding to Subject Access Requests using appropriate technical and organisational measures.</p>
<p>12.0</p> <p>12.1</p> <p>12.2</p>	<p>Security of Processing</p> <p>How will data be shared?</p> <p>Information will be transferred / shared on both a routine and ad hoc basis.</p> <p>As Data Processor, EHDs will process information as instructed by DWI.</p> <p>Data will be transferred in a format compatible with DWI information technology systems. This includes transfer electronically via the Risk Assessment Web Application (each user has a unique password), via email across the secure government network and occasionally in paper format via post or hand delivered (i.e. at meetings), in all cases an acknowledgement of receipt will be provided.</p> <p>Where necessary, information will be protectively marked in line with <u>Government Security Classifications</u> (Official, Secret, and Top Secret).</p> <p>DWI and EHDs shall implement appropriate technical and organisational measures to ensure a level of security appropriate to the risk as outlined in Article 32 of UK GDPR. DWI shall evaluate the risks to the rights and freedoms of natural persons inherent in the processing and implement measures to mitigate those risks. Depending on their relevance, the measures may include the following:</p> <ul style="list-style-type: none"> • Pseudonymisation and encryption of personal data; • The ability to ensure ongoing confidentiality, integrity, availability and resilience of processing systems and services; • The ability to restore the availability and access to personal data in a timely manner in the event of a physical or technical incident; • A process for regularly testing, assessing and evaluating the effectiveness of technical and organisational measures for ensuring the security of the processing. <p>DWI shall also evaluate the risks to the rights and freedoms of natural persons inherent in the processing and implement measures to mitigate those risks. To this effect, the DWI shall provide the EHDs with all information necessary to identify and evaluate such risks.</p> <p>DWI and EHDs shall ensure that:</p> <ul style="list-style-type: none"> • Unauthorised staff and other individuals are prevented from gaining access to personal data; • Visitors are received and supervised at all times in areas where personal data is stored; • All computer systems that contain personal data be password-protected (the level of security should depend on the type of data held, but ensure that only those who need to use the data have access); • Appropriate training is provided for the staff who access the information; • Workstations / PCs are not left signed on when not in use; • All disks, tapes or printouts are locked securely away when not in use;

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12.3	<ul style="list-style-type: none"> • All new software is virus-checked prior to loading onto a Council machine; • No personal data is transmitted by open email; • Paper files are stored in secure locations and only accessed by those who need to use them; • Personal data is not disclosed to anyone other than the Data Subject unless you have the Data Subject's consent, or it is a registered disclosure, required by law, or permitted by a Data Protection Legislation exemption; • No information is left on public display in any form; sensitive material is locked away safely at the end of each day; • No information is exploited for commercial purposes; and • Crown Copyright and any intellectual property rights are invested in the information provided. <p>DAERA Privacy Statement</p> <p>DWI takes data protection, freedom of information and environmental information issues seriously. It takes care to ensure that any personal information supplied to it is dealt with in a way which complies with the requirements of the DPA 2018. This means that any personal information supplied will be processed principally for the purpose for which it has been provided.</p> <p>DWI and EHDs have a statutory duty to process personal data in compliance with this Act.</p> <p>The Department however, is also under a duty to protect the public funds it administers, and to this end may use the information provided by EHDs for this purpose. It may also share this information with other bodies responsible for the audit or administration of public funds, in order to prevent and detect fraud.</p> <p>In addition, the Department may also use it for other legitimate purposes as outlined in the <u>DAERA Privacy Statement</u>.</p> <p>A Data Protection Impact Assessment (DPIA) screening assessment has been completed and determined a full DPIA is not required for this Contract.</p>
13.0	<p>Retention and Disposal</p> <p>The Private Water Supplies Regulations (NI) 2017 require that records for sampling and analysis be retained for 30 years, and all other information in relation to the site be retained for 10 years according to information retention procedures.</p> <p>Records are retained according to DAERA's record retention schedule which is reviewed annually. Data relating to subjects should only be retained by the EHDs whilst the site is in operation and requires active data processing. When the site is removed from the requirements of the Regulations and the Order (no longer using a private water supply), the EHD will be advised in writing by the DWI and Clause 15 will be enacted.</p> <p>Information processed on behalf of DWI by EHDs in relation to other regulations shall be dealt with in a similar manner and disposed of after 10 years.</p>
14.0	<p>Notification of a Personal Data Breach</p>

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	<p>In case of any personal data breach, the EHDs shall, without undue delay after having become aware of it, notify DWI of the personal data breach.</p> <p>The EHD's notification to DWI shall, take place without undue delay and in any case within 24 hours after the EHDs has become aware of the personal data breach to enable the DWI to comply with the Data Controller's obligation to notify the personal data breach to the Competent Supervisory Authority, within 72 hours as required by Article 33 of UK GDPR.</p> <p>In accordance with Clause 9.2, the EHDs shall assist the DWI in notifying the personal data breach to the Competent Supervisory Authority, meaning that the EHD is required to assist in obtaining the information listed below which, pursuant to Article 33(3) UK GDPR, shall be stated in the DWI's notification to the Competent Supervisory Authority:</p> <ul style="list-style-type: none"> • The nature of the Personal data including where possible, the categories and approximate number of data subjects concerned and the categories and approximate number of personal data records concerned; • The name and contact details of the Data Protection Officer or other contact where further information may be obtained; • The likely consequences of the personal data breach; • The measures taken or proposed to be taken by the DWI to address the personal data breach, including, where appropriate, measures to mitigate its possible adverse effects. <p>The EHDs must be fully engaged in the resolution of an incident by assisting in the investigation being carried out by DWI.</p> <p>DWI will report any data breaches immediately, according to the DWI Information Loss Handling Plan.</p>
15.0	<p>Audit and Inspection</p> <p>The EHDs shall make available to DWI all information necessary to demonstrate compliance with the obligations laid down in Article 28 and the Clauses and allow for and contribute to audits, including inspections, conducted by DWI or another auditor mandated by DWI.</p> <p>Procedures applicable to the DWI's audits, including inspections, of the Data Processor and Sub-processors are specified in Annex 1 of the SLA.</p> <p>The Data Processor shall be required to provide the supervisory authorities, which pursuant to applicable legislation have access to the DWI's and EHD's facilities, or representatives acting on behalf of such supervisory authorities, with access to the Data Processor's physical facilities on presentation of appropriate identification.</p>
16.0	<p>Commencement and Termination of Data Processing Agreement</p> <p>This agreement will be reviewed every two years in line with the review of the SLA and can only be amended with agreement of both Parties. The Clauses shall become effective on the date of both Parties signature.</p> <p>Both Parties shall be entitled to require the Clauses to be renegotiated if changes to the law or inexpediency of the Clauses should give rise to such renegotiation.</p> <p>The Clauses shall apply for the duration of the provision of data processing services. For the duration of the provision of personal data processing services, the Clauses cannot be</p>

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	<p>terminated unless other Clauses governing the provision of the personal data processing services have been agreed between the Parties.</p> <p>If the provision of data services is terminated, and the personal data is deleted or returned to the DWI pursuant to Clause 17.0 (erasure and return of data), the Clauses may be terminated by written notice by either party.</p>
17.0	<p>Erasure and Return of Data</p> <p>On termination of the provision of data processing services, the EHDs shall be under obligation to delete all personal data processed on behalf of DWI and certify to DWI that it has been done in a secure manner and in accordance with the security requirements of Article 32 of the UK GDPR.</p>
18.0	<p>Indemnity</p> <p>In the event of a breach of this agreement which results in a financial penalty, claim or proceedings, the Parties agree to co-operate to identify and apportion responsibility for the breach and the defaulting party will accept responsibility for any such claim.</p>
19.0	<p>Signatures</p> <p>I have read, understood and agree to abide by the terms and conditions of this agreement. All information received will only be used for the purpose defined and listed in the agreement.</p> <p>Signed on behalf of Drinking Water Inspectorate (Data Controller)</p> <p>-----</p> <p>Name (block capitals): CATRIONA DAVIS</p> <p>Date:</p> <p>Signed on behalf of Local Council Environmental Health Department (Data Processor)</p> <p>-----</p> <p>Name (block capitals): RICHARD HARVEY</p> <p>Date:</p>

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Notification of Data Breach by Data Processor to Data Controller

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The Processor shall notify the Controller without undue delay after becoming aware of **any** data breach. Where, and in so far as, it is not possible to provide the information at the same time, the information may be provided in phases without undue further delay.

Date & Time of Notification	
Name & Contact of Person Making Notification	
Extent Nature and cause of the data / information loss	
Describe the nature of the data breach including where possible: <ul style="list-style-type: none"> • the categories and approximate number of data subjects concerned • the categories and approximate number of personal data records concerned 	
Contact Details	
Name and contact details of the data protection officer or other contact point where more information can be obtained	
Cause	
Detail the cause of the data loss: <ul style="list-style-type: none"> • What happened • Human error • IT system failure • Fraud • Theft 	
Containment and Recovery	
Has it been stopped? Has the data been recovered? Damage limitation?	
Consequences	
Detail the likely consequences of the data breach; <ul style="list-style-type: none"> • Did it include personal data? • Did it include sensitive personal data? 	
Data Subjects	
Who is affected? Have they been informed?	
Actions taken	
Measures taken / proposed by the Processor to address the personal data breach, including, where appropriate, measures to mitigate its possible adverse effects	



Environmental Services Committee

7th September 2022

Report from:

Head of Service – Environmental Health

Item for Decision

TITLE: Item 5.2 - The Child and Adult Safeguarding Policy - Prevention and Protection in Partnership

Background and Key Issues:

1. Members are advised that the Safeguarding Working Group has reviewed and updated the Lisburn & Castlereagh City Council Child and Adult Safeguarding Policy. The Policy has been equality screened.
2. Attached as **Appendix 2A and 2B EH** are the updated documents for Members' approval.

Recommendation:

It is recommended that Members approve the updated Child and Adult Safeguarding Policy.

Finance and Resource Implications:

None.

Screening and Impact Assessment

1. Equality and Good Relations

Has an equality and good relations screening been carried out on the proposal/project/policy?

Yes

If no, please provide explanation/rationale

If yes, what was the outcome?:

Option 1

Screen out without mitigation

Yes

Option 2

Screen out with mitigation

No

Option 3

Screen in for a full EQIA

No

Rationale for outcome/decision (give a brief explanation of any issues identified including mitigation and/or plans for full EQIA or further consultation)

Equality screening has concluded no need to carry out a full equality impact assessment. No negative impacts have been identified. The policy should only have minor positive impacts for the groups it is targeting.

Insert link to completed Equality and Good Relations report:

See Appendix 2B EH

2. Rural Needs Impact Assessment:

Has consideration been given to Rural Needs?

N/A

Has a Rural Needs Impact Assessment (RNIA) template been completed?

N/A

If no, please give explanation/rationale for why it was not considered necessary:

If yes, give brief summary of the key rural issues identified, any proposed actions to address or mitigate and include the link to the completed RNIA template:

SUBJECT TO PLANNING APPROVAL:

N/A

If Yes, "This is a decision of this Committee only. Members of the Planning Committee are not bound by the decision of this Committee. Members of the Planning Committee shall consider any related planning application in accordance with the applicable legislation and with an open mind, taking into account all relevant matters and leaving out irrelevant consideration".

APPENDICES:

Appendix 2A EH – Child and Adult Safeguarding Policy
Appendix 2B EH – Equality Screening

HAS IT BEEN SUBJECT TO CALL IN TO DATE?

N/A

If Yes, please insert date:

**LISBURN & CASTLEREAGH CITY COUNCIL
CHILD AND ADULT SAFEGUARDING POLICY -
PREVENTION AND PROTECTION IN
PARTNERSHIP**



**Lisburn &
Castlereagh
City Council**

CHIEF EXECUTIVE'S FOREWORD

Everyone has a fundamental right to be safe. Whatever the cause, and wherever it occurs, harm caused to children and adults by abuse, exploitation or neglect is not acceptable. This policy emphasises that safeguarding is everyone's business and that as a Council, Lisburn & Castlereagh City Council (LCCC) should strive to prevent harm to children and adults from abuse, exploitation or neglect.

This Policy requires us to put all individuals who may be at risk at the centre of what we do, to listen to them and to work in partnership with them and on an inter-agency basis, to create an organisation which has a zero-tolerance of harm to the most vulnerable people living in Northern Ireland.

The Policy contributes to the fulfilment of a Northern Ireland Executive Programme for Government commitment to deliver a package of measures to safeguard children and adults who are at risk of harm and to promote a culture where safeguarding is everyone's business. It also links with LCCC Community Action Plan in that it helps to deliver on pledges to support our young people and older people who may be at risk of abuse.

The Council recognises that the Safeguarding Policy must be owned at all levels within the organisation. As Chief Executive of LCCC I have directed that this Policy be developed and I, with the Corporate Management Team, will be responsible for its approval and ensuring it is fully implemented and reviewed. A key element of the Safeguarding Policy is the nomination of a Safeguarding Manager, with the remit of Adult Safeguarding Champion, who will ensure that this council embraces best practice in this area.

The Policy and its supporting procedures have been developed by the Council's Safeguarding Working Group (SWG) with the support of expert advice. It applies to all employees, elected members, volunteers, contractors, grant-aided organisations and those using our facilities, irrespective of their function, remit or role. I particularly commend this Policy to all employees and would ask that you take the time to familiarise yourself with the contents.

David Burns

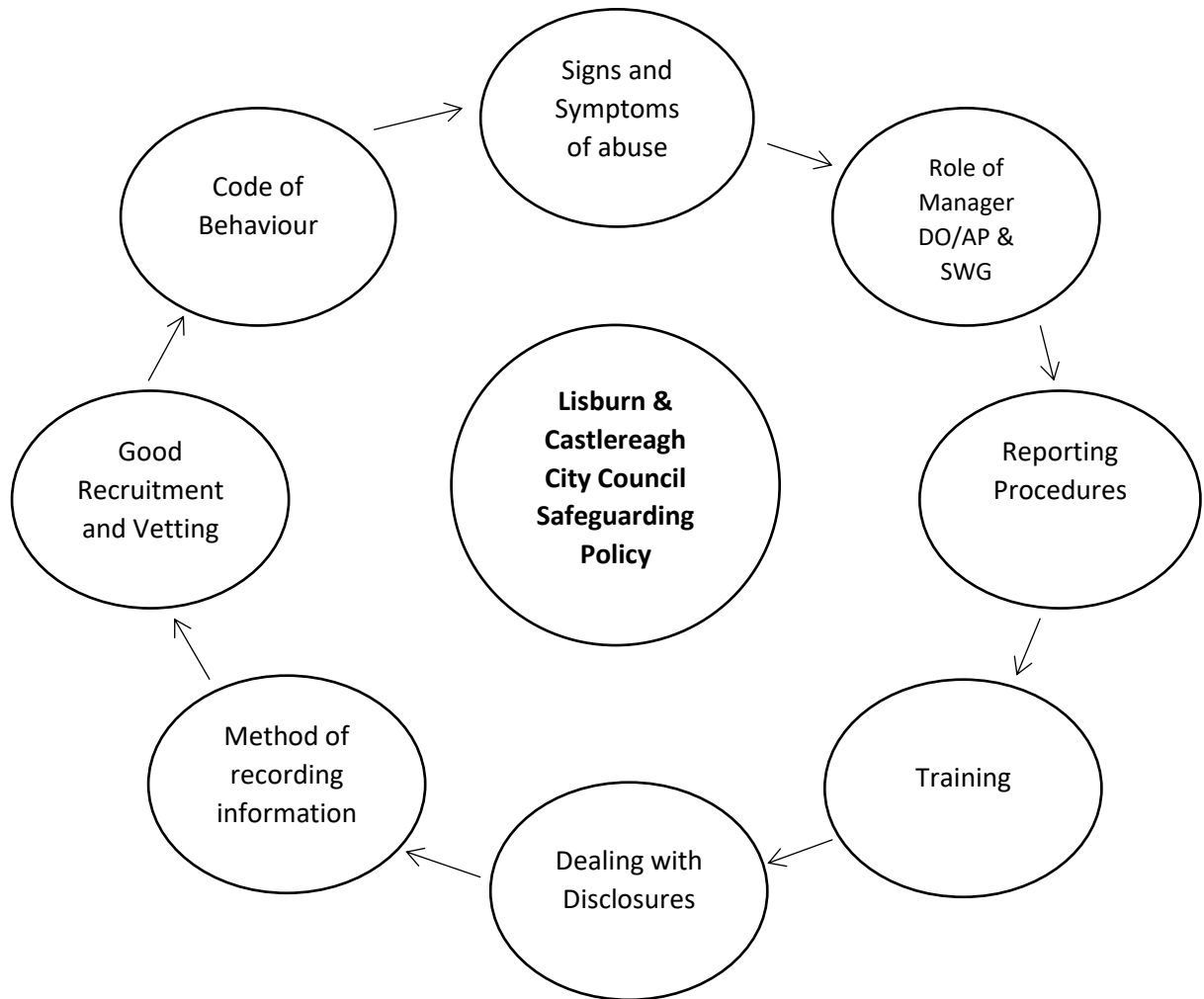
May 2022

1. WHAT IS SAFEGUARDING?

- 1.1** Within this Policy the term ‘safeguarding’ is used in its widest sense, that is, to encompass both activity which **prevents** harm from occurring in the first place (Council Safeguarding Procedures) and activity which **protects** children and adults at risk and in need of protection, where harm has occurred or is likely to occur (Council Reporting to statutory agencies Procedures).
- 1.2 Preventative Safeguarding** includes a range of actions and measures. Council employees may come into contact with children and adults who may be at risk of harm and so must recognise the potential for, and to prevent, harm. In practice the Council supports staff by providing safeguarding procedures:
- Recruitment and Selection
 - Reporting Procedures and Incident Report Form
 - Code of Behaviour for Staff and Volunteers
 - Booking of LCCC facilities
 - Photographic Guidance
 - Role of Safeguarding Manager and Designated Officers/Appointed persons
 - Safeguarding Training for staff and elected members
 - Leisurewatch Procedure
 - Workplace Domestic Violence Guidance
 - Supervision levels
 - Student Work Placements
 - Contractor Guidance
 - Managing Challenging Behaviour/Anti-Bullying
 - Persons in Crisis/At risk of suicide
 - Allegations Against Staff Procedure
 - [Live Streaming and Video Conferencing](#)
- 1.3 Protective Safeguarding** is targeted at children and adults who are in need of protection, that is, when harm from abuse, exploitation or neglect is suspected, has occurred, or is likely to occur. The protection service is led by Health and Social Care Trusts and PSNI. In practice the Council has internal reporting protocols for concerns regarding children and adults which may lead to referrals to these statutory agencies.

