

PREVENTING AND PROTECTING

An evaluation of a multi-agency response for the reduction
of paramilitary and organized crime related harms

Dr Colm Walsh

March 2022

Table of Contents

<i>Executive summary</i>	2
<i>Introduction</i>	4
Aim and objectives of the evaluation:.....	6
<i>Methods</i>	6
<i>Findings</i>	8
Context	8
Motivations to be part of the panel	10
The nature of the panel and role of the panel members	13
Caseloads	18
Nature of the threats.....	25
Needs of those presenting to the panel	28
Responses (data, cases studies and interview).....	34
<i>Conclusions and recommendations</i>	39
Recommendation 1	39
Recommendation 2	40
Recommendation 3	40
Recommendation 4	41
Recommendation 5	41
Recommendation 6	42
Recommendation 7	42
Figure 1: Month of referral	19
Figure 2: Month of referral by area	20
Figure 3: Month of referral by male.....	21
Figure 4: Referral pathways	23
Figure 5: Presenting issues to the panel	25
Figure 6: Nature of paramilitary related threats by gender and area.....	27
Figure 7: Nature of threats and number of services	28
Figure 8: Case illustration 1.....	29
Figure 9: Case illustration 2.....	32

Executive summary

In the decades that have followed the Good Friday Agreement, armed groups have remained part of the fabric of some communities in Northern Ireland, with many remaining materially affected by the presence of paramilitaries. As part of the societal wide effort to understand and respond to paramilitary related harms through the tackling paramilitarism's and organised crime programme, Belfast City Council (BCC) have chaired a multi-agency support panel. Extending beyond the confines of West Belfast during the pilot phase, the panel now supports those at risk of paramilitary related harm in North Belfast. A mixed methods evaluation was undertaken to review progress towards reducing incidences and impact of such harms and explore the experiences of those engaged on the panel. During February and March 2022, interviews were undertaken with panel members. Two observations were also facilitated. To completed these data, routinely collected data was also collected, coded and analysed. This evaluation of the first year of phase II of the programme has found that membership has increased to include representatives from the Belfast Health and Social Care Trust-a key recommendation of the evaluation of the pilot. Further, Northern Ireland Alternatives has joined the panel- an important development as it extended into North Belfast. A strategic aim of the panel is to reduce incidences and risk of harm. Key to this is timely and credible information. It is clear that through this panel, effective mechanisms are in place to facilitate this function. There are many examples of individuals with credible threats to life that have been supported to stay in their homes with threats removed or facilitated to move to a place of safety. In both cases, harm is reduced and those in crisis avail of timely advice and support. This achievement is made possible by the agencies that are represented on the panel (Council, policing, housing, community, health and social care) with sufficient leadership to take decisions on behalf of their organisations. There is of course space to develop. Of specific note is the absence of PSNI in the North Belfast panel. Further, this evaluation notes that close to half of all cases are under the age of 25. Consideration could be given to extending membership to other organisations such as youth services.

Males account of the majority of cases supported. However, there has been a notable rise in females presenting to the panel. In fact, the panel note an 87% rise since 2021. This observation raises the question-why?

Comparative data between two parts for the city illustrate temporal and thematic differences. For example, cases in West Belfast are increased during Autumn and Winter, whereas in North Belfast, Spring and Summer appear to be busier. These insights provide opportunities to prepare for increased levels of vulnerability in a coordinated way.

There is increasing evidence the long arm of paramilitary harms. In close to half (49%) of cases of those presenting to the panel with a credible threat, there is evidence of others at vicarious risk. Indeed, there are also examples of where vicarious risk transitions into a direct threat. Cases studies provide a useful illustration of this, particularly in the context of increasing incidences of females presenting to the panel.

The factors that increase risk of paramilitary related harms are often chronic and complex. There was a recognition among the panel that the factors that contribute towards increased vulnerability towards paramilitary harms were systemic and unable to be addressed within the parameters of the panel. There are opportunities therefore for the panel to consider the ways in which those vulnerable to paramilitary related harms can be signposted onto specialist supports as crisis abates. Further, there are opportunities to coherently integrate this structure into the wider tackling paramilitarism and organised crime programme.

An uneasy truth is that credible information often relies on retaining lines of communication with armed groups. Whilst it seems bizarre that armed groups continue to exert this level of influence on communities, the reality is that to preserve welfare, to reduce risk, and to achieve the best possible short-term outcomes within the context of a complex, murky and difficult situation, this multi-agency coordination adds significant value to people's lives, and without it, it is highly likely that serious harm would be caused to many individuals

Introduction

In the decades that have followed the Good Friday Agreement, armed groups have remained part of the fabric of some communities in Northern Ireland. Despite an assimilation into civic society by some of the members of those armed groups, others have not yet ceded their influence. Indeed, new iterations of those pre-1998 paramilitaries groups have evolved, each intent on staking their own influence on communities through threat, intimidation and exploitation. Police recorded crime, as well as emergency department data suggest that rather than being in decline, paramilitary related harms have actually increased (Ritchie & McGreevy, 2019; Walsh, 2019), with many remaining materially affected by the presence of paramilitaries (Walsh and Schubotz, 2019, Walsh, 2021; Walsh and Cunningham, 2022). For example, in the first study to explore the effects of violent victimisation on violent offending in the NI context, Walsh, Doherty and Best (2021) found that justice involved youth who had experienced paramilitary violence were more likely to have been convicted of a more serious violent offence. At the same time, it seems that those who are in most in need of supports are not routinely connected to those supports (Duffy et al., 2022).

However, not all communities experience paramilitary harm in the same ways, and within those communities most affected, not each individual is at elevated risk (Walsh and Gray, 2021). Context is important and understanding local context is critical when seeking to understand and respond to complex issues such as paramilitary harms.

The ‘*Fresh Start*’ Agreement, published by the UK and Irish governments in 2015 (NIO, 2015) set out strategic proposals for addressing some of these most challenging, and often intractable issues. Following this agreement, a three-person panel was established by the Northern Ireland Executive (The Executive) to report with recommendations for a strategy leading to the disbandment of paramilitary groups. Following an engagement and research process, the panel reported mid-2016 (Alderdice, McBurney and McWilliams, 2016). It identified a range of potential barriers which if addressed, “*might go some way toward creating the conditions in which groups would abandon their paramilitary structures and peacefully support the rule of law*” and provide “*a new strategic approach to the discontinuation of residual paramilitary activity*”. These barriers were translated into strategic priorities and became enshrined in the Northern Ireland Executive’s Programme for Government 2016-2021. Strategic priorities included:

1. **Promoting lawfulness**
2. **Support for transition away from conflict**
3. **Tackling criminality and criminal exploitation**
4. **Addressing systemic issues undermining the transition towards peace**

The 43 Panel recommendations were translated into a series of commitments in a high-level action plan - the *'Executive Action Plan for Tackling Paramilitary Activity, Criminality And Organised Crime'*.

As part of this societal wide effort to understand and respond to paramilitary related harms, Belfast City Council (BCC) were provided with funding to implement multiagency arrangements (piloted within one small community in West Belfast) to address the associated issues attached to victims of paramilitary groups and those under threat throughout West Belfast. In partnership with other agencies, the Council aim to deliver a targeted, co-ordinated piece of work to address the needs of those under threat of paramilitary violence, with a particular focus on improving communication and co-ordination amongst services funded to work with these individuals and their families within West Belfast. The first evaluation of the pilot by Walsh (2021: 38) found that as a pilot project, the panel had "...provided a strategic framework for stabilising individuals and groups of individuals who are at imminent risk of violence from paramilitary organisations and organised crime networks."

This current evaluation builds on the findings and recommendations of that report as the project moves into the first year of phase II of the tackling paramilitarism and organised crime programme. Specifically, three of those recommendations included:

1. A review of how need and outcomes are defined and measured
2. Specific attention being paid to stepping down support and moving beyond 'stabilisation'
3. An identification of partners which provide targeted support to those at risk of paramilitary related harms. Specifically, there was an opportunity to connect the efforts by the panel, to the wider activities of TPP

Aim and objectives of the evaluation:

The aim of this formative evaluation is to review progress towards reducing the incidence and impact of paramilitary related harms and to contribute towards the refinement of the multi-agency support panel process.

The objectives of the evaluation are to explore the experiences of those engaged on the panel; to determine the extent to which recommendations from the previous evaluation have been implemented and; to identify areas for improvement.

Methods

A mixed methods methodology was employed to undertake this evaluation. This involved the sequential analysis of quantitative and qualitative data. Firstly, quantitative data was captured, coded and analysed. The findings that emerged from this phase of the evaluation directly informed the design and implementation of the qualitative interviews.

A semi-structured interview schedule was developed as the basis for a guided conversation. The schedule was connected across four key themes:

1. The purpose of the panel
2. The mechanisms of the panel
3. The responses/activities of the panel
4. The future direction of the panel

Following each interview, this qualitative data was stored in a specialist package called NVivo where the data was analysed thematically.

During February 2022, two panel observations were facilitated and interviews with a total of nine individuals, representing six key organisations were facilitated. The response rate to those request was 100% (n=9) (see table 1).

Table 1: Stakeholder engagement overview

Agency	Responded	Interview	Observation
Belfast City Council	Yes	X	X
BHSCT	Yes	X	X
BHSCT	No	X	
CRJI	Yes	X	X
CRJI	Yes	X	X
NIA	Yes	X	X
NIHE	Yes	X	X
NIHE	Yes	X	X
PSNI (West)	Yes	X	X
PSNI (North)	N/A		

Following analysis of the qualitative data, seven key themes emerged from the interviews:

1. The context in which the multi-agency panel is facilitated
2. The motivation of organisations that engage on the panel
3. The role of the members
4. The needs of those under threat
5. Caseload activity
6. The responses by the panel to those under threat
7. Recommendations for enhancing the panel

Routinely collected data such as case notes were also coded. Personal data was redacted. This enabled the extraction of project relevant data.

Descriptive analyses provided an overview of the target group, the issues being presented to the panel and actions taken.

Mean difference analysis provided enhanced understanding of variation in responses based on factors such as caseload, average number of new cases brought before the panel.

Statistical tests (e.g. Chi-square and correlation tests) were undertaken to assess for any statically significant association between variable of interest (e.g. being under the age of 25 and elevated risk of drug issues).

The following section provides an overview of the key findings.

Findings

Context

During the phase I pilot evaluation, Walsh (2021) reported that there had already been several iterations of this multi-agency based approach in West Belfast. Whilst each iteration differed, ultimately the project was designed to respond to paramilitary threats and to reduce the potential harm that could be caused. As well as evolving to expand in scope, the project had evolved in regard to its geographical remit- extending beyond the confines of the lower Falls area of West Belfast to include all of West Belfast and subsequently, into North Belfast.

The current iteration of this multi-agency panel is chaired by one local government organisation (BCC) and is represented by several statutory agencies, including the Northern Ireland Housing Executive (NIHE) and the Police Service of Northern Ireland (PSNI). Importantly, the Belfast Health and Social Care Trust (BHSCT) are now represented on the panel, addressing one of the gaps and recommendations from phase I. Crucially, community and voluntary partners are also actively engaged on the panel. These include Community Restorative Justice Ireland (CRJI) and Northern Ireland Alternatives (NIA). NIA are also new to the panel in phase II and this reflects the geographical extension into North Belfast which also extends beyond areas characterised as Catholic/Nationalist/Republican (CNR) and into those characterised as Protestant/Unionist/Loyalist (PUL). As one panel member commented, the inclusion of the community and voluntary sector is a central ingredient and one that is not always included in structures such as this.

