

Safeguarding Children and Vulnerable Adults:

A Strategic Framework for training

November 2019

Supersedes October 2017 document

Review date November 2021

Document Control

Document reference no	
Document Title	Training Policy: Safeguarding Children and Vulnerable Adults
Authors	Greater Manchester Designated Professionals Reviewed by Maxine Lomax Deputy Director of Nursing NHS Bury CCG
Document Status	Reviewed November 2017 FINAL Update November 2019
Based Upon	<ol style="list-style-type: none"> 1. Statutory guidance on making arrangements to safeguard and promote the welfare of children under section 11 of the Children Act 2004 (HM Government 2007) 2. Working Together to Safeguard Children (HM Government 2018) 3. Statutory Guidance on promoting the Health and well-being of Looked After Children (DH 2015) 4. No Secrets (DH and Home Office 2000) 5. Mental Capacity Act 2005: Code of Practice (Department for Constitutional Affairs 2007) 6. Safeguarding Adults: The Role of Health Services (DH 2011) 7. The Care Act 2014 8. Royal College of Paediatrics and Child Health (2014) Safeguarding children and young people: roles and competences for health care staff Intercollegiate document Third edition:
Signed off by	Quality and Risk Committee December 2019
Publication date	December 2019
Next review date	November 2021
Distribution	Via NHS Bury CCG website

Version	Date	Status
1	22 nd May 2012	Draft
2	18 th February 2014	Draft
3	14 th April 2014	Final
4	23 rd October 2015	Refreshed Final version
5	26 th September 2017	Reviewed

6	8 th November 2017	Ratified by Q&P committee of the CCG
2019 Version 1	11 th November 2019	Draft

Contents

1.0	Introduction	5
1.1	Scope.....	5
1.2	Principles	5
1.3	The Purpose of Training.....	5
1.4	Definitions	6
2.0	Roles and Responsibilities	7
2.1	Commissioners	7
2.2	Employers	7
3.0	Levels of Training Requirements for all NHS Staff Across Greater Manchester	7
3.1	Safeguarding Children and Training:.....	7
3.2	Safeguarding Adults Training	8
4.0	Training Needs Analysis	10
5.0	Monitoring and Assurance	10
6.0	References	11

1.0 Introduction

This Strategic Framework for Training is designed to provide the approach for safeguarding training for Commissioners and providers of health care for the Greater Manchester population. Its aim is to ensure that all staff working with children and/or adults are alert to the need to safeguard and promote the welfare of children and vulnerable adults and are appropriately skilled and competent in carrying out their responsibilities for safeguarding appropriate to their role. Each Health Trust/Organisation will be required to produce a training plan that outlines how safeguarding training will be delivered.

It should be noted that throughout the document the term vulnerable adult and adult at risk are used interchangeably.

1.1 Scope

This strategy for safeguarding training is relevant to all staff working in the health economy. It also provides a strategy for independent contractors in ensuring that their staff are trained in accordance with individual roles and responsibilities in relation to safeguarding children and adults at risk.

The strategy will be reviewed bi-annually and in response to changes to national and local guidance or local policy initiatives.

1.2 Principles

All staff are trained and competent to be alert to potential indicators of abuse and neglect, know how to act on those concerns and to fulfil their roles and responsibilities for safeguarding children and adults at risk of abuse.

Interagency training should complement single agency training, all training should emphasise the importance of working together.

Single-agency training, and training provided in professional settings, should always equip staff for working collaboratively with others and communicating and sharing information.

All training provided should respect diversity (including culture, race, religion and disability), promote equality and encourage the participation of children, families and adults in the safeguarding process.

1.3 The Purpose of Training

The purpose of training for interagency work at both strategic and operational levels is to achieve better outcomes for children and vulnerable adults by promoting:

- a shared understanding of the tasks, processes, principles and roles and responsibilities outlined in national guidance and local arrangements for safeguarding children and vulnerable adults and promoting their welfare;
- more effective and integrated services at both the strategic and individual case level;

- improved communications between professionals including a common understanding of key terms, definitions, and thresholds for action;
- effective working relationships, including an ability to work in multi-disciplinary groups or teams;
- sound decision making based on information sharing, thorough assessment, critical analysis, and professional judgement;
- Learning lessons from Serious Case Reviews and implementing changes to practice based on recommendations from local and national cases.

1.4 Definitions

Single agency training is training which is carried out by a particular agency for its own staff.

Inter- (or multi-) agency training is training for employees of different agencies who either work together formally or come together for training or development.

Children: in this strategy, as in the Children Act 1989 and 2004, **a child** is anyone who has not yet reached their 18th birthday. 'Children' therefore means children and young people throughout.

Vulnerable adult:

Whilst there is no formal definition of vulnerability within health care, some people receiving health care may be at greater risk from harm than others, sometimes as a complication of their presenting condition and their individual circumstances. The risks that increase a person's vulnerability should be appropriately assessed and identified by the health care professional at the first contact and continue throughout the care pathway (DH 2010).