1.4 Arena of Safety

The 'arena of safety' diagram expresses the Council's Prevention and Protection Procedures.



2.0 Definitions (for the purposes of this policy)

2.1 Child

Those aged under 18 years.

2.2 Adult at risk of harm

It is not possible to definitively state when an adult is at risk of harm as this will change on a case by case basis. The following definition is intended to provide guidance, as to when an adult may be at risk of harm in order that further professional assessment may be sought.

Adult at Risk of Harm

An adult at risk of harm is a person aged 18 or over, whose exposure to harm through abuse, exploitation or neglect **may** be increased by their personal characteristics and/or life circumstances.

i) **personal characteristics** *may include, but are not limited to age, disability, illness, mental or physical frailty or impairment of, or disturbance in, the functioning of the mind or brain;*

ii) **life circumstances** *may include, but are not limited to, isolation, social-economic factors and environmental living conditions;*

Adult in Need of Protection is a person aged 18 or over, whose exposure to harm through abuse, exploitation or neglect may be increased by their:

- a. personal characteristics; and/or
- b. life circumstances; and
- c. who is **unable to protect** their own well-being, property, assets, rights or other interests; and
- d. where the **action or inaction of another person or persons** is causing, or is likely to cause, him/her to be harmed.

In order to meet the definition of an 'adult in need of protection' either **a.** or **b.** must be present, in addition to both element of **c.** and **d.**

In most situations HSC Trusts will make a decision regarding the degree of risk and level of harm an adult may be facing and decide on the most appropriate action to take.

3.0 AIMS

This policy aims to:

- 3.1 promote zero-tolerance of harm to all children and adults who are at risk from abuse, exploitation or neglect;

- 3.2 improve safeguarding arrangements for children and adults who are at risk of harm from abuse, exploitation or neglect;
- 3.3 influence the way the organisation thinks about harm to children and adults resulting from abuse, exploitation or neglect by embedding a culture which recognises every person's right to respect and dignity, honesty, humanity and compassion in every aspect of their life;
- 3.4 establish clear procedures for reporting and responding to concerns that a child or adult is, or may be, at risk of being harmed or in need of protection;
- 3.5 prevent and reduce the risk of harm to **adults**, while supporting their right to maintain control over their lives and make informed choices free from coercion;
- 3.6 promote a continuous learning approach to safeguarding and to support the adoption of a Trauma Informed Workforce; and
- 3.7 to incorporate safeguarding responsibilities into Service Plans where appropriate.
- 3.8 to underpin the themes of the SBNI Strategic Plan 2022-26 with the aims of: Online safety, Domestic violence and abuse, and Children and Young people's mental health.

4.0 WHO IS THIS POLICY FOR?

- 4.1 The policy applies to all employees, elected members, volunteers, contractors, grant-aided organisations and those using our facilities irrespective of their function, remit or role.
- 4.2 There is an expectation that all employees will work in partnership as they apply this policy to their work with children and adults who may be at risk of harm or in need of protection.

5.0 UNDERPINNING PRINCIPLES/BACKGROUND

- 5.1 This policy has been developed in line with the following legislation and guidance and good practice guidelines, current at the time of publication.

5.2 Legislation

- The Criminal Law Act 1967
- The Children's (NI) Order 1995
- The Children's Services Co-operation Act (NI) 2015
- UN Convention on the Rights of the Child 1989
- The Mental Health(NI) Order 1986
- The Safeguarding Vulnerable Groups (NI) Order 2007 (as amended by the Protection of Freedoms Act 2012)
- The Sexual Offences Order (NI) 2008
- Section 75 NI Act 1998

- The Human Rights Act 1998
- The Safeguarding Board Act (NI) 2011
- Data Protection Act 2018- GDPR
- [The Disability Discrimination Act 1995 \(Commencement No. 11\) Order \(Northern Ireland\) 2015](#)
- The Criminal Justice (NI) Order 2008
- The Draft Adult Protection Bill

5.3 Guidance Documents

- Adult Safeguarding- Prevention and Protection in Partnership – NIASP 2015
- [SBNI Strategic Plan 2022-26](#)
- Adult Safeguarding Operational Procedures –NIASP 2016
- Keeping Adults Safe: A shared Responsibility – Volunteer Now 2017
- SBNI – Safeguarding Board for NI - Policy standards
- Co-operating to Safeguard Children (DHSSPS) Guidance in Northern Ireland, 2017
- [Keeping Children Safe: Our Duty to Care- Volunteer Now 2019](#)

5.4 Relationship with other Council Policies and Guidance

5.4.1 This policy operates in parallel and is supported by other Council Policies and guidance namely:

Disciplinary; Equality; Training and Development; Whistleblowing; Social Media; Health and Safety; Fraud and Corruption; Complaints procedure; Performance Review Scheme; Disposal of Records Policy; Dignity at Work Policy; Data Protection Policy; and Community Planning Policy.

6.0 FORMS OF ABUSE

6.1 Adults

Abuse is a single or repeated act or lack of appropriate action, occurring within a relationship where there is an expectation of trust, which causes harm or distress to another individual or violates their human or civil rights.

Abuse is the misuse of power and control that one person has over another. It can involve direct or indirect contact and can include online abuse.

The types of abuse are not exhaustive, nor listed in any order of priority.

6.1.1 Physical abuse

Physical abuse is the use of physical force or mistreatment of one person by another which may or may not result in actual physical injury. This may include hitting, pushing, rough handling, exposure to heat or cold, force feeding, improper administration of medication, denial of treatment, misuse or illegal use of restraint and deprivation of liberty. Female genital mutilation (FGM) is considered a form of physical AND sexual abuse.

6.1.2 Sexual violence and abuse

Sexual abuse is any behaviour (physical, psychological, verbal, virtual/online) perceived to be of a sexual nature which is controlling, coercive, exploitative, harmful, or unwanted that is inflicted on anyone (irrespective of age, ethnicity, religion, gender, gender identity, sexual orientation or any form of disability).

Sexual violence and abuse can take many forms and may include non-contact sexual activities, such as indecent exposure, stalking, grooming, being made to look at or be involved in the production of sexually abusive material, or being made to watch sexual activities. It may involve physical contact, including non-consensual penetrative sexual activities or non-penetrative sexual activities, such as intentional touching (also known as groping). Sexual violence can be found across all sections of society, irrelevant of gender, age, ability, religion, race, ethnicity, personal circumstances, financial background or sexual orientation.

6.1.3 Psychological / emotional abuse

Psychological / emotional abuse is behaviour that is psychologically harmful or inflicts mental distress by threat, humiliation or other verbal/non-verbal conduct.

This may include threats, humiliation or ridicule, withholding security, love or support, provoking fear of violence, shouting, yelling and swearing, blaming, controlling, intimidation and coercion.

6.1.4 Financial abuse

Financial abuse is actual or attempted theft, fraud or burglary. It is the misappropriation or misuse of money, property, benefits, material goods or other asset transactions which the person did not or could not consent to, or which were invalidated by intimidation, coercion or deception. This may include exploitation, embezzlement, withholding pension or benefits or pressure exerted around wills, property or inheritance.

6.1.5 Institutional abuse

Institutional abuse is the mistreatment or neglect of an adult, by a regime or individuals, in settings within which adults who may be at risk reside or use.

Institutional abuse may occur when the routines, systems and regimes result in poor standards of care, poor practice and behaviours, inflexible regimes and rigid routines which violate their dignity and human rights and place adults at risk of harm. Institutional abuse may occur within a culture that denies, restricts or curtails the privacy, dignity, choice and independence. It involves the collective failure of a service provider or an organisation to provide safe and appropriate services, and includes a failure to ensure that the necessary preventative and/or protective measures are in place.

6.1.6 Neglect

Neglect is the deliberate withholding, or failure through a lack of knowledge, understanding or awareness, to provide appropriate and adequate care and support, which is necessary for the adult to carry out daily living activities. It may include physical neglect to the extent that health or well-being is impaired, administering too much or too little medication, failure to provide access to appropriate health or social care, withholding the necessities of life, such as adequate nutrition, heating or clothing, failure to intervene in situations that are dangerous to the person concerned or to others particularly when the person lacks the capacity to assess risk.

Note that self-neglect and self-harm do not fall within the scope of this definition. Each individual set of circumstances will require a professional HSC assessment to determine the appropriate response and consider if any underlying factors require a protection response.

6.1.7 Exploitation

Exploitation is the intentional maltreatment, manipulation or abuse of power and control over another person; to take selfish or unfair advantage of another person or situation usually but not always for personal gain from using them as a commodity. It may manifest itself in many forms including slavery, servitude, forced or compulsory labour, domestic violence and abuse, sexual violence and abuse or human trafficking.

6.1.8 Domestic abuse and sexual violence

Domestic abuse and sexual violence is threatening controlling, coercive behaviour, violence or abuse (psychological, physical, virtual, verbal, sexual, financial or emotional) inflicted on one person by anyone (irrespective of age, ethnicity, religion, gender, gender identity, sexual orientation or any form of disability) by a current or former intimate partner or family member. Domestic violence and abuse is essentially a pattern of behaviour which is characterised by the exercise of control and the misuse of power by one person over another.

It is usually frequent and persistent. It can include violence by a son, daughter, mother, father, husband, wife, life partner or any other person who has a close relationship with the victim. It occurs right across society, regardless of age, gender, race, ethnic or religious group, sexual orientation, wealth, disability or geography.

6.1.9 Human trafficking/Modern Slavery

Human trafficking/modern slavery involves the acquisition and movement of people by improper means, such as force, threat or deception, for the purposes of exploiting them. It can take many forms, such as domestic servitude, forced criminality, forced labour, sexual exploitation and organ harvesting. Victims of human trafficking/modern slavery can come from all walks of life; they can be

male or female; children or adults; and they may come from migrant or indigenous communities.

The response to adults at risk experiencing human trafficking/modern slavery will always be to report the incident to the Police Service.

6.1.10 Hate crime

Hate crime is any incident which constitutes a criminal offence perceived by the victim or any other person as being motivated by prejudice, discrimination or hate towards a person's actual or perceived race, religious belief, sexual orientation, disability, political opinion or gender identity.

The response to adults at risk experiencing human trafficking/modern slavery will usually be to report the incident to the Police Service.

6.2 CHILDREN

6.2.1 Physical Abuse

Physical abuse is the deliberate physical injury to a child or the wilful or neglectful failure to prevent physical injury or suffering. This may include hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, confinement to a room or cot, or inappropriately giving drugs to control behaviour.

6.2.2 Emotional Abuse

Emotional abuse is the persistent emotional ill treatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may involve causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Smothering a child's development through over-protection can also be a form of abuse. Some level of emotional abuse is involved in all types of ill treatment of a child, though it may occur alone. Domestic violence, adult mental health problems and parental substance misuse may expose children to emotional abuse.

6.2.3 Sexual Abuse

Sexual abuse involves forcing or enticing a child to take part in sexual activities, whether or not the child is aware of what is happening including Child Sexual Exploitation. The activities may involve physical contact, including penetrative or non-penetrative acts. They may include non-contact activities, such as involving children in looking at or the production of pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

6.2.4 Neglect

Neglect is the persistent failure to meet a child's physical and/or psychological needs, likely to result in significant harm. It may involve a parent or carer failing to provide adequate foods, shelter and clothing, failing to protect a child from physical harm or danger, failing to ensure access to appropriate medical care or treatment, lack of stimulation or lack of supervision. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

6.2.5 Child Sexual Exploitation (CSE)

Child sexual exploitation is a form of sexual abuse in which a person(s) exploits, coerces and/or manipulates a child or young person into engaging in some form of sexual activity in return for something the child needs or desires and/or for the gain of the person(s) perpetrating or facilitating the abuse. (SBNI 2014, adopted from CSE Knowledge Transfer Partnership NI)

6.2.6 Female Genital Mutilation (FGM)

The World Health Organisation defines female genital mutilation (FGM) as:

“Any procedure which involves the partial or complete removal of the external female genitalia or other injury to the female genital organs for non-medical reasons”. Some communities refer to FGM as ‘circumcision’, ‘cutting’ or ‘sunnah’, rather than ‘FGM’.

FGM violates the rights and dignity of women and girls and is illegal regardless of the age of the female on which it is performed. FGM is usually practised on girls between infancy and 15 years old, but can also be performed on older girls.

More than 125 million girls and women alive today have been cut globally and in the UK, it is estimated that there are over 130,000 women living with FGM.

6.3 CONSENT AND CAPACITY- ADULT ABUSE ONLY

Staff, elected members and volunteers should always seek to work in the best interests of the adult and with his/her consent. They should be mindful of the need for the adult to consent to, and to be comfortable with, any proposed activity or service. Consent is a clear indication of a willingness to participate in an activity or to accept a service. For consent to be valid the adult must have capacity to make the decision AND has been appropriately informed AND consent must be freely given.

Capacity is the mental ability to make a decision and take actions. An adult will always be assumed to have capacity to make a decision unless it is suspected otherwise. It does not matter what the adult looks like, how they behave, what age they are or if they have a disability or illness. If a member of staff, elected member or volunteer has any doubts about the capacity of an adult to make a decision they should report this to the Appointed Person/ Safeguarding

Manager as it may be necessary for a professional from the local HST Trust to conduct a capacity assessment.

7.0 ROLE OF THE COUNCIL'S SAFEGUARDING MANAGER

- 7.1 Key to the Council's ability to safeguard and to enable its employees to provide a safe environment the Council has nominated a **Safeguarding Manager**. This is an important role since the expertise and experience of safeguarding is focused on one post and the manager will in turn act as a pivotal point for all safeguarding matters.

The Safeguarding Manager for Lisburn and Castlereagh City Council is:

Name Environmental Health Manager

Contact Environmental Health Service, Island Civic Centre, Lisburn, BT 27 4RL

Email safeguarding@lisburncastlereagh.gov.uk

Out of hours (children and adult) 028 95 049999 (Regional)

Gateway (children) South Eastern Trust 0300 1000 300
Belfast Trust 028 90 507000

PSNI 999 or PPU – 028 94 482633

Gateway (adult) South Eastern Trust 028 92 501227
Belfast Trust 028 95 041744

- 7.2 Specifically the role and responsibilities of the Safeguarding Manager will include:

7.2.1 Referral of child protection concerns

- Monitoring the implementation of the Council's Safeguarding Policy and procedures and specifically to inform Social Services/PSNI within the appropriate Trust area of any concerns about a child or adult.
- Ensuring that any referral made by telephone is confirmed in writing for any documentation relating to concerns to be passed to Social Services or the PSNI.
- To act as custodian to ensure the safekeeping of any case material and keeping Senior Management of the Council apprised of any developments.

7.2.2 Adult Safeguarding Champion

All organisations which require staff to be vetted are required to nominate an ASC who must be at a senior position and should have the necessary training, skills and experience to carry out the role. The ASC provides strategic and operational leadership and oversight in relation to adult safeguarding for the organisation and is responsible for implementing its safeguarding policy.

The ASC is the main point of contact with HSC Trusts and the PSNI for all adult safeguarding matters

Key responsibilities of the ASC include:

1. To provide information, support and advice for staff and/or volunteers on adult safeguarding within the organisation.
2. To ensure that the organisation's adult safeguarding policy is disseminated and support implementation throughout the organisation.
3. To advise the organisation regarding adult safeguarding training needs.
4. To provide advice to staff or volunteers who have concerns about the signs of harm and ensure a report is made to HSC Trusts where there is a safeguarding concern.
5. To support staff to ensure that any actions take account of what the adult wishes to achieve – this should not prevent information about risks of serious harm being passed to the relevant HSC Trust Adult Protection Gateway Service for assessment and decision making.
6. To establish contact with the HSC Trust Designated Adult Protection Officer (DAPO), PSNI and other agencies as appropriate.
7. To ensure accurate and up to date records are maintained detailing all decisions made, the reasons for those decisions and any actions taken.
8. To compile and analyse records of reported concerns to determine whether a number of low level concerns are accumulating to become more significant. These records must be available on request for inspection.

To meet the governance requirements set out in the NIASP Policy the ASC will compile an annual Adult Safeguarding Position Report (number of referrals to HSC Trusts, etc.)

7.2.2 Partnership with Health Trusts

- Providing a link through regular liaison with senior members of the South Eastern Health and Social Care Trust and the Belfast Health and Social Care Trust to participate in any appropriate training, new legislation and guidance etc.
- Safeguarding Manager or deputy is member of the Local Adult Safeguarding Partnership (LASP) in both Trust areas.
- Safeguarding Manager or deputy is member of the Keeping Safe Steering groups in both Trust areas.

- Safeguarding Manager or deputy is a member of the Safeguarding Board for NI in both Trust areas (SBNI).

7.2.3 Within the Council and Regionally

- Advising the Corporate Management Team of any immediate Safeguarding concerns and reporting annually on the work of the SWG.
- Chairing the Safeguarding Working Group.
- Monitoring the implementation of the Safeguarding Policy and Procedures.
- Acting as source of advice and assistance on safeguarding matters in the Council.
- Advising the Council in conjunction with the Training Officer of any safeguarding training needs.
- Communicating Safeguarding Procedures to all employees.
- Promoting the inclusion of safeguarding in regular facility management teams' agendas.
- Safeguarding Manager or deputy is a member of the NI Network of Councils for Safeguarding.
- Overseeing the review of the Safeguarding Policy and Procedures at least every three years.