“Maybe in the past, the community voice wasn’t heard. When it came to cases where people were at serious risk, there was missing details. Important details. Options that could or could not be done wouldn’t be heard either. We know the community context and can help inform decision making. We can talk about a history of engagement and how likely people might be to take part in support (Community and voluntary group)”

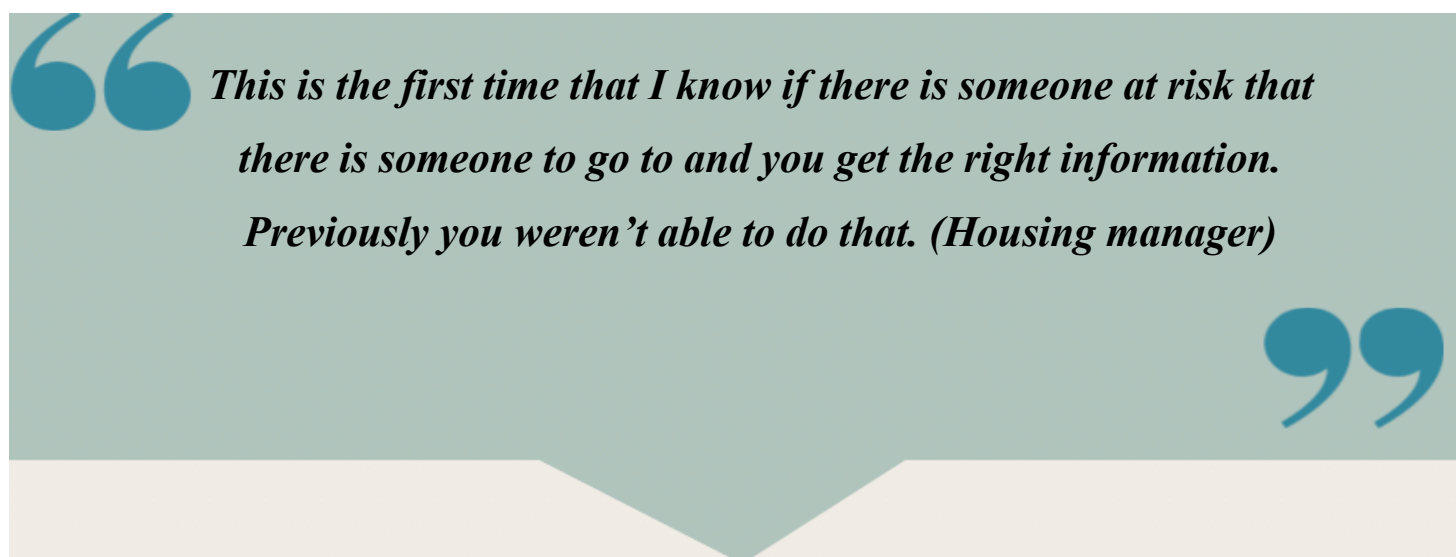
Several panel members suggested that this could be enhanced further with the presence of other community and voluntary groups. Given the relatively high numbers of younger people, it was recommended on several occasions that consideration be given to the role of youth services on such panels. Indeed, youth services play an important function in the wider tackling paramilitarism and organised crime programme.

“It might be useful to have someone like [youth worker] or someone from the voluntary sector who has insights into who is at risk. It would make sense (PSNI)”

This was also a recommendation of the phase I evaluation (Walsh, 2021).

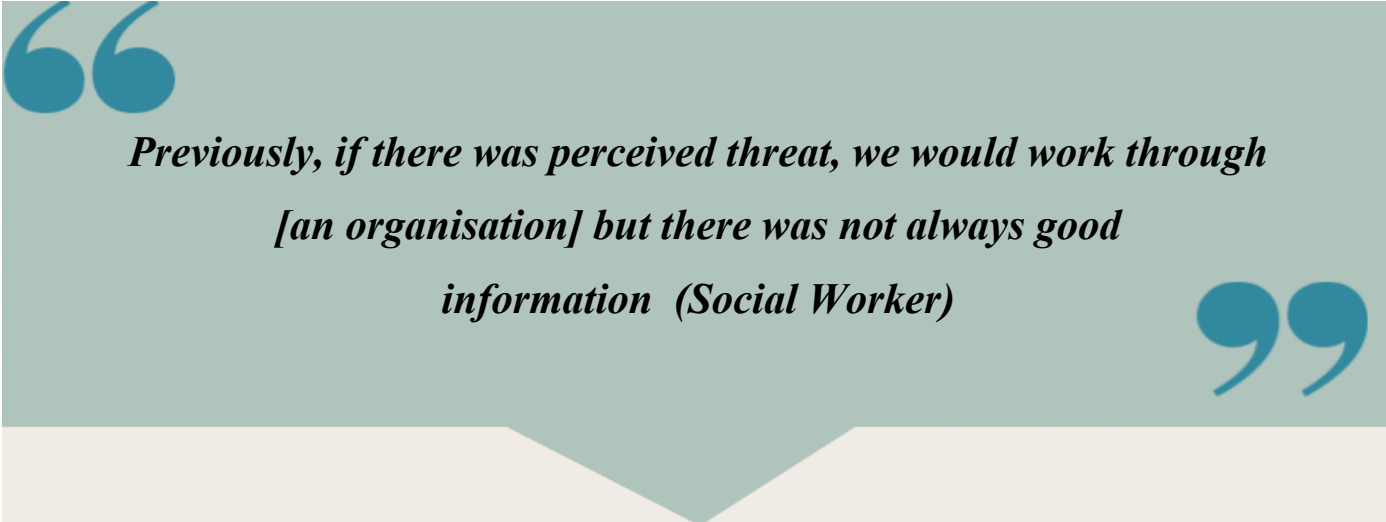
Motivations to be part of the panel

One of the most commonly reported motivations for engaging on the panel was to address a perception that the current system was not working.

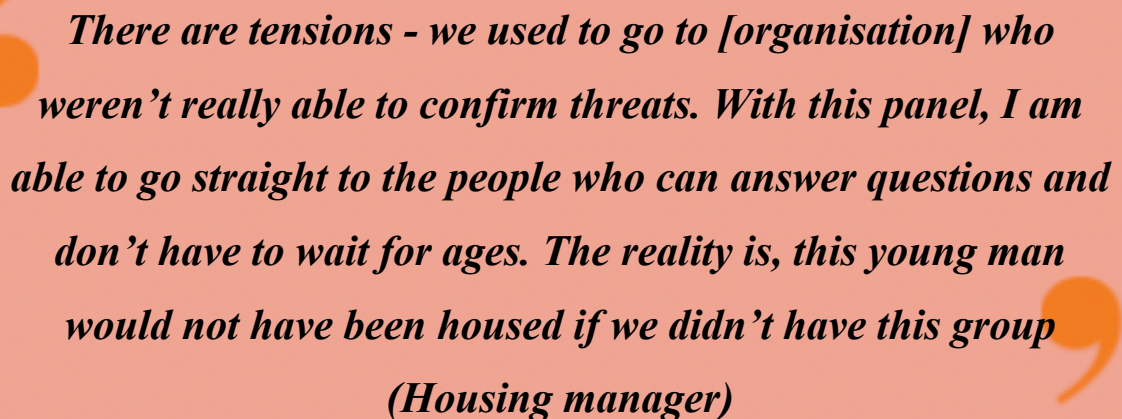


Members of the panel believed that when it came to recognising paramilitary threat cases and responding to those cases in a coordinated and timely way, the system tended to fail. The most obvious risk in this context is the risk of harm to individuals who may be under significant threat within their communities. Two of the main reasons cited for this failure was

related to delays in communication between partners and a lack of reliable information. Traditional processes for asking questions and getting responses appear to take some time-time that can exacerbate risk. In fact, in some cases, the panel members described significant difficulty in getting any clarifications at all and when they did, the information included so little detail, that it was actually rendered useless.



Previously, if there was perceived threat, we would work through [an organisation] but there was not always good information (Social Worker)



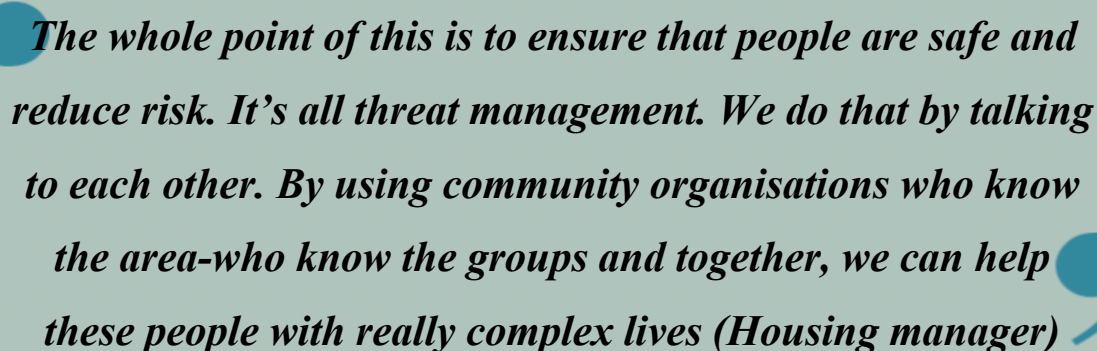
There are tensions - we used to go to [organisation] who weren't really able to confirm threats. With this panel, I am able to go straight to the people who can answer questions and don't have to wait for ages. The reality is, this young man would not have been housed if we didn't have this group (Housing manager)

Another related issue appears to be the bureaucracy associated with the existing system. Formal requests for information and the mechanisms by which information is shared dampens the potential effectiveness of the response. However, whilst this capacity to share information is clearly useful, some panel members identified the potential issues this could

present. For example, one member indicated that they were acutely aware of the GDPR requirements and that failure to comply with these regulations could present significant challenges. Indeed, they were aware of one local elected representative asking questions about how information could be shared between the panel members. Another suggested that their information sharing agreement had not been signed due to delays within their organisation. Despite challenging this on several occasions, and with a number of people, the agreement remained unsigned. In order to take part on the panel however, they were content that there existed sufficient grounds to share information on the basis of safeguarding. Of course all communication is GDPR screened and facilitated within the context of organisational policies- but it does reflect anxieties regarding data sharing.

These issues presented tangible challenges for these agencies to effectively perform their organisational functions. If for example, an organisation was in a position secure new (and potentially safer) accommodation, but relied on key information (credibility of the threat, severity of the threat, nature of the threat, details on any actions that could mitigate the threat) to take those decisions, risk could be increased without it.

