Primary Care Safeguarding Children Training Guidance and 'Prevent' 2016/19

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1.0. **INTRODUCTION**

- 1.1 This strategy identifies the training requirements to enable Primary Care staff to meet their statutory, regulatory and contractual responsibilities. All healthcare staff have a duty to safeguard and protect the welfare of children from abuse or neglect. This document aims to provide guidance on the content and timetable for safeguarding children training for all staff who are employed by GP practices including:
 - GPs (partners, salaried GPs, retainers, locum)
 - Nurse Practitioners
 - Practice Nurses
 - Healthcare assistants
 - Practice Managers
 - Receptionist and Administrative staff
 - Any other staff employed by the Practice.
- All health staff who come into contact with children and their families should be aware of the predisposing factors, signs and indicators of abuse or neglect, and recognise who could be at risk of radicalisation. All staff should have the knowledge and confidence to take any necessary action, seek advice and report any safeguarding concerns appropriately within their own practice or if necessary through local safeguarding procedures.
- 1.3. Those involved in direct work with children, and their families, should have the knowledge and skills to analyse and effectively share information and collaborate with other agencies and disciplines in order to safeguard and promote the welfare of children. They require a sound understanding of the legislative framework and the wider policy context within which they work, as well as a familiarity with the York and North Yorkshire and East Riding (depending on locality of the Practice) Safeguarding Children Procedures available on the respective Local Safeguarding Boards websites:

Local Safeguarding Children Boards:

North Yorkshire: www.safeguardingchildren.co.uk

City of York: www.saferchildrenyork.org.uk

East Riding: http://erscb.org.uk/

2. STATUTORY, REGULATORY AND CONTRACTUAL POSITION FOR PRIMARY CARE

- 2.1. The GMS and PMS contracts define and require primary care providers to have appropriate safeguarding mechanisms and to comply with legislation and guidance.
- 2.2 Under their registration with the CQC all primary care providers must;

- Ensure that those who use their services are safeguarded and that staff are suitably skilled and supported.
- Have effective arrangements in place to safeguard vulnerable children.
- Demonstrate to their governing body, commissioners and the public that safeguarding process are effective and robust.
- Have safeguarding process in place that include arrangements for
 - safe recruitment
 - effective and appropriate level of training for all staff, including non clinical staff
 - effective supervision arrangements
 - working in partnership with other agencies
 - Primary care providers and GP practices should have a lead for safeguarding children, who should work closely with Named GPs and Designated Professionals.
- 2.3. The Good Medical Practice (GMC, 2013), core ethical guidance for doctors, sets out the principles and values for good practice and informs the education, training and practice of all doctors in the UK. Though safeguarding is not mentioned specifically within this document the guidance outlines the requirements to develop and maintain professional competence
- 2.4 Under the Children Act 2004, GP Practices are responsible for ensuring their staff are competent and confident to carry out their responsibilities to safeguard children. The statutory guidance "Working Together to Safeguard Children" (2015) requires that all NHS staff receive appropriate training to achieve the competences required by the Intercollegiate Document "Safeguarding Children and Young People: Roles and Competencies for Health Care Staff" (2014).

3 ROLES AND RESPONSIBILITIES

- 3.1. All health staff who come into contact with children and their families have an individual responsibility for ensuring that they have the competences to recognise abuse and neglect and are aware of the actions to take if they have concerns about a safeguarding issue.
- 3.2. Practices are responsible for ensuring their staff are competent and confident in carrying out their responsibilities for safeguarding children and are aware of how to recognise and respond to safeguarding concerns, including recognising individuals at risk of radicalisation.
- 3.3. Practices are expected to comply with CQC Essential Standards of Quality and Safety outcomes 7-14, particularly outcome 7; Safeguarding People who use Services from Abuse.
- 3.4. Practices are required to ensure that their staff have access to the appropriate safeguarding training, learning opportunities and support to facilitate their understanding of child safeguarding issues including recognition and response, information sharing and record keeping.

