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Contents

- 1. Purpose**
- 2. Background**
- 3. Strategy**
- 4. Aim of Training**
- 5. Responsibilities**
- 6. Training provision**
- 7. Named professionals- Level 4**
- 8. Values Underpinning Training and Development**
- 9. Safeguarding Supervision**
- 10. Audit & Monitoring**
- 11. Communication & Implementation**
- 12. Equality & Diversity**
- 13. Bibliography & References**

Appendices

- 1. Roles and Competencies for Health Care Staff (2014)**
- 2. Looked after Children, Knowledge, Skills and competences of health care staff: Intercollegiate role Framework (2015)**
- 3. Summary of Levels 1-4**
- 4. Training Strategy Mid Essex Hospital Services NHS Trust**
- 5. Equality Impact Assessment**

1. Purpose

- 1.1 The purpose of this document is to provide a clear statement of the expectation Mid Essex Hospital Services NHS Trust (MEHT) has in relation to the provision of Safeguarding Children training.

2. Background

- 2.1 In order to protect children and young people from harm, all healthcare staff must have the competences to recognise child maltreatment and to take effective action as appropriate to their role (Intercollegiate Document 2014). Full version as Appendix 1
- 2.2 It is the duty of employers to ensure that those working for them clearly understand their contractual obligations within the employing organisation and it is the responsibility of employers to facilitate access to training and education which enable the organisation to fulfil its aims, objectives and statutory duties effectively and safely (Intercollegiate Document 2014)
- 2.3 It remains the responsibility of organisations to develop and maintain quality standards and quality assurance, in order to ensure appropriate systems and processes are in place and to embed a safeguarding culture within the organisation; this includes staff induction and effective training and education
- 2.4 Employers have a responsibility to identify adequate resources and support for staff to attend both single agency and multi- agency training; this includes recognising the different training needs of individual staff groups dependent on their level of contact with children and young people and/or with adults who are parents or carers.
- 2.5 For reference single agency training is defined as training that is carried out by a particular agency for its own staff whilst Multi-agency training is defined as training which is for employees of different agencies who either work together formally or come together for training and development.

3. Strategy

- 3.1 The Trust has developed the training needs analysis in response to the competency framework set in the Intercollegiate document: Safeguarding Children and Young People: roles and competences for health care staff (2014).
- 3.2 The Trust aims to provide training opportunities to ensure that:
- Employees are confident and competent in carrying out their responsibilities for safeguarding and promoting the welfare of children and young people.
 - Different training needs are recognised and acknowledged; staff will be supported to attend the appropriate level of training according to their degree of contact with children and young people and/or adults who are parents or carers. The level of individual responsibility and independence of decision making will also be acknowledged.
 - That a variety of forums are available to staff through which to access and receive safeguarding training and that these forums are evaluated in response to existing resources and organisational requirements.

- That training is regularly reviewed and updated in accordance with changes in legislation, statutory requirements, national and local policy. The views and evaluations by staff are also integral to this process.
- That safeguarding training is audited and application of theory to clinical practice measured and demonstrated.
- That further learning opportunities are available to staff in response to Serious Case Reviews (SCR's), Serious Incidents (SI's) and individual cases from which it is felt by the safeguarding team that further learning is required. This will also include positive clinical outcomes.

3.3 In addition the opportunity for staff to attend Multi-agency training is facilitated as it is acknowledged that Multi-agency training is viewed as a highly effective way of promoting a common and shared understanding respective roles and responsibilities of different professionals and contributes to effective working relationships.

4. Aim of Training

4.1 To equip trust staff to work effectively within the organisation and collaboratively with other agencies to safeguard and promote the welfare of children. This will be achieved by:

- The development and shared understanding of the tasks, processes, principles, roles and responsibilities outlined in national guidance. This includes local arrangements for safeguarding.
- Improved communications between professionals including a common understanding of the key terms, definitions and thresholds for action.
- Effective working relationships, including an ability to work in multidisciplinary groups or teams.
- Effective, child focused decision making based on information sharing, assessment, critical analysis and sound professional judgement.
- Learning from Serious Case Reviews (SCR's) and reviews from child deaths.

5. Responsibilities

5.1 Chief Executive Officer (CEO)

5.1.1 The CEO is ultimately responsible for ensuring that safeguarding training is provided in accordance with statutory organisational responsibilities outlined in Section 11 of the Children's Act (2004). Day to day management of this task is delegated to the Executive Lead for Safeguarding.

5.2 Executive Lead for Safeguarding/ Director of Nursing/Chief Nurse

5.2.1 The Executive lead is responsible for supporting the Safeguarding Team to ensure that resources are provided for all appropriate training.

5.2.2 The Executive Lead is responsible for ensuring that staff are released to attend appropriate training.

5.3 Associate Chief Nurses/Clinical Leads/ Lead Nurses/Lead Midwives/Line Managers .

- 5.3.1 Ensure that all staff attend Corporate Induction on their first day of employment or as soon as possible after. This is in accordance with trust policy.
- 5.3.2 Assess what level of training is required by staff taking on new roles and responsibilities.
- 5.3.3 Ensure that Safeguarding Training is addressed at all staff appraisals.
- 5.3.4 Ensure that all training needs identified through appraisal are communicated to the Safeguarding Team.
- 5.3.5 Keep records of staff training and alert the Safeguarding Team and the staff member that their update training is due.

5.4 **Safeguarding Team**

- 5.4.1 Undertake a Training Needs Analysis (TNA) to identify role based training needs as per the Intercollegiate Guidance Safeguarding Children and Young People: Roles & Competencies for Health Care Staff (2014) and its successor documents. Additionally consideration will be given to the Intercollegiate role framework: Looked after children, Knowledge, skills and competences of healthcare staff, 2015. Full copy Appendix 2
- 5.4.2 Provide the following face to face training:
 - Level 1: Initial training as part of Corporate Induction. Further updates will be available within Corporate Induction or via a leaflet. This is for all non-clinical staff; competences are to be reviewed as part of the annual appraisal.
 - Level 2: Initial level two training will be delivered as part of the extended Induction programme for specific groups such as nurses. For all other groups face to face sessions are provided as part of the annual safeguarding training programme. Alternative options for updates are provided via eLearning through NHS eLearning portal or via a Training booklet. Bespoke sessions may also be delivered in response to identified departmental need however this is dependent on resources within the safeguarding team.
 - Level 3: A full day of face to face training is provided as part of the monthly safeguarding training programme. Further Level three training opportunities will be circulated as they arise; this will include learning from Serious Case Reviews.
- 5.4.3 Cascade learning outcomes and recommendations from Serious Case Reviews/Domestic Homicide Reviews and Individual Management Reviews (IMR's).
- 5.4.4 Identify and address own learning needs and ensure their own compliance with the Intercollegiate competences.
- 5.4.5 Named professionals will provide Safeguarding Supervision (on completion of recognised safeguarding supervision course) and receive Safeguarding Supervision from the Designated Nurse at the CCG at least every quarter. Further guidance is provided within the Safeguarding Supervision policy.

5.4.6 The Safeguarding team will ensure that all training packages are reviewed regularly and are ratified by the Designated Nurse to ensure that it meets the requirements as set out in the Intercollegiate document (2014).

5.4.7 Receive and monitor training compliance in accordance with any key performance indicator; escalate non-compliance to the relevant managers/leads.

5.5 **Training & Development Department**

5.5.1 Facilitate e-Learning and provide the Safeguarding Team with compliance figures of all training and supervision.

5.5.1 Monitor and update staff records on completion of e-learning.

5.5.2 Monitor and provide compliance figures of supervision.

5.5.3 Co-ordinate staff bookings for training and provide register for safeguarding team

5.6 **All Staff**

5.6.1 Attend Corporate Induction on their first day of employment or within six weeks of commencing employment.

5.6.2 Attend further safeguarding training as identified within the Intercollegiate Guidance Safeguarding Children and Young People: Roles & Competencies for Health Care Staff 2014 and its successor documents.

5.6.3 To be responsible for identifying additional learning needs and ensure that they remain active on any professional register

6. **Training provision**

6.1 **Level 1**

6.1.1 All staff working in health care settings require Level 1 training; this is initially delivered within Corporate induction. Corporate Induction should be attended on the first day of employment or as soon as possible after. This is in accordance with trust policy. (Appendix 1)

6.1.2 Level 1 training is delivered within the trusts corporate induction programme for all new employees and those transferring jobs within the trust; in addition staff requiring an update can also attend these sessions; updates are required at a minimum every three years.