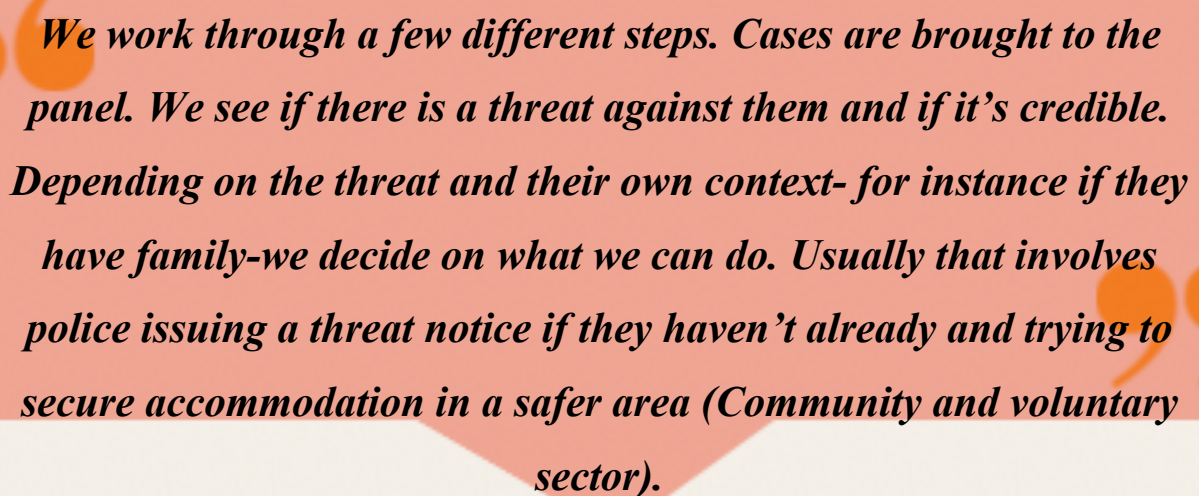
It is clear that with the partners engaged on this panel that one of the key motivations is to enhance the speed and the process by which agencies get accurate and reliable information to take collective decisions around responses that could reduce paramilitary related harm.



The whole point of this is to ensure that people are safe and reduce risk. It's all threat management. We do that by talking to each other. By using community organisations who know the area-who know the groups and together, we can help these people with really complex lives (Housing manager)

The nature of the panel and role of the panel members

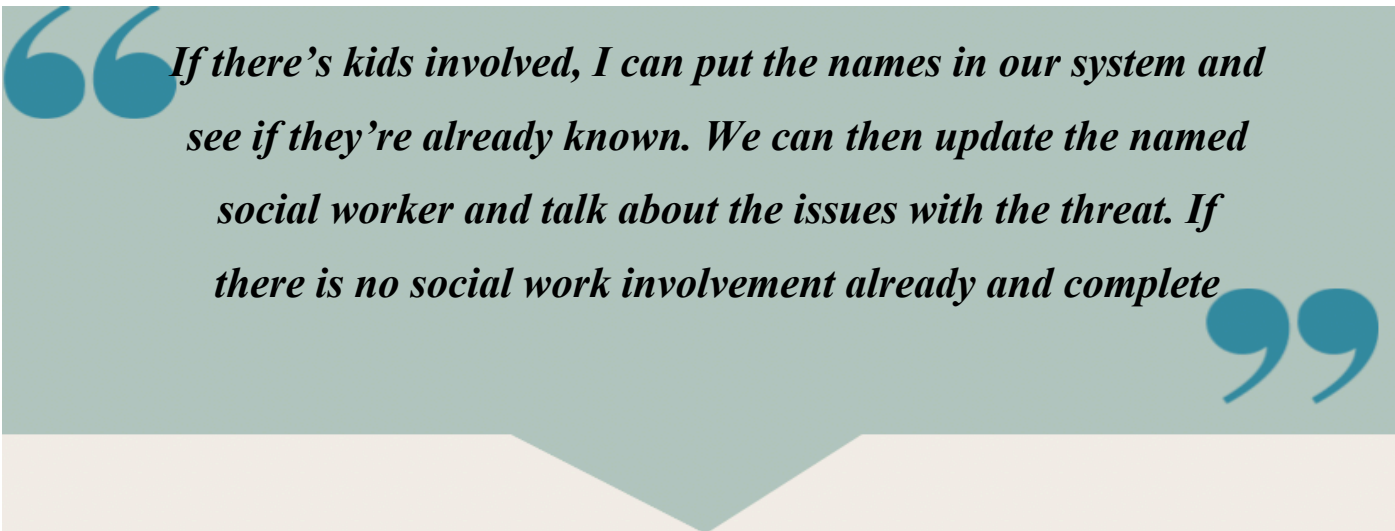
If the motivation of panel members was to address the deficiencies with the existing system, and to safeguard those at risk of paramilitary harms, then the function of the panel was to share information and coordinate a response.



We work through a few different steps. Cases are brought to the panel. We see if there is a threat against them and if it's credible. Depending on the threat and their own context- for instance if they have family-we decide on what we can do. Usually that involves police issuing a threat notice if they haven't already and trying to secure accommodation in a safer area (Community and voluntary sector).

Whilst the function of information sharing appeared core to all members, there were also different but also complementary perspectives from across the different organisations in regard to the role of individual members.

For example, from a social care perspective, the safeguarding of children and vulnerable adults who might be indirectly affected was paramount.



If there's kids involved, I can put the names in our system and see if they're already known. We can then update the named social worker and talk about the issues with the threat. If there is no social work involvement already and complete

***the UNOCINI. The main thing is that we keep them safe
(BHSCT)***

From a policing perspective, the focus was on primarily threat management, and from a housing perspective, it was ensuring safe and stable accommodation.

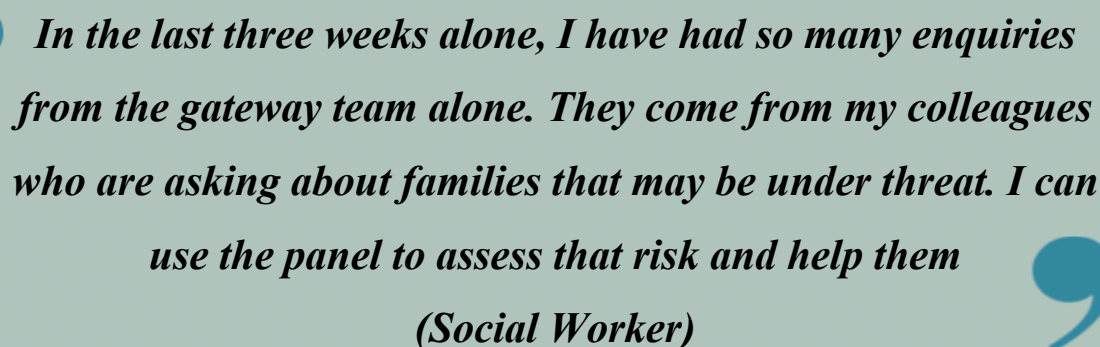
The formulation of the panel appeared to be important to the members and the new addition of two social workers from the Trust enables access to, and insights from another data system.

“Referral to gateway is a bit of a grey area. Ideally, I would be asking my threat officers a number of questions, and if the answer is ‘yes, there are kids in the house’, then a referral would automatically be made to safeguarding. However, there are gaps in the process because the person might not disclose that they have children so the Trust can advise on that information. (PSNI)”

The added value of the social workers was believed to be both prospective and retrospective. Prospective in that the social workers could advise on current social work contact, or indeed the initiation of a gateway process to access social work support. Retrospectively, the presence of the Trust meant that new insights could be gleaned from historical social care data - for example in cases where individuals had been care experienced. These insights provide an additional layer of ‘intelligence’ that enables the panel members to assess the wider context of people’s lives and ultimately, could help to inform an evidence informed response.

Interestingly, the addition of two social workers appears to have not only enhance the panel, but added value to their own organisation. As one social worker noted, there had been pent up frustration within social work teams that had been unable to get timely and accurate

information regarding threats and this had affected their own risk analysis and safety planning.



In the last three weeks alone, I have had so many enquiries from the gateway team alone. They come from my colleagues who are asking about families that may be under threat. I can use the panel to assess that risk and help them

(Social Worker)


That said, the members suggested that whilst the presence of the Belfast Trust was of significant value, many of the cases that came to the panel in West Belfast were from the South Eastern Health and Social Care Trust (SEHSCT) area. As such, several members recommended that there was a need for a representative from SEHSCT. Indeed, there was evidence that this request had already been made by the chair of the panel and although no appointment had been made, there was an indication that this would be made imminently.

In addition to the performance of organisational functions, it appears that many on this panel are deeply committed to the process and to achieving the outcome of reducing harm for those who are a serious risk. To effectively do this, it was clear that many members of the group rarely leave key activities for the formal panel meetings. Indeed, there are many examples of the members going back into the respective organisations, sourcing information, engaging with their own colleagues, taking calls outside of hours and preparing plans. As one member of the panel noted, the panel as it is would not work if the people who are part of it were not wholly committed.


“You have to be committed to this. It’s all times of the day and night. You’re dealing with people’s lives so you can’t just switch off. You could be sitting at night and need to look at it-to do something. From my point of view, you need to think ‘does this person need accommodation right now?’ ‘do they need to get out of harm’s way?’”

Whilst this case reflected the general approach to contribute to the reduction of harm, it also reflected a challenge that many members commented on. The issues of emails was noted several times. For example, emails from one member regarding a person at risk are sent to include all members-and for good reason. For transparency and collective oversight, the inclusion of all members in all correspondence can be useful. However, it can also reduce efficiency.


“We get lots of emails! Some days, you can get a dozen emails. There are huge demands on our services. I’m trying to log in but also trying to deal with a hundred different things and then looking up details. I don’t think I need to be included in North, but everyone is just included (Housing manager)”




We need to have some parameters around the meetings and email etiquette. I sometimes come in to thirty emails and most of them could be ‘thank you’. We need to think about how that is managed so that email isn’t clogged up



As noted by several members of the panel, being included in a chain of several dozen emails requires time to review. Whilst each member feels obliged to review each chain, it may not be relevant to every member of the panel.



You have to think to yourself ‘does social services need to know this?’, but I just err on the side of caution and ‘reply all’.



Indeed, being an active member on the panel is labour intensive. Aside from the emails, members are expected to attend meetings, to take notes, to agree a series of actions, follow up on those actions, seek further clarification, hold people accountable and feed back to the panel. At a very basic level, there is no administrative resource attached to the panel. The task of keeping notes of cases and actions, a key recommendation of phase I (Walsh, 2021) is

undertaken by the chair of the panel and representative from Belfast City Council. Whilst there are some aspects of the process that require effort, there are other aspects such as the administrative tasks that through investment in support, could lessen the burden on members.

Another cautionary observation made by one panel member was the perception that mission drift had set in. For this member, the model had expanded somewhat, moving beyond threat management to now include an array of community difficulties. For example, they suggested that at one panel meeting, the members spent time discussing community tensions rather than threats of paramilitary harm. They illustrated this with an example that during one panel, out of the nine cases presented to the panel that particular day, eight were not credible threats. Whilst this may not present a problem per-se, it does seem to extend beyond the aims and remit of the panel. It is for the panel themselves to reflect on this and to either reaffirm their alignment with the original goals, or indeed update their aims and objectives. This could of course have implications on how motivated members continue to be.

Caseloads

Caseloads were reviewed during the phase I evaluation. However, analyses of this data was somewhat tempered by the fact that only five months of data (October 2020-February 2021) was available. In this - the second evaluation report, almost one-year of data (11 months) was available, coded and analysed (April 2021-Feb 2020).

As has been noted, the presence of the panel have extended beyond West Belfast and into North Belfast. In fact, as the data illustrates, there have also been a small number of cases from other parts of Belfast (e.g. East Belfast).

Previous estimates suggested that there would be on average 14.6 cases per month brought to the panel.