3.5 All training needs to meet the Local Safeguarding Children Board (LSCB) approved standards. Training should be delivered by approved facilitators (who include the Nurse Consultant for Safeguarding in Primary Care, the Designated Professionals for Children and the Named GPs), or directly by LSCB trainers (via LSCB training events or online resources). Whilst other resources might have education value, it is important that all resources meet competency standards for formal certification of training to be recognised (See appendix One for guidance on competencies required by each level of staff.)

4. COMPETENCIES EXPECTED OF STAFF WORKING WITH CHILDREN AND YOUNG PEOPLE OR THEIR FAMILIES.

- 4.1. The Intercollegiate Document, "Safeguarding Children and Young People: Roles and Competencies for Health Care Staff" (2014) provides guidance on what competencies are expected of staff. The guidance outlines five levels of competency required for staff; the first four of which are relevant to primary healthcare teams:
 - Level 1: The level required by all staff including non-clinical managers and staff working in health care settings. At level 1 staff should receive safeguarding children training, education and learning equivalent to a minimum of 2 hours over 3 years.
 - Level 2: The minimum level required for non-clinical and clinical staff who
 have some degree of contact with children and young people and/or
 parents/carers. At level 2 staff should receive safeguarding children
 training, education and learning equivalent to a minimum of 3-4 hours
 over 3 years.
 - Level 3 (core): Clinical staff working with children, young people and/or their parents/carers and who could potentially contribute to assessing, planning, intervening and evaluating the needs of a child or young person and parenting capacity where there are safeguarding/child protection concerns. At level 3 core staff should receive safeguarding children training, education and learning equivalent to a minimum of 6-8 hours over 3 years.
 - Level 3 (specialist): for those at Level 3 who require additional specialist competencies due to the nature of their work and role. At level 3 specialist staff should receive safeguarding children training, education and learning equivalent to a minimum of 12-16 hours over 3 years.
 - Level 4: Named professionals including Named GPs require safeguarding children, training education and learning equivalent to a minimum of 24 hours over 3 years
- 4.2. The following table outlines the various staff roles in primary care in relation to the training levels of competency outlined above

Level 1	Level 2	Level 3 core	Level 3	Level 4
2 hrs over 3	3-4 hrs over 3	8 hrs over 3	specialist	24 hrs over
years	years.	years	16 hrs over 3	3 years
			years	
 Practice Manager Receptionist Administrative Staff Ancillary Staff, e.g. Domestics Maintenance Staff 	 Practice Nurse HCA Pharmacists Counsellors Employed AHP, e.g. Physio, Phlebotomists 	 GPs Practice Nurses (working regularly with children) Advanced Nurse Practitioners 	GP safeguarding Practice leads	Named GP

The decision on the competency required of a particular staff member is one for each practice to take, since roles and responsibilities for an employee may vary widely between practices.

- 4.3 The assessment of competency can be helped by asking the following questions:
 - Does this staff member work in a healthcare setting? If "Yes" then they will need to acquire Level 1 competency, as a minimum.
 - Does this staff member have clinical contact with parents, children and young people? If "Yes" then they will need to acquire Level 2 competency, as a minimum.
 - Does this staff member work predominantly with children, young people and parents, and are they expected to work and communicate with other agencies, such as by making referrals to Children's Social Care? If "Yes" then they will need to acquire Level 3 (core) competency, as a minimum.
 - Does this member of level 3 staff have additional requirements as part of their role which includes advising and liaising with other agencies on safeguarding issues, applying the lessons learnt from audit and serious case level to Practice and advising on information sharing? If "Yes" then they will need to acquire Level 3 (specialist) competences as a minimum.
 - Does this member of staff work as the Named GP for safeguarding children? If "Yes "then they will need to acquire Level 4 competences
- 4.4. The detail of each competency level, a summary of which is included in Appendix One, with the knowledge and skills that underpin them, is set out in the Intercollegiate Document, "Safeguarding Children and Young people: Roles and competencies for Health Staff":

http://www.rcpch.ac.uk/sites/default/files/page/Safeguarding%20Children%20-%20Roles%20and%20Competences%20for%20Healthcare%20Staff%20%20 02%200%20%20%20(3).pdf