6.1.3 Bespoke face to face sessions can be arranged in response to a specific departmental request when updates due. Updates are additionally available through e-learning or by means of the Level one leaflet; this is circulated to all staff requiring an update; the most recent version will be available on the Intranet

6.1.4 Level 1 training has been developed for all non-clinical staff working in health care settings and as an introduction to safeguarding children for all clinical staff.

- 6.1.5 Non-clinical staff who do not require additional levels of training must ensure that Level 1 competencies are reviewed annually as part of their appraisal; it is required that training is updated every three years.
- 6.1.6 Level 1 training will be reviewed in line with the Royal College of Paediatrics and Child Health Intercollegiate Document (2014) and the Intercollegiate Role framework for Looked after children (2015) and subsequent updates to ensure required competences are incorporated into the training.
- 6.1.7 Compliance with Level 1 training will be recorded by the Training and Development Department; compliance will be monitored by their Line Manager and overseen by the safeguarding team..
- 6.2 **Level 2**
- 6.2.1 Level two training is required for all non-clinical and clinical staff who have any contact with children, young people and/or parents and carers.
- 6.2.2 Level two training will meet safeguarding competencies as outlined in the Royal College of Paediatrics and Child Health Intercollegiate Document (2014).
- 6.2.3 Level two training competencies are set within the Intercollegiate document and are included as Appendix 3.
- 6.2.4 Level 2 training will be delivered across Mid Essex Hospital Services NHS Trust initially as a face to face training session or via an e-learning facility. Updates can be accessed via face to face sessions/eLearning or booklet. Level 2 training can also be delivered in response to identified departmental need.
- 6.2.5 The course may be accessed through the NHS E-learning desktop shortcut. The password for this is given on employment; support with passwords can be accessed through the Warner library.
- 6.2.6 All new employees who meet the criteria for level two training should access training as soon as possible after commencement of employment unless they can provide evidence of attending training within the previous three years which meets the requirements within the Intercollegiate document.
- 6.2.7 Once completed level two training should be repeated every three years in accordance with statutory guidance. Level two training supersedes that of level one and therefore once an employee has completed level two, further attendance at level one is no longer required.
- 6.2.8 A record of attendance will be kept by MEHT Training and Development Department; departmental reports are circulated which provide information on compliance. A certificate of attendance will be issued for all mandatory training sessions on request.
- 6.2.9 Online training at level two can be undertaken in work or at home (if preferable to the candidate)
- 6.2.10 Level two training must be repeated every three years. Within a three year period staff must have undertaken 4 hours of training. This may include training, education and learning opportunities that focus on multi-disciplinary scenario based

discussion/ case studies, and/or lessons from research or audit. Examples of this may include attendance at:

- Domestic Abuse training.
- Learning from Serious Case Reviews.
- Learning from Serious Incidents (SI's).
- Link/Nurse meetings.
- Annual conferences.
- Action Learning.
- Complex Case Review.
- Safeguarding supervision

6.2.11 Written information will accompany this training and a certificate of attendance made available on request.

6.2.12 The Southend, Essex and Thurrock (SET) Child Protection Procedures (2015) will also be available via the Mid Essex Hospital Services NHS Trust Intranet/Website <http://meht-intranet/clinical-pages/child-protection>

6.3 Level 3

6.3.1 Level three training is for all 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.

6.3.2 Health staff attending this training **must have already completed** level two safeguarding training. Once level three is completed this supersedes that of level two and therefore once an employee has completed level three, attendance at level two is no longer required.

6.3.3 Level three training competencies are included within Appendix 3.

6.3.4 Level three training should be attended every three years. Core training should be equivalent to 7-8 hours training with an additional 8 hours for the remaining 2 years. This must include education and learning opportunities that are appropriate to the role and speciality of the individual. Examples of this may include:

- Peer reviews/discussions.
- Clinical audit.
- Review of significant events or serious incidents (SI's).
- External conferences.
- Learning from Serious Case Reviews.
- Complex Case Reviews.
- Specialist training.
- Domestic abuse training/learning from domestic homicide reviews.
- Common Assessment Framework training.
- Looked after Children training.

6.3.5 Named Safeguarding professionals will circulate details of training events to all staff via internal communication systems, link nurses and display on the Safeguarding Children webpage <http://meht-intranet/clinical-pages/child-protection/> .

6.3.6 Attendance should be discussed with and written approval given by the individuals Line Manager.

7. Named professionals Training-Level 4

7.1 Level four training is for named/specialist safeguarding professionals including named doctors, named nurses, named health visitors, named midwives, named health professionals in ambulance organisations and named GPs for Primary Care Organisations.

7.2 Level four training will usually be sourced externally to the trust. Agreement to attend level four training will be sought from the Chief Nurse as Executive Lead for Safeguarding.

7.3 Named professionals should, attend 24 hours of education, training and learning over every three-year period. This should include non-clinical knowledge acquisition such as management, appraisal, and supervision training. Action learning sets facilitated by the Designated Nurse will be considered as level four learning.

8. Values Underpinning Training and Development

8.1 These values will reflect those of the Common Core:

- Promote Equality
- Respect Diversity and Challenge Stereotypes
- Helping and Improving the Life Chances of all children and young people

8.2 In addition to the above principles the Strategy will endeavour to create an ethos which values:

- Working collaboratively
- Is child centred
- Promotes the participation of children and families
- Shares and builds on experiences

8.3 Effective Safeguarding depends not only on reliable and accepted procedure for all staff involved with children, but also on their skills, knowledge and ability to work together collaboratively. This Strategy provides a pathway for MEHT staff which links training with roles, responsibilities, performance expectation and level of experience. It is for line managers to discuss the appropriate level of training required for their staff with the safeguarding team to ensure that all staff achieve the required level of competence for their role; this is supported by the mapping against roles agreed within the Mandatory Training policy.

8.4 Additional Training is available via Local Safeguarding Children's Board (LSCB). It is essential that all staff and managers ensure that their staffs are released to attend training sessions to meet their department's individual needs.

8.5 For many Practitioners involved in day-to-day work with children and families, effective supervision is important to promote good standards of practice and to supporting individual staff members. Supervision should help to ensure that practice is soundly based and consistent with local and national guidance.

9. Safeguarding supervision

- 9.1 Safeguarding Supervision supports reflective practice; further guidance on Safeguarding supervision can be found in the Safeguarding supervision policy.
- 9.2 Safeguarding Supervision is mandatory for all health care practitioners i.e. Midwives, Nurses, Medical Staff who work with children and their families.

10. Audit & Monitoring

- 10.1 The Safeguarding team will monitor compliance percentages for all levels of safeguarding training and provide this information to any external monitoring organisation as agreed.
- 10.2 The Safeguarding team will escalate non-compliance to departmental managers and provide a report to the Safeguarding Group/Clinical Governance group as required. If the Key performance indicator is not achieved this will be included on the risk assurance framework; an action plan and trajectory will be developed in support.
- 10.3 Training will be evaluated and relevant adjustments will be made within the framework of the Intercollegiate document.
- 10.4 A Datix will be completed when there is a perceived risk in relation to training provision or compliance.
- 10.5 An audit of the impact of safeguarding training will be undertaken in accordance to the Safeguarding audit timetable.

11. Communication & Implementation

- 11.1 It is the responsibility of each directorate to make sure that where manual copies of the documents are kept and relied upon that these are always up to date and that old versions are routinely removed.
- 11.2 The policy will be accessible on the intranet & trust website
- 11.3 The policy will be disseminated by the Safeguarding Team through:
 - Safeguarding Management group
 - Associate Chief Nurse meeting
 - Nursing and Midwifery Executives group
 - Lead Nurse and Ward sisters meetings
 - Link Practitioners group

12. Equality & Diversity

- 12.1 Mid Essex Hospital Services NHS Trust (MEHT) is committed to the provision of a service that is fair, accessible and meets the need of all individuals.

12.2 Equality Impact assessment included as Appendix 4

13. Bibliography & References

- Looked after children: Knowledge, skills and competence of health care staff: Intercollegiate role framework (2015) www.rcpch.ac.uk
- Working Together to Safeguard Children (2015) <http://www.workingtogetheronline.co.uk/index.html>
- Safeguarding Children and Young People: Roles and Competences for Health Care Staff Intercollegiate Document (2014)
- Lord Laming (2009), The Protection of Children in England: The Progress Report, TSO
- Common Core of Skills and Knowledge for the Children's Workforce (DFES 2005)
- Children Act 1989/2004 <http://www.legislation.gov.uk/ukpga/2004/31/contents>
- National Service Framework for Children and Young People and Maternity Services (2004) www.dh.gov.uk
- Essex Children's Safeguarding Board www.escb.org.uk
- Local trust policies

Appendix 1: Roles and Competencies for Health Care Staff -Intercollegiate Document September 2014.