8.0 Designated Safeguarding Officers / Appointed Persons

8.1 In order to assist the Safeguarding Manager, the Council has nominated a number of Designated Officers/Appointed Persons within the service units of the Council. They sit on the Safeguarding Working Group.

8.2 Responsibilities include

- Acting as a point of contact for safeguarding matters for their unit
- Receiving and recording concerns
- Responsible for reporting **all** concerns to the appropriate statutory agency for safeguarding and the Council's Safeguarding Manager
- Making referrals to the statutory agencies in the absence of the Safeguarding manager/out of hours.
- Attend training

8.3 The names and contact details of DSOs/Appointed Persons are held on the Council's Safeguarding intranet site.

9.0 Safeguarding Working Group

9.1 The Safeguarding Working Group is a cross-departmental group set up to oversee the practical implementation of this policy and to develop/review safeguarding procedures. It is governed by the Terms of Reference for the group.

9.2 Its role includes:

- Identifying safeguarding training needs within services
- Developing supplementary safeguarding procedures as required
- Promoting good practice within Council services
- Discussing incidents and concerns raised in services to facilitate a Council-wide response if necessary

Reference to:

Safeguarding Procedures

- Recruitment and Selection
- Reporting Procedures and Incident Report Form
- Code of Behaviour for Staff and Volunteers
- Booking of LCCC facilities
- Photographic Guidance
- Role of Safeguarding Manager and Designated Officers/Appointed persons
- Safeguarding Training for staff and elected members
- Leisurewatch Procedure
- Workplace Domestic Violence Guidance
- Supervision levels
- Student Work Placements
- Contractor Guidance
- Managing Challenging Behaviour/Anti-Bullying
- Persons in Crisis/At risk of suicide
- Allegations Against Staff Procedure
- Live-Streaming and Video-Conferencing guidance

Lisburn & Castlereagh City Council

Section 75 Equality and Good Relations Screening Template

Part 1. Information about the activity/policy/project being screened

The Child and Adult Safeguarding Policy - Prevention and Protection in Partnership sets out the Council's commitment to the fundamental right of everyone to be safe, and to protecting children and adults at risk of harm.

Name of the activity/policy/project

LCCC - Child and Adult Safeguarding Policy - Prevention and Protection in Partnership – Copy attached

Is this activity/policy/project – an existing one, a revised one, a new one?

The Safeguarding Policy is an existing policy which is being reviewed. It is reviewed every 3 years.

What are the intended aims/outcomes the activity/policy/project is trying to achieve?

The Policy sets out measures which the council puts in place for Preventing Harm and measures for reporting any harm which has occurred to the statutory agencies for safeguarding i.e. PSNI and HSCT.

- To promote zero-tolerance of harm to all children and adults at risk
- Improve Safeguarding arrangements for children and adults at risk
- Embed a culture of respecting the rights of children and adults at risk
- Prevent and reduce harm of adults at risk while supporting their right to maintain control over their lives
- Incorporate Safeguarding responsibilities into Service Plans

Who is the activity/policy/project targeted at and who will benefit? Are there any expected benefits for specific Section 75 categories/groups from this activity/policy/project? If so, please explain.

The Policy is aimed at everyone and in particular employees, elected members, volunteers, contractors, grant-aided organisations and facility users irrespective of their function, remit or role. It will benefit all children and adults at risk of harm and in need of protection.

Who initiated or developed the activity/policy/project?

The Safeguarding function sits in the Environmental Health Service of the council with the Environmental Health Manager being the manager of the function.

Who owns and who implements the activity/policy/project?

The Environmental Health Manager implements policy assisted by the Safeguarding Working Group.

Are there any factors which could contribute to/detract from the intended aim/outcome of the activity/policy/project?

No.

Who are the internal and external stakeholders (actual or potential) that the activity/policy/project will impact upon? Delete if not applicable

- All Staff and elected members
- All users of LCCC services
- Volunteers
- Contractors and grant-funded organisations

Other policies/strategies/plans with a bearing on this activity/policy/project

Name of policy/strategy/plan	Who owns or implements?
Safeguarding Board For NI Strategy 2022-2026	DOH
Draft Adult Protection Bill NI	DOH
LCCC- Procurement Policy	Finance
LCCC HR Policies	HR&OD
LCCC H&S policy	Environment Health

Available evidence

What evidence/information (qualitative and quantitative) have you gathered or considered to inform this activity/policy? Specify details for each Section 75 category.

- General - In reviewing this Policy, we have consulted with the following groups;
- NICCY – NI children’s Commissioner
- CiNI – Children in NI
- Children’s Law Centre
- AgeNI
- Autism NI
- Carers NI
- Cedar Foundation
- COP NI - Commissioner for Older People
- Disability Action
- MENCAP
- The LCCC Youth Council - presentation carried out

We also consulted with our SG Working group and reviewed how the Policy has operated over the last 20 years in the Council.

Section 75 Category	Details of evidence/information
Religious Belief	N/A
Political Opinion	N/A
Racial Group	Info from Safeguarding Board for NI (SBNI) /Local Adult Safeguarding Partnerships (LASP)

Age	Info from SBNI
Marital Status	Info from ONUS re Domestic Violence
Sexual Orientation	Info from ONUS re DV – cases of Domestic Violence have increased in same sex relationships
Men & Women Generally	Info from ONUS re Domestic Violence - 1 in 4 women and 1 in 7 men affected by DV
Disability	Info from SBNI /LASP
People with and without Dependants	N/A

Needs, experiences and priorities

Taking into account the information referred to above, what are the different needs, experiences and priorities of each of the following categories, in relation to the particular activity/policy/decision? Specify details for each of the Section 75 categories

Section 75 Category	Details of needs/experiences/priorities
Religious Belief	No evidence of different needs according to religious belief.
Political Opinion	No evidence of different needs according to political opinion/community background.
Racial Group	Should treat everyone equally. Those of different racial groups may be at greater risk or have other needs relevant to safeguarding - e.g. FGM, scam marriages, human trafficking.
Age	All children and adults at risk should be treated equally
Marital Status	Should treat all person equally
Sexual Orientation	Should not negatively impact on the LGBT community
Men & Women Generally	Men and women should be treated equally and different needs will be identified according to gender.
Disability	Those at risk of abuse and in need of protection should be supported
People with and without Dependants	No one should be negatively impacted because of having dependants or not.

Part 2. Screening questions

1 What is the likely impact on equality of opportunity for those affected by this activity/policy, for each of the Section 75 equality categories?

Section 75 Category	Details of likely impact – will it be positive or negative? If none anticipated, say none	Level of impact - major or minor* - see guidance below
Religious Belief	No different impact identified – the policy will apply in the same way regardless of religious belief	None
Political Opinion	No different impact identified	None
Racial Group	No different impact identified	None
Age	The policy is specifically intended to protect children (young people) and adults who may be vulnerable	Minor - positive
Marital Status	No different impact identified	None
Sexual Orientation	No different impact identified	None
Men & Women Generally	No different impact identified by gender	None
Disability	No different impact identified	None

People with and without Dependants	No different impact identified	None
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* See Appendix 1 for details.

2(a) Are there opportunities to better promote equality of opportunity for people within the Section 75 equality categories?

Section 75 Category	IF Yes, provide details	If No, provide details
Religious Belief Political Opinion Racial Group Age Marital Status Sexual Orientation Men & Women Generally Disability People with and without Dependants	Racial groups - Policy and procedures will be made available in different languages/use of interpreters where required	.

Equality Action Plan 2021-2025

Does the activity/policy/project being screened relate to an action in the Equality Action Plan 2021-2025? If yes, specify which action.

No.

2(b) DDA Disability Duties (see Disability Action Plan 2021-2025)

Does this policy/activity present opportunities to contribute to the actions in our Disability Action Plan:

- to promote positive attitudes towards disabled people?
- to encourage the participation of disabled people in public life?

Yes.

If yes, give details/specify which action.

1. Providing appropriate levels of supervision for Council run activities and the code of conduct for staff allow for greater participation by disabled people in LCCC activities.
2. In reviewing the policy, a number of organisations which represent the interests of children/young people and adults with disabilities were consulted.
3. **To what extent is the activity/policy/project likely to impact on good relations between people of different religious belief, political opinion or racial group?**

Good Relations Category	Details of likely impact. Will it be positive or negative? [if no specific impact identified, say none]	Level of impact – minor/major*
Religious Belief		None
Political Opinion		None
Racial Group		None

*See Appendix 1 for details.

4. Are there opportunities to better promote good relations between people of different religious belief, political opinion or racial group?

Good Relations Category	IF Yes, provide details	If No, provide details
Religious Belief		No
Political Opinion		No
Racial Group		No

Multiple identity

Provide details of any data on the impact of the activity/policy/project on people with multiple identities. Specify relevant Section 75 categories concerned.

The Safeguarding Policy offers protection to those with multiple identities through the SG Protection procedures made under it, for example, those who may be even more vulnerable because of race or disability

Part 3. Screening decision/outcome

Equality and good relations screening is used to identify whether there is a need to carry out a **full equality impact assessment** on a proposed policy or project. There are 3 possible outcomes:

- 1) **Screen out** - no need for a full equality impact assessment and no mitigations required because no relevance to equality, no negative impacts identified or only very minor positive impacts for all groups. This may be the case for a purely technical policy for example.
- 2) **Screen out with mitigation** - no need for a full equality impact assessment but some minor potential impacts or opportunities to better promote equality and/or good relations identified, so mitigations appropriate. Much of our activity will probably fall into this category.
- 3) **Screen in for full equality impact assessment** – potential for significant and/or potentially negative impact identified for one or more groups so proposal requires a more detailed impact assessment. [See Equality Commission guidance on justifying a screening decision.]

Choose only one of these and provide reasons for your decision and ensure evidence is noted/referenced for any decision reached.

Screening Decision/Outcome	Reasons/Evidence
Option 1 Screen out without mitigation – no equality impact assessment and no mitigation required [go to Monitoring section]	Equality screening has concluded no need to carry out a full equality impact assessment. No negative impacts have been identified. The policy should only have minor positive impacts for the groups it is targeting.
Option 2 Screen out with mitigation – some potential impacts identified but they can be addressed with appropriate mitigation or some opportunities to better promote equality and/or good relations identified [complete mitigation section below]	

<p>Option 3 Screen in for a full Equality Impact Assessment (EQIA) [If option 3, complete timetabling and prioritising section below]</p>	
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Mitigation (only relevant to Option 2)

Can the activity/policy/project plan be amended or an alternative activity/policy introduced to better promote equality of opportunity and/or good relations?

If so, give the **reasons** to support your decision, together with the proposed changes/amendments or alternative activity/policy and ensure the mitigations are included in a revised/updated policy or plan.

Timetabling and prioritising for full EQIA (only relevant to Option 3)

If the activity/policy has been **‘screened in’** for full equality impact assessment, give details of any factors to be considered and the next steps for progressing the EQIA, including a proposed timetable.

Is the activity/policy affected by timetables established by other relevant public authorities? Yes/No. If yes, please provide details.

Part 4. Monitoring

Public authorities should consider the guidance contained in the Commission’s Monitoring Guidance for Use by Public Authorities (July 2007).

Effective monitoring will help a public authority identify any future adverse impact arising from the activity/policy which may lead the public authority to conduct an equality impact assessment, as well as help with future planning and activity/policy development.

What will be monitored and how? What specific equality monitoring will be done? Who will undertake and sign-off the monitoring of this activity/policy and on what frequency?

Please give details:

The operation of the policy will be monitored by the Safeguarding Manager, with oversight from the Safeguarding Working Group.

Incidents will be recorded (anonymously according to procedure) and analysed to identify any issues that require action/referral.

Part 5 - Approval and authorisation

	Position/Job Title	Date
Screened by: Brona Turley/Sandra Pinion	Environmental Health Officer	08/08/22
Reviewed by: Mary McSorley	Equality Officer	10/08/22
Approved by: Richard Harvey	Head of Service Environmental Health	15/08/22

Note: On completion of the screening exercise, a copy of the completed Screening Report should be:

- approved and ‘signed off’ by a senior manager responsible for the activity/policy
- included with Committee reports, as appropriate

- sent to the Equality Officer for the quarterly screening report to consultees, internal reporting and publishing on the LCCC website
- shared with relevant colleagues
- made available to the public on request.

Evidence and documents referenced in the screening report should also be available if requested.

Appendix 1 - CHILD AND ADULT SAFEGUARDING POLICY -PREVENTION AND PROTECTION IN PARTNERSHIP

LISBURN & CASTLEREAGH CITY COUNCIL
CHILD AND ADULT SAFEGUARDING POLICY -PREVENTION AND PROTECTION IN PARTNERSHIP



CHIEF EXECUTIVE'S FOREWORD

Everyone has a fundamental right to be safe. Whatever the cause, and wherever it occurs, harm caused to children and adults by abuse, exploitation or neglect is not acceptable. This policy emphasises that safeguarding is everyone's business and that as a Council, Lisburn & Castlereagh City Council (LCCC) should strive to prevent harm to children and adults from abuse, exploitation or neglect.

This Policy requires us to put all individuals who may be at risk at the centre of what we do, to listen to them and to work in partnership with them and on an inter-agency basis, to create an organisation which has a zero-tolerance of harm to the most vulnerable people living in Northern Ireland.

The Policy contributes to the fulfilment of a Northern Ireland Executive Programme for Government commitment to deliver a package of measures to safeguard children and adults who are at risk of harm and to promote a culture where safeguarding is everyone's business. It also links with LCCC Community Action Plan in that it helps to deliver on pledges to support our young people and older people who may be at risk of abuse.

The Council recognises that the Safeguarding Policy must be owned at all levels within the organisation. As Chief Executive of LCCC I have directed that this Policy be developed and I, with the Corporate Management Team, will be responsible for its approval and ensuring it is fully implemented and reviewed. A key element of the Safeguarding Policy is the nomination of a Safeguarding Manager, with the remit of Adult Safeguarding Champion, who will ensure that this council embraces best practice in this area.

The Policy and its supporting procedures have been developed by the Council's Safeguarding Working Group (SWG) with the support of expert advice. It applies to all employees, elected members, volunteers, contractors, grant-aided organisations and those using our facilities, irrespective of their function, remit or role. I particularly commend this Policy to all employees and would ask that you take the time to familiarise yourself with the contents.

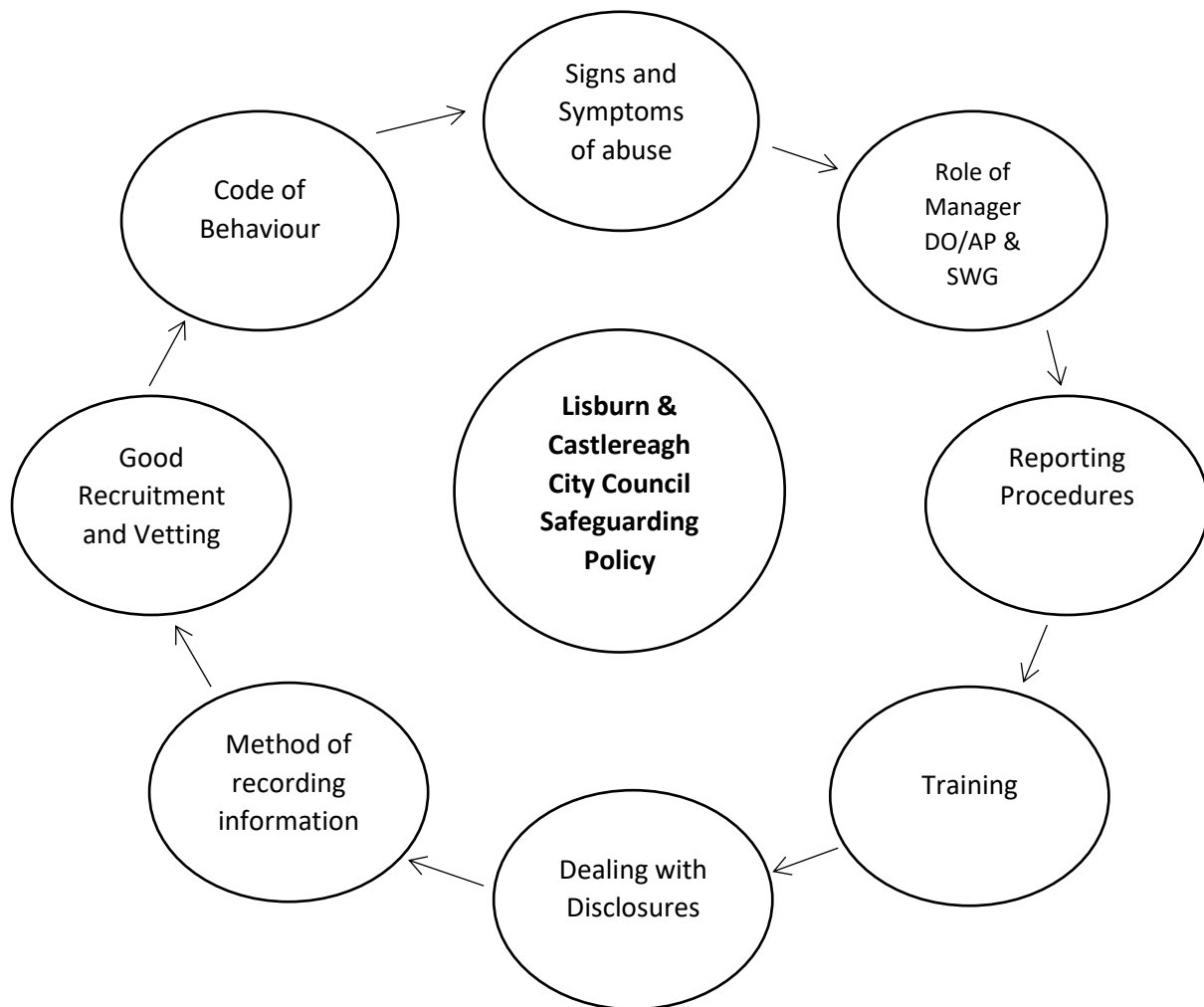
David Burns
May 2022

WHAT IS SAFEGUARDING?