5. PREVENT

- 5.1. Statutory guidance issued under the Counter-Terrorism and Security Act 2015 places a duty on "specified authorities",(of which health is included) in the exercise of their functions, to have "due regard to the need to prevent people from being drawn into terrorism".
- 5.2. The PREVENT programme is part of the Government's response to the terrorist threat in the UK and forms part of the CONTEST strategy which aims to stop people becoming terrorists, supporting extreme violence or becoming susceptible to radicalisation. Healthcare professionals may meet and treat people who are vulnerable to radicalisation, such as people with mental health issues or learning disabilities, who may have a heightened susceptibility to being influenced by others. Alongside other agencies, such as education services, local authorities and the police, healthcare services have been identified as a key strategic partner in supporting this strategy.
- 5.3. NHS England has incorporated PREVENT into its safeguarding arrangements, so that PREVENT awareness and other relevant training is delivered to all staff who provide services to NHS patients.
- 5.4. PREVENT focuses on all forms of terrorism and operates in a pre-criminal space, providing support and re-direction to vulnerable individuals at risk of being groomed into terrorist activity.
- 5.5. PREVENT training and awareness is embedded within the competencies outlined within the Intercollegiate Document, "Safeguarding Children and Young People: Roles and Competencies for Health Care Staff" (2014).

6 TRAINING AND EDUCATION

- 6.1 All New Staff must complete safeguarding adult and children training of at least 1 hr which is included in the Practice induction programme. This induction should be completed within 6 weeks of commencing work. Thereafter the staff member should complete the level of training commensurate to their role. All Level 3 staff and above should undertake initial Safeguarding Children training within 6 months of starting employment.
- 6.2 Practices have a responsibility to identify adequate resources and support for their staff in the following training opportunities: (see appendices Two)
 - Multi-agency training: training with workers from different agencies to promote a common and shared understanding of the respective roles and responsibilities of different professionals, and to contribute to more effective working relationships.

- **Single-agency training:** training from a health service perspective typically carried out within Practice Learning events.
- Individual training: training based on the needs or interests of the individual staff member (e.g. a training event on domestic violence), or involving accessing a more general multi-agency or single agency resource, or training accessed via other routes such as an approved elearning module.
- Annual update: All staff should be updated annually on any recent changes in safeguarding policy or procedures. This would be an opportunity to review the practice protocol, to discuss any learning points from local case reviews. This usually consists of a half hour face-to-face session and is facilitated by the Practice Safeguarding lead or may be part of single agency in-house training delivered by an Safeguarding Board approved trainer, e.g. Nurse Consultant, Designated Professional or Named GP.
- 6.3. Regulatory bodies such as the GMC and NMC require evidence of completion of key refresher and updating education and training for revalidation purposes.
- 6.4. The type and frequency of training varies depending on the level of training required. Training Requirements are calculated over a 3 yearly basis.

 NB: this is flexible and if so desired the required training may be achieved all in one year, although a rolling programme of education is desirable)
- 6.5. Using "typical" job descriptions from section 4 and 5 the recommended type and frequency of training is set out in the table below:

	Type of training recommended				
Staff Training	Multi-agency	Single	Individual		Annual
Level	training	agency	training	PREVENT	Update
		training			Incl
					PREVENT
Receptionist/Adm	Not required	Not	Once every 3	As part of level 1	Yearly
in		required	years	training or eLearning	
Level 1					
Healthcare	Not required	Once every	Once every 3	As part of level 2	Yearly
Assistant		3 years	years	training or eLearning	
Level 2					
GP Level 3 Core	Once every 3	Once every	Once every 3	WRAP3 (PREVENT	Yearly
	years	3 years	years	awareness) Once	
GP safeguarding	Once every 3	Once every	Once every 3	WRAP3 (PREVENT	Yearly
Lead Level 3	years	3 years	years	awareness) Once	
specialist					
Named GP	Once every 3	Once every	Once every 3	WRAP3 (PREVENT	Yearly
	years	3 years	years	awareness) Once	

7.0. **RECORDING TRAINING**

7.1. It is important that staff and employers keep accurate records of safeguarding training undertaken, including refresher training, as this will be required to provide assurance both to commissioners and the CQC for registration purposes.