Safeguarding
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Appendix 2: Looked after children, Knowledge, Skills and Competences of Healthcare staff: Intercollegiate framework, 2015



Looked After
Children 2015.pdf

Appendix 3

Level 1: All staff including non-clinical managers and staff working in health care settings

Staff groups

This includes, for example, Board level Executives and non-executives, lay members, receptionists, administrative, caterers, domestics, transport, porters, community pharmacist counter staff and maintenance staff, including those non clinical staff working for independent contractors within the NHS such as GPs, optometrists, contact lens and dispensing opticians, dentists and pharmacists, as well as volunteers across health care settings and service provision.

Core competences

Competence at this level is about individuals knowing what to look for which may indicate possible harm and knowing who to contact and seek advice from if they have concerns. It comprises of:

- Recognising potential indicators of child maltreatment – physical abuse including fabricated and induced illness, emotional abuse, sexual abuse, and 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 relevant legislation (Children Acts 1989, 2004 and of Sexual Offences Act 2003)
- Taking appropriate action if they have concerns, including appropriately reporting concerns safely and seeking advice

Competences should be reviewed annually as part of staff appraisal in conjunction with individual learning and development plan.

Knowledge, skills, attitudes and values

This is the minimum entry level for all staff working in health care settings

All staff at Level 1 should be able to demonstrate the following:

Knowledge

- Know about child maltreatment in its different forms (physical including Fabricated and induced illness, emotional and sexual abuse, and neglect) including child trafficking, FGM and radicalisation including prevalence and impact
- Know about relevance of parental, family and carer factors such as domestic abuse, mental and physical ill-health, substance and alcohol misuse
- Know what to do if there are concerns about child maltreatment, including local policies and procedures around who to contact, where to obtain further advice and support, and have awareness of the referral process
- Know about the importance of sharing information (including the consequences of failing to do so)
- Know what to do if they feel that their concerns are not being taken seriously or they experience any other barriers to referring a child/family
- Know the risks associated with the internet and online social networking
- Know what the term 'Looked after child' means

Skills

- Able to recognise possible signs of child maltreatment as this relates to their role
- Able to seek appropriate advice and report concerns, and feel confident that they have been listened to

Attitudes and values

- Willingness to listen to children and young people and to act on issues and concerns

Criteria for assessment

- Demonstrates an awareness and understanding of child maltreatment
- Demonstrates an understanding of appropriate referral mechanisms and information sharing i.e. Knows who to contact, where to access advice and how to report

Level 2: All non-clinical and clinical staff who have any contact with children, young people and/or parents/carers

Staff groups

This includes administrators for looked after children and safeguarding teams, health care students, clinical laboratory staff, phlebotomists, pharmacists, ambulance staff, orthodontists, dentists, dental care professionals, audiologists, optometrists, contact lens and dispensing opticians, adult physicians, surgeons, anaesthetists, radiologists, nurses working in adult acute/community services (including practice nurses), allied health care practitioners and all other adult orientated secondary care health care professionals, including technicians.

Those with a mixed caseload (adults and children) should be able to demonstrate a minimum of level 2 and be working towards attainment of level 3 core knowledge, skill and competence

Core competences

- As outlined for Level 1
- Uses professional and clinical knowledge, and 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, and professional boundaries, including professional abuse and raising concerns about conduct of colleagues
- As appropriate to role, able to refer to social care if a safeguarding/child protection concern is identified (aware of how to refer even if role does not encompass referrals)
- Documents safeguarding/child protection concerns in order to be able to inform the relevant staff and agencies as necessary, maintains appropriate record keeping, and differentiates between fact and opinion
- Shares appropriate and relevant information with other teams
- Acts in accordance with key statutory and non-statutory guidance and legislation including the UN Convention on the Rights of the Child and Human Rights Act

Competences should be reviewed annually as part of staff appraisal in conjunction with individual learning and development plan.

Knowledge, skills, attitudes and values

All staff at Level 2 should have the knowledge, skills, attitudes and values outlined for Level 1 and should be able to demonstrate the following:

Knowledge

- Awareness of the normal development of children and young people and the ways in which abuse and neglect may impact on this, including the short and long term impact of domestic violence on the child's behaviour and mental health, as well as maternal mental and physical health. Speech, language and communication needs could be an indication of abuse, particularly neglect.
- Understand the public health significance of child maltreatment including epidemiology and financial impact
- Understand that certain factors may be associated with child maltreatment, such as child disability and preterm birth, and living with parental mental health problems, other long-term chronic conditions, drug and alcohol abuse, and domestic violence
- Understand the increased needs of Looked After Children, youth offenders and increased risk of further maltreatment
- Awareness of the legal, professional, and ethical responsibilities around information sharing, including the use of directories and assessment frameworks
- Know best practice in documentation, record keeping, and understand data protection issues in relation to information sharing for safeguarding purposes
- Understand the purpose and guidance around conducting serious case reviews/case management reviews/significant case reviews, individual management reviews/individual agency reviews/internal management reviews, and child death review processes
- Understand the paramount importance of the child or young person's best interests as reflected in legislation and key statutory and non-statutory guidance (including the UN Convention on the Rights of the Child and the Human Rights Act)

Skills

- Able to document safeguarding/child protection concerns, and maintain appropriate record keeping, differentiating between fact and opinion

- Able to share appropriate and relevant information between teams – in writing, by telephone, electronically, and in person
- Able to identify where further support is needed, when to take action, and when to refer to managers, supervisors or other relevant professionals, including referral to social services

Attitudes and values

- Recognises how own beliefs, experience and attitudes might influence professional involvement in safeguarding work

Criteria for assessment

- 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

Level 3: All 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

Staff groups

This includes GPs, forensic physicians, forensic nurses, paramedics, urgent and unscheduled care staff, all mental health staff (adult and CAMHS), child psychologists, child psychotherapists, adult learning disability staff, learning disability nurses, specialist nurses for safeguarding, looked after children's nurses, health professionals working in substance misuse services, youth offending team staff, paediatric allied health professionals, sexual health staff, school nurses, health visitors, all children's nurses, midwives, obstetricians, all paediatricians, paediatric radiologists, paediatric surgeons, lead anaesthetists for safeguarding I and child protection paediatric intensivists, paediatric orthodontists and dentists with a lead role in child protection.

Team work underpins safeguarding children and young people – for example some professional groups may refer to others to undertake a full assessment

Those with a mixed caseload (adults and children) should be able to demonstrate a minimum of level 2 and be working towards attainment of level 3 core knowledge, skill and competence.

The Royal College of Anaesthetists/Association of Paediatric Anaesthetists recommends there should be a minimum of one paediatric anaesthetist with level 3 core competence in all DGH's and Tertiary centres. The precise number of Paediatric Anaesthetists requiring level 3 core competence should be determined locally based on an assessment of need and risk. Regardless of the number of Anaesthetists possessing level 3 core competence at local level it is recommended that a lead Anaesthetist for safeguarding and child protection is identified as outlined by role description (see the following websites RCoA www.rcoa.ac.uk ,APA www.apagbi.org.uk)

Core competences

- As outlined for Level 1 and 2

- Draws on child and family-focused clinical and professional knowledge and 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 and 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)
- Contributes to serious case reviews/case management reviews/significant case reviews (including the child practice review process in Wales), internal partnership and local forms of review, as well as child death review processes
- Works with other professionals and agencies, with children, young people and their families when there are safeguarding concerns

Additional specialist competences as appropriate to role for paediatricians, paediatric intensivists, dentists with a lead role in child protection, Forensic Physicians, lead anaesthetist for safeguarding and child protection, all child and adolescent psychiatrists and other child and adolescent mental health practitioners, child psychologists, child psychotherapists, GPs, forensic nurses, children’s nurses, school nurses, child and adolescent mental health nurses, children’s learning disability nurses, specialist nurses for safeguarding and looked after children, midwives and health visitors

- 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 (including the child practice review process in Wales) to improve practice
- Advises others on appropriate information sharing
- Where role includes conducting detailed assessments of child abuse and neglect, demonstrates ability to assess and examine children for suspected abuse and neglect, document and provide reports with an opinion.