- 1.1 Within this Policy the term ‘safeguarding’ is used in its widest sense, that is, to encompass both activity which **prevents** harm from occurring in the first place (Council Safeguarding Procedures) and activity which **protects** children and adults at risk and in need of protection, where harm has occurred or is likely to occur (Council Reporting to statutory agencies Procedures).
- 1.2 **Preventative Safeguarding** includes a range of actions and measures. Council employees may come into contact with children and adults who may be at risk of harm and so must recognise the potential for, and to prevent, harm. In practice the Council supports staff by providing safeguarding procedures:
- Recruitment and Selection
 - Reporting Procedures and Incident Report Form
 - Code of Behaviour for Staff and Volunteers
 - Booking of LCCC facilities
 - Photographic Guidance
 - Role of Safeguarding Manager and Designated Officers/Appointed persons
 - Safeguarding Training for staff and elected members
 - Leisurewatch Procedure
 - Workplace Domestic Violence Guidance
 - Supervision levels
 - Student Work Placements
 - Contractor Guidance
 - Managing Challenging Behaviour/Anti-Bullying
 - Persons in Crisis/At risk of suicide
 - Allegations Against Staff Procedure
 - Live Streaming and Video Conferencing
- 1.3 **Protective Safeguarding** is targeted at children and adults who are in need of protection, that is, when harm from abuse, exploitation or neglect is suspected, has occurred, or is likely to occur. The protection service is led by Health and Social Care Trusts and PSNI. In practice the Council has internal reporting protocols for concerns regarding children and adults which may lead to referrals to these statutory agencies.

1.4 Arena of Safety

The 'arena of safety' diagram expresses the Council's Prevention and Protection Procedures.



2.0 Definitions (for the purposes of this policy)

2.1 Child

Those aged under 18 years.

2.2 Adult at risk of harm

It is not possible to definitively state when an adult is at risk of harm as this will change on a case by case basis. The following definition is intended to provide guidance, as to when an adult may be at risk of harm in order that further professional assessment may be sought.

Adult at Risk of Harm

An adult at risk of harm is a person aged 18 or over, whose exposure to harm through abuse, exploitation or neglect **may** be increased by their personal characteristics and/or life circumstances.

i) **personal characteristics** *may include, but are not limited to age, disability, illness, mental or physical frailty or impairment of, or disturbance in, the functioning of the mind or brain;*

ii) **life circumstances** *may include, but are not limited to, isolation, social-economic factors and environmental living conditions;*

Adult in Need of Protection is a person aged 18 or over, whose exposure to harm through abuse, exploitation or neglect may be increased by their:

- a. personal characteristics; and/or
- b. life circumstances; and
- c. who is **unable to protect** their own well-being, property, assets, rights or other interests; and
- d. where the **action or inaction of another person or persons** is causing, or is likely to cause, him/her to be harmed.

In order to meet the definition of an 'adult in need of protection' either **a.** or **b.** must be present, in addition to both element of **c.** and **d.**

In most situations HSC Trusts will make a decision regarding the degree of risk and level of harm an adult may be facing and decide on the most appropriate action to take.

3.0 AIMS

This policy aims to:

- 3.1 promote zero-tolerance of harm to all children and adults who are at risk from abuse, exploitation or neglect;
- 3.2 improve safeguarding arrangements for children and adults who are at risk of harm from abuse, exploitation or neglect;

- 3.3 influence the way the organisation thinks about harm to children and adults resulting from abuse, exploitation or neglect by embedding a culture which recognises every person's right to respect and dignity, honesty, humanity and compassion in every aspect of their life;
- 3.4 establish clear procedures for reporting and responding to concerns that a child or adult is, or may be, at risk of being harmed or in need of protection;
- 3.5 prevent and reduce the risk of harm to **adults**, while supporting their right to maintain control over their lives and make informed choices free from coercion;
- 3.6 promote a continuous learning approach to safeguarding and to support the adoption of a Trauma Informed Workforce; and
- 3.7 to incorporate safeguarding responsibilities into Service Plans where appropriate.
- 3.8 to underpin the themes of the SBNI Strategic Plan 2022-26 with the aims of: Online safety, Domestic violence and abuse, and Children and Young people's mental health.

4.0 WHO IS THIS POLICY FOR?

- 4.1 The policy applies to all employees, elected members, volunteers, contractors, grant-aided organisations and those using our facilities irrespective of their function, remit or role.
- 4.2 There is an expectation that all employees will work in partnership as they apply this policy to their work with children and adults who may be at risk of harm or in need of protection.

5.0 UNDERPINNING PRINCIPLES/BACKGROUND

- 5.1 This policy has been developed in line with the following legislation and guidance and good practice guidelines, current at the time of publication.

5.2 Legislation

- The Criminal Law Act 1967
- The Children's (NI) Order 1995
- The Children's Services Co-operation Act (NI) 2015
- UN Convention on the Rights of the Child 1989
- The Mental Health(NI) Order 1986
- The Safeguarding Vulnerable Groups (NI) Order 2007 (as amended by the Protection of Freedoms Act 2012)
- The Sexual Offences Order (NI) 2008
- Section 75 NI Act 1998
- The Human Rights Act 1998
- The Safeguarding Board Act (NI) 2011
- Data Protection Act 2018- GDPR

- The Disability Discrimination Act 1995 (Commencement No. 11) Order (Northern Ireland) 2015
- The Criminal Justice (NI) Order 2008
- The Draft Adult Protection Bill

5.3 Guidance Documents

- Adult Safeguarding- Prevention and Protection in Partnership – NIASP 2015
- SBNI Strategic Plan 2022-26
- Adult Safeguarding Operational Procedures –NIASP 2016
- Keeping Adults Safe: A shared Responsibility – Volunteer Now 2017
- SBNI – Safeguarding Board for NI - Policy standards
- Co-operating to Safeguard Children (DHSSPS) Guidance in Northern Ireland, 2017
- Keeping Children Safe: Our Duty to Care- Volunteer Now 2019

5.4 Relationship with other Council Policies and Guidance

- 5.4.1** This policy operates in parallel and is supported by other Council Policies and guidance namely:

Disciplinary; Equality; Training and Development; Whistleblowing; Social Media; Health and Safety; Fraud and Corruption; Complaints procedure; Performance Review Scheme; Disposal of Records Policy; Dignity at Work Policy; Data Protection Policy; and Community Planning Policy.

6.0 FORMS OF ABUSE

6.1 ADULTS

Abuse is a single or repeated act or lack of appropriate action, occurring within a relationship where there is an expectation of trust, which causes harm or distress to another individual or violates their human or civil rights.

Abuse is the misuse of power and control that one person has over another. It can involve direct or indirect contact and can include online abuse.

The types of abuse are not exhaustive, nor listed in any order of priority.

6.1.1 Physical abuse

Physical abuse is the use of physical force or mistreatment of one person by another which may or may not result in actual physical injury. This may include hitting, pushing, rough handling, exposure to heat or cold, force feeding, improper administration of medication, denial of treatment, misuse or illegal use of restraint and deprivation of liberty. Female genital mutilation (FGM) is considered a form of physical AND sexual abuse.

6.1.2 Sexual violence and abuse

Sexual abuse is any behaviour (physical, psychological, verbal, virtual/online) perceived to be of a sexual nature which is controlling, coercive, exploitative, harmful, or unwanted that is inflicted on anyone (irrespective of age, ethnicity, religion, gender, gender identity, sexual orientation or any form of disability).

Sexual violence and abuse can take many forms and may include non-contact sexual activities, such as indecent exposure, stalking, grooming, being made to look at or be involved in the production of sexually abusive material, or being made to watch sexual activities. It may involve physical contact, including non-consensual penetrative sexual activities or non-penetrative sexual activities, such as intentional touching (also known as groping). Sexual violence can be found across all sections of society, irrelevant of gender, age, ability, religion, race, ethnicity, personal circumstances, financial background or sexual orientation.

6.1.3 Psychological / emotional abuse

Psychological / emotional abuse is behaviour that is psychologically harmful or inflicts mental distress by threat, humiliation or other verbal/non-verbal conduct. This may include threats, humiliation or ridicule, withholding security, love or support, provoking fear of violence, shouting, yelling and swearing, blaming, controlling, intimidation and coercion.

6.1.4 Financial abuse

Financial abuse is actual or attempted theft, fraud or burglary. It is the misappropriation or misuse of money, property, benefits, material goods or other asset transactions which the person did not or could not consent to, or which were invalidated by intimidation, coercion or deception. This may include exploitation, embezzlement, withholding pension or benefits or pressure exerted around wills, property or inheritance.

6.1.5 Institutional abuse

Institutional abuse is the mistreatment or neglect of an adult, by a regime or individuals, in settings within which adults who may be at risk reside or use. Institutional abuse may occur when the routines, systems and regimes result in poor standards of care, poor practice and behaviours, inflexible regimes and rigid routines which violate their dignity and human rights and place adults at risk of harm. Institutional abuse may occur within a culture that denies, restricts or curtails the privacy, dignity, choice and independence. It involves the collective failure of a service provider or an organisation to provide safe and appropriate services, and includes a failure to ensure that the necessary preventative and/or protective measures are in place.

6.1.6 Neglect

Neglect is the deliberate withholding, or failure through a lack of knowledge, understanding or awareness, to provide appropriate and adequate care and support, which is necessary for the adult to carry out daily living activities. It may include physical neglect to the extent that health or well-being is impaired,

administering too much or too little medication, failure to provide access to appropriate health or social care, withholding the necessities of life, such as adequate nutrition, heating or clothing, failure to intervene in situations that are dangerous to the person concerned or to others particularly when the person lacks the capacity to assess risk.

Note that self-neglect and self-harm do not fall within the scope of this definition. Each individual set of circumstances will require a professional HSC assessment to determine the appropriate response and consider if any underlying factors require a protection response.

6.1.7 Exploitation

Exploitation is the intentional maltreatment, manipulation or abuse of power and control over another person; to take selfish or unfair advantage of another person or situation usually but not always for personal gain from using them as a commodity. It may manifest itself in many forms including slavery, servitude, forced or compulsory labour, domestic violence and abuse, sexual violence and abuse or human trafficking.

6.1.8 Domestic abuse and sexual violence

Domestic abuse and sexual violence is threatening controlling, coercive behaviour, violence or abuse (psychological, physical, virtual, verbal, sexual, financial or emotional) inflicted on one person by anyone (irrespective of age, ethnicity, religion, gender, gender identity, sexual orientation or any form of disability) by a current or former intimate partner or family member. Domestic violence and abuse is essentially a pattern of behaviour which is characterised by the exercise of control and the misuse of power by one person over another. It is usually frequent and persistent. It can include violence by a son, daughter, mother, father, husband, wife, life partner or any other person who has a close relationship with the victim. It occurs right across society, regardless of age, gender, race, ethnic or religious group, sexual orientation, wealth, disability or geography.

6.1.9 Human trafficking/Modern Slavery

Human trafficking/modern slavery involves the acquisition and movement of people by improper means, such as force, threat or deception, for the purposes of exploiting them. It can take many forms, such as domestic servitude, forced criminality, forced labour, sexual exploitation and organ harvesting. Victims of human trafficking/modern slavery can come from all walks of life; they can be male or female; children or adults; and they may come from migrant or indigenous communities.

The response to adults at risk experiencing human trafficking/modern slavery will always be to report the incident to the Police Service.

6.1.10 Hate crime

Hate crime is any incident which constitutes a criminal offence perceived by the victim or any other person as being motivated by prejudice, discrimination or hate

towards a person's actual or perceived race, religious belief, sexual orientation, disability, political opinion or gender identity.

The response to adults at risk experiencing human trafficking/modern slavery will usually be to report the incident to the Police Service.

6.2 CHILDREN

6.2.1 Physical Abuse

Physical abuse is the deliberate physical injury to a child or the wilful or neglectful failure to prevent physical injury or suffering. This may include hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, confinement to a room or cot, or inappropriately giving drugs to control behaviour.

6.2.2 Emotional Abuse

Emotional abuse is the persistent emotional ill treatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may involve causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Smothering a child's development through over-protection can also be a form of abuse. Some level of emotional abuse is involved in all types of ill treatment of a child, though it may occur alone. Domestic violence, adult mental health problems and parental substance misuse may expose children to emotional abuse.

6.2.3 Sexual Abuse

Sexual abuse involves forcing or enticing a child to take part in sexual activities, whether or not the child is aware of what is happening including Child Sexual Exploitation. The activities may involve physical contact, including penetrative or non-penetrative acts. They may include non-contact activities, such as involving children in looking at or the production of pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

6.2.4 Neglect

Neglect is the persistent failure to meet a child's physical and/or psychological needs, likely to result in significant harm. It may involve a parent or carer failing to provide adequate foods, shelter and clothing, failing to protect a child from physical harm or danger, failing to ensure access to appropriate medical care or treatment, lack of stimulation or lack of supervision. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

6.2.5 Child Sexual Exploitation (CSE)

Child sexual exploitation is a form of sexual abuse in which a person(s) exploits, coerces and/or manipulates a child or young person into engaging in some form of sexual activity in return for something the child needs or desires and/or for the gain of the person(s) perpetrating or facilitating the abuse. (SBNI 2014, adopted from CSE Knowledge Transfer Partnership NI)

6.2.6 Female Genital Mutilation (FGM)

The World Health Organisation defines female genital mutilation (FGM) as: "Any procedure which involves the partial or complete removal of the external female genitalia or other injury to the female genital organs for non-medical reasons". Some communities refer to FGM as 'circumcision', 'cutting' or 'sunnah', rather than 'FGM'. FGM violates the rights and dignity of women and girls and is illegal regardless of the age of the female on which it is performed. FGM is usually practised on girls between infancy and 15 years old, but can also be performed on older girls. More than 125 million girls and women alive today have been cut globally and in the UK, it is estimated that there are over 130,000 women living with FGM.

6.3 CONSENT AND CAPACITY- ADULT ABUSE ONLY

Staff, elected members and volunteers should always seek to work in the best interests of the adult and with his/her consent. They should be mindful of the need for the adult to consent to, and to be comfortable with, any proposed activity or service. Consent is a clear indication of a willingness to participate in an activity or to accept a service. For consent to be valid the adult must have capacity to make the decision AND has been appropriately informed AND consent must be freely given.

Capacity is the mental ability to make a decision and take actions. An adult will always be assumed to have capacity to make a decision unless it is suspected otherwise. It does not matter what the adult looks like, how they behave, what age they are or if they have a disability or illness. If a member of staff, elected member or volunteer has any doubts about the capacity of an adult to make a decision they should report this to the Appointed Person/ Safeguarding Manager as it may be necessary for a professional from the local HST Trust to conduct a capacity assessment.

7.0 ROLE OF THE COUNCIL'S SAFEGUARDING MANAGER

7.1 Key to the Council's ability to safeguard and to enable its employees to provide a safe environment the Council has nominated a **Safeguarding Manager**. This is an important role since the expertise and experience of safeguarding is focused on one post and the manager will in turn act as a pivotal point for all safeguarding matters.

The Safeguarding Manager for Lisburn and Castlereagh City Council is:

Name Environmental Health Manager

Contact Environmental Health Service, Island Civic
Centre, Lisburn, BT 27 4RL

Email safeguarding@lisburncastlereagh.gov.uk

Out of hours (children and adult) 028 95 049999 (Regional)

Gateway (children) South Eastern Trust 0300 1000 300
Belfast Trust 028 90 507000

PSNI 999 or PPU – 028 94 482633

Gateway (adult) South Eastern Trust 028 92 501227
Belfast Trust 028 95 041744

7.2 Specifically the role and responsibilities of the Safeguarding Manager will include:

7.2.1 Referral of child protection concerns

- Monitoring the implementation of the Council's Safeguarding Policy and procedures and specifically to inform Social Services/PSNI within the appropriate Trust area of any concerns about a child or adult.
- Ensuring that any referral made by telephone is confirmed in writing for any documentation relating to concerns to be passed to Social Services or the PSNI.
- To act as custodian to ensure the safekeeping of any case material and keeping Senior Management of the Council apprised of any developments.

7.2.2 Adult Safeguarding Champion

All organisations which require staff to be vetted are required to nominate an ASC who must be at a senior position and should have the necessary training, skills and experience to carry out the role. The ASC provides strategic and operational leadership and oversight in relation to adult safeguarding for the organisation and is responsible for implementing its safeguarding policy.

The ASC is the main point of contact with HSC Trusts and the PSNI for all adult safeguarding matters

Key responsibilities of the ASC include:

1. To provide information, support and advice for staff and/or volunteers on adult safeguarding within the organisation.
2. To ensure that the organisation's adult safeguarding policy is disseminated and support implementation throughout the organisation.
3. To advise the organisation regarding adult safeguarding training needs.
4. To provide advice to staff or volunteers who have concerns about the signs of harm and ensure a report is made to HSC Trusts where there is a safeguarding concern.
5. To support staff to ensure that any actions take account of what the adult wishes to achieve – this should not prevent information about risks of serious harm being passed to the relevant HSC Trust Adult Protection Gateway Service for assessment and decision making.
6. To establish contact with the HSC Trust Designated Adult Protection Officer (DAPO), PSNI and other agencies as appropriate.
7. To ensure accurate and up to date records are maintained detailing all decisions made, the reasons for those decisions and any actions taken.
8. To compile and analyse records of reported concerns to determine whether a number of low level concerns are accumulating to become more significant. These records must be available on request for inspection.

To meet the governance requirements set out in the NIASP Policy the ASC will compile an annual Adult Safeguarding Position Report (number of referrals to HSC Trusts, etc.)

7.2.2 Partnership with Health Trusts

- Providing a link through regular liaison with senior members of the South Eastern Health and Social Care Trust and the Belfast Health and Social Care Trust to participate in any appropriate training, new legislation and guidance etc.
- Safeguarding Manager or deputy is member of the Local Adult Safeguarding Partnership (LASP) in both Trust areas.
- Safeguarding Manager or deputy is member of the Keeping Safe Steering groups in both Trust areas.
- Safeguarding Manager or deputy is a member of the Safeguarding Board for NI in both Trust areas (SBNI).