8. ADVICE

8.1. Advice in relation to available safeguarding training and achieving the requirements of this strategy can be obtained from:

Jacqui Hourigan

Nurse Consultant Safeguarding Children and Vulnerable Adults Primary Care jhourigan@nhs.net

9. **REFERENCES**

Children Act 1989 http://www.legislation.gov.uk/ukpga/1989/41/contents

Children Act 2004 http://www.legislation.gov.uk/ukpga/2004/31/contents

HM Government (2015) Working Together to Safeguard Children

www.workingtogetheronline.co.uk/index.html

HM Government (2015) Revised PREVENT Duty Guidance for England and Wales

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/44597 7/3799_Revised_Prevent_Duty_Guidance_England_Wales_V2-Interactive.pdf

NHS England (2015) Prevent Training and Competencies Framework.

https://www.england.nhs.uk/wp-content/uploads/2015/02/train-competnc-frmwrk.pdf

RCPCH (2014) Safeguarding Children and Young People: Roles and competences for health care staff. Intercollegiate Document Third Edition

http://www.rcpch.ac.uk/child-health/standards-care/child-protection/updates/child-protection-updates

APPENDIX ONE

HEALTHCAR Level 1	HEALTHCARE STAFF COMPETENCY LEVELS FOR SAFEGUARDING CHILDREN AND YOUNG PEOPLE Level 1 Level 2 Level 3 Level 3 Level 4 core Specialist					
Recognising potential indicators of child maltreatment physical abuse including fabricated & induced illness, emotional abuse, sexual abuse, & neglect including child trafficking and Female Genital Mutilation (FGM) Understanding the potential impact of a parent/carers physical and mental health on the wellbeing and development of a child or young person, including the impact of domestic violence the risks associated with the internet and online social networking, an understanding of the importance of children's rights in the safeguarding/child protection context, and the basic knowledge of Children Acts 1989, 2004 and of Sexual Offences Act 2003 Knowledge of objectives of Prevent strategy and responsibilities in relation to this strategy. Understand vulnerability factors that can make individuals susceptible to radicalisation. Taking appropriate action if	As outlined for Level 1 Uses professional & clinical knowledge, & understanding of what constitutes child maltreatment, to identify any signs of child abuse or neglect Able to identify and refer a child suspected of being a victim of trafficking or sexual exploitation; at risk of FGM or having been a victim of FGM; at risk of exploitation by radicalisers. Acts as an effective advocate for the child or young person Recognises the potential impact of a parent's/carer's physical and mental health on the well being of a child or young person, including possible speech, language and communication needs Clear about own and colleagues' roles, responsibilities, & professional boundaries, including professional abuse & raising concerns about conduct of colleagues As appropriate to role, able to refer to social care if a safeguarding/child protection	 As outlined for Level 1 and 2 Draws on child and family-focused clinical & professional knowledge & expertise of what constitutes child maltreatment, to identify signs of sexual, physical, or emotional abuse or neglect. Will have professionally relevant core and case specific clinical competencies Documents & reports concerns, history taking and physical examination in a manner that is appropriate for safeguarding/child protection and legal processes. Contributes to inter-agency assessments, the gathering and sharing of information and where appropriate analysis of risk Undertakes regular documented reviews of own (and/or team) safeguarding /child protection practice as appropriate to role (in various ways, such as through audit, case discussion, peer review, and supervision and as a component of refresher training) 	As outlined for Level 1, 2, and 3 core Advises other agencies about the health management of individual children in child protection cases Applies the lessons learnt from audit and serious case reviews/case management reviews/ significant case reviews to improve practice Advises others on appropriate information sharing.	As outlined for Level 1, 2 and 3 Contributes as a member of the safeguarding team to the development of strong internal safeguarding/child protection policy, guidelines, and protocols Able to effectively communicate local safeguarding knowledge, research and findings from audits and challenge poor practice. Facilitates and contributes to own organisation audits, multi-agency audits and statutory inspections Works with the safeguarding/child protection team and partners in other agencies to conduct safeguarding training needs analysis, and to commission, plan, design, deliver and evaluate single and inter-agency training and teaching for staff in the organisations covered Undertakes and contributes to serious case reviews/case management reviews/significant case reviews, individual management reviews /individual agency reviews/internal management reviews, and child death reviews where requested, and undertakes chronologies, and the development of action plans using a		