Knowledge, skills, attitudes and values

Level 3 professionals should have knowledge, skills and attitudes as outlined for Levels 1 and 2, and should be able to demonstrate the following:

Paediatricians

Knowledge

- Aware of the implications of legislation, inter-agency policy and national guidance
- Understand the importance of children’s rights in the safeguarding/child protection context, and related legislation
- Understand information sharing, confidentiality, and consent related to children and young people
- Aware of the role and remit of the LSCB/the Safeguarding Board for Northern Ireland and the safeguarding panel of the health and social care trust/child protection committee
- Understand inter-agency frameworks and child protection assessment processes, including the use of relevant assessment frameworks
- Understand the processes and legislation for Looked After Children including after-care services

- Have core knowledge (as appropriate to one's role) of court and criminal justice systems, the role of different courts, the burden of proof, and the role of a professional witness in the stages of the court process

Clinical knowledge

- Understand what constitutes, as appropriate to role, forensic procedures and practice required in child maltreatment, and how these relate to clinical, and legal requirements
- Understand the assessment of risk and harm
- Understand the effects of parental behaviour on children and young people, and the interagency response required
- Know the issues surrounding misdiagnosis in safeguarding/child protection and the effective management of diagnostic uncertainty and risk
- Have an understanding of Fabricated or Induced Illness (FII)
- Know when to liaise with expert colleagues about the assessment and management of children and young people where there are concerns about maltreatment
- Understand the needs and legal position of young people, particularly 16-18 year olds, and the transition between children's and adult legal frameworks and service provision
- Know how to share information appropriately, taking into consideration confidentiality and data-protection issues
- Understand the impact of a family's cultural and religious background when assessing risk to a child or young person, and managing concerns
- Know about models of effective clinical supervision and peer support
- Understand processes for identifying whether a child or young person is known to professionals in Children's Social Care and other agencies
- Aware of resources and services that may be available within Health and other agencies, including the voluntary sector, to support families
- Know what to do when there is an insufficient response from organisations or agencies
- Know the long-term effects of maltreatment and how these can be detected and prevented
- Know the range and efficacy of interventions for child maltreatment
- Understand procedures for proactively following up children and young people who miss outpatient appointments or parents under the care of adult mental health services who miss outpatient appointments
- Have an understanding of the management of the death of a child or young person in the safeguarding context (including where appropriate structures and processes such as rapid response teams and Child Death Overview panels)
- Understand and contribute to processes for auditing the effectiveness and quality of services for safeguarding/child protection, including audits against national guidelines
- Understand relevant national and international policies and the implications for practice
- Understand how to manage allegations of child abuse by professionals

Skills

- Able to contribute to, and make considered judgements about how to act to safeguard/protect a child or young person
- Able to assess, examine and manage children where there are child protection concerns appropriate to the level of training.
- Paediatricians undertaking forensic sexual assault assessments in children and young people must be trained and competent as set out in Guidelines for Paediatric Forensic examinations in relation to possible child sexual abuse (FFLM and RCPCH 2012)

- Able to work with children, young people and families where there are child protection concerns as part of the multi-disciplinary team and with other disciplines, such as adult mental health, when assessing a child or young person
- Able to present safeguarding/child protection concerns verbally and in writing for professional and legal purposes as required (and as appropriate to role, including case conferences, court proceedings, core groups, strategy meetings, family group conferences, and for children, young people and families)
- Able to contribute to, and make considered judgements about how to act to safeguard/protect a child or young person
- Able to work with children, young people and families where there are child protection concerns as part of the multi-disciplinary team and with other disciplines, such as adult mental health, when assessing a child or young person
- Able to communicate effectively with children and young people, ensuring that they have the opportunity to participate in decisions affecting them as appropriate to their age and ability
- Able to give effective feedback to colleagues
- Able to identify (as appropriate to specialty) associated medical conditions, mental health problems and other co-morbidities in children or young people which may increase the risk of maltreatment, and able to take appropriate action
- Able to challenge other professionals when required and provide supporting evidence
- Able to provide clinical support and supervision to junior colleagues and peers
- Able to contribute to inter-agency assessments and to undertake an assessment of risk when required
- Able to identify and outline the management of children and young people in need
- Able to act proactively to reduce the risk of child/young person maltreatment occurring
- Able to contribute to and make considered decisions on whether concerns can be addressed by providing or signposting to sources of information or advice
- Able to participate and chair multi-disciplinary meetings as required
- Able to apply lessons from serious case reviews/case management reviews/significant case reviews
- Able to contribute to risk assessments
- Able to write chronologies and reviews that summarise and interpret information about individual children and young people from a range of sources
- Able to contribute to a management plan for FII
- Able to contribute to/formulate and communicate effective management plans for children and young people who have been maltreated
- Able to assess as appropriate to the role the impact of parental issues on children, young people, and the family, including mental health, learning difficulties, substance misuse, and domestic abuse
- Able to complete the audit cycle and/or research related to safeguarding/child protection as part of appropriate clinical governance and quality assurance processes
- Able to obtain support and help in situations where there are problems requiring further expertise and experience
- Understand forensic procedures and practice required in child maltreatment, and how these relate to clinical and legal requirements
- Understands the importance of and how to ensure 'the chain of evidence'

Attitudes and values

- Understands the importance and benefits of working in an environment that supports professionals
- Understands the potential personal impact of safeguarding/child protection work on professionals
- Recognises when additional support is needed in managing presentations of suspected child maltreatment, including support with all legal and court activities (such as writing statements,

preparing for attending court) and the need to debrief in relation to a case or other experience ·

Recognises the impact of a family's cultural and religious background when assessing risk to a child or young person, and managing concerns

- Recognises ethical considerations in assessing and managing children and young people

Competence should be reviewed annually as part of staff appraisal in conjunction with individual learning and development plan.

Children's nurse / Midwife

Knowledge

- Aware of the implications of legislation, inter-agency policy and national guidance
- Understand the importance of children's rights in the safeguarding/child protection context, and related legislation
- Understand information sharing, confidentiality, and consent related to children and young people
- Aware of the role and remit of the LSCB/the Safeguarding Board for Northern Ireland and the safeguarding panel of the health and social care trust/child protection committee
- Understand inter-agency frameworks and child protection assessment processes, including the use of relevant assessment frameworks
- Understand the processes and legislation for Looked After Children including after-care services
- Have core knowledge (as appropriate to one's role) of court and criminal justice systems, the role of different courts, the burden of proof, and the role of a professional witness in the stages of the court process

Clinical knowledge

- Understand what constitutes, as appropriate to role, forensic procedures and practice required in child maltreatment, and how these relate to clinical and legal requirements
- Understand the assessment of risk and harm
- Understand the effects of parental behaviour on children and young people, and the interagency response
- Know the issues surrounding misdiagnosis in safeguarding/child protection and the effective management of diagnostic uncertainty and risk
- Have an understanding of Fabricated or Induced Illness (FII)
- Know when to liaise with expert colleagues about the assessment and management of children and young people where there are concerns about maltreatment
- Understand the needs and legal position of young people, particularly 16-18 year olds, and the transition between children's and adult legal frameworks and service provision
- Know how to share information appropriately, taking into consideration confidentiality and data-protection issues
- Understand the impact of a family's cultural and religious background when assessing risk to a child or young person, and managing concerns
- Know about models of effective clinical supervision and peer support
- Understand processes for identifying whether a child or young person is known to professionals in Children's Social Care and other agencies
- Aware of resources and services that may be available within Health and other agencies, including the voluntary sector, to support families
- Know what to do when there is an insufficient response from organisations or agencies
- Know the long-term effects of maltreatment and how these can be detected and prevented

- Know the range and efficacy of interventions for child maltreatment
- Understand procedures for proactively following up children and young people who miss outpatient appointments or parents under the care of adult mental health services who miss outpatient appointments
- Have an understanding of the management of the death of a child or young person in the safeguarding context (including where appropriate structures and processes such as rapid response teams and Child Death Overview panels)
- Understand and contribute to processes for auditing the effectiveness and quality of services for safeguarding/child protection, including audits against national guidelines
- Understand relevant national and international policies and the implications for practice
- Understand how to manage allegations of child abuse by professionals