7.2.3 Within the Council and Regionally

- Advising the Corporate Management Team of any immediate Safeguarding concerns and reporting annually on the work of the SWG.
- Chairing the Safeguarding Working Group.
- Monitoring the implementation of the Safeguarding Policy and Procedures.
- Acting as source of advice and assistance on safeguarding matters in the Council.
- Advising the Council in conjunction with the Training Officer of any safeguarding training needs.
- Communicating Safeguarding Procedures to all employees.
- Promoting the inclusion of safeguarding in regular facility management teams' agendas.
- Safeguarding Manager or deputy is a member of the NI Network of Councils for Safeguarding.
- Overseeing the review of the Safeguarding Policy and Procedures at least every three years.

8.0 Designated Safeguarding Officers / Appointed Persons

8.1 In order to assist the Safeguarding Manager, the Council has nominated a number of Designated Officers/Appointed Persons within the service units of the Council. They sit on the Safeguarding Working Group.

8.2 Responsibilities include

:

- Acting as a point of contact for safeguarding matters for their unit
- Receiving and recording concerns
- Responsible for reporting **all** concerns to the appropriate statutory agency for safeguarding and the Council's Safeguarding Manager
- Making referrals to the statutory agencies in the absence of the Safeguarding manager/out of hours.
- Attend training

8.3 The names and contact details of DSOs/Appointed Persons are held on the Council's Safeguarding intranet site.

9.0 Safeguarding Working Group

9.1 The Safeguarding Working Group is a cross-departmental group set up to oversee the practical implementation of this policy and to develop/review safeguarding procedures. It is governed by the Terms of Reference for the group.

9.2 Its role includes:

- Identifying safeguarding training needs within services
- Developing supplementary safeguarding procedures as required
- Promoting good practice within Council services
- Discussing incidents and concerns raised in services to facilitate a Council-wide response if necessary

9.0 APPENDICES

SAFEGUARDING PROCEDURES

- Recruitment and Selection
- Reporting Procedures and Incident Report Form
- Code of Behaviour for Staff and Volunteers
- Booking of LCCC facilities
- Photographic Guidance
- Role of Safeguarding Manager and Designated Officers/Appointed persons
- Safeguarding Training for staff and elected members
- Leisurewatch Procedure
- Workplace Domestic Violence Guidance
- Supervision levels
- Student Work Placements
- Contractor Guidance
- Managing Challenging Behaviour/Anti-Bullying
- Persons in Crisis/At risk of suicide
- Allegations Against Staff Procedure
- Live-Streaming and Video-Conferencing guidance

Appendix 2 – Equality Commission guidance on equality impact

*Major impact:

- a) The policy/project is significant in terms of its strategic importance;
- b) Potential equality matters are unknown, because, for example, there is insufficient data upon which to make an assessment or because they are complex, and it would be appropriate to conduct an equality impact assessment in order to better assess them;
- c) Potential equality and/or good relations impacts are likely to be adverse or are likely to be experienced disproportionately by groups of people including those who are marginalised or disadvantaged;
- d) Further assessment offers a valuable way to examine the evidence and develop recommendations in respect of a policy about which there are concerns amongst affected individuals and representative groups, for example in respect of multiple identities;
- e) The policy is likely to be challenged by way of judicial review;
- f) The policy is significant in terms of expenditure.

Minor impact

- a) The policy is not unlawfully discriminatory and any residual potential impacts on people are judged to be negligible;
- b) The policy, or certain proposals within it, are potentially unlawfully discriminatory, but this possibility can readily and easily be eliminated by making appropriate changes to the policy or by adopting appropriate mitigating measures;
- c) Any asymmetrical equality impacts caused by the policy are intentional because they are specifically designed to promote equality of opportunity for particular groups of disadvantaged people;

- d) By amending the policy there are better opportunities to better promote equality of opportunity and/or good relations.

No impact (none)

- a) The policy has no relevance to equality of opportunity or good relations;
- b) The policy is purely technical in nature and will have no bearing in terms of its likely impact on equality of opportunity or good relations for people within the equality and good relations categories.

Revised Template @ April 2022



Environmental Services Committee

7th September 2022

Report from:

Head of Service - Environmental Health

Item for Decision

TITLE: Item 5.3 - Northern Ireland Local Government Partnership on Traveller Issues

Background and Key Issues:

1. Members are advised that the Northern Ireland Local Government Partnership on Traveller Issues is a Group consisting of Elected Members and Officers from Local Government. The Group meets bi-monthly to discuss issues and matters pertaining to the Traveller Community.
2. Members are advised that Councillor R McLernon was the previous representative on the Group from Lisburn & Castlereagh City Council. Following the 2022 Council AGM, Members are requested to nominate an Elected Member to become a representative from Lisburn & Castlereagh City Council on this Group.

Recommendation:

It is recommended that Members nominate a Member to become a representative of Lisburn & Castlereagh City Council on the Northern Ireland Local Government Partnership on Traveller Issues Group.

Finance and Resource Implications:

None.

Screening and Impact Assessment

1. Equality and Good Relations

Has an equality and good relations screening been carried out on the proposal/project/policy? N/A

If no, please provide explanation/rationale

If yes, what was the outcome?:

Option 1 Screen out without mitigation	N/A	Option 2 Screen out with mitigation	N/A	Option 3 Screen in for a full EQIA	N/A
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Rationale for outcome/decision (give a brief explanation of any issues identified including mitigation and/or plans for full EQIA or further consultation)

Insert link to completed Equality and Good Relations report:

2. Rural Needs Impact Assessment:

Has consideration been given to Rural Needs?	N/A	Has a Rural Needs Impact Assessment (RNIA) template been completed?	N/A	
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If no, please given explanation/rationale for why it was not considered necessary:

If yes, give brief summary of the key rural issues identified, any proposed actions to address or mitigate and include the link to the completed RNIA template:

SUBJECT TO PLANNING APPROVAL: N/A

If Yes, "This is a decision of this Committee only. Members of the Planning Committee are not bound by the decision of this Committee. Members of the Planning Committee shall consider any related planning application in accordance with the applicable legislation and with an open mind, taking into account all relevant matters and leaving out irrelevant consideration".

APPENDICES:

None.

HAS IT BEEN SUBJECT TO CALL IN TO DATE?

N/A

If Yes, please insert date:



Environmental Services Committee

7th September 2022

Report from:

Head of Service - Environmental Health

Item for Noting

TITLE: Item 5.4 - Environmental Health Service Unit Food Service Plan 2022/2023

Background and Key Issues:

1. The Food Standards Agency (FSA) requires each competent authority to have an up-to-date, documented Food Service Plan, which is readily available to food business operators (FBOs) and consumers. The plan must be subject to regular review and clearly state the period of time during which the plan has effect.
2. The Food Standards Agency's 'Framework Agreement on Local Authority Law Enforcement' sets out what the FSA expects from local authorities in their delivery of official controls on feed and food law, based on the existing statutory Codes of Practice.
3. The requirements of the FSA Local Authority Recovery Plan, which was issued post Covid, have also been included within the Food Service Plan for 2022/2023. The FSA has indicated that local authorities should, where they are able to, move at a faster pace than set out in the Recovery Plan to enable realignment with the requirements of the Food Law Code of Practice. Whilst stated as an ambition, it must be recognised that with some vacant posts and reduced staffing resources, the recovery plan may not be accelerated due to this deficit in resource.
4. Therefore, the Food Service Plan for 2022/2023 has been developed in order to meet the requirements outlined in the Framework Agreement and if possible to take account of the Local Authority Recovery Plan. The Plan covers in detail:
 - The aims and objectives of the food service
 - The profile of the Council, including the organisational structure and the scope of the service provided
 - The ways in which the service will be delivered and the targets for its delivery
 - The human and financial resources involved in providing the service

- The ways in which the quality of the service will be monitored and improved upon
- The ways in which the service will be reviewed and improved upon.

Recommendation:

It is recommended that Members note the content of the attached Food Service Plan for 2022/2023.

Finance and Resource Implications:

Existing payroll and non-payroll provision has been made within the 2022/23 budget. Some vacant posts and challenges with recruitment may result in some elements of the Plan not being met.

Screening and Impact Assessment

1. Equality and Good Relations

Has an equality and good relations screening been carried out on the proposal/project/policy?

If no, please provide explanation/rationale

If yes, what was the outcome?:

Option 1 Screen out without mitigation	<input type="text" value="N/A"/>	Option 2 Screen out with mitigation	<input type="text" value="N/A"/>	Option 3 Screen in for a full EQIA	<input type="text" value="N/A"/>
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Rationale for outcome/decision (give a brief explanation of any issues identified including mitigation and/or plans for full EQIA or further consultation)

Insert link to completed Equality and Good Relations report:

2. Rural Needs Impact Assessment:

Has consideration been given to Rural Needs?	<input type="text" value="N/A"/>	Has a Rural Needs Impact Assessment (RNIA) template been completed?	<input type="text" value="N/A"/>	
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If no, please given explanation/rationale for why it was not considered necessary:

If yes, give brief summary of the key rural issues identified, any proposed actions to address or mitigate and include the link to the completed RNIA template:

SUBJECT TO PLANNING APPROVAL: N/A

If Yes, "This is a decision of this Committee only. Members of the Planning Committee are not bound by the decision of this Committee. Members of the Planning Committee shall consider any related planning application in accordance with the applicable legislation and with an open mind, taking into account all relevant matters and leaving out irrelevant consideration".

APPENDICES: Appendix 3 EH – LCCC Food Service Plan 2022-2023

HAS IT BEEN SUBJECT TO CALL IN TO DATE? N/A

If Yes, please insert date:



Environmental Health Service Unit Food Control Service Plan 2022/2023



FOOD SERVICE PLAN

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INTRODUCTION

The Food Standards Agency, as part of its national Food Safety Framework Agreement, requires all local authorities to prepare an annual service plan which reviews the implementation of the previous year's plan and details the delivery of their food safety enforcement responsibilities for the following year.

This Food Service Delivery Plan is seen as an important document ensuring that national priorities and standards are addressed and delivered locally. It will also:

- Focus debate on key delivery issues;
- Provide an essential link with financial planning;
- Set objectives for the future, and identify major issues that may cross service boundaries;
- Provide a means of managing performance and making performance comparisons;

Prior to the Covid-19 Pandemic, Council was expected to undertake all official food safety controls and related activities prescribed in specific legislation and those recommended within specific guidance, as well as meeting the requirements of the Food Law Code of Practice. Like all food safety authorities, Council faced significant challenges during the pandemic with delivering the statutory functions whilst having to prioritise protecting communities from Covid-19. Many food businesses were temporarily closed or changed their operations and routine interventions were put on hold.

Despite the challenges presented by the Covid-19 pandemic the Environmental Health Service continues to support approximately 1,600 food businesses to deliver products which are safe and produced from premises which are hygienic and properly controlled.

This year's Food Service Delivery sets out our priorities in line with the Food Standards Agency (FSA) Recovery Plan. This aims to ensure that during the period of recovery from the impact of Covid-19, resources are targeted where they add greatest value in providing safeguards for public health and consumer protection in relation to food. It also aims to safeguard the credibility of the Food Hygiene Rating Scheme (FHRS). The FSA Recovery Plan provides a framework for re-starting the regulatory system in line with the Food Law Code of Practice for new food establishments and for high-risk and/or non-compliant establishments, whilst providing flexibility for lower risk establishments. This will be implemented alongside the requirements of the 'Food Standard Agency's Framework Agreement on Local Authority Food Law Enforcement' and sets out:

- The aims and key priorities of the services provided, the organisational structure and the scope of the services provided;
- The ways in which the service will be delivered and the targets for its delivery;
- The human and financial resources involved in providing the service;
- The ways in which the quality of the service will be monitored and improved upon;
- The ways in which the service will be reviewed and improved upon.

The Food Safety Service Delivery Plan will next be reviewed in spring 2023 or sooner if there are new Food Standards Agency requirements. This is to coincide with the FSA's plans to implement a revised Food Hygiene/Food Standards intervention rating scheme from 2023/2024.

1.0 SERVICE AIMS AND OBJECTIVES

1.1 Aims and Objectives

Aim:

To ensure the safe production and sale of food within the Lisburn and Castlereagh City Council area, reduce the possibility of food borne illness and protect the consumer with regard to composition and labelling of food. These aims and objectives are consistent with "Food you can trust - FSA Strategy 2022 to 2027"

1. To inspect food businesses for compliance with the Food Hygiene Regulations (NI) 2006 and any EC Regulations relating to food made under the European Communities Act 1972, assess food-handling practices, identify hazards and take action to remedy any problems discovered. The frequency of inspection will be based on risk assessment of premises in compliance with the Food Law Code of Practice (NI) 2021
2. To inspect food businesses for compliance with the Food Safety (NI) Order 1991 and EC Regulations relating to food standards, to ensure that legal requirements are met in relation to the quality, composition, labelling, presentation and advertising of food. The frequency of inspection will be based on risk assessment of premises in compliance with the Food Law Code of Practice (NI) 2021
3. To work towards the implementation of the Outcome Framework detailed in the FSA and Local Authorities Strategic Priorities Report.
4. To implement the mandatory Food Hygiene Rating Scheme as required by the Food Hygiene Rating (Northern Ireland) Act 2016, in order to ensure that Statutory Food Hygiene Ratings are displayed to assist consumers to make informed choices.
5. To provide advice and assistance to food businesses to enable them to comply with Food Standards Agency guidance "E.Coli 0157 Control Of Cross Contamination"
6. To act as "Home Authority" to manufacturers and packers of food, located within the City, providing advice, food hygiene and food standards audit reports and responding to requests for "Home Authority" reports from other Councils.
7. To improve the understanding of food safety requirements by persons handling food during visits to premises and providing advice and recommendations.
8. To investigate complaints regarding premises, practices and food items.
9. To carry out a proactive and reactive food-sampling regime for chemical analysis.
10. To carry out a proactive and reactive food-sampling regime for bacteriological analysis.

11. To investigate individual cases and outbreaks of food borne illnesses as notified by the PHA and members of the public and to assist in the control and spread of foodborne diseases
12. To provide a Health Education and promotion service to the food industry and the public, to ensure greater awareness of food safety and issues in both the commercial and domestic settings.
13. To deliver nutrition awareness to the catering sector by initiatives and incorporating the message during routine inspections .To implement schemes such as Caloriewise to increase the range of healthy choices for the consumer and to contribute to the implementation of the NI Obesity Framework.
14. To comply with the requirements of the Framework Agreement on Local Authority Food Law Enforcement

TARGETS

Food Standards Agency Recovery Plan

The Environmental Health Service intends to comply with the Food Standards Agency (FSA) Recovery Plan which sets out guidance and advice to councils for the period from 1 July 2021 to 31 March 2024. The guidance and advice aims to ensure that during the period of recovery from the impact of Covid-19, local authority resources are targeted where they add greatest value in providing safeguards for public health and consumer protection in relation to food. It also aims to safeguard the credibility of the Food Hygiene Rating Scheme (FHRS). The Recovery Plan provides a framework for the delivery system in line with the Food Law Code of Practice for new food establishments and for high-risk and/or non-compliant establishments while providing flexibility for lower risk establishments. This will be implemented alongside delivery of:

- Official controls where the nature and frequency are prescribed in specific legislation and official controls recommended by FSA guidance that support trade and enable export.
- Reactive work including enforcement in the case of non-compliance, food incidents and food hazards, and investigation of complaints.
- Sampling, and;
- Ongoing proactive surveillance.
- All local authorities are expected to have regard to the guidance and advice in this Recovery Plan which came into force on 1 July 2021.

The Food Control Section has moved at a faster pace in realigning with the intervention frequencies and other provisions set out in the Food Law Code of Practice. The Food Control Section continues to address the backlog of inspections as a result of various resource pressures from the Covid-19 Pandemic.

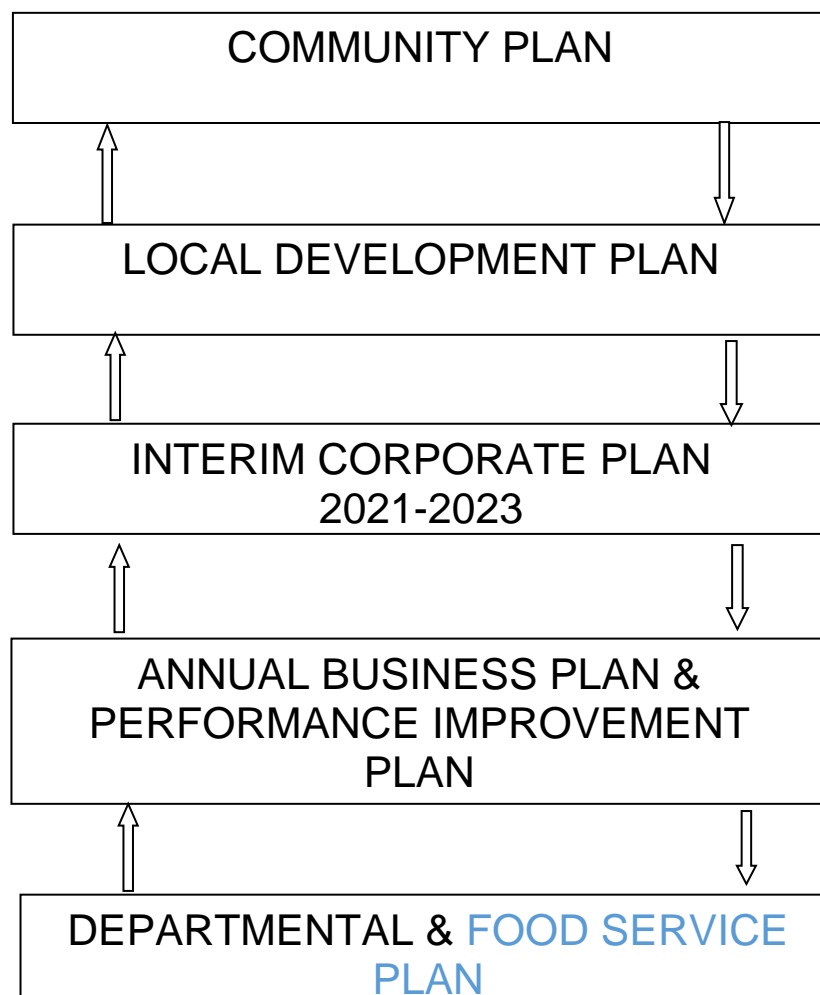
The objectives and actions detailed above will be measured in accordance with the following table of targets. Where deviations from the targets are found, the targets will be analysed and reviewed throughout the year.