they have concerns, including	concern is identified (aware of	Contributes to serious case	root cause analysis approach where
appropriately reporting concerns	how to refer even if role does	reviews/case management	appropriate or other locally approved
safely and seeking advice	not encompass referrals)	reviews/significant case	methodologies
Salely and seeking davice	Documents safeguarding /child	reviews, internal partnership	Co-ordinates and contributes to
	protection concerns in order to	and local forms of review, as	implementation of action plans and
	be able to inform the relevant	well as child death review	the learning following the above
	staff & agencies as necessary,	processes	reviews with the safeguarding team.
	maintains appropriate record	Able to support and redirect	Works effectively with colleagues
	keeping, & differentiates	vulnerable individuals at risk of	from other organisations, providing
	between fact and opinion	being groomed into terrorist	advice as appropriate
	Shares appropriate & relevant	related activity.	Provides advice and information
	information with other teams	Make referrals into the	about safeguarding to the employing
	Acts in accordance with key	Channel process	authority, both
	statutory and non-statutory	Works with other	proactively and reactively – this
	guidance and legislation	professionals and agencies,	includes the board, directors, and
	including the UN Convention on	with children, young people	senior managers
	the Rights of the Child and	and their families	Provides specialist advice to
	Human Rights Act	when there are safeguarding	practitioners, both actively and
		concerns	reactively, including clarification
			about organisational policies, legal
			issues and the management of child
			protection cases
			Provides safeguarding/child
			protection supervision and leads or
			ensures appropriate reflective
			practice is embedded in the
			organisation to include peer review
			Participates in sub-groups, as
			required, of the LSCB
			Leads/oversees safeguarding
			quality assurance and improvement processes
			Undertakes risk assessments of
			the organisation's ability to
			safeguard/protect children and
			young people
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CRITERIA FOR ASSESSMENT						
Level 1	Level 2	Level 3 core	Level 3 Specialist	Level 4		
Demonstrates an awareness and understanding of child maltreatment Able to recognise indicators of vulnerability, risk of radicalisation and the impact of influence on vulnerable individuals. Demonstrates an understanding of appropriate referral mechanisms & information sharing i.e. knows who to contact, where to access advice and how to report	As outlined for Level 1 Demonstrates awareness of the need to alert primary care professionals (such as the child's GP) and universal services (such as the child's health visitor or school nurse) of concerns. Demonstrates accurate documentation of concerns. Demonstrates an ability to recognise and describe a significant event in child protection/ safeguarding to the most appropriate professional or local team.	 As outlined for Level 1 and 2 Demonstrates knowledge of patterns & indicators of child maltreatment Demonstrates knowledge of the function of LSCBs. Demonstrates understanding of appropriate information sharing in relation to child protection & children in need Demonstrates an ability to assess risk & need & instigates processes for appropriate interventions Demonstrates knowledge of the role and responsibilities of each agency, as described in local policies and procedures Demonstrates critical insight of personal limitations and an ability to participate in peer review Where role includes conducting detailed assessments of child abuse and neglect, demonstrates ability to assess, examine children for suspected abuse and neglect, provide a report and an opinion Where undertaking forensic examinations as part of their role, demonstrates an ability to undertake forensic procedures and demonstrate how to present 	As outlined for Level 1, 2, and 3 core Demonstrates an ability to advise other agencies about the health management of individual children in child protection cases Demonstrates an ability to apply the lessons learnt from audit and serious case reviews/case management reviews/ significant case reviews to improve practice Demonstrates an ability to advise others on appropriate information sharing	 As outlined for Level 1, 2 and 3 Demonstrates completion of a teaching & assessment programme within 12 months of appointment Demonstrates an understanding of appropriate & effective training strategies to meet the competency development needs of different staff groups Demonstrates completion of relevant specialist child protection /safeguarding education within 12 mths of appointment Demonstrates understanding of professional body registration requirements Demonstrates an understanding & experience of developing evidence-based clinical guidance Effectively consults with other health care professionals & participation in multidisciplinary discussions Demonstrates participation in audit, & in the design &evaluation of service provision, including the development of action plans & strategies to address any issues raised by audit and serious case reviews/internal management reviews/significant case reviews/other locally determined reviews Demonstrates critical insight of personal limitations & an ability to participate in peer review Demonstrates practice change from learning, peer review or audit. Demonstrates contributions to reviews have been effective and of good quality. Demonstrates use of feedback & 		