Skills

- Able to contribute to, and make considered judgements about how to act to safeguard/protect a child or young person
- Able to work with children, young people and families where there are child protection concerns as part of the multi-disciplinary team and with other disciplines, such as adult mental health, when assessing a child or young person
- Able to present safeguarding/child protection concerns verbally and in writing for professional and legal purposes as required (and as appropriate to role, including case conferences, court proceedings, core groups, strategy meetings, family group conferences, and for children, young people and families)
- Able to contribute to, and make considered judgements about how to act to safeguard/protect a child or young person
- Able to work with children, young people and families where there are child protection concerns as part of the multi-disciplinary team and with other disciplines, such as adult mental health, when assessing a child or young person
- Able to communicate effectively with children and young people, ensuring that they have the opportunity to participate in decisions affecting them as appropriate to their age and ability
- Able to give effective feedback to colleagues
- Able to identify (as appropriate to specialty) associated medical conditions, mental health problems and other co-morbidities in children or young people which may increase the risk of maltreatment, and able to take appropriate action
- Able to challenge other professionals when required and provide supporting evidence
- Able to provide clinical support and supervision to junior colleagues and peers
- Able to contribute to inter-agency assessments and to undertake an assessment of risk when required
- Able to identify and outline the management of children and young people in need
- Able to act proactively to reduce the risk of child/young person maltreatment occurring
- Able to contribute to and make considered decisions on whether concerns can be addressed by providing or signposting to sources of information or advice
- Able to participate and chair multi-disciplinary meetings as required
- Able to apply lessons from serious case reviews/case management reviews/significant case reviews
- Able to contribute to risk assessments
- Able to write chronologies and reviews that summarise and interpret information about individual children and young people from a range of sources
- Able to contribute to a management plan for FII

- Able to contribute to/formulate and communicate effective management plans for children and young people who have been maltreated
- Able to assess as appropriate to the role the impact of parental issues on children, young people, and the family, including mental health, learning difficulties, substance misuse, and domestic abuse
- Able to complete the audit cycle and/or research related to safeguarding/child protection as part of appropriate clinical governance and quality assurance processes
- Able to obtain support and help in situations where there are problems requiring further expertise and experience

Attitudes and values

- Understands the importance and benefits of working in an environment that supports professionals
- Understands the potential personal impact of safeguarding/child protection work on professionals
- Recognises when additional support is needed in managing presentations of suspected child maltreatment, including support with all legal and court activities (such as writing statements, preparing for attending court) and the need to debrief in relation to a case or other experience
- Recognises the impact of a family's cultural and religious background when assessing risk to a child or young person, and managing concerns
- Recognises ethical considerations in assessing and managing children and young people

Competence should be reviewed annually as part of staff appraisal in conjunction with individual learning and development plan.

Paediatric surgeons

Knowledge

- Aware of the implications of legislation, inter-agency policy and national guidance
- Understand the importance of children's rights in the safeguarding/child protection context, and related legislation
- Understand information sharing, confidentiality, and consent related to children and young people
- Aware of the role and remit of the LSCB/the Safeguarding Board for Northern Ireland and the safeguarding panel of the health and social care trust/child protection committee
- Understand inter-agency frameworks and child protection assessment processes, including the use of relevant assessment frameworks
- Understand the processes and legislation for Looked After Children including after-care services

Clinical knowledge

- Understand what constitutes, as appropriate to role, forensic procedures and practice required in child maltreatment, and how these relate to clinical and legal requirements
- Understand the assessment of risk and harm
- Understand the effects of parental behaviour on children and young people, and the interagency response
- Know the issues surrounding misdiagnosis in safeguarding/child protection and the effective management of diagnostic uncertainty and risk
- Have an understanding of Fabricated or Induced Illness (FII)
- Know when to liaise with expert colleagues about the assessment and management of children and young people where there are concerns about maltreatment
- Understand the needs and legal position of young people, particularly 16-18 year olds and the transition between children's and adult legal frameworks and service provision

- Know how to share information appropriately, taking into consideration confidentiality and data-protection issues
- Understand the impact of a family's cultural and religious background when assessing risk to a child or young person, and managing concerns
- Know about models of effective clinical supervision and peer support
- Understand procedures for proactively following up children and young people who miss outpatient appointments or parents under the care of adult mental health services who miss outpatient appointments
- Aware of resources and services that may be available within Health and other agencies, including the voluntary sector, to support families
- Know what to do when there is an insufficient response from organisations or agencies
- Have an understanding of the management of the death of a child or young person in the safeguarding context (including where appropriate structures and processes such as rapid response teams and Child Death Overview panels)
- Understand processes for identifying whether a child or young person is known to professionals in Children's Social Care and other agencies

Skills

- Able to contribute to, and make considered judgements about how to act to safeguard/protect a child or young person
- Able to work with children, young people and families where there are child protection concerns as part of the multi-disciplinary team and with other disciplines, such as adult mental health, when assessing a child or young person
- Able to present safeguarding/child protection concerns verbally and in writing for professional and legal purposes as required (and as appropriate to role, including case conferences, court proceedings, core groups, strategy meetings, family group conferences, and for children, young people and families)
- Able to contribute to, and make considered judgements about how to act to safeguard/protect a child or young person
- Able to work with children, young people and families where there are child protection concerns as part of the multi-disciplinary team and with other disciplines, such as adult mental health, when assessing a child or young person
- Able to communicate effectively with children and young people, ensuring that they have the opportunity to participate in decisions affecting them as appropriate to their age and ability
- Able to give effective feedback to colleagues
- Able to identify (as appropriate to specialty) associated medical conditions, mental health problems and other co-morbidities in children or young people which may increase the risk of maltreatment, and able to take appropriate action
- Able to challenge other professionals when required and provide supporting evidence
- Able to provide clinical support and supervision to junior colleagues and peers
- Understands the importance of and how to ensure 'the chain of evidence'

Attitudes and values

- Understands the importance and benefits of working in an environment that supports professionals
- Understands the potential personal impact of safeguarding/child protection work on professionals

- Recognises when additional support is needed in managing presentations of suspected child maltreatment, including support with all legal and court activities (such as writing statements, preparing for attending court) and the need to debrief in relation to a case or other experience

Competence should be reviewed annually as part of staff appraisal in conjunction with individual learning and development plan.

Lead anaesthetist for safeguarding/child protection

Knowledge

- Aware of the implications of legislation, inter-agency policy and national guidance
- Understand the importance of children's rights in the safeguarding/child protection context, and related legislation
- Understand information sharing, confidentiality, and consent related to children and young people
- Aware of the role and remit of the LSCB/the Safeguarding Board for Northern Ireland and the safeguarding panel of the health and social care trust/child protection committee
- Understand inter-agency frameworks and child protection assessment processes, including the use of relevant assessment frameworks
- Understand the processes and legislation for Looked After Children including after-care services

Clinical knowledge

- Understand what constitutes, as appropriate to role, forensic procedures and practice required in child maltreatment, and how these relate to clinical and legal requirements
- Understand assessment of risk and harm
- Understand the effects of parental behaviour on children and young people, and the inter agency response
- Know the issues surrounding misdiagnosis in safeguarding/child protection and the effective management of diagnostic uncertainty and risk
- Have an understanding of Fabricated or Induced Illness (FII)
- Know when to liaise with expert colleagues about the assessment and management of children and young people where there are concerns about maltreatment
- Understand the needs and legal position of young people, particularly 16-18 year old and the transition between children's and adult legal frameworks and service provision
- Know how to share information appropriately, taking into consideration confidentiality and data-protection issues
- Understand the impact of a family's cultural and religious background when assessing risk to a child or young person, and managing concerns
- Know about models of effective clinical supervision and peer support
- Understand processes for identifying whether a child or young person is known to professionals in Children's Social Care and other agencies
- Have an understanding of the management of the death of a child or young person in the safeguarding context (including where appropriate structures and processes such as rapid response teams and Child Death Overview panels)

Skills

- Able to contribute to, and make considered judgements about how to act to safeguard/protect a child or young person

- Able to work with children, young people and families where there are child protection concerns as part of the multi-disciplinary team and with other disciplines, such as adult mental health, when assessing a child or young person
- Able to present safeguarding/child protection concerns verbally and in writing for professional and legal purposes as required (and as appropriate to role, including case conferences, court proceedings, core groups, strategy meetings, family group conferences, and for children, young people and families)
- Able to contribute to, and make considered judgements about how to act to safeguard/protect a child or young person
- Able to work with children, young people and families where there are child protection concerns as part of the multi-disciplinary team and with other disciplines, such as adult mental health, when assessing a child or young person
- Able to communicate effectively with children and young people, ensuring that they have the opportunity to participate in decisions affecting them as appropriate to their age and ability
- Able to give effective feedback to colleagues
- Able to identify (as appropriate to specialty) associated medical conditions, mental health problems and other co-morbidities in children or young people which may increase the risk of maltreatment, and able to take appropriate action
- Able to challenge other professionals when required and provide supporting evidence
- Able to provide clinical support and supervision to junior colleagues and peers

Attitudes and values

- Understands the importance and benefits of working in an environment that supports professionals
- Understands the potential personal impact of safeguarding/child protection work on professionals
- Recognises when additional support is needed in managing presentations of suspected child maltreatment, including support with all legal and court activities (such as writing statements, preparing for attending court) and the need to debrief in relation to a case or other experience
- Competence should be reviewed annually as part of staff appraisal in conjunction with individual learning and development plan.