Activity	Target
Achieving compliance with the Allergen requirements of the Food Information Regulation (FIR) including Natasha's Law	Compliance assessed and advice given during every programmed inspection. Follow up action taken in accordance with the Food Law Code of Practice.
Inspection of high risk food premises	100% of risk category A & B and broadly non-compliant C's
- Achieve an improvement in FH rating for those premises currently rated <3	70% of premises currently rated <3 improved
Issue of Food Hygiene Rating Notification.	100% of correspondence issued within 14 days of inspection.
Issue of Statutory Notices (excluding Emergency Notices)	100% of Notices issued within ten working days of inspection.
Issue of Emergency Notices	100% of Notices issued within one working day of inspection.
Complaints, requests for advice, responses to queries and Food Alerts for Information	90% responded to within three working days.
Food Alerts for Action	100% responded to within one working day.
Infectious Disease Notifications	90% responded to within one working day

1.2 Links to Corporate Objectives and Plans

The Food Control Service Plan is part of a wider planning process adopted by the Council. The high level aims of the Council are translated into operational objectives and in turn into this service plan, which will be implemented by the Food Control Section of the Environmental Health Service Unit

The Planning Cycle



Service Plan

The Food Safety Service Plan will be embodied in the Environmental Health Service Unit Business Plan.

Delivery of Service

The food service performance is reviewed annually against local and national performance indicators, within the Department's business plan. External review is by means of the Food Standards Agency's LAEMS (Local Authority Enforcement Monitoring System) annual return and through their ongoing monitoring of Food Hygiene Ratings. Internal review is facilitated through internal audit.

Planning & Development

Environmental Health is consulted on planning applications and makes responses to planning service after considering the environmental health effect the proposed development could have on the locality. Directly, the unit aims to create a healthy, safe and sustainable environment on a day to day basis by influencing that environment as far as possible, such as consumer products, the working environment, the domestic environment and pollution control.

Community Involvement

The Section considers interaction with its 'customers' as paramount in delivering its services. The sections supports the Community Services initiatives to educate the community from a number of perspectives including:

Health Promotion & Education. The service proactively aims to deliver health information and education to the public from primary school age to senior citizens. Examples of projects include; food hygiene training for places of worship, Cook-it Programme in partnership with the SEHSCT, allergen training for the food industry and food safety advice to community groups.

Business and Industry

The Environmental Health Service Unit ensures that the regulatory services it carries out have due regard to business constraints while balancing this against actual public health risk therefore supporting economic sustainability. All proprietors of businesses are consulted on the service provided by the Food Control Section. The Section continually strives to keep businesses and industries updated and act as interfaces between the service and themselves, through promotions, provision of training on legislation and premise specific mailshots. Adherence to good Environmental Health Practice, e.g. Food safety, Health & Safety and Environmental Protection makes good business sense and helps companies attract new customers and retain existing contracts.

Forward Planning and Development

The Environmental Health Service receives a large number of public service enquiries and refers these if necessary to the appropriate agency. Frequently this involves referrals being made to appropriate agencies on the complainants / enquirers behalf. Officers advise the Council to enable it to respond to consultations from other agencies. The Service produces an annual business plan incorporating planning and development of the service for the future, which is now incorporated into this document.

Principles

The principles of the Food Control Section reflect those in the Departmental Service Plan and in turn match those of the Council's Interim Corporate Plan

Overall Council Corporate Plan

The Food Control Section looks to the overall Council's Interim Corporate Plan 2021-2024
Council Vision.

Lisburn & Castlereagh City Council's vision is to create opportunities for strong, healthy communities and business growth.

Strategic Themes and Our Partners

The Council's priorities are categorised under the themes of 'Leading well', 'The Economy, 'Health & Wellbeing', 'Where we Live' and 'Our Community'.

The Food Control Section will contribute were possible to the Councils Strategic Themes.

2 BACKGROUND

2.1 Profile of the Local Authority

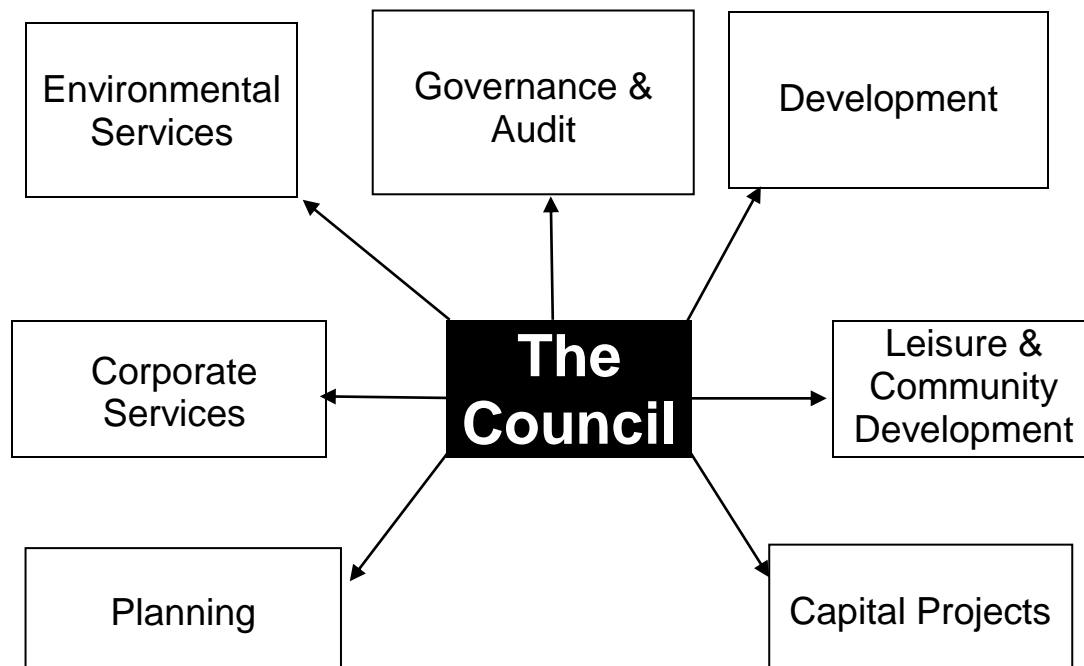
On the 1st April 2015 Lisburn & Castlereagh City Council assumed responsibility for the new Council area, following the amalgamation of Lisburn City Council and Castlereagh Borough Council.

The Council, made up of 40 Elected Members, represents 146,452 residents in 58,868 homes and covers an area of nearly 200 square miles and stretches from Moira and Glenavy in the West, across the City of Lisburn to Dundonald in the East.



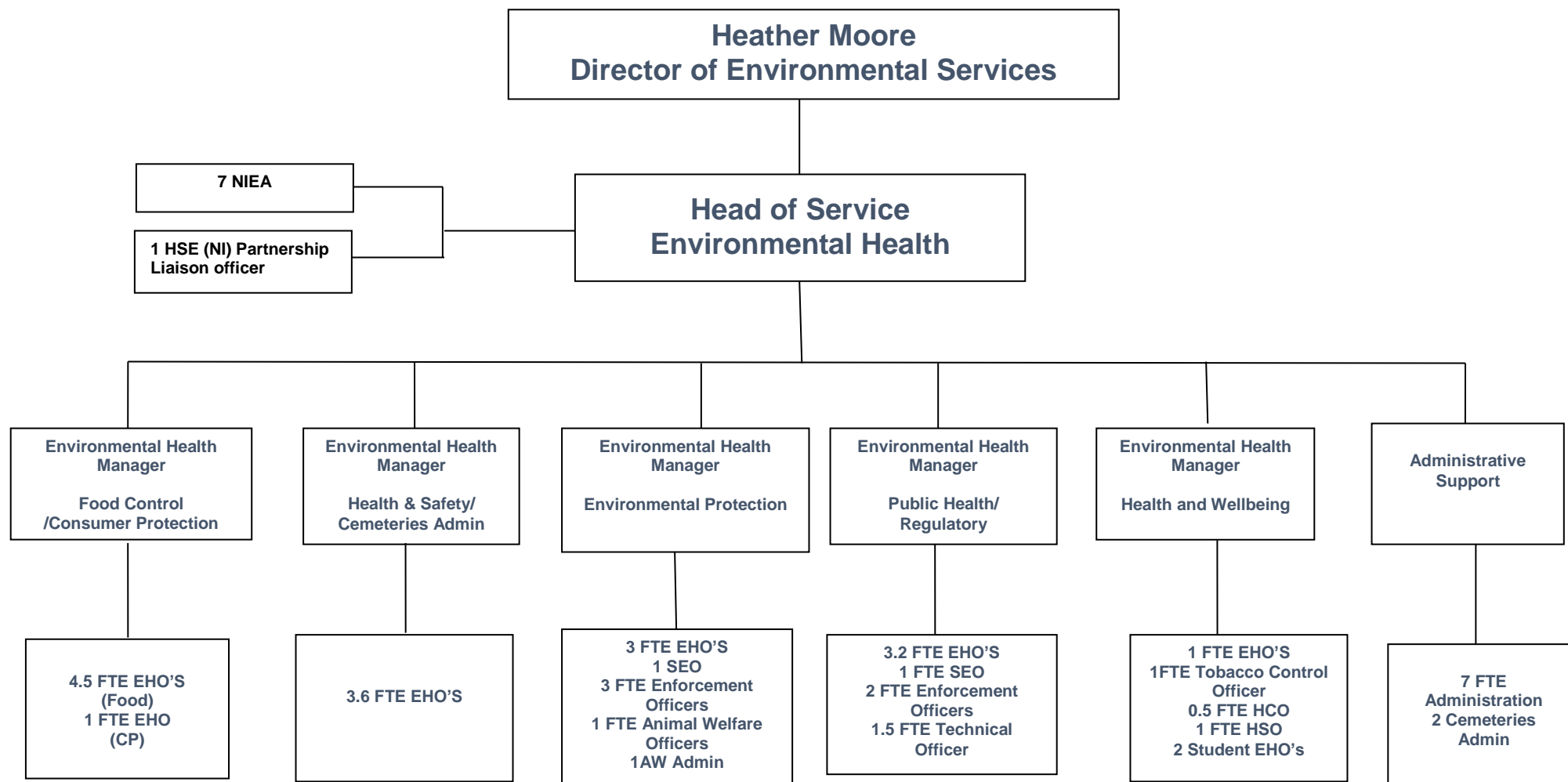
2.2 Organisational Structure

The Head of Service reports all food service issues to the Council via the Environmental Services Committee, which is one of the Councils Statutory Member Committees.



The Council has delegated a number of powers to the Director and Head of Service of Environmental Services to allow for an improvement in the decision making processes regarding food control (and other Environmental Health issues). All powers concerning the delivery of the food service (with the exception of the institution of legal proceedings) rests with the Environmental Health Officers. Only Officers with 2 years experience are permitted to issue Hygiene Emergency Prohibition Notices or Remedial Action Notices

Environmental Services (Environmental Health) - Reporting Structure (Presently Under Review)



Specialist Services

The Department also uses external specialist services, such as the Public Analyst, the Public Health Laboratory and The Department of Agriculture, Environment and Rural Affairs (DAERA). Currently Public Analyst services, in respect of analysis and opinions regarding routine and complaint samples, are provided by Public Analyst -Eurofins Food Ireland Testing Ltd and there is a service level agreement determining the standard of service between the Council and the Public Analyst. The Public Health Laboratory Service (NIPHL) provides microbiological examination of routine and complaint food samples and samples of faeces and vomit obtained during investigation of food related illnesses. A Microbiology Sample Testing Agreement is in place between the Council and NIPHL.

2.3 Scope of the Food Service

The following outlines the various types of activities covered by the Food Control Service:

1 Inspection	<i>Planned Food Hygiene and Food Standards Inspections FHRS Rescore Inspections Re-visits Allergen assessment inspections</i>
2 Response Work	<i>Advice Food Complaints Telephone queries Advisory Visits Food Poisoning and Other Infectious Diseases Unsound Food Food Alerts Allergen Alerts</i>
3 Sampling	<i>Bacteriological Chemical Pesticide residues Survey</i>
4 Service Management	<i>Officer monitoring and supervision Co-ordination and uniform enforcement Maintenance of the Food Hygiene Rating Scheme Forward planning Reporting to Council Court Proceedings Document control Consultation with Stakeholders</i>
5 Service Promotion	<i>Training Research Health Education/Allergen Promotion and Education</i>

All Environmental Health Officers could be asked to carry out other duties at any time by the Head of Service e.g. Public Health calls during staff shortages or at holiday time.

2.4 Demands on the Food Service

At the time of writing Lisburn and Castlereagh City Council has 1584 premises registered as food businesses currently open for which the authority has food enforcement responsibility. They fall into the following premise categories:

Premises type	Premise registered
Primary Producers	7
Manufacturers/Processors	128
Importers/Exporters	4
Distributors/Transporters	52
Retailers	254
Restaurant and other caterers	1139

The Food Control Section is located in Civic Headquarters, Lagan Valley Island, Lisburn. Food Control staff are available during normal working hours with out of hours planned work being carried out as required at any appropriate time e.g. Chinese premises inspections, Council and outside events e.g. Balmoral Show, Ulster Grand Prix, firework displays, Mayors Parade, local racecourse events, etc. Officers work flexi-hours between 8.00am and 12.00midnight. An emergency response system is also available 24 hours a day, 7 days a week for notification of infectious diseases via the PHA and Food Alerts issued by the FSA.

The service can also be contacted via Officers direct e-mail addresses and a Council wide website (www.lisburnandcastlereagh.gov.uk).

2.5 Enforcement Policy

The Council's Enforcement Policy was ratified in June 2020 and is consistent with the principles set out in the Government's Better Regulation agenda which is intended to improve compliance with legislation while minimising the burden on businesses, individuals, organisations and the Council.

In preparing the Policy, the Council has considered the Regulator's Code and the "Statement of Intent" between the Better Regulation Delivery Office, the Department for the Economy and district councils.

The policy will be available to the public and businesses on the Council's Website.

3 SERVICE DELIVERY

Food Premises Inspections

The Council intends to inspect food premises for compliance with all relevant legislation according to risk as set out in the FSA approved Food Law Code of Practice and as a result assess food hygiene and food standards requirements.

With the introduction of the Food Hygiene Rating Act 2016 Councils are required to inspect and rate all premises that fall within the scope of the Act.

This will limit the use of alternative methods of enforcement for low risk premises as guided by the FSA Food Law Code of Practice.

Were a shortfall of resources occur the Council will need consider the reduction of the advisory support visits to businesses. Priority must be given full inspections as directed by Food Law Code of Practice.

Appropriate action within the terms of the Council's Enforcement Policy will be taken to remedy any non-compliance discovered.

During the year 2022/2023 the planned numbers of inspections are as follows:

FOOD HYGIENE PROFILE OF ACTIVITES

<u>Category</u>	<u>Frequency</u>	<u>Total Number of Premises</u>	<u>Inspections for 2022/23</u>	<u>Hours</u>	<u>Total Hours</u>
A	6 months	3	8	24	24
B	1 year	11	16	6.5	104
C	18 months	153	96	4.5	432
D	2 years	443	331	3.5	1158
E	Alternative Enforcement	907	386	2	772
Unrated, etc.	N/A	67	67	4	268
Outside the programme	N/A	1			
TOTALS		1584	904		2758

FOOD STANDARDS PROFILE OF ACTIVITIES

<u>Category</u>	<u>Frequency</u>	<u>Total Number of Premises</u>	<u>Inspections for 2022/23</u>	<u>Hours</u>	<u>Total Hours</u>
A	1 year	2	4	8	8
B	2 years	131	93	6	558
C	5 years	1384	296	2	592
Unrated etc	N/A	67	67	4	268
Outside the programme		0			
TOTALS		1584	460		1426

WORK PLAN FRAMEWORK

<u>ACTIVITY</u>	<u>CODE</u>	<u>TASKS</u>	<u>TIME</u>	<u>TOTAL</u>	<u>HOURS</u>
Planned FH Inspections	0101	500		2758	hours
Planned FS Inspections	0101	240		1426	hours
PPDS Inspections	0212	93	2	186	hours
New Premises	0102/0203	158	4	635	hours
Re-Score Visits FHRS	0211	16	2.5	40	hours
Advice Visits & Other Service Requests	0203	112	2	224	hours
Add. HA Premises	0203	77	5	385	hours
Bacto-Sampling	0501	485	0.75	364	hours
Chemical Sampling	0501	323	1	323	hours
Food Complaints Investigation	1806	59	4	236	hours
Food Poisoning Outbreaks	0207	1	50	50	hours
Communicable Diseases	0207	40	2	80	hours
Food Alerts (FAFA/FAFI)	0201	80	0.5	40	hours
Unsound Food	0306	1	4	4	hours
Meetings, Training/Sems, Research				450	hours
Court Hearings, etc (including prep)	9800	1	15	15	hours
Officer Monitoring/Supervision, Co-ordination and Uniform Enforcement	9200	151	2	312	hours
Council Reports/LAEMS Returns	9302	10 / 1	2 / 40	50	hours
Forward Planning	9201	-	150	150	hours
Procedures	-	-	100	100	hours
Managing FHRS & Consistency	-	-	150	150	hours
Telephone Queries		1000	0.33	330	hours
TOTAL HOURS REQUIRED:				8308 hours	

Staffing Allocations

The staffing resources of the Food Control Section for 2022/2023 are as follows:-

<u>Position</u>	<u>Name</u>	<u>% time</u>	<u>Hours</u>
Director of Environmental Services	Heather Moore	3%	42 hours
Director's PA		3%	42 hours
Head of Service	Richard Harvey	15%	210 hours
Environmental Health Manager	Robert Lamont	80%	1122 hours
Environmental Health Officer	Maeve Carey	100%	1403 hours
Environmental Health Officer	Liz King	100%	1403 hours
Environmental Health Officer	Heather Marshall	100%	1403 hours
Environmental Health Officer	Kerrie Simms	100%	1403 hours
Environmental Health Officer	Vacant 0.5 FTE	100%	702 hours
TOTAL HOURS: 7730 hours			

Following analysis of the total work demand on the Food Control Section of 8308 hours compared with the officer time available of 7703 hours (this includes the vacancy) there is a shortfall of resources available equating to 608 hours or 43 % of a FTE officer. The ratio of Food Officer per 1000 premise is 3.39.