	the findings and evidence to	evaluation to improve safeguarding
	legal requirements.	teaching.

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APPENDIX TWO SAFEGUARDING CHILDREN TRAINING RESOURCES

Provider	Resource	How to Access
North Yorkshire and York CCG's Named GPs Nurse Consultant, Designated Professionals	Hot Topics Training safeguarding adults and children including PREVENT (WRAP)	Via <u>ihourigan@nhs.net</u> / <u>angharad.lumber@nhs.net</u>
E Learning for Healthcare	Safeguarding Children and Young People	<u>e - Learning for Healthcare - Safeguarding Children and Young People</u>
North Yorkshire Safeguarding Children's Board	Children's safeguarding North Yorkshire (Learning Zone)	http://www.safeguardingchildren.co.uk/learning-improvement.
City of York Safeguarding Children's Board	Children's safeguarding City of York (Work force development)	http://www.saferchildrenyork.org.uk/learning-and-development.htm http://www.yorkworkforcedevelopment.org.uk/view-courses-to-book.htm
East Riding Safeguarding Children's Board	Children's safeguarding East Riding	http://erscb.org.uk/training/
NCAL	PREVENT online awareness	http://course.ncalt.com/Channel_General_Awareness/01/index.html https://www.elearning.prevent.homeoffice.gov.uk/
Royal College of Paediatrics and Child Health	A range of resources to support healthcare professionals including e-learning and face to face	RCPCH - Safeguarding Training and Resources
Child and Maternal Health Intelligence Network	Knowledge Hub – Safeguarding Safeguarding Children Training Directory	Safeguarding Children Training Directory
NSPCC	Children's safeguarding resources	NSPCC Safeguarding Learning Resources
Royal College of General	This toolkit, produced by the Royal College	Safeguarding Children and Young People - A Toolkit for
Practitioners (RCGP)	of General Practitioners and the NSPCC is intended to support GPs in the UK.	General Practice 2011
NHS England / Public Health England	Child Sexual Exploitation awareness	https://www.youtube.com/watch?v=Wm1bEWvDHCg&feature=youtu.behttps://www.youtube.com/watch?v=sC4Nn_mYKu0

Provider	Resource	How to Access
Other Resources	Guidance to assist staff to identify potential victims of human trafficking	https://www.gov.uk/government/uploads/system/uploads/att achment_data/file/187041/A5_Human_Trafficking_Guidanc e_leaflet.pdf https://www.gov.uk/government/uploads/system/uploads/att achment_data/file/509326/victims-of-modern-slavery- frontline-staff-guidance-v3.pdf Note eLearning module pending
	Free e-learning on Force Marriage awareness	http://www.safeguardingchildrenea.co.uk/resources/awareness-of-forced-marriage-register-for-training
	Free on-line training Female Genital Mutilation: Recognising and prevention FGM	http://fgmelearning.co.uk/ http://www.e-lfh.org.uk/programmes/female-genital-mutilation