Paediatric allied health professionals

Knowledge

- Aware of the implications of legislation, inter-agency policy and national guidance
- Understand the importance of children's rights in the safeguarding/child protection context, and related legislation
- Understand information sharing, confidentiality, and consent related to children and young people
- Aware of the role and remit of the LSCB/the Safeguarding Board for Northern Ireland and the safeguarding panel of the health and social care trust/child protection committee
- Understand inter-agency frameworks and child protection assessment processes, including the use of relevant assessment frameworks
- Understand the processes and legislation for Looked After Children including after-care services

Clinical knowledge

- Understand what constitutes, as appropriate to role, forensic procedures and practice required in child maltreatment, and how these relate to clinical and legal requirements
- Understand the assessment of risk and harm
- Understand the effects of parental behaviour on children and young people, and the interagency response

- Know the issues surrounding misdiagnosis in safeguarding/child protection and the effective management of diagnostic uncertainty and risk
- Have an understanding of Fabricated or Induced Illness (FII)
- Know when to liaise with expert colleagues about the assessment and management of children and young people where there are concerns about maltreatment
- Understand the needs and legal position of young people, particularly 16-18 year olds and the transition between children's and adult legal frameworks and service provision
- Know how to share information appropriately, taking into consideration confidentiality and data-protection issues
- Understand the impact of a family's cultural and religious background when assessing risk to a child or young person, and managing concerns
- Know about models of effective clinical supervision and peer support
- Understand procedures for proactively following up children and young people who miss outpatient appointments or parents under the care of adult mental health services who miss outpatient appointments

Skills

- Able to contribute to, and make considered judgements about how to act to safeguard/protect a child or young person
- Able to work with children, young people and families where there are child protection concerns as part of the multi-disciplinary team and with other disciplines, such as adult mental health, when assessing a child or young person
- Able to present safeguarding/child protection concerns verbally and in writing for professional and legal purposes as required (and as appropriate to role, including case conferences, court proceedings, core groups, strategy meetings, family group conferences, and for children, young people and families)
- Able to contribute to, and make considered judgements about how to act to safeguard/protect a child or young person
- Able to work with children, young people and families where there are child protection concerns as part of the multi-disciplinary team and with other disciplines, such as adult mental health, when assessing a child or young person
- Able to communicate effectively with children and young people, ensuring that they have the opportunity to participate in decisions affecting them as appropriate to their age and ability
- Able to give effective feedback to colleagues
- Able to identify (as appropriate to specialty) associated medical conditions, mental health problems and other co-morbidities in children or young people which may increase the risk of maltreatment, and able to take appropriate action
- Able to challenge other professionals when required and provide supporting evidence
- Able to provide clinical support and supervision to junior colleagues and peers

Attitudes and values

- Understands the importance and benefits of working in an environment that supports professionals
- Understands the potential personal impact of safeguarding/child protection work on professionals
- Recognises when additional support is needed in managing presentations of suspected child maltreatment, including support with all legal and court activities (such as writing statements, preparing for attending court) and the need to debrief in relation to a case or other experience

Competence should be reviewed annually as part of staff appraisal in conjunction with individual learning and development plan.

Child psychologists/child psychotherapists

Knowledge

- Aware of the implications of legislation, inter-agency policy and national guidance
- Understand the importance of children's rights in the safeguarding/child protection context, and related legislation
- Understand information sharing, confidentiality, and consent related to children and young people
- Aware of the role and remit of the LSCB/the Safeguarding Board for Northern Ireland and the safeguarding panel of the health and social care trust/child protection committee
- Understand inter-agency frameworks and child protection assessment processes, including the use of relevant assessment frameworks
- Understand the processes and legislation for Looked After Children including after-care services

Clinical knowledge

- Understand what constitutes, as appropriate to role, forensic procedures and practice required in child maltreatment, and how these relate to clinical and legal requirements
- Understand the assessment of risk and harm
- Understand the effects of parental behaviour on children and young people, and the interagency response
- Know the issues surrounding misdiagnosis in safeguarding/child protection and the effective management of diagnostic uncertainty and risk
- Have an understanding of Fabricated or Induced Illness (FII)
- Know when to liaise with expert colleagues about the assessment and management of children and young people where there are concerns about maltreatment
- Understand the needs and legal position of young people, particularly 16-18 year olds and the transition between children's and adult legal frameworks and service provision
- Know how to share information appropriately, taking into consideration confidentiality and data-protection issues
- Understand the impact of a family's cultural and religious background when assessing risk to a child or young person, and managing concerns
- Know about models of effective clinical supervision and peer support
- Understand processes for identifying whether a child or young person is known to professionals in Children's Social Care and other agencies
- Understand procedures for proactively following up children and young people who miss outpatient appointments or parents under the care of adult mental health services who miss outpatient appointments

Skills

- Able to contribute to, and make considered judgements about how to act to safeguard/protect a child or young person
- Able to work with children, young people and families where there are child protection concerns as part of the multi-disciplinary team and with other disciplines, such as adult mental health, when assessing a child or young person

- Able to present safeguarding/child protection concerns verbally and in writing for professional and legal purposes as required (and as appropriate to role, including case conferences, court proceedings, core groups, strategy meetings, family group conferences, and for children, young people and families)
- Able to contribute to, and make considered judgements about how to act to safeguard/protect a child or young person
- Able to work with children, young people and families where there are child protection concerns as part of the multi-disciplinary team and with other disciplines, such as adult mental health, when assessing a child or young person
- Able to communicate effectively with children and young people, ensuring that they have the opportunity to participate in decisions affecting them as appropriate to their age and ability
- Able to give effective feedback to colleagues
- Able to identify (as appropriate to specialty) associated medical conditions, mental health problems and other co-morbidities in children or young people which may increase the risk of maltreatment, and able to take appropriate action
- Able to challenge other professionals when required and provide supporting evidence
- Able to provide clinical support and supervision to junior colleagues and peers

Attitudes and values

- Understands the importance and benefits of working in an environment that supports professionals
- Understands the potential personal impact of safeguarding/child protection work on professionals
- Recognises when additional support is needed in managing presentations of suspected child maltreatment, including support with all legal and court activities (such as writing statements, preparing for attending court) and the need to debrief in relation to a case or other experience

Competence should be reviewed annually as part of staff appraisal in conjunction with individual learning and development plan.

Sexual health (medical and registered nursing staff)

Knowledge

- Aware of the implications of legislation, inter-agency policy and national guidance
- Understand the importance of children's rights in the safeguarding/child protection context, and related legislation
- Understand information sharing, confidentiality, and consent related to children and young people
- Aware of the role and remit of the LSCB/the Safeguarding Board for Northern Ireland and the safeguarding panel of the health and social care trust/child protection committee
- Understand inter-agency frameworks and child protection assessment processes, including the use of relevant assessment frameworks
- Understand the processes and legislation for Looked After Children including after-care services

Clinical knowledge

- Understand what constitutes, as appropriate to role, forensic procedures and practice required in child maltreatment, and how these relate to clinical and legal requirements
- Understand the assessment of risk and harm
- Understand the effects of parental behaviour on children and young people, and the interagency response
- Know the issues surrounding misdiagnosis in safeguarding/child protection and the effective management of diagnostic uncertainty and risk

- Have an understanding of Fabricated or Induced Illness (FII)
- Know when to liaise with expert colleagues about the assessment and management of children and young people where there are concerns about maltreatment
- Understand the needs and legal position of young people, particularly 16-18 year olds, and the transition between children's and adult legal frameworks and service provision
- Know how to share information appropriately, taking into consideration confidentiality and data-protection issues
- Understand the impact of a family's cultural and religious background when assessing risk to a child or young person, and managing concerns
- Know about models of effective clinical supervision and peer support
- Understand processes for identifying whether a child or young person is known to professionals in Children's Social Care and other agencies
- Understand procedures for proactively following up children and young people who miss outpatient appointments or parents under the care of adult mental health services who miss outpatient appointments