As shown above there is a shortfall in resources in the Food Control Section. With the current resources available the Council's will not be able to meet our obligations under the Food Law Code of Practice and the Framework Agreement on Local Authority Food Law Enforcement.

Section 1.0 - Service aims and objectives has referenced the FSA'S Recovery Plan, however regional and local intelligence has identified a significant decrease in standards found in Category D businesses which is concerning and may increase the risk to consumers and undermine the consumer confidence of the Food Hygiene Rating Scheme as the majority of these businesses are currently displaying a 5 rating but have not received an inspection in the last 4 years.

It is therefore imperative that the Food Control Service endeavour to realign with the risk based inspection frequency as directed by the Food Law Code of Practice and address the backlog of outstanding inspections.

To address the deficiency of staff resource in the Food Section it is the intention to transfer a member of staff from the Health & Safety Unit on a temporary basis to support the inspection programme.

3.2 Food Complaints

The Council will investigate all food complaints in accordance with the FSA Code of Practice and the approved Northern Ireland Food Liaison Group procedure (2013). It is estimated that approximately 59 complaints will be investigated during 2022/2023 with a total demand of time 236 hours.

3.3 Home Authority Principle

Lisburn and Castlereagh City Council formally adopted the LACORS Home Authority Principle in January 2001 although the food control service has been practising it since its inception in the late 1980's. Currently the Council is responsible for 128 manufacturing premises which distribute food outside the Council area.

3.4 Advice to Businesses

The Council will aim to improve the understanding of food safety requirements by persons handling food, through formal food hygiene courses and informal education during visits to premises, and in the provision of advice and recommendations. It shall also aim to provide a health education and promotion service to the general public to ensure greater awareness of food safety issues in both the commercial and domestic setting.

Advice to businesses is given during planned programmed inspections or when a food handler or member of the public contacts the food safety unit by phone, E-mail or letter. A Health Promotion and Education Service in conjunction with the Health and Wellbeing Section is also provided to the General Public. Talks and presentations on any food hygiene/food standards or infectious disease topic can be organised and presented at any time. Food Safety Information has been translated in Chinese, Urdu as well as Polish and other ethnic languages and is available on request. This has of course become a statutory duty in the context of the Councils Equality Scheme.

The increased importance of information to be provided by food businesses regarding allergens and nutritional information will require engagement with food business operations to ensure that there are additional choices available for the consumer

3.5 Food Inspection and Sampling

The Food Control Section adopted the NIFLG Policy for sampling in 2012.

Food Standards (Chemical Samples)

A sampling plan outlining the workload for 2022/2023 has been devised. The Council takes 2 routine samples per 1000 population in its Council area. Therefore approximately 24 samples per month or 280 samples per year (or until the budget is spent) are procured and submitted to the appointed Public Analyst. This number of samples may then be supplemented by special surveys or complaints.

Food Hygiene (Bacteriological Samples)

The target number of bacteriological samples submitted is 11 per week. This may be supplemented by complaint samples or special surveys organised by FSA, PHLS etc. The Public Health Laboratory Service at the City Hospital, Belfast examines these samples free of charge, for resource implication see 3.1.

3.6 Control and Investigation of Outbreaks and Food Related Infectious Diseases

Although the Public Health Agency is the regional authority responsible for the investigation of infectious diseases the Council will investigate all individual cases of food poisoning as notified by the Public Health Agency within 1 working day. We will also investigate as appropriate alleged food poisoning if reported by GPs or members of the Public and report these to the Agency. These notifications are received and returned electronically to increase efficiency and confidentiality.

We investigate and act as agents to the Public Health Agency for any food poisoning outbreaks in the City Council area.

These procedures will be in accordance with the Public Health Agency policy on the investigation of food poisoning incidents and outbreaks where we report to the Consultant in gastrointestinal infection who is under the control of the PHA. On average we receive approximately 85 individual cases of food poisoning and 1 outbreak per year - for resource implication see 3.1.

3.7 Food Safety Incidents

The Council will act on all food safety incidents in accordance with the FSA Code of Practice and will deal with all notified Food Alerts. Food Allergy alerts will be responded to as required.

The resource implication is detailed in 3.1 and all food alerts will be responded to within one day.

3.8 Liaison with Other Organisations

Lisburn & Castlereagh City Council have established strong links with other Councils via the Northern Ireland Food Managers Group other regional working groups. These links have been maintained and serve to permit a close working relationship involving the sharing of information/expertise and joint working and training initiatives.

Liaison with Government and Professional Working Groups

Similarly, the Environmental Health Manager (Food Control and Consumer Protection) provides the main liaison point on behalf of the Council to such bodies as DAERA, Health and Safety Executive, QUB, University of Ulster, CIEH and other professional groups.

Commitment to Local/Regional Groups

Under the Environmental Health Northern Ireland group a sub-group, known as the Northern Ireland Food Managers Group (NIFMG) has been created. The NIFMG has representation from each of the 11 Councils. It provides advice and co-ordination of Food Control matters throughout the Province.

The NIFMG produces a work plan on several food related areas each year which are undertaken throughout all the 11 Councils.

Liaison and Involvement with LACORS

Although the Council operates the principles of Home Authority as devised by LACORS, the organisation itself has ceased to exist and the Primary Authority system overseen by the Better Regulation Delivery Office (BRDO) has to a great extent, replaced the Home Authority system in Great Britain. In the absence of the obligatory application of this system in Northern Ireland, local authorities, including, Lisburn & Castlereagh City Council will follow as far as possible the protocols involved with Primary Authority principle. This only has implications for some of the larger businesses (e.g. superstores) and Councils in Northern Ireland will also continue with the Home Authority approach with businesses whose primary location is within the Council area.

Formal Liaison with Voluntary Group and Public Sector Bodies

The NI Food Managers Group provides specialist advice to voluntary groups, usually upon demand.

The Public Health Agency has a close working relationship with the Council, particularly in the area of infectious disease control. The relationship with the Public Health Consultant for Gastro-intestinal illness has proved to be the main interface in this aspect.

Formalised liaison is maintained with other services within the authority, including Planning Service, Building Control, Events Organisers and the Home Safety Group.

3.9 Food Safety and Standards Promotion

The Council will aim to:

- Improve food handler's understanding of food safety requirements, by provision of formal food hygiene courses and informal education during visits to premises, in the provision of advice and recommendations, and to
- Provide a health education and promotion service to the general public to ensure greater awareness of food safety issues in both the commercial and domestic setting.

In the coming year it is planned to undertake the following in conjunction with the Health and Wellbeing section:

1. To collaborate with a range of organisations to embrace the aims and objectives of the Investing for Health Strategy and to contribute to the Councils Community Plan.
2. To support the Council's District Electoral Area projects.
3. Continue to provide Hygiene Instruction Training to Volunteers who prepare food for Churches and Community Groups in conjunction with the Health and Wellbeing Section
4. Facilitate food hygiene training in schools
5. Ongoing education during inspection of premises
6. Participation in national promotional events such as Food Safety Week
7. Engage with community groups to promote food safety in the home

4 RESOURCES

4.1 Financial Allocations

The Food Control Section is responsible for its own budget and has conducted a benchmarking of the Food Control resources available to all Northern Ireland Councils.

<u>Expenditure</u>	<u>2022/2023</u> £
Salaries	£287,800
Staff Travel and Subsistence	£10,000
Protective Clothing	£350
New Equipment	£860
Sampling	£36,000
TOTAL	£335,010

Food Standards Agency Grant Funding

The FSA traditionally allocated funding to Councils based predominately on population, however from April 2015, grants were allocated based on prioritisation of activities linked to food establishments. All monies will be paid on a quarterly basis.

For 2022/2023

FSA Core Funding £99,755.87

This reflects an increase from 2021/2022 of £25,578.43.

FSA have increased the core funding from 2021/2022 in recognition of not only the key work DCs continue to undertake to deliver food official controls, but the wider participation and valuable contribution to FSA working groups, the programmes of change led by the FSA and wider collaborative programmes concerning dietary health. The additional funding allocation for 2022/2023 will be used to increase the staff compliment in the Food Section to expedite the realignment of the inspection regime in line of the Food Law Code of Practice.

4.2 Staff Development Plan

As part of the Council's Investment in People Initiative, an employee development scheme has been implemented. At present, staff training programmes are produced following an annual review of the training needs of each officer, as part of the internal monitoring processes operated in the Food Control Service. Training is tailored to the needs of both the department and the individual members of staff and they are provided with opportunities as they arise. A positive attempt is made to ensure that these needs are met. A structured training programming is provided through the NIFMG, which Lisburn & Castlereagh City Council fully supports. Officers from the Council's Food Control Service attend any courses organised by the Group. It is also essential that officers meet the training requirements detailed in the Food Law Code of Practice.

5 QUALITY ASSESSMENT

5.1 Quality Assessment

In order to assess the quality of the Service the food control staff are involved in a number of measures and monitoring arrangements: -

- **Monitoring of District EHO by Environmental Health Manager**
The Environmental Health Manager will review Food Hygiene Ratings, officer's inspection notes, letters and follow-up actions. Qualitative assessment of inspection procedures is also conducted through accompanied inspections where necessary and where resources permit.
- **Staff Meetings**
The Environmental Health Manger will meet with staff on a regular basis to discuss issues related to service provision and quality of the service.
- **Customer Engagement**
A questionnaire is sent to every completed programmed inspection and completed food complaint .These are regularly analysed and reported as part of the Council's performance review plan.

➤ **Consistency**

Consistency exercises formatted by Northern Ireland Food Managers' Group.

6 REVIEW

6.1 Review against the Service Plan

Due to the Covid-19 Pandemic a Food Service Plan was not developed for 2021/2022 and therefore a review is not possible.

The Food Control Service met the requirements of the FSA's Recovery Plan in 2021/2022.

6.2 Identification of Variation from the Service Plan

As indicated on the planned allocation of resources in Section 3.1 above, there is a shortfall of officer time within the food control section to realign with the requirements of the Food Law Code of Practice. .

To address the shortfall in the food control section it is proposed that an officer is transferred into the section on a temporary basis.

The food section has historically carried out routine advisory visits to all new food businesses. The food section appreciates the importance of providing support and guidance to businesses, however going forward this guidance and support will be provided by directing businesses to the Council website and other information sources. Advisory visits will continue to be carried out on request or if the business is intending to carry out complex food processing activities.

Areas of work will continue be prioritised according to risk and public benefit. Monitoring review, using specifically designed internal performance indicators, will be carried out every quarter throughout the year, to assess variations from the Service Plan. Following the discovery of any variations, steps will be taken to address them, which could include redeployment of staff into the Food Control Section.

6.3 Areas of Improvement

Where variations are noted, they will form the basis of areas to be included in a Performance Improvement Plan for the following year.

Since the Covid-19 Pandemic there has been an increase in reactive workload due to the number of new food businesses opening or changing ownership which must be inspected within 28 days of opening.

As previously noted the food section is finding that there is a fall in food safety standards across the catering sector. This is resulting in more revisit inspections to ensure compliance and an increase in Re-Rating inspection applications compared to previous years.

These additional inspections and the realignment with the Food Law Code of Practice inspection frequencies will continue to exert significant pressure on the section to deliver the service.

Workloads will continue to be prioritised by risk and where appropriate alternative intervention strategies will be deployed.

Richard Harvey
Head of Service

Date Ratified by Environmental Services Committee: _____



Environmental Services Committee

7th September 2022

Report from:

Head of Service (Environmental Health)

Item for Decision

TITLE: Item 5.5 - Consultation on the Food Standards Agency's Food Hygiene Rating (Online Display) Regulations (NI) 2023

Background and Key Issues:

1. A report was tabled at the August 2022 Full Council seeking Council approval to grant delegated authority for the corporate response to the Consultation on the Food Standards Agency's Food Hygiene Rating (Online Display) Regulations (NI) 2023.
2. Members agreed to grant delegated authority to the Environmental Service Committee and now the Consultation response is ready to be submitted (attached as **Appendix 4 EH** for Members' information).

Recommendation:

It is recommended that Members approve the response to the Consultation on the Food Standards Agency's Food Hygiene Rating (Online Display) Regulations (NI) 2023 to be submitted to FSA prior to the closing date of 9 September 2022.

Finance and Resource Implications:

None.

Screening and Impact Assessment

1. Equality and Good Relations

Has an equality and good relations screening been carried out on the proposal/project/policy? N/A

If no, please provide explanation/rationale

If yes, what was the outcome?:

Option 1 Screen out without mitigation	N/A	Option 2 Screen out with mitigation	N/A	Option 3 Screen in for a full EQIA	N/A
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Rationale for outcome/decision (give a brief explanation of any issues identified including mitigation and/or plans for full EQIA or further consultation)

Insert link to completed Equality and Good Relations report:

2. Rural Needs Impact Assessment:

Has consideration been given to Rural Needs?	N/A	Has a Rural Needs Impact Assessment (RNIA) template been completed?	N/A
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If no, please give explanation/rationale for why it was not considered necessary:

If yes, give brief summary of the key rural issues identified, any proposed actions to address or mitigate and include the link to the completed RNIA template:

SUBJECT TO PLANNING APPROVAL: N/A

If Yes, "This is a decision of this Committee only. Members of the Planning Committee are not bound by the decision of this Committee. Members of the Planning Committee shall consider any related planning application in accordance with the applicable legislation and with an open mind, taking into account all relevant matters and leaving out irrelevant consideration".

APPENDICES:

Appendix 4 EH - Food Standards Agency's Food Hygiene Rating (Online Display) Regulations (NI) 2023 Consultation Response

HAS IT BEEN SUBJECT TO CALL IN TO DATE?

N/A

If Yes, please insert date:

Consultation on the Food Standards Agency's Food Hygiene Rating (Online Display) Regulations (NI) 2023

Document: [The Food Hygiene Rating \(Online Display\) Regulations \(Northern Ireland\) 2023 | Food Standards Agency](#)

Response submission: executive.support@food.gov.uk

Closing Date: 9th September 2022

Lisburn & Castlereagh City Council welcomes the opportunity to provide the comments below on The Food Hygiene Rating (Online Display) Regulation (NI) 2023. While it should be anticipated that these regulations will ensure consistency of Food Hygiene Rating display across all platforms and provide authorised officers with the appropriate tools for enforcement, Lisburn & Castlereagh City Council (LCCC) has some reservations in respect of being able to enforce this piece of legislation.

Question 1:

Do you agree with the proposed commencement date which will be immediately following the legislative process (est. April 2023)? If you consider an alternative date appropriate, please specify this and provide a rationale.

Lisburn & Castlereagh City Council is addressing the backlog of inspections that resulted from the pandemic and would point out the focus for the last quarter of the 22/23 year will be on working to the FSA recovery milestone of 31st March 2023. Promotion of the FHRS online display regulations is not a priority in the current FSA recovery plan and it may be likely that the Council will not have the resources to support a PR campaign at that time.

Lisburn & Castlereagh City Council is also aware that should the appropriate legislative processes not be in place then it is likely that the suggested commencement date above may have to be extended. It should be pointed out that the impact assessment refers to additional funding given to all DC's for the 22/23 year for use towards the costs of implementing these regulations. Consideration needs to be given to the possibility that not all work in this regard will be undertaken in the 22/23 financial year. LCCC would welcome further updates in regard to changes to the proposed commencement date and expectations on DC's during the lead up period.

Question 2:

Do you have any comments regarding the definition of an "online facility" which will bring certain businesses within scope of this requirement? If you think this definition has included or excluded certain business in the scheme that should or should not be, please provide details and a rationale of why they should be included or excluded.

LCCC do not have any comments regarding the definition of an "online facility".

Question 3:

Do you agree with the proposed specified relevant period of 7 days (beginning on the day the rating is published on www.food.gov.uk/ratings) for online display? If not, please state why and provide a rationale for an alternative period.

LCCC are in agreement with the proposed specified relevant period of 7 days for online display as all businesses will have been through the appropriate notification and appeal period prior to publishing.

Question 4:

Do you have any comments regarding the definition of the “relevant point” which defines the location of where the food hygiene rating icon must be displayed?

LCCC have no comments in relation to the definition of the “relevant point” as it is clearly explained in the interpretation section of the draft regulations.

Question 5:

Do you have any comments regarding the definition of a “social media service”?

LCCC do not have any comments regarding the definition of a “social media service”.

Question 6:

- a) Does the wording in regulation 3 (2)(a) make it clear who the regulations apply to?
- b) Do you have any comments regarding regulation 3 (2)(a)?

a) LCCC interprets the wording in regulation 3 (2)(a) to apply to those food business operators who use their own online facility from which food can be purchased and to online facilities that are used by one or more food business operators to sell their foods.

b) LCCC have no further comments regarding regulation 3(2) (a)

Question 7:

- a) Does the wording in regulation 3 (2)(b) make it clear who the regulations apply to?
- b) Do you have any comments regarding regulation 3 (2)(b)?