In this, the first review of phase II, a total of 93 cases were reviewed, equating to 8.5 cases per month over the eleven months. This did differ between the two key areas however, with throughput in West Belfast significantly higher than that in North Belfast.

As illustrated in fig. 1 , patterns of referral vary considerably month by month. Whilst cases appear to present throughout the year, there do seem to be peaks. Indeed, the summer period sees a rise in cases, peaking in August to then decline into Autumn. This is followed by a steep rise towards the end of the year, before dropping off once again. Similar to the findings in 2021, it is unclear if these temporal patterns are indeed a pattern given the limited observations thus far. It is simply something to be aware of and to continue to monitor.

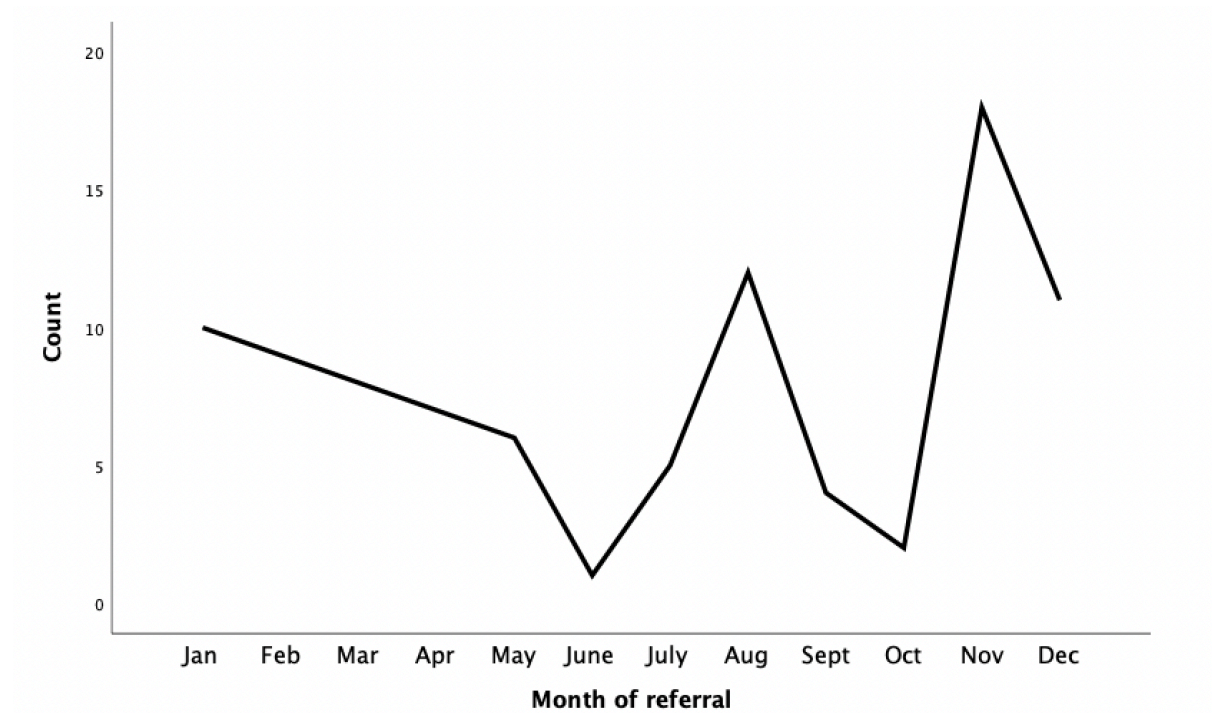


Figure 1: Month of referral

What does seem to be worth noting, is the difference in the proportion of presentations by panel area throughout the year. As fig. 2 illustrates the late Autumn into Winter period appears to be relatively busier for the West Belfast panel whereas the Spring into Summer appears to be busier for the North Belfast panel. It would be worth unpacking the reasons for this given that there could be both opportunities to prepare for increased levels of vulnerability and importantly, to prevent crisis from emerging.

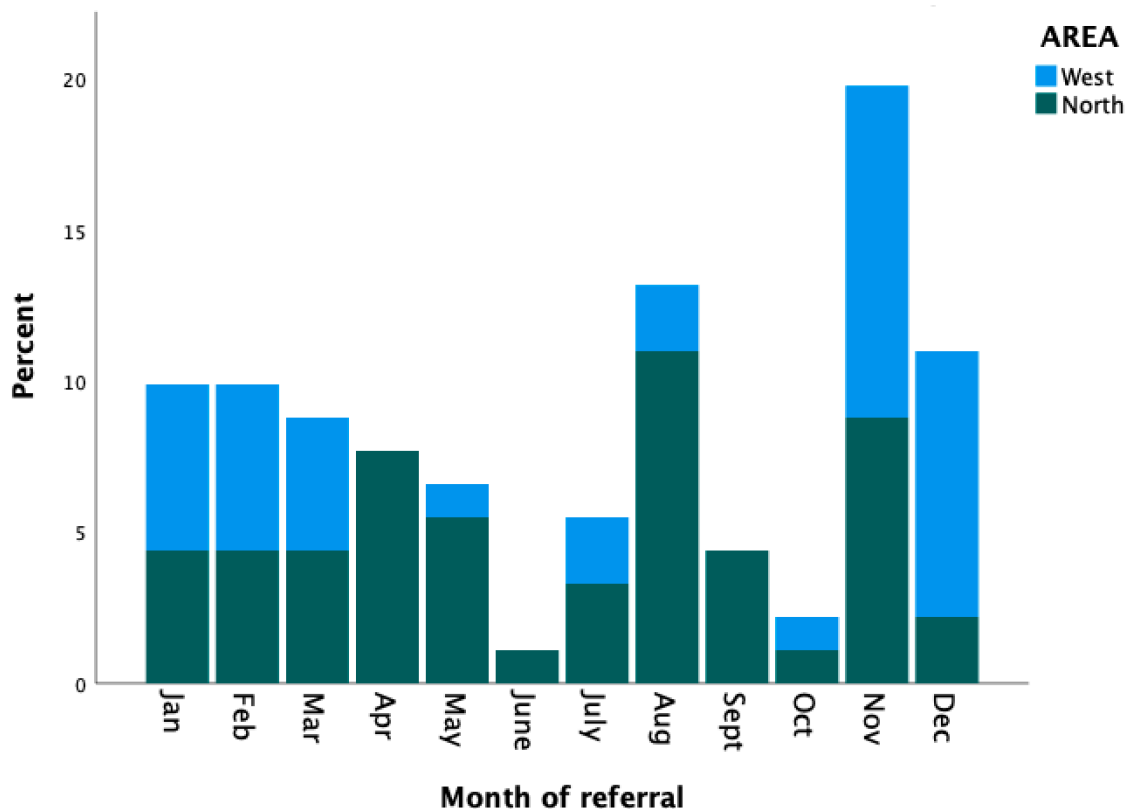


Figure 2: Month of referral by area

In line with the comparatively similar findings during phase I, the majority of cases referred were male (72%), reflecting wider patterns across the justice system. However, there was a marked increase in the number of females presenting to the panel. In fact, there was an 87.2% increase in the number of female, up from 11% in 2021 to 28% in 2022. of all referrals within this period were female (see fig 2). This is important to illustrate not only as a means of outlining the population, but as it raises questions for the project team as they refine the approach. Although this does reflect wider patterns across the justice system, the question is why? Why is it that the majority of all cases that are coming into the project, often with threats to life are male, and often young men? This question needs to be asked and critically engaged with as it could provide the basis for a response that is gender conscious and could potentially target the root causes of some difficulties in communities. For now, it remains an observation that raises questions.

There also seems to be some interesting observations when referral data is disaggregated by gender (see fig. 3). For example, in the period immediately after Christmas and into the New Year, the proportion of cases are 50% higher for females compared to males. For males, there

is a steep rise in cases between Oct and November following a significant drop off during August.

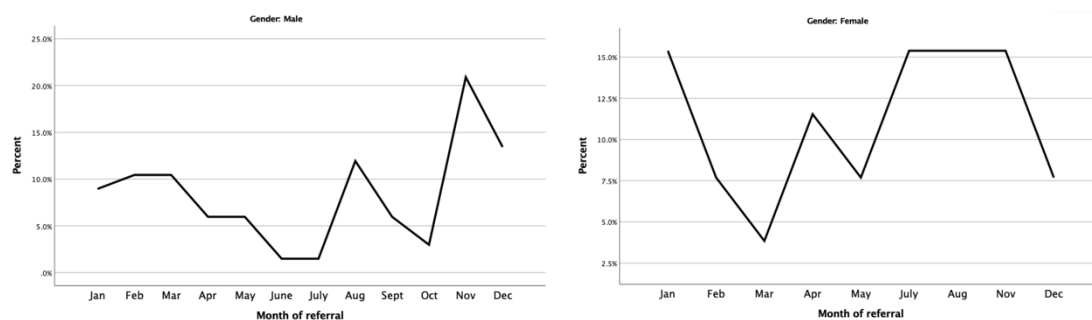
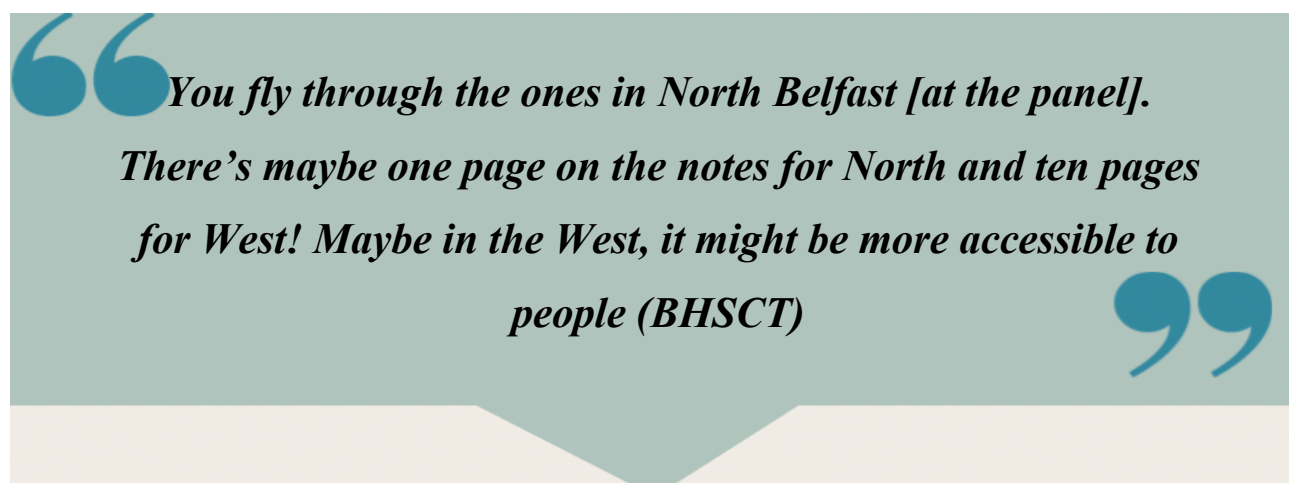