Skills

- Able to contribute to, and make considered judgements about how to act to safeguard/protect a child or young person
- Able to work with children, young people and families where there are child protection concerns as part of the multi-disciplinary team and with other disciplines, such as adult mental health, when assessing a child or young person
- Able to present safeguarding/child protection concerns verbally and in writing for professional and legal purposes as required (and as appropriate to role, including case conferences, court proceedings, core groups, strategy meetings, family group conferences, and for children, young people and families)
- Able to contribute to, and make considered judgements about how to act to safeguard/protect a child or young person
- Able to work with children, young people and families where there are child protection concerns as part of the multi-disciplinary team and with other disciplines, such as adult mental health, when assessing a child or young person
- Able to communicate effectively with children and young people, ensuring that they have the opportunity to participate in decisions affecting them as appropriate to their age and ability
- Able to give effective feedback to colleagues
- Able to identify (as appropriate to specialty) associated medical conditions, mental health problems and other co-morbidities in children or young people which may increase the risk of maltreatment, and able to take appropriate action
- Able to challenge other professionals when required and provide supporting evidence
- Able to provide clinical support and supervision to junior colleagues and peers
- Understand forensic procedure and practice required in child maltreatment, and how these relate to clinical and legal requirements
- Understands the importance of and how to ensure 'the chain of evidence'

Attitudes and values

- Understands the importance and benefits of working in an environment that supports professionals
- Understands the potential personal impact of safeguarding/child protection work on professionals
- Recognises when additional support is needed in managing presentations of suspected child maltreatment, including support with all legal and court activities (such as writing statements, preparing for attending court) and the need to debrief in relation to a case or other experience

Competence should be reviewed annually as part of staff appraisal in conjunction with individual learning and development plan.

Emergency and unscheduled care (medical and registered nursing staff)

Knowledge

- Aware of the implications of legislation, inter-agency policy and national guidance
- Understand the importance of children's rights in the safeguarding/child protection context, and related legislation
- Understand information sharing, confidentiality, and consent related to children and young people
- Aware of the role and remit of the LSCB/the Safeguarding Board for Northern Ireland and the safeguarding panel of the health and social care trust/child protection committee
- Understand inter-agency frameworks and child protection assessment processes, including the use of relevant assessment frameworks
- Understand the processes and legislation for Looked After Children including after-care services

Clinical knowledge

- Understand what constitutes, as appropriate to role, forensic procedures and practice required in child maltreatment, and how these relate to clinical and legal requirements
- Understand the assessment of risk and harm
- Understand the effects of parental behaviour on children and young people, and the interagency response
- Know the issues surrounding misdiagnosis in safeguarding/child protection and the effective management of diagnostic uncertainty and risk
- Have an understanding of Fabricated or Induced Illness (FII)
- Know when to liaise with expert colleagues about the assessment and management of children and young people where there are concerns about maltreatment
- Understand the needs and legal position of young people, particularly 16-18 year olds, and the transition between children's and adult legal frameworks and service provision
- Know how to share information appropriately, taking into consideration confidentiality and data-protection issues
- Understand the impact of a family's cultural and religious background when assessing risk to a child or young person, and managing concerns
- Know about models of effective clinical supervision and peer support
- Understand processes for identifying whether a child or young person is known to professionals in Children's Social Care and other agencies
- Know what to do when there is an insufficient response from organisations or agencies
- Understand procedures for proactively following up children and young people who miss outpatient appointments or parents under the care of adult mental health services who miss outpatient appointments
- Have an understanding of the management of the death of a child or young person in the safeguarding context (including where appropriate structures and processes such as rapid response teams and Child Death Overview panels)

Skills

- Able to contribute to, and make considered judgements about how to act to safeguard/protect a child or young person

- Able to work with children, young people and families where there are child protection concerns as part of the multi-disciplinary team and with other disciplines, such as adult mental health, when assessing a child or young person
- Able to present safeguarding/child protection concerns verbally and in writing for professional and legal purposes as required (and as appropriate to role, including case conferences, court proceedings, core groups, strategy meetings, family group conferences, and for children, young people and families)
- Able to contribute to, and make considered judgements about how to act to safeguard/protect a child or young person
- Able to work with children, young people and families where there are child protection concerns as part of the multi-disciplinary team and with other disciplines, such as adult mental health, when assessing a child or young person
- Able to communicate effectively with children and young people, ensuring that they have the opportunity to participate in decisions affecting them as appropriate to their age and ability
- Able to give effective feedback to colleagues
- Able to identify (as appropriate to specialty) associated medical conditions, mental health problems and other co-morbidities in children or young people which may increase the risk of maltreatment, and able to take appropriate action
- Able to challenge other professionals when required and provide supporting evidence
- Able to provide clinical support and supervision to junior colleagues and peers
- Able to complete the audit cycle and/or research related to safeguarding/child protection as part of appropriate clinical governance and quality assurance processes
- Able to obtain support and help in situations where there are problems requiring further expertise and experience

Attitudes and values

- Understands the importance and benefits of working in an environment that supports professionals
- Understands the potential personal impact of safeguarding/child protection work on professionals
- Recognises when additional support is needed in managing presentations of suspected child maltreatment, including support with all legal and court activities (such as writing statements, preparing for attending court) and the need to debrief in relation to a case or other experience
- Recognises the impact of a family's cultural and religious background when assessing risk to a child or young person, and managing concerns

Competence should be reviewed annually as part of staff appraisal in conjunction with individual learning and development plan.

Board Level for Chief Executive Officers, Trust and Health Board Executive and non-executive directors/members, commissioning body Directors

It is envisaged that Chief Executives of healthcare organisations take overall (executive) responsibility for Safeguarding and Child protection strategy and policy with additional leadership being provided at board level by the executive director with the lead for safeguarding. All board members must have a level of knowledge equivalent to all staff working within the healthcare setting (level 1) as well as additional knowledge based competencies by virtue of their board membership, as outlined below. All boards should have access to safeguarding advice and expertise through Designated or Named Professionals.

Chair

The Chair of acute, mental health and community Trusts, Health Boards and commissioning bodies (and equivalent health care bodies throughout the UK) are responsible for the effective operation of the Board with regard to Child Protection and Safeguarding children and young people

Key Responsibilities for Chairs

- To ensure that the role and responsibilities of the NHS organisation board in relation to Safeguarding/Child Protection are met
- To promote a positive culture of safeguarding children across the Board through assurance that there are procedures for safer recruitment; whistle blowing; appropriate policies for safeguarding and child protection and that these are being followed; and that staff and patients are aware that the organisation takes child protection seriously and will respond to concern about the welfare of children
- To ensure that there are robust governance processes in place to provide assurance on safeguarding and child protection
- To ensure good information from and between the organisation board or board of directors, committees, council of governors where applicable, the membership and senior management on safeguarding and child protection'

Chief Executive Officer (CEO)

The CEO of acute, mental health and community Trusts, Health Boards and commissioning bodies (and equivalent health care bodies throughout the UK) must provide strategic leadership, promote a culture of supporting good practice with regard to Child Protection/Safeguarding within their organisations and promote collaborative working with other agencies.

Key Responsibilities of CEOs

- To ensure that the role and responsibilities of the NHS board in relation to Safeguarding/Child Protection are met
- To ensure that the organisation adheres to relevant national guidance and standards for Safeguarding/child Protection
- To promote a positive culture of safeguarding children to include: ensuring there are procedures for safer staff recruitment; whistle blowing; appropriate policies for safeguarding and child protection (including regular updating); and that staff and patients are aware that the organisation takes child protection seriously and will respond to concern about the welfare of children
- To appoint an Executive Director lead for safeguarding
- To ensure good Child Protection and Safeguarding practice throughout the organisation
- To ensure there is appropriate access to advice from Named and Designated professionals
- To ensure that operational services are resourced to support/respond to the demands of Safeguarding/Child protection effectively
- To ensure that an effective Safeguarding/Child protection training and supervision strategy is resourced and delivered
- To ensure and promote appropriate, safe, multiagency//interagency partnership working practices and information sharing practices operate within the organisation

Executive Director Lead

There should be a nominated Executive Director board member who takes responsibility for child protection/ safeguarding issues The Executive Director lead will report to the NHS Board on the performance of their delegated responsibilities and will provide leadership in the long term strategic

planning for Safeguarding/ Child protection services for children across the organisation supported by the Named and Designated professionals.

Boards should consider the appointment of a Non-Executive Director (NED) board member to ensure the Organisation discharges its safeguarding responsibilities appropriately and to act as a champion for children and young people.