Reponses:

- a) Please see comments in b)
- b) LCCC is aware of the Food Standards Agency’s work with online aggregators and welcome the opportunity for District Council’s to participate in such workstreams. The willingness of online aggregators to display prescribed and valid food hygiene ratings is an important factor in the implementation of the online display regulations. LCCC would seek clarification on whether a failure to display a prescribed and valid FHR on an aggregator site constitutes an offence that can be enforced by a Fixed Penalty Notice (FPN), in that failure to display an icon at the relevant point is an offence by the FBO. As there does not appear to be any legal requirement in the draft regulations for aggregators to display ratings, LCCC are concerned that there may be some reluctance from aggregators to do so. FBO’s could be committing offences through no fault of their own.

Clarification is being sought on the offence of failure to display a prescribed valid online food hygiene rating. The wording of the fixed penalty notice in Schedule 2 of the Food Hygiene Rating Regulations (NI) 2016 refers to the offence as failure to display an ‘online link’ contrary to section 10 (1) of the Food Hygiene Rating Act (NI) 2016. The draft online

display regulations reference an 'icon'. It is the understanding of LCCC that a link is only to be used by food business operators that have a chain of establishments as detailed in section 3(3) of the draft regulations.

In Schedule 2 Part A of the Food Hygiene Rating Act should the FPN reference section 7(3) in the alleged offence for online display, in a manner similar to the reference of 7(1) in the alleged offence of failure to display a sticker?

LCCC would welcome further engagement by the FSA with social media platform providers in order to address ongoing difficulties the Council is experiencing with food traders using such platforms. It is envisaged that there may be an increase in complaints from consumers with regard to the display of a FHR by businesses selling via social media. Businesses may not provide all the necessary information on these platforms to enable the Council to identify where the business is operating from, leaving them unable to register the business or take appropriate enforcement actions.

Question 8:

Do you have any comments regarding regulation 3 (3)?

LCCCI would bring to the attention of the FSA that as per Regulation 3, a facility that operates in respect of an operator's chain who is permitted to provide a hyperlink to the required information should be encouraged to do so in a way that does not provide an overwhelming amount of information to the consumer on establishments that it would not be possible for them to order from. For example a UK wide chain listing the FHR of all its establishments including those in mainland GB.

Question 9:

a) Do you foresee issues with any of the proposed prescribed key branding parameters in Regulation 4? In particular, do you have any issues with the specification of the colour Green Pantone 376?

b) Do you foresee any issues with the rating being within the rating scale (0 to 5), to provide some context to consumers, as shown in the FHR images in Figure 2 and Figure 4?

c) Do you have any other comments on Regulation 4?

LCCC do not have any comments to question 9 or foresee any issues with the questions asked in parts a) and b).

Additional comments

LCCC would welcome guidance and/or training in evidence gathering for FHR offences committed online, particularly to ensure compliance with RIPA. Currently RIPA investigations require the agreement and sign off by a magistrate.

LCCC would welcome further guidance on the use of fixed penalty notices to ensure consistency of enforcement among District Councils. Currently District Councils may operate different time scales for the enforcement of FPN's based on internal procedures.

LCCC is largely in agreement with the assessment of the potential impact and costs of implementation on food businesses and District Councils. LCCC acknowledge the additional funding given to the Council for the 22/23 financial year is to accommodate the estimated costs. LCCC agree that the scoping estimate of 26% of businesses in NI that use an online ordering facility is low and would suggest a much greater per centage of food businesses will

be required to display an online FHR. LCCC note this is acknowledged by the FSA in the impact assessment in that the most up to date data is pre-pandemic and may not reflect the changes to consumer behaviour which resulted from the pandemic.

LCCC also agree that in order to minimise impacts on District Councils in the monitoring and enforcement of the online display regulations, they should adopt a risk based and proportionate approach and target resources to focus on businesses that are non-broadly compliant.



Environmental Services Committee

7th September 2022

Report from:

Head of Service- Environmental Health

Item for Decision

TITLE: Item 5.6 - Regulation of Cosmetic Treatments

Background and Key Issues:

1. Members are advised to consider a request to write to the Health Minister to seek better regulation of cosmetic treatments in Northern Ireland.
2. In October 2021 the Botulinum Toxin and Cosmetic Fillers (Children) Act 2021 came into force in England making it illegal to administer botox or a filler by way of injection for a cosmetic purpose to a person under 18 years of age. No such law exists in Northern Ireland.
3. The UK Government recently confirmed its intention to introduce a licensing regime for non-surgical cosmetic procedures to better regulate the cosmetic industry in England through an amendment to the Health and Care Bill.
4. The licensing scheme in England will introduce consistent standards that individuals carrying out non-surgical cosmetic procedures such as lip fillers, botox etc must meet, as well as hygiene and safety standards for premises. It will focus on those cosmetic procedures which, if improperly performed, have the potential to cause harm.
5. In recent years there has been a significant rise in the number and type of non-surgical aesthetic procedures available, with many practitioners performing treatments without being able to evidence appropriate training and the required standards of oversight and supervision.

6. The existing legislation available to Environmental Health Officers to regulate this sector in Northern Ireland is considered no longer fit for purpose and no licensing scheme (similar to that being introduced in England) exists in Northern Ireland.
7. The Local Authority Health and Safety Liaison Group (HSLG) is a subgroup of Environmental Health Northern Ireland (EHNI). HSLG is seeking the support of all Councils (see **Appendix 5 EH**) by requesting that consideration be given to writing to the Health Minister to ask for better regulation of cosmetic treatments in Northern Ireland, along with the introduction of a licensing scheme for non-surgical cosmetic procedures.

Recommendation:

It is recommended that Members consider the request and approve a letter to be sent to the Health Minister to ask for better regulation of cosmetic treatments in Northern Ireland, along with the introduction of a licensing scheme for non-surgical cosmetic procedures.

Finance and Resource Implications:

None

Screening and Impact Assessment

1. Equality and Good Relations

Has an equality and good relations screening been carried out on the proposal/project/policy? N/A

If no, please provide explanation/rationale

If yes, what was the outcome?:

Option 1 Screen out without mitigation	N/A	Option 2 Screen out with mitigation	N/A	Option 3 Screen in for a full EQIA	N/A
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Rationale for outcome/decision (give a brief explanation of any issues identified including mitigation and/or plans for full EQIA or further consultation)

Insert link to completed Equality and Good Relations report:

2. Rural Needs Impact Assessment:

Has consideration been given to Rural Needs?

N/A

Has a Rural Needs Impact Assessment (RNIA) template been completed?

N/A

If no, please give explanation/rationale for why it was not considered necessary:

If yes, give brief summary of the key rural issues identified, any proposed actions to address or mitigate and include the link to the completed RNIA template:

SUBJECT TO PLANNING APPROVAL:

N/A

If Yes, "This is a decision of this Committee only. Members of the Planning Committee are not bound by the decision of this Committee. Members of the Planning Committee shall consider any related planning application in accordance with the applicable legislation and with an open mind, taking into account all relevant matters and leaving out irrelevant consideration".

APPENDICES:

Appendix 5 EH - Letter of request from Chair of HSLG

HAS IT BEEN SUBJECT TO CALL IN TO DATE?

N/A

If Yes, please insert date:

Appendix 5EH

By email

11th July 2022

Richard Harvey
Head of Service (Environmental Health)
Lisburn and Castlereagh City Council
Civic Centre
Lagan Valley Island
Lisburn
BT27 4RL

Dear Mr Harvey,

RE: REGULATION OF COSMETIC TREATMENTS IN NORTHERN IRELAND

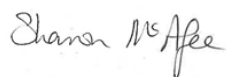
The popularity of aesthetic non-surgical cosmetic treatments has grown rapidly in recent years, with new non-surgical cosmetic procedures continually emerging on the market. The existing legislation available to Environmental Health Officers in Northern Ireland to regulate this sector is however considered no longer fit for purpose.

The introduction of a national licensing scheme to govern the oversight of advanced aesthetic non-surgical cosmetic treatments was one of seventeen recommendations made by the All-Party Parliamentary Group on Beauty, Aesthetics and Wellbeing following their Inquiry into advanced aesthetic non-surgical cosmetic treatments.

The UK Government have recently agreed to amend the Health and Care Bill in England to introduce a licensing scheme for non-surgical cosmetic procedures to better regulate the cosmetic industry in England.

The Local Authority Health and Safety Liaison Group (HSLG) is seeking the support of Lisburn and Castlereagh City Council on this issue and is requesting consideration be given to writing to the Health Minister to request better regulation of cosmetic treatments in Northern Ireland, along with the introduction of a licensing scheme for non-surgical cosmetic procedures.

Yours sincerely

**Sharon McAfee**

Chair of Local Authority Health and Safety Liaison Group (HSLG)



Environmental Services Committee

7th September 2022

Report from:

Head of Service - Environmental Health

Item for Decision

TITLE: Item 5.7 - Consultation on the Draft National Air Pollution Control Programme (NAPCP)

Background and Key Issues:

1. A report tabled to the August 2022 Full Council meeting was approved to grant delegated authority to the September Environmental Services Committee to retrospectively approve the response to the Consultation on the Draft National Air Pollution Control Programme (NAPCP). The Consultation closed on 4 September 2022. Officers had requested an extension until 12 September 2022, however, this request was denied.
2. The UK government and the devolved administrations are conducting a consultation on the Draft National Air Pollution Control Programme (NAPCP).
3. The NAPCP sets out policies and measures, as well as supporting technical analysis, that may be required in order to limit emissions in accordance with the Emission Reduction Commitments (ERCs) set under the National Emission Ceilings Regulations 2018 ('the NECR').
4. The NECR set out legally binding Emission Reduction Commitments (ERCs) for five air pollutants: fine particulate matter (PM2.5), sulphur oxides (SOx), nitrogen oxides (NOx), ammonia (NH3) and non-methane volatile organic compounds ('NMVOCs') for 2020 and 2030.
5. In the Draft NAPCP the UK government and devolved administrations have outlined the Policies and Measures (PaMs) which will be considered further in order to reduce emissions in accordance with the national emission reduction commitments.
6. These PaMs are not firm government policy. They continue to be subject to further policy analysis, development, consultation and government decision processes.

7. The policies and measures which will be considered further fall within 7 packages. They include:
- Solid fuels - domestic burning is a major contributor to PM2.5 emissions. This package could include policies and measures relating to the types of solid fuels burnt in domestic combustion.
 - Communications on burning – this package focuses on educating consumers on the risks of domestic burning and how to burn in the cleanest way possible.
 - Cleaner stoves - these policies and measures could support the shift towards cleaner stoves in the household, thus improving indoor and outdoor air quality.
 - Agriculture - this package could reduce ammonia emissions from agriculture, which is the largest contributor to the UK's NH3 emissions.
 - Industry – the industry package sets out how industry and regulators will work together to raise standards and reduce emissions.
 - Road transport (decarbonisation) – this package takes into account various road transport policies, set out in the Net Zero Strategy, which have an impact on air quality.
 - Net Zero (Power, Industry and Residential) - policies and proposals for decarbonising all sectors of the UK economy also have an impact on air quality and have been taken into account in compiling the NAPCP.
8. The Department for Environment, Food and Rural Affairs (DEFRA) wants to ensure that they are taking the most effective and ambitious action across all administrations within the UK to tackle air pollution. The response submitted by Environmental Health therefore considered the NAPCP bearing in mind regional strategies and proposed strategies referring to for example Clean Air, Ammonia and Energy.
9. An email was sent to Members of the Environmental Services Committee on 29 July 2022 inviting comments to be included in the response to this Consultation. A copy of the Consultation response is attached as **Appendix 6 EH**.

Recommendation:

It is recommended that Members give retrospective approval to the response submitted by Environmental Health and attached as **Appendix 6 EH**.

Finance and Resource Implications:

None.

Screening and Impact Assessment

1. Equality and Good Relations

Has an equality and good relations screening been carried out on the proposal/project/policy?

If no, please provide explanation/rationale

DEFRA will be responsible for completing as part of any final policy implementation across the UK.

If yes, what was the outcome?:

Option 1

Screen out
without mitigation

N/A

Option 2

Screen out with
mitigation

N/A

Option 3

Screen in for
a full EQIA

N/A

Rationale for outcome/decision (give a brief explanation of any issues identified including mitigation and/or plans for full EQIA or further consultation)

Insert link to completed Equality and Good Relations report:

2. Rural Needs Impact Assessment:

Has consideration been
given to Rural Needs?

No

Has a Rural Needs Impact
Assessment (RNIA) template been
completed?

N/A

If no, please give explanation/rationale for why it was not considered necessary:

DEFRA will be responsible for completing as part of any final policy implementation across UK

If yes, give brief summary of the key rural issues identified, any proposed actions to address or mitigate and include the link to the completed RNIA template:

SUBJECT TO PLANNING APPROVAL:

N/A

If Yes, "This is a decision of this Committee only. Members of the Planning Committee are not bound by the decision of this Committee. Members of the Planning Committee shall consider any related planning application in accordance with the applicable legislation and with an open mind, taking into account all relevant matters and leaving out irrelevant consideration".

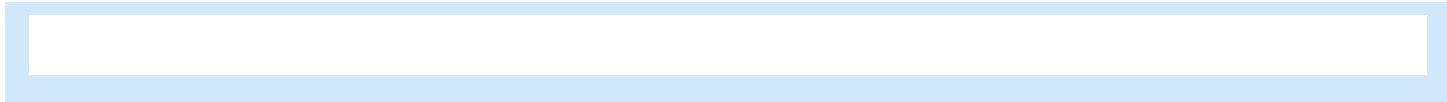
APPENDICES:

Appendix 6 EH – Consultation on the Draft National Air Pollution Control Programme (NAPCP) Response

HAS IT BEEN SUBJECT TO CALL IN TO DATE?

N/A

If Yes, please insert date:



Response ID ANON-4D4S-A6X7-5

Submitted to Consultation on the draft National Air Pollution Control Programme
Submitted on 2022-08-17 14:07:27

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About this consultation

Context

NAPCP overview

NAPCP additional factors

Aim of the consultation

General information and how to respond

Consultation questions

1 Would you like your response to be confidential?

No

Reason:

2 What is your name?

Name:

Sally Courtney

3 What is your email address?

Email:

sally.courtney@lisburncastlereagh.gov.uk

4 What is your location?

Northern Ireland

Other please specify:

5 Which of the below best describes you?

Local authority

Please add your organisation:

Lisburn & Castlereagh City Council

Policy related questions

6 Do you agree or disagree with the balance of measures across the 7 NAPCP packages as set out in section 2.6.1 of the NAPCP document, for the abatement of fine Particulate Matter (PM2.5)?

Agree

Additional comments:

The biggest sources of PM in Northern Ireland are domestic wood and coal burning, industrial combustion and road transport. Research is increasingly points to the conclusion that - for exposure to particulate matter PM2.5 at least - there is 'no safe level' of air pollution, and that exposure to incremental levels of PM2.5 even below objectives can be associated effects on mortality. measures to control solid fuel burning and to educate consumers are to be welcomed

7 Do you agree or disagree with the balance of measures across the 7 NAPCP packages as set out in section 2.6.1 of the NAPCP document, for the abatement of Ammonia (NH3)?

Not Answered

Additional comments:

Northern Ireland is a relatively high contributor to ammonia emissions in the UK, the agricultural sector being responsible for the majority of these emissions.

The proposed Ammonia Strategy introducing measures to reduce farm ammonia, introduce conservation actions to improve the condition of habitats and a revised operational protocol for the assessment of air pollution effects should help to achieve reductions.

8 Do you agree or disagree with the balance of measures across the 7 NAPCP packages as set out in section 2.6.1 of the NAPCP document, for the abatement of Nitrogen Oxides (NOx)?

Agree

Additional comments:

Monitoring and modelling of NO₂ concentrations show that this pollutant is a problem at a number of roads and monitoring sites in Northern Ireland. Further reductions are required to meet the air quality objective.

9 Do you agree or disagree with the balance of measures across the 7 NAPCP packages as set out in section 2.6.1 of the NAPCP document, for the abatement of Non-Methane Volatile Organic Compounds NMVOCs?

Not Answered

Additional comments:

The limits for total emissions of air pollutants (sulphur dioxide, ammonia, non-methane volatile organic compounds (NMVOCs) and nitrogen oxides) set by the National Emissions Ceilings (NEC) Directive were met in 2010 and have been maintained thereafter.

The measures proposed would help to further reduce emissions towards the 39% target.

10 Do you agree or disagree with the balance of measures across the 7 NAPCP packages as set out in section 2.6.1 of the NAPCP document, for the abatement of Sulphur Dioxide (SO₂)?

Agree

Additional comments:

Further legislative measures to prevent the sale and use of 'high' sulphur fuels and promote the installation of cleaner forms of heating are to be welcomed.

11 After the publication of this NAPCP, UK government and devolved administrations will continue to develop our policy measures and approaches. Please inform us of any further measures you think we should consider to help achieve the UK ERCs most effectively.

Proposals should be evidence based. Please select a country from the list below to which your measure(s) relate to and use the text box and file upload button to describe the proposed measure and supporting evidence.:

Not Answered

Technical related questions

12 Do you agree or disagree with the scale of the potential emission reductions for each of the 7 packages of PaMs as set out in table 2.6.1 of the draft NAPCP?

Agree

If you answer disagree (i.e. you feel the scale is either too low or high) please provide views and information to support your view.:

13 We have outlined the uncertainty of projections in the 'UK NAPCP additional factors' above. Please provide any additional information on potential changes over the next 8 years which may impact emission projections. Please also select the category that your information relates to.

Policy

additional information:

Ammonia Strategy NI
Energy Strategy For NI
Clean Air Strategy for NI

14 In revising the NAPCP the UK has followed the format set out in EU implementing decision 2018/1522. Do agree or disagree that the format of the NAPCP could be improved?

Neither agree or disagree

If you answer agree and think the format could be improved, please provide views on how the NAPCP can be improved. This can be either presentational (i.e. the format or content required), or effectiveness/usefulness of the document. If you disagree and don't think the format of the NAPCP could be improved, please provide your views on the content and/or effectiveness/usefulness of the current format. :

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At the end of the consultation

Consultee Feedback on the Online Survey

15 Overall, how satisfied are you with our online consultation tool?

Not Answered

Please give us any comments you have on the tool, including suggestions on how we could improve it. :