Figure 3: Month of referral by male

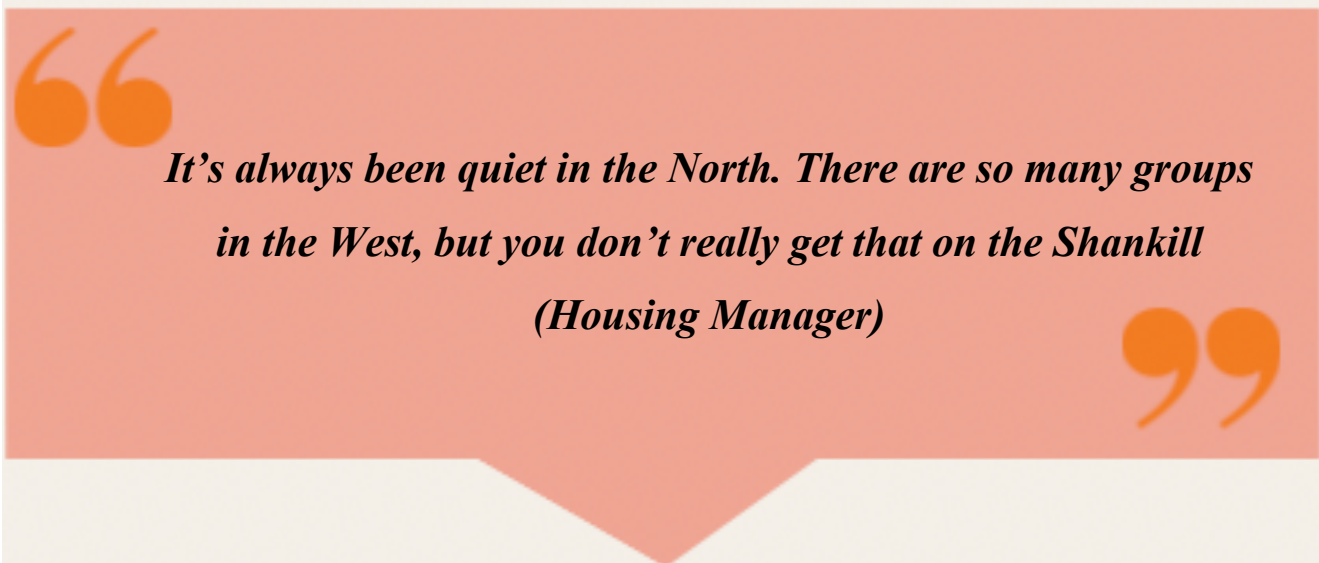
More than two-fifths of those cases with details on age (44%) were under the age of 25. However, this is somewhat skewed by the fact that the ages for 58% of all cases was unknown. Despite the small comparison group, there was no statistically significant difference between the average age of females ($M = 27.8$) and males ($M = 28.5$) presenting to the panel.

A key development since phase I was the extension into another key target area (North Belfast). In fact, the majority of cases that were reviewed came from those within that new area of North Belfast (57%). 40.9% of cases resided in West Belfast. Interestingly, there were a small number of cases presenting from those living in other areas such as East Belfast and Lisburn (2.2%).

Despite the figures, there was a general sense among the panel members that cases in the North had not met expectations.



Several reasons were cited for the relative lack of detail on cases in North Belfast. Firstly, the panel were still new in the area and as could be expected, ramping up to full implementation often takes as long as 18 months. Others suggest that it could be more to do with the different context across the two areas. For example, the number of paramilitary groups, as well as the approach they employ may differ.



It's always been quiet in the North. There are so many groups in the West, but you don't really get that on the Shankill
(Housing Manager)

As one member put it, however, *'it's not like there are not people under threat in the North, but where are they? They don't seem to be coming through'* suggesting that the caseloads themselves are not a proxy for paramilitary activity. Instead, the working assumption is that that there are significantly more people under threat of paramilitary harm that appear to be coming through the panel.

Another reason for the difference in caseloads between the two areas was suggested as being related to the PSNI investment in the North. Whilst the West has had a dedicated person for a significant period, there remains no representative from PSNI on the North Belfast panel. To plug this gap, the member from West Belfast attends both. However, this adds pressure to one panel member and dilutes their response given that their organisational role is limited to West Belfast. There is a need for PSNI to comment on their commitment to the panel and if it remains committed, recommend a dedicated officer, at a significantly senior enough rank to attend these panel meeting and engage with the partners.

Fig. 4 illustrates a breakdown of the referral pathways into the panel disaggregated by both areas. In North Belfast, all members are actively involved in bringing cases to the awareness of the panel- however, housing and CRJI account for close to half of all referrals.

Interestingly, PSNI have brought relatively little to the newly established panel. The absence of a consistent representative from PSNI in North Belfast may account for this observation. This is discussed in more detail across the report. In West Belfast, NIA does not sit on the panel. The remaining partners have all brought cases to the awareness it. Again, CRJI contribute heavily to the referral process but interestingly, PSNI referrals are significantly higher than in North Belfast.

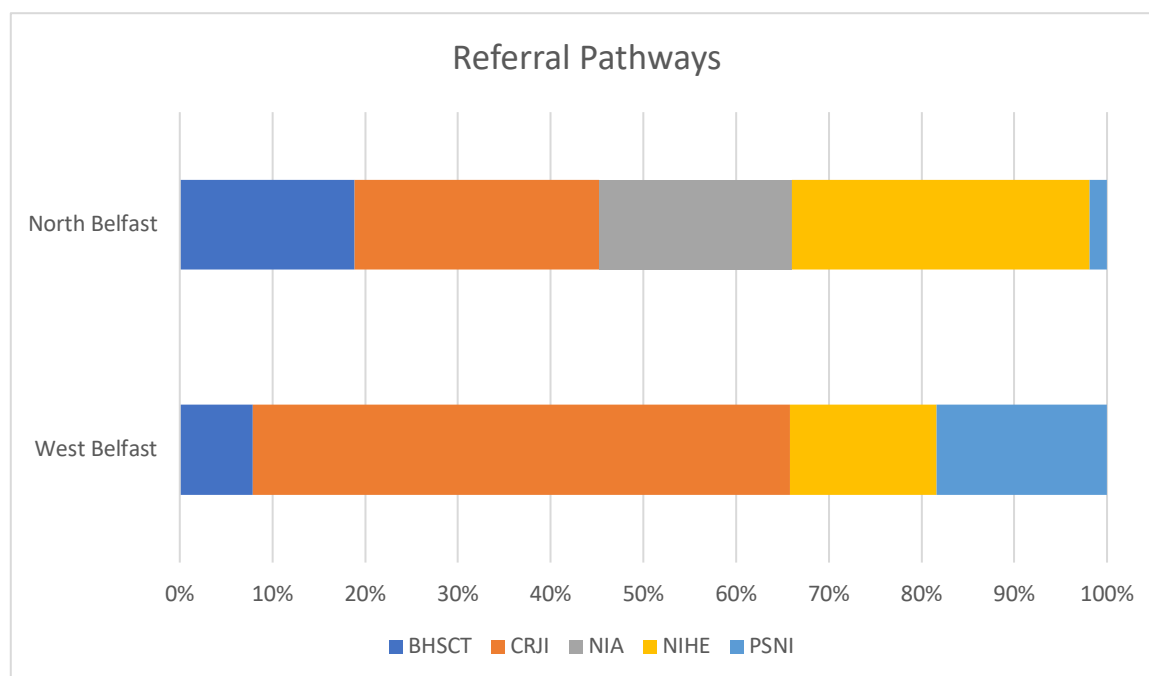


Figure 4: Referral pathways

As members indicated, a core element of the panel is to confirm credible threats before agreeing a response. Of the cases reviewed, 52.7% of threats were confirmed. This means that for the remaining 47.3%, the perceived threats against them were either not credible (insufficient evidence or confirmation from armed groups) or that they may have been credible, but that the panel were unable to confirm this one way or another. Confirmed cases were higher in West Belfast as compared with North Belfast (60.5% vs 49.1%) and would be worth exploring why this is the case. It could of course be an indicator of lines of

communication, or indeed an indicator that those in North Belfast were more likely to report being '*under threat*' when there was insufficient evidence (or evidence to the contrary).

On average, cases took 8.4 days to confirm the status of an alleged threat from the referral was received. This ranged between 0 days (i.e. the same day as the referral) and 67 days. However, this differed significantly between the areas. For example, on average it took 10 days in North Belfast whilst it took only 5 days in West Belfast. This also appeared to differ between male and females with the average time taking 6 days for the former and only 9 for the latter. Although this did not reach the point of statistical significance.

Interestingly, where threats were confirmed, close to half of those threats (49.1%) also endangered others (e.g. partners and children) due to the proximity to the person under direct threat. There is significant evidence of partners for example subsequently becoming at direct risk for '*allowing*' those under threat to remain at their home.

Of the cases reviewed with details on the nature of the threat, the majority of known issues were either related to drug use and supply (95%) or perceived anti-social behaviour (67.5%). Sometimes both (see fig. 5). There was no discernible difference between the two areas. However, this must be tempered with the fact that it was not clear what the index issues were for just over half of the cases (57%), a figure that is comparable with the same finding during phase I. There are no details collected on the range of vulnerabilities likely to affect this population. It would be useful to build on the developments in regard to data collection and capture these in a more standardised way.

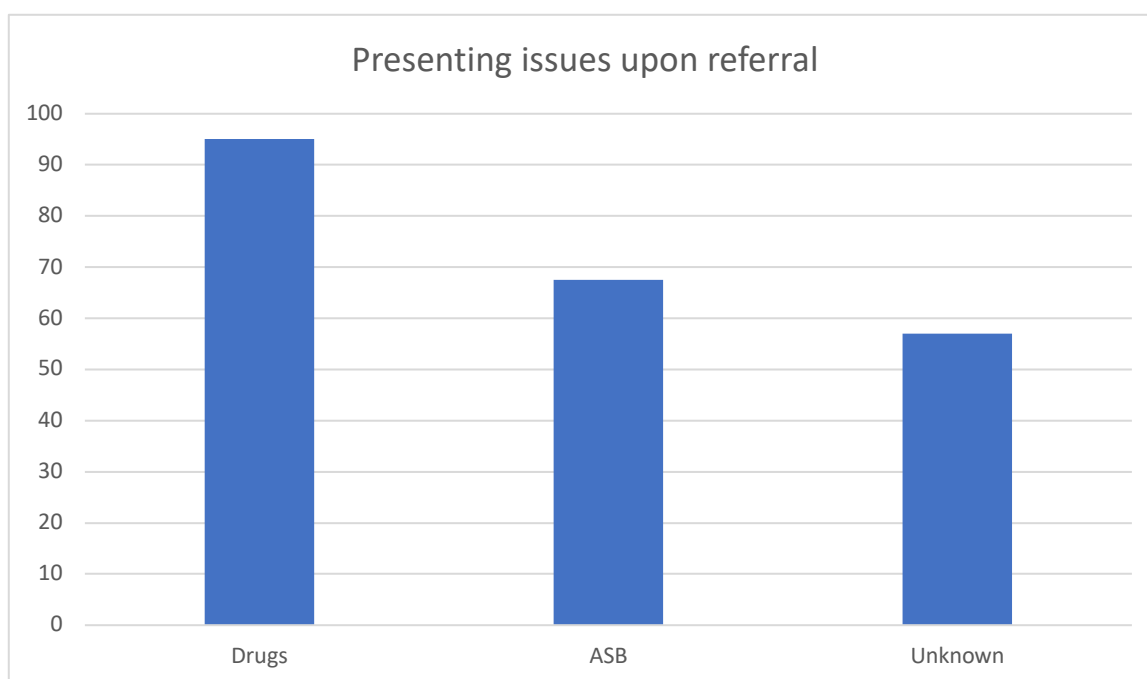


Figure 5: Presenting issues to the panel

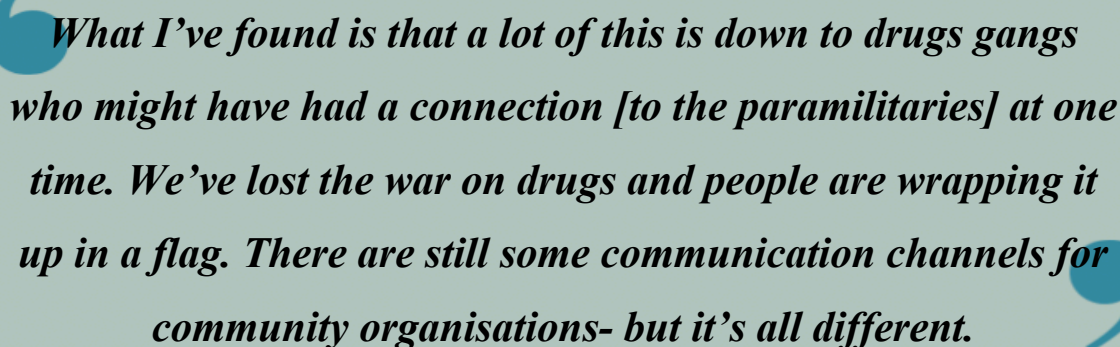
Nature of the threats

All partners are well established within each of the two areas. Indeed, the benefit of the community organisations being central to the process is that they developed organically within these areas. However, some differences were noted in the ways that the different armed groups operate across the two areas and for some, this has contributed to differences in the panels.