Key Responsibilities of the Board Executive Director lead

- To ensure that safeguarding is positioned as core business in strategic and operating plans and structures
- To oversee, implement and monitor the on-going assurance of safeguarding arrangements
- To ensure the adoption, implementation and auditing of policy and strategy in relation to safeguarding
- Within both commissioning and provider organisations to ensure support of named/designated lead professionals across primary and secondary care and independent practitioners to implement safeguarding arrangements
- To ensure that there is a programme of training and mentoring to support those with responsibility for safeguarding.
- Working in partnership with other groups including commissioners/providers of health care (as appropriate), local authorities and police to secure high quality, best practice in safeguarding/ child protection for children
- To ensure that serious incidents relating to safeguarding are reported immediately and managed effectively

Key Responsibilities of the Non-Executive Director Board lead

- To ensure appropriate scrutiny of the Organisation's safeguarding performance
- To provide assurance to the Board of the Organisation's safeguarding performance

Core competences

All Board members/commissioning leads should have Level 1 core competencies in safeguarding and must know the common presenting features of abuse and neglect and the context in which it presents to health care staff. In addition Board members/commissioning leads should have an understanding of the statutory role of the Board in safeguarding including partnership arrangements, policies, risks and performance indicators; staff's roles and responsibilities in safeguarding; and the expectations of regulatory bodies in safeguarding. Essentially the board will be held accountable for ensuring children and young people in that organisations care receive high quality, evidence based care and are seen in appropriate environments, with the right staff, who share the same vision, values and expected behaviours.

Competences should be reviewed annually as part of appraisal.

Knowledge, skills, attitudes and values

In addition to Level 1 Board members/commissioning leads should have the following:

Knowledge

- Knowledge of public health consequences and financial cost to the health economy of child maltreatment, care of survivors into adulthood and Looked after Children
- Knowledge of agencies involved in Child Protection/Safeguarding, their roles and responsibilities, and the importance of interagency co-operation

- Knowledge about the statutory obligations to work with the local or area child protection committee/Safeguarding children's board and other safeguarding agencies including the voluntary sector.
- Knowledge of the ethical, legal and professional obligations around information sharing related to safeguarding and child protection
- Knowledge about the statutory obligation to be involved, participate and implement the learning from Serious or Significant Case Reviews (SCRs) and other review processes
- Knowledge about the principles and responsibilities of the organisation's/staff's participation with the Child Death Review Process.
- Knowledge about the need for provision of and compliance with staff training both within commissioning and provider organisations as an organisational necessity
- Knowledge about the importance of safeguarding/child protection policies with regard to personnel, including use of vetting and barring and safe recruitment and the requirement for maintaining, keeping them up to date and reviewed at regular intervals to ensure they continue to meet organisational needs
- Knowledge about the regulation and inspection processes and implications for the organisation if standards are not met by either commissioners or providers
- Knowledge about the importance of regular reporting and monitoring of safeguarding arrangements within provider organisations.
- Knowledge about Board level risk relating to safeguarding children and the need to have arrangements in place for rapid notification and action on Serious Untoward Incidents
- Knowledge and awareness about the requirement of the Board to have access to appropriate high quality medical and nursing advice on Safeguarding/child protection matters from lead/Named/Designated and nominated professionals

Skills

- To be able to recognise possible signs of child maltreatment as this relates to their role
- To be able to seek appropriate advice and report concerns
- To have the appropriate Board level skills to be able to challenge and scrutinise safeguarding information to include performance data, Serious Incidents/SCRs, partnership working and regulatory inspections to enable appropriate assurance of the organisation's performance in safeguarding.

Attitudes and values

- Willingness as an individual to listen to children and young people and to act on issues and concerns, as well as an expectation that the organisation and professionals within it value and listen to the views of children and young people.
- Willingness to work in partnership with other organisations/patients and families to promote safeguarding
- Willingness to promote a positive culture around safeguarding within the organisation.

Level 4:

Specialist roles - named professionals

Staff Groups

This includes named doctors, named nurses, named health visitors, named midwives (in organisations delivering maternity services), named health professionals in ambulance organisations and named GPs for Primary Care Organisations.

The key duties and responsibilities of Named Professionals are outlined in the Intercollegiate Document 2014

Core competences

- As outlined for level 1,2,& 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 and 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/internal management reviews/child death reviews when requested and undertakes chronologies and the development of action plans using a root cause analysis approach when appropriate or other locally approved methodologies
- Co-ordinates and contributes to implementation of action plans and the learning following the above reviews with the safeguarding team
- Works effectively with colleagues from other organisations, providing advice as appropriate
- Provides advice and information about safeguarding to the employing authority, both proactively and reactively-this includes the board, directors and senior managers
- Provides specialist advice to practitioners, both actively and reactively, including clarification about organisational policies, legal issues and the management of child protection cases
- Provide 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/the safeguarding panel of the health and social care trust/the child protection committee of the Health board or Trust in Wales
- Leads/oversees safeguarding quality assurance and improvement processes
- Undertakes risk assessments of the organisations ability to safeguard/protect children and young people.

Knowledge, skills, attitudes and values

Level 4 professionals should have the knowledge, skills and attitudes outlined for Levels 1, 2 and 3 (core and also specialist where appropriate), and be able to demonstrate the following:

Knowledge

- Aware of best practice in safeguarding/child protection
- Aware of latest research evidence and the implications for practice
- Advanced understanding of child-care legislation, information sharing, information governance, confidentiality and consent including guidance from professional bodies
- Have a sound understanding of forensic medicine as it relates to clinical practice, including the procedures and investigations required in the maltreatment of children and young people
- Have an advanced knowledge of relevant national and international issues, policies and implications for practice
- Understand the commissioning and planning of safeguarding/child protection health services
- Know about the professional and experts' role in the court process
- Know how to implement and audit the effectiveness of safeguarding/child protection services on an organisational level against current national guidelines and quality standards

Skills

- Able to give advice about safeguarding/child protection policy and legal frameworks

- Able to support colleagues in challenging views offered by other professionals, as appropriate
- Able to advise other agencies about the health management of child protection concerns
- Able to analyse and evaluate information and evidence to inform inter-agency decision-making across the organisation
- Able to participate in a serious case review/case management review/significant case or other locally determined review, leading internal management reviews as part of this
- Able to support others across the organisation in writing a chronology and review about individual children/young people, and in summarising and interpreting information from a range of sources
- Able to develop a management plan for Fabricated and Induced Illness (FII) and to support colleagues involved in individual cases
- Able to lead service reviews
- Able to establish safeguarding/child protection quality assurance measures and processes
- Able to undertake training needs analysis, and to teach and educate health service professionals
- Able to review, evaluate and update local guidance and policy in light of research findings
- Able to advise and inform others about national and international issues and policies and the implications for practice
- Able to deal with the media and organisational public relations concerning safeguarding/child protection
- Able to work effectively with colleagues in regional safeguarding/child protection clinical networks

Attitudes and values

As outlined in level 1, 2 and 3

Criteria for assessment

- As outlined for Level 1,2 and 3
- Demonstrates completion of a teaching and assessment programme within 12 months of appointment
- Demonstrates an understanding of appropriate and effective training strategies to meet the competency development needs of different staff groups
- Demonstrate completion of relevant specialist child protection/safeguarding education within 12 months of appointment
- Demonstrates understanding of professional body registration requirements for practitioners
- Demonstrates and understanding and experience of developing evidence based clinical clinical guidance
- Demonstrates effective consultation with other health care professionals and participation in multi-disciplinary discussions
- Demonstrates participation in audit, and in the design and evaluation of service provision , including the development of action plans and strategies to address any issues raised by audit and serious case reviews/significant case reviews/other locally determined reviews
- Demonstrates critical insight of personal limitations and 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 and evaluation to improve teaching in safeguarding

Appendix 4

Equality Impact Assessment (EIA)

Safeguarding Children Training Strategy:

Equality or human rights concern. (see guidance notes below)	Does this item have any differential impact on the equality groups listed? Brief description of impact.	How is this impact being addressed?
Gender	No Impact	
Race and ethnicity	Cultural differences can be an issue in delivering Safeguarding training as individual beliefs and experiences will be challenged	The training will be delivered in a non judgmental way whilst ensuring all staff are aware of the Local and National Safeguarding Procedures.
Disability	Different learning styles need to be considered to ensure all staff have the opportunity to learn.	On line training is supported by Face to Face training. Trainers will consider how to adapt training to meet the needs of individual staff who have a disability.
Religion, faith and belief	No impact	
Sexual orientation	No impact	
Age	No impact	
Transgender people	No impact	
Social class	No impact	
Carers	It must be recognised that some staff will have to attend training within their working hours only due to personal commitments	Training sessions will be provided on a variety of days and times. On line training for level two

Date of assessment: 02.06.16

Names of Assessor (s)...Sue Wright