For example, one panel member suggested that loyalist armed groups tend to use different '*sanctions*' and apply them in different ways. For example, whilst the victims are likely to become aware of the threat in West Belfast, this is not always the case in North Belfast. Another key difference is that there is a belief that the nature and severity of so called '*sanctions*' differ. Whilst the ultimate harm that could be inflicted in West Belfast would be murder - in North Belfast, loyalist paramilitaries appear to use punishment beatings more readily. These observations are at least in part supported by police recoded data.

Another suggestion was that groups had transitioned from what was generally believed to be armed groups with political motivations to organised crime gangs, steeped in the drugs industry and commodity of illicit substances. From the perspective of several panel members,

this change has also led to a reduction on the channels of communication that were traditionally available. Without reliable lines of communication, it becomes more difficult to identify cases and assess the credibility of threats.



What I've found is that a lot of this is down to drugs gangs who might have had a connection [to the paramilitaries] at one time. We've lost the war on drugs and people are wrapping it up in a flag. There are still some communication channels for community organisations- but it's all different.

Fig. 6 illustrates how the threats differed within and between the panels with respect to area and gender. Overall, a relatively small but particularly at risk group (12.7%) appear to have credible threats to life against them. That is not to say that the threat against others could not become a threat to life - if for example they should they be seen not to comply with the demands of armed groups. However, this sub-group appear to be in particular crisis, and whether they acknowledge the risk to themselves or not, it is clear that the panel members have significant concerns regarding their welfare. Others (21.8%) appear to have credible threats where the 'sanctions' include beatings or so called paramilitary style assaults. Another group, the largest (56.4%), are similarly under threat but there is evidence that if they leave the area within a specified time, they would not be harmed. Finally, for a small group (9.1%), the specific nature of the threat is unknown (or at least undocumented).

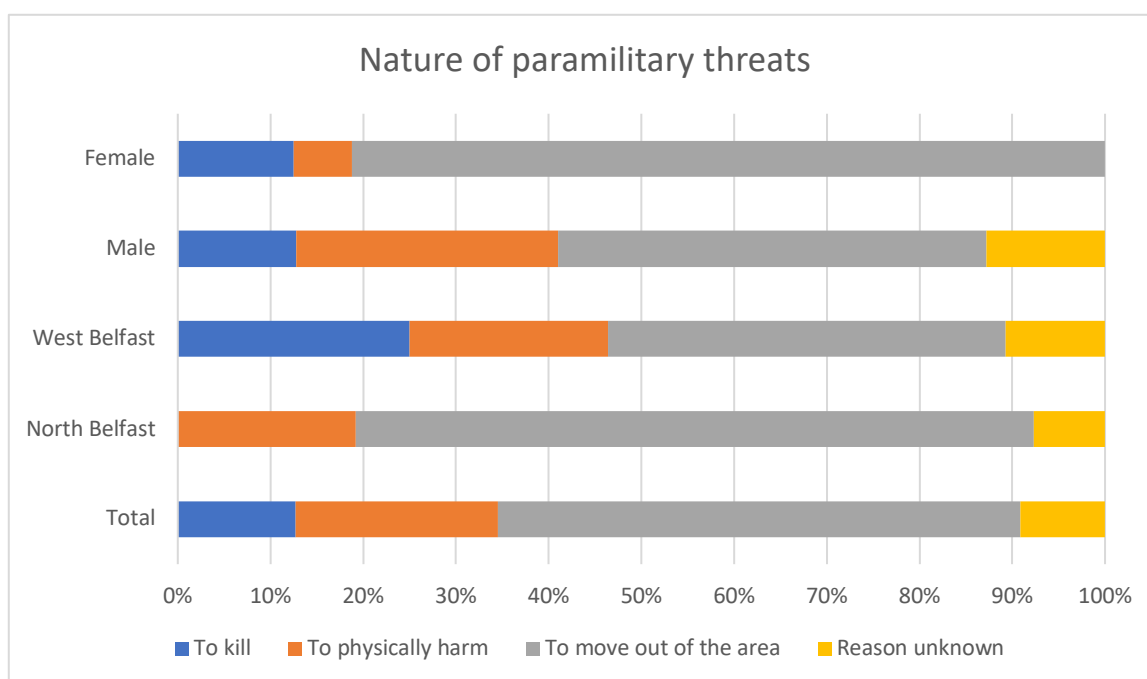


Figure 6: Nature of paramilitary related threats by gender and area

Interestingly however, when this data is disaggregated by both area and gender, other observations emerge. For example, in North Belfast, there is no evidence of immediate threats to kill whereas the proportion of those under threat of physical harm (PSA) is larger than in West Belfast. In regard to gender, males are statistically more likely to present to the panel for risk of physical violence than females, but conversely, females are more likely to be at risk of community exclusion.

As might be expected, the response by the panel appears to have vacillated depending on the nature of the threat. As fig. 7 illustrates, those with the most serious (and imminent) threats against them appear to require the support of greater numbers of panel members, whereas those individuals who present to the panel without a clear indication of the nature or severity of the threat often require less intensive response- conceivably until both are clarified.

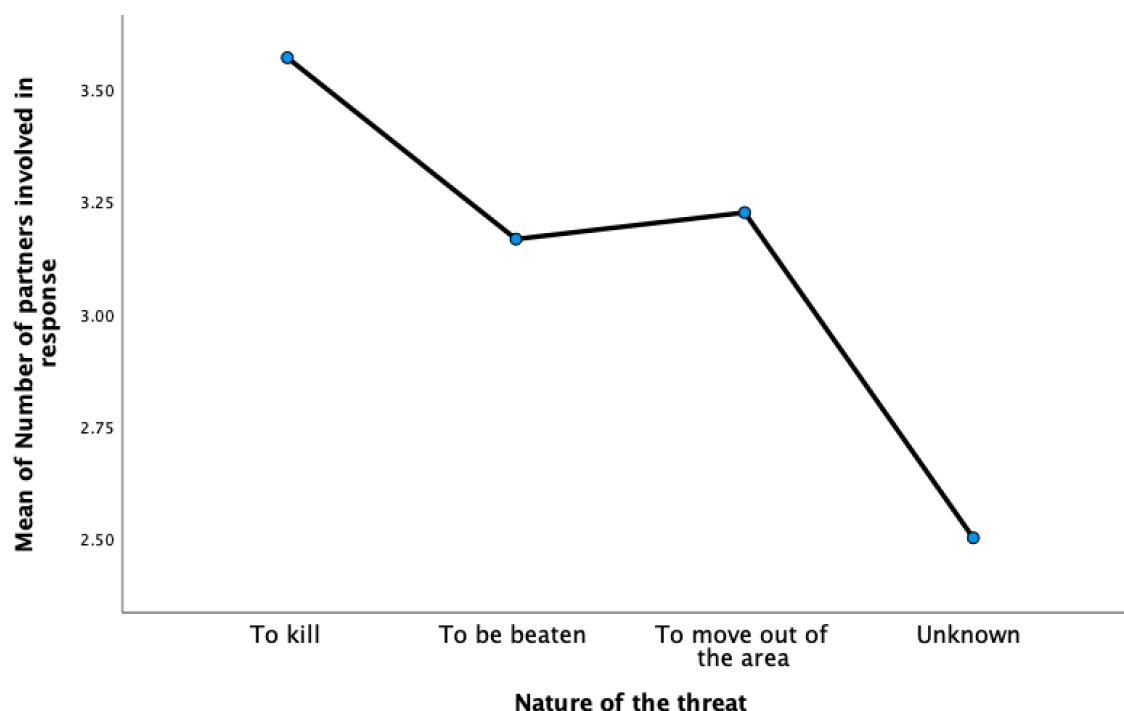


Figure 7: Nature of threats and number of services

Needs of those presenting to the panel

Making sense of the needs of individuals (and families) presenting to the panel is important. In the previous evaluation, it was recommended that systems were reviewed and standardised in order to contribute towards this. During the first year of phase II, there is evidence that this has been enhanced via new record keeping mechanisms. A new template has been agreed by the panel and is being led by Belfast City Council who chair the panel.

Despite the potential benefits, this is presenting as a labour intensive exercise being given that the chair themselves are completing the records for each case. As the numbers demonstrate, cases can exceed the hundreds and with each case file set up and maintained by the chair, there is a need for administrative support.

In the interim, their completion has allowed for analysis at programme and at individual levels. One of the most striking observations was the numbers of females presenting to the panel. This observation was later supported by interview data.



Figure 8: Case illustration 1


There was unanimous consensus that in West Belfast, there had been a changing trend towards greater numbers of females being presented to the panel with concerns regarding paramilitary threat and intimidation. This was confirmed by a review of the panel data. As one panel member noted:

“There was one real stand out case. There was a lot-a lot of vulnerabilities with this person. We were advised of the threat but she hadn’t presented to NIHE so we were unaware. Very quickly we established that it was a genuine threat and were able to act”.

There was some suggestion that the increasing numbers of females, particularly young women being directly threatened by paramilitaries could be in part attributed to the changing tactics of those armed groups. In the past, it seems that those who came to the attention of paramilitaries would be directly threatened themselves. It tended not to be the case that those around them (e.g. family members) would be threatened merely because of an association with those individuals. That appears to be changing. Family members, particularly partners are at elevated risk

of threat when their partners are under threat. There were many examples of this presented

during the interviews and the analysis of panel data also supports this. In particular, in cases where males are alleged to have been actively involved in the high use and/or supply of drugs, their partners were also threatened. This trend does not appear to be widely understood, and therefore the harms being caused to women and girls is under-evaluated. Additionally, these females tend to have children who are also exposed to potential harm.



I've been working in this role for 11 years I'm actually stunned that in the space of a month, there have been 5 cases of families with credible threats against them with children in the homes.

The panels observations of the changing trends towards greater numbers of females becoming '*under threat*' as well as the responses of the panel are illustrated in the two case examples.

In the first example illustrated above, a young women, with two young children became the target of a paramilitary threat due to the alleged behaviour of her partner. Like many of the cases presenting to this panel, substance use and supply were central to the allegations made by the armed group. What the armed group were less concerned with was the mental health of the young woman, the traumatising effect of violent threats and the welfare of young children. Communicating the threat directly, three masked men attended her home and gave the young woman an ultimatum. She was informed that her partner was no longer '*allowed*' to remain at their home. Caught between the potential for harm and the wishes of her partner, the young woman was unable (and possibly unwilling) to insist that the partner leave their home. Given that the partner stayed at home, the armed group then considered the young woman a legitimate target. She was later informed that she too was '*under threat*'. Desperate to reduce the risk and to restore some semblance of normality, the young women even requested that the armed group shoot her partner to have it '*over and done with*'. This, a

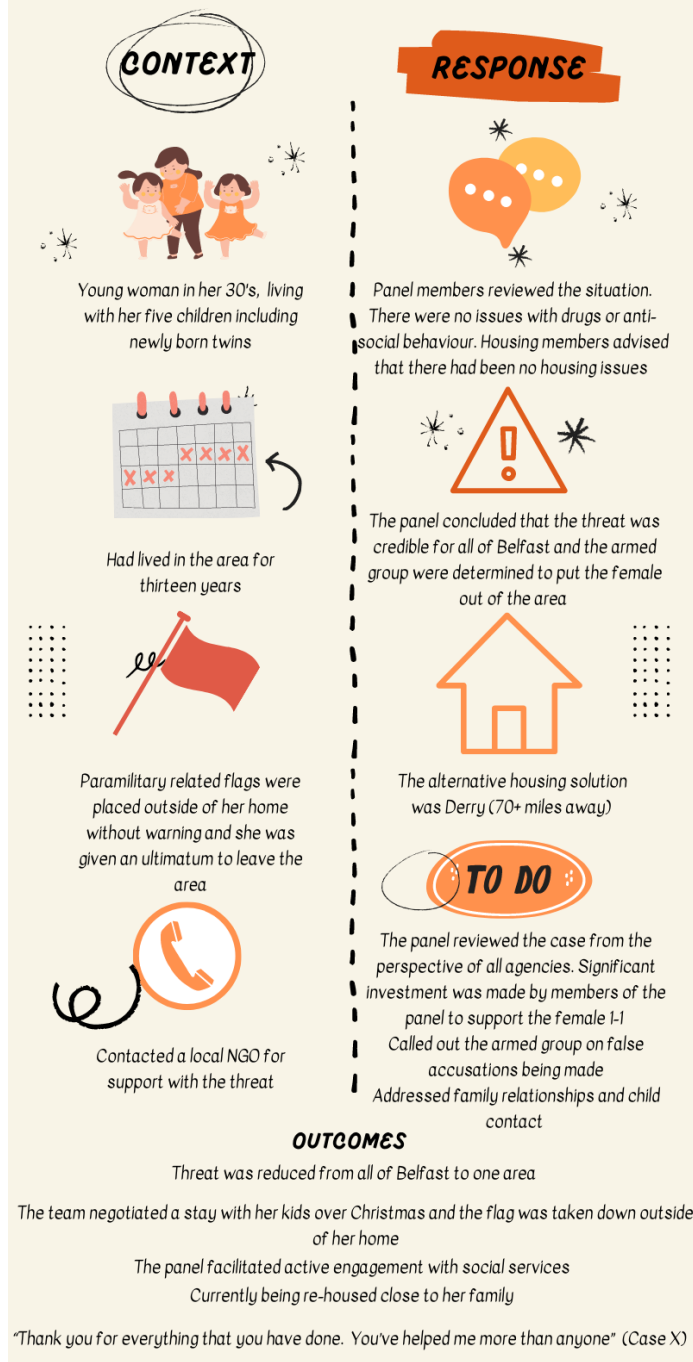
testament to the normalisation of paramilitary activity in some areas and lack of confidence in services to lawfully resolve issues.

The case came to the attention of the panel via the armed group who advised that, from their perspective, the partner was engaged in the supply of drugs and the family were not complying with their expectations. The panel reviewed the case, and with the benefit of the multiple agencies present, they were able to consider the case from the perspective of policing, housing and social care. It also became evident that there were pre-existing mental health issues. The additive effect of paramilitary threats only exacerbated these issues. This was communicated to the armed group along with details of the plan that the panel were formulating. The panel were convinced that with these appropriate supports, the family could safely remain in the community and the partner would desist from the supply of drugs. The presence of the community and voluntary organisations also provided a local lens with which to wholly consider the information. The plan involved a response from multiple agencies. Policing in the area was enhanced and the address was included on the PSNI system. Alternative housing options were considered but were rejected by the family. Social services increased their involvement with the family, regularly facilitating home visits to ensure the welfare of the young children. The local NGO engaged directly with the young woman, supporting her to access mental health support and her partner's engagement in substance use treatment service.

The gender specific effects of paramilitary threat, intimidation and violence are well established for males. However, the effects are less well understood from the perspective of females. Cases such as these illustrate the harm that is caused and by association, vicious threats quickly transition to direct threats against them. Worryingly, this case is not isolated.

CASE EXAMPLE

Reducing paramilitary harm and exploitation panel



There were many cases that similarly exemplified the long arm of armed groups' aggression. In another case (see fig. 9), a young woman who had recently given birth to twins, was traumatised when a paramilitary flag was placed outside of her home and a threat made for her to leave the area. The mother of five who had lived in her home for more than ten years was advised that she needed to leave her home. In fact, the armed group advised that the threat was not only for the local area, but for the whole of Belfast. Distraught and unaware of the apparent logic behind the threat, she appealed to a member of the panel which brought the case to the group. Immediately, the case was reviewed from multiple perspectives. It was clear that the family were not known to PSNI. Housing members advised that there was no history of housing issues or antisocial behaviour.

Further, intelligence from the local organisation confirmed that there was no known issues in the local area. Whilst the threat was confirmed by the armed group and therefore defined as credible, it was generally believed that this was a personal issue. This contention was given further weight

Figure 9: Case illustration 2

misinformation regarding this young woman's behaviour, allegations that were known to the panel to be false. The panel agreed a

graded response to work towards the elimination of the threat. This began with a review of accommodation. The armed group made it clear the young woman could not remain in the home. Despite having new baby twins as well as older children, one of which was fifteen and undertaking exams in school, the young woman was supported to stay on her own with her mum allowing her children to remain in their own home. At the same time, intensive individual work began allowing for mentoring and coaching. This process elucidated a history of trauma following maltreatment and exploitation as a child. It also exposed a toxic relationship between the young woman and her mum. Concerned that the panel may have unwittingly facilitated a move that had the potential to cause greater harm, the young woman was again supported to move out of the mother's home. For a variety of reasons, there had been a difficult relationship with social services. From the young woman's perspective, social services were a threat to the stability of her family and from the social worker's perspective, they had the capacity to connect her to the most appropriate supports and enhance her family's functioning. Through the mentoring relationship, relations with the social work team improved immeasurably. Indeed, the social worker wrote to the panel to describe the impact that the transition had on their ability to perform their functions and ultimately, the outcomes achieved for the family. Over time, the panel members were able to demonstrate that any concerns that were believed to exist, did not exist and therefore the perceived legitimacy of the armed group's position was materially challenged. This enabled the panel to facilitate temporary stays at home and ultimately a complete transition back to the young woman's home, the removal of the paramilitary flag, and the total removal of any threat against the young woman and her family. Of course, it seems bizarre that armed groups continue to exert this level of influence, but the reality is that to preserve welfare, to reduce risk, and to achieve the best possible short-term outcomes within the context of a complex, murky and difficult situation, this multi-agency coordination adds significant value to people's lives.

The factors that increase risk of paramilitary related harm are often chronic and complex. There was a recognition among the group that the factors that contribute towards increase vulnerability towards paramilitary harms were systemic and unable to be addressed within the parameters of the panel.

“People who appear on this panel have had a history of poverty, trauma and addiction. The root of all crime is trauma and poverty. I wish that we could treat crime as a symptom of something else but we can’t fix it (PSNI)”

That said, there was a general consensus among the panel members that what they could do is interrupt the potential for harm and signpost on to supports.

Responses (data, cases studies and interview)

On this basis of this review of data, combined with interview material, it is evident that there are several advantages to this case management approach, both to the organisations as well as to the individuals under threat of paramilitary related harms.

From an organisational perspective, the overwhelming finding was the benefit of information sharing from multiple perspectives. As one panel member described, whilst there may be concerns regarding an individual, often the details appear to be limited. In isolation, it might be difficult for one organisation to appropriately assess and respond. However, with combined insights, this detail can be enhanced.

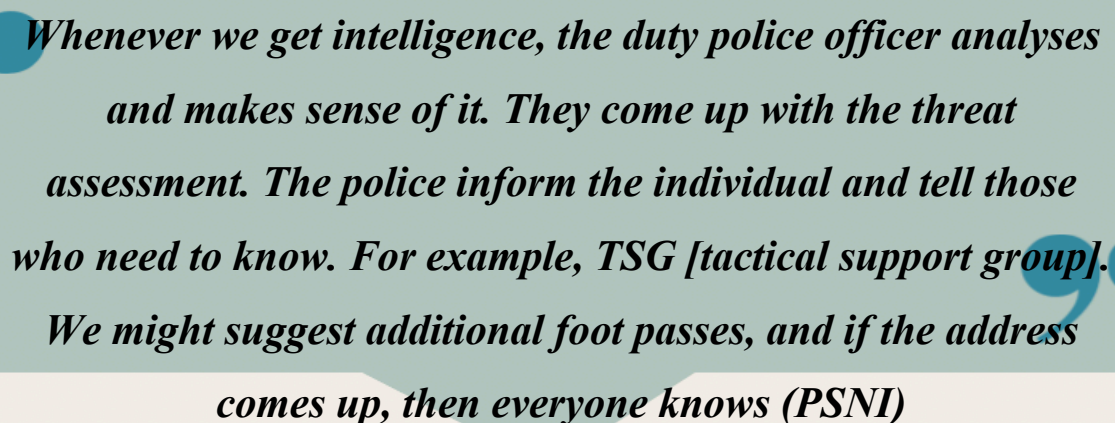
“The information coming to the panel can be very scant. In my role for example, I can see if there is already a social worker attached and I am able to access a system, or speak with the social worker and find out more detail about a threat or work that is already going on. That can be done within hours-minutes even. (Social Worker)”

Another significant benefit was the increased capacity for organisations to clarify whether or not threats were credible or not. Indeed, many self-reported threats appeared to be related to a range of other factors. For example, individuals may believe that they are under threat of paramilitary harms when those threats are actually related to situations such as neighbour disputes. Further, individuals may present with concerns regarding threats, but the panel have evidence that they are motivated more by potential gain than any reduction in harm. This most commonly presents in regard to housing. Specifically, those wishing to move to another house, or another area, believe that by presenting as ‘*under threat*’, this process could be sped up.

For the victims of paramilitary harms, there are also clear advantages to a panel such as this. Through coordinated responses, individuals concerned for their welfare-their lives, are more likely to receive timely responses. They get access to basic supports, particularly housing and this is the case because the people who can take decisions regarding the allocation of these resources are around the table. The people in the room have access to information and have the authority to take decisions.

Core to the panel process is the reduction of harm through coordinated responses. This harm reductions appears to happen in a number of ways.

From a policing perspective, the added intelligence feeds into policing responses. This response could include notifying individuals of threats against them. It might also involve the allocation of additional police resources to specific localities.




Whenever we get intelligence, the duty police officer analyses and makes sense of it. They come up with the threat assessment. The police inform the individual and tell those who need to know. For example, TSG [tactical support group]. We might suggest additional foot passes, and if the address comes up, then everyone knows (PSNI)

The panel have the information available to agree if the level and credibility of the threat warrants services facilitating a move for individual's out of their own communities. In many cases, threats against individuals are limited to specific and well-defined areas. These are defined by paramilitary groups, but do provide the basis on which to transition those people to outside of those areas and therefore, to reduce the risk of harm. This response, whilst drastic, is logical. It is applied in times of crisis, and in cases where the threat of harm is imminent.


Another way that partners appear able to mitigate the threat of harm is through mediated responses. The outcome could be a mitigation of threat without the transition to a new area. The indirect access to armed groups through the presence of community and voluntary organisations helps to facilitate this.

For example, there are a number of examples where CRJI have successfully agreed, in consultation with the victim and the armed group, an alternative to both physical violence and a home move. As one member noted: ***“RJ were able to mitigate the threat and he was able to stay with his granny”.***

This *‘third way’* could include the victim's engagement in drugs counselling for example. This is interesting from a number of perspectives, not least, because it appears that through CRJI, armed groups are being made aware of the factors that drive so called ‘anti-social’ or ‘anti-community’ behaviours. CRJI recognises the systemic issues that contribute towards issues such as the use and supply of drugs. By leveraging this evidence, as well as the evidence base for reduction and recovery, some of these groups appear willing to test the evidence. Of course, there are enduring ethical and moral considerations. Some might ask why, in the decades that have followed the peace agreement, these processes of mediation continue. Addressing the enduring issue of the presence of armed groups in communities is beyond the remit of this panel. The reality for this panel is that these groups do exist, and the potential harm is real. As one member also noted, when it comes to confidence in police to address the alleged crimes of individuals within communities, this remains low.



People get sick of the PSNI. The dogs in the street know who's dealing, but the dogs can't talk (Community and voluntary sector)



Comments like this reflect the challenges at a community level and the dynamics between those believed to be engaged in crime and anti-social behaviour, the belief in the criminal justice system to perform its functions and the presence of paramilitaries. When confidence is low, it is believed that support for paramilitaries can increase. So how should organisations work within that context? The decisions around how to engage with and respond to these groups and reduce harms is a delicate balance. On one hand, it could be easy to see a situation in which a facilitated conversation between a victim and armed group could be seen to give legitimacy to that group and their approach, particularly in a context where the facilitators is recommending compliance with the armed group. However, there are examples of approaches, for example from CRJI, that illustrate that in those cases where there is imminent threat, risk can be mitigated against in an evidence based way. There is however an opportunity for a wider conversation around the nature of purpose of ongoing dialogue with armed groups.

A more strategic point raised by several panel members was the lack of clarity of if and how this work contributes to the wider efforts around understanding and responding to paramilitary harms. One member commented *'this is all well and good but it's just fire-fighting-we're in crisis mode'* (Community and voluntary sector). Another member, who also labelled this idea of *'firefighting'* suggested that:

“There is a lot of intergenerational stuff going on with people under threat.... By and large, it’s the same people or family members getting up to the same things. Why? What is the point of throwing money at all this stuff? What is happening upstream? (Community and voluntary sector)”

Comments such as these reflected what we intuitively know-that earlier intervention can have the most sustainable and cost-effective effects. However, this particular comment also seemed to suggest a lack of understanding of efforts that are taking place across the spectrum of need. The previous evaluation of phase I of this project (Walsh, 2021) found that when transposed onto a public health model which illustrates interventions along a spectrum of support ranging from primary (the least intensive and specialist) through to tertiary (the most intensive and specialist), this project is certainly responding to those in need of tertiary level supports. In that sense, comments such as these reflect the observations-that at the time of presentation to the panel, most are in crisis. What it does not do however is recognise the work that is going on with many others along the spectrum and importantly, how this panel can potentially contribute towards stepping down those who may present with tertiary level need, back down through secondary and ultimately towards primary level need.

In estimating the relative impact of the panel, Walsh (2021) categorised outcomes in four ways:

1. Threat lifted
2. Person referred to appropriate supports
3. Ongoing support by panel
4. Unknown

These four categories were elucidated from routinely collected data forms and a recommendation was made to review and refine the means by which responses and outcomes are both defined and captured. One of the challenges during this, the second evaluation, was that outcomes were unable to be coded. Despite the advances that had been made in regard to

the collection of data (i.e. using a standardised template and consistently completed by the Chair), what seemed to be missing was detail on the response and how these related to the outcomes. For example,

To address this, cases studies were collected (see above). Whilst this has the advantage of providing a rich narrative that illustrates both needs and response, it is also limited in its capacity to generalise across the project.

On average, cases took 40 days to close from the point of referral. This ranged between 1 day (i.e. when no credible threat was found or the individual did not consent to the process) and 120 days. There is evidence that some individual's cases had been closed, only to be re-opened again several months, or even weeks later. This is maybe unsurprising given what we have come to know regarding the level and multitude of vulnerabilities.

Conclusions and recommendations

The partnership has evolved since the first evaluation report. Building on the success in West Belfast, and taking into account the recommendations of the evaluation report, the Belfast Trust is now represented by two social workers from gateway and family support. Members of the panel have noted that added value. It is also noted however that many of the individuals presented as 'under threat' may fall within the SEHSCT. It is acknowledged that efforts are ongoing to identify a named person to present that Trust on the panel.

Recommendation 1

It is recommended that panellists pursue their efforts to secure a named individual from the SEHSCT to attend the West Belfast panel on a consistent basis

In North Belfast the role of PSNI is less clear. Despite being represented by a police officer from West Belfast, there remains no dedicated officer of sufficient rank on the panel from North Belfast. This reflects poorly on the organisations' commitment to reducing paramilitary harms in partnership with communities at a local level - at a time when the strategic focus for policing is on locality based responses. There was no clear rationale from the PSNI

perspective as to why this is the case. It would be prudent for the TPP programme team to liaise with PSNI to enquire as to why there appears to be low engagement in this process within North Belfast.

Recommendation 2

It is recommended that a dedicated officer of sufficient rank attends the North Belfast panel on a consistent basis

This evaluation process elucidated the time and human resources that are required in order to facilitate a fluid process. Respondents consistently commented on the urgency with which cases often need reviewed and decisions taken. These needs do not present within the parameters of traditional working hours-in fact the opposite. Members of the panel regularly commit to extra-ordinary working schedules-a demonstration of their personal commitment. In addition to the novel working arrangements, it is evident that with this comes additional time to undertake administrative duties. In particular, the chair is currently responsible for the admin needs. They write up and maintain case files on each case presenting to the panel. This takes significant time-time away from their substantive role. There is a general recommendation to capture how much time is required by each member that contributes to the panel, but there is a more specific recommendation that administrative support is provided to the panel so that these duties can free members up to focus on fact finding, decision making and coordination.

Recommendation 3

It is recommended that the project secures administrative support

There have been great strides made in regard to the data that is captured. A standardised template has been developed and this provides a comprehensive overview of cases. However, there are many examples where the expected data is not included on the form. There is a need to complete the form fully, particularly with reference to the background of the threat, connections to other programmes/supports and importantly and outcomes prior to closing the case. This would enhance the data collection by capturing the needs of individuals at the time they present, it would document key risks and protective factors associated with individuals

e.g. substance use, mental health, violence and family situation. Further, the section that captures how decisions are taken to sign-post on to other relevant services and supports could be completed.

Recommendation 4

It is recommended that all sections of the case review template are completed

In order to more accurately capture the effects of the project, it would be worth considering how the partners could refine the tools and methods that they use to collect project level data. This could include the collection of additional data such as the presenting/index issues, services already involved with individuals and measurable outcomes in a consistent and well-defined way. Additionally, the project could access support from TPP to consider validated measures that could be embedded within this framework to enhance the rigour of measurement. This connects to a wider point regarding the decisions are taken. An important-even critical aspect of the panel is to ensure that individuals are safe and the potential for harm is reduced-often eliminated. This is done in a range of ways as outlined earlier in the report. In many cases, this is done by securing alternative accommodation outside of the areas where threats exist. It would be useful for the panel to also think about addressing the causes of risk of harm in addition to verifying threats and facilitating home moves. There are some limited examples of this, but when this happens, the impact on individuals appears to be powerful and sustainable.

Recommendation 5

It is recommended that end-benefits and outcomes are defined in measurable ways and consideration be given to measurement tools

The first evaluation found that from a public health perspective, many of those being supported through this project are within the tertiary level of support. That is, they are very often in crisis and their lives are in danger. The evidence from clinical practice suggests that this process of ‘stabilisation’ can be highly effective in reducing vulnerability and creating the conditions for individuals to engage in targeted support provision. In essence, this partnership provides the team and space to mitigate the threat to life, address basic needs

issues, such as housing and signpost into treatment for those who present with chronic issues such as substance misuse. However, this process of stabilisation is on its own insufficient for address the longer term outcomes. It would be very useful for the partnership to develop a conceptual map of where this specific project is situated within the context of the public health approach and develop a process map that 1. Allows for this period of stabilisation but crucially, 2. is followed by targeted support as service users move from tertiary support back through to secondary and ultimately primary level supports. Relatedly, the TPP has invested in a range of targeted provisions that are being facilitated at different levels of the public health approach.

Recommendation 6

It is recommended that the project reviews its activities relative to the wider Tackling Paramilitarism and Organised Crime programme and considers practical opportunities to signpost cases on for further, and more specialist support.

Where detail exists on the nature of threats, it is clear that there is an almost ubiquitous issue of substance use. This observation was confirmed during interviews. Without exception, panel members agree that some of the root causes of people's increased vulnerability towards paramilitary related harm is related to substance use. Whilst it is beyond the scope of the panel to begin to unpack and address this escalating challenge, partners could leverage existing knowledge relationships to connect those in need of therapeutic supports.

Recommendation 7

It is recommended that the project consider substance use as a thematic focus and explores ways that individuals who are presenting to the panel with significant concerns in this area can be signposted for the most appropriate supports.

Core to the panellist's motivation's for engaging in this project is the enhanced capability to share information. The ability to share this information rests almost exclusively on access to up to date data from a range of reliable source. Each member of the panel contributes to this in different ways. At a very basic level, PSNI data can provide insights around threats and police responses, housing data can provide reliable information around the whereabouts of

individuals and Trust data can give an indication of the presence of children and/or vulnerable adults. The sum of the parts is enhanced coordination. Further, gains have been made with regard to data collection at a panel level. The chair has invested time in developing a standardised template. They have also taken on the responsibility for completing these forms which capture each case, reviews that take place and decisions taken. Despite all of these strengths, limitations were noted during interviews and observed during the analysis. For example, at a Trust level, some records are stored on a platform called SOS CARE while others are stored on a newer system called PARIHS. Access to one is useful, but panel members commented that in the event that these two systems are not streamlined, it would be more useful to have access to both.