Adult at risk: Safeguarding duties apply to an adult aged 18 or over and who:

- Has needs for care and support (whether the local authority is meeting any of those needs or not) and;
- Is experiencing, or is at risk of abuse or neglect; and
- As a result of those care needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect.
- (Care Act 2014)

For the purpose of this policy the term adult at risk is used interchangeably with vulnerable adult.

2.0 Roles and Responsibilities

2.1 Commissioners

Clinical Commissioning Groups and other commissioners of health care services have a responsibility to ensure that the services they commission have robust safeguarding training plans that are fit for purpose and comply to national guidance.

2.2 Employers

Employers are responsible for ensuring that their staff are competent and confident in carrying out their responsibilities for safeguarding and promoting the welfare of children and adults at risk.

It is the responsibility of employers to recognise that in order for staff to carry out their roles and responsibilities for safeguarding they will have different training needs which are dependent on their degree of contact with and responsibilities for children and adults.

Employers also have a responsibility to identify adequate resources and support for inter-agency training by:

- committing resources for inter-agency training, for example through funding, providing venues, providing staff who contribute to the planning, delivery and/or evaluation of inter-agency training;
- providing staff that have the relevant expertise to support the multi-agency training delivered under the auspices of the Bury Integrated Safeguarding Partnership LSAB
- releasing staff to attend the appropriate inter-agency training courses and ensuring the time for them to complete inter-agency training tasks and apply their learning in practice
- ensure that staff receive relevant single-agency training that enables them to maximise the learning derived from inter-agency training.
- Ensure they keep accurate data of staff trained within the organisation including a breakdown of eligible staff trained at each level.

3.0 Levels of Training Requirements for all NHS Staff Across Greater Manchester

3.1 Safeguarding Children and Looked after Children Training:

(Safeguarding children and young people: roles and competences for health care staff INTERCOLLEGIATE DOCUMENT January 2019)

Children

Level 1:

All staff working in healthcare services

Level 2:

All non-clinical and clinical staff who have any contact (however small) with children, young people and/or parents/carers or any adult who may pose a risk to children

Level 3:

Clinical staff working with children, young people and/or their parents/carers and/or any adult who could pose a risk to children and who could potentially contribute to assessing, planning, intervening and/or evaluating the needs of a child or young person and/or parenting capacity (regardless of whether there have been previously identified child protection/safeguarding concerns or not)

Level 4: Specialist roles – named professionals

Level 5: Specialist roles – designated professionals

Board Level

For chief executive officers, trust and health board executive and non-executive directors/members, commissioning body directors

(Looked after children: Knowledge, skills and competences of healthcare staff intercollegiate role framework March 2015)

Level 1:

All staff including non-clinical managers and staff working in healthcare settings

Level 2:

Minimum level for all non-clinical and clinical staff who may have some contact with children, young people and/or parents/carers

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 health needs of a looked after child/young person or care leaver

Level 4:

Specialist medical, nursing and health professionals for looked after children, including Named professionals and Medical Advisors for Fostering and Adoption

Level 5: Designated Professionals

Board Level

For chief executive officers, trust and health board executive and non-executive directors/members, commissioning body directors.

3.2 Safeguarding Adults Training

The Adult Safeguarding: Roles and Competencies for Health Care Staff First edition: August 2018, outlines the requirements for training for staff working with adults.

Level 1:

All staff working in health settings

Level 2:

All practitioners that have regular contact with patients, their families or carers, or the public

Level 3:

Registered health care staff who engage in assessing, planning, intervening and evaluating the needs of adults where there are safeguarding concerns

Level 4:

Specialist roles – named professionals

Level 5:

Specialist roles – designated professionals or equivalent roles

Board level

For chief executive officers, trust and health board executive and non-executive directors/members, commissioning body directors

3.3 Prevent

As part of the Governments counter terrorism strategy (CONTEST), the NHS has committed to support initiatives to reduce the risk of terrorism. CONTEST aims to reduce the risk we face from terrorism so that people can go about their lives freely and with confidence

The PREVENT strategy will specifically focus on three broad objectives:

- Respond to the ideological challenge of terrorism and the threat from those who promote it
- PREVENT individuals from being drawn into terrorism and ensure that they are given appropriate advice and support
- Work with institutions where there are risks of radicalisation that we need to address.

The PREVENT strategy places an onus upon the health sector to support the work of counter-terrorist activity because of the volume of people who come into contact with healthcare workers on a daily basis and high profile cases associated with the NHS. The roll out of the revised PREVENT strategy intends to improve channels of

communication across the public sector and other partners in order to counter terrorism in the UK mainland and its interests abroad.

Across Greater Manchester PREVENT initiatives will be integrated into Adult Safeguarding Training.

- Health providers and Bury CCG will have in place a programme to provide Workshops to Raise Awareness of PREVENT (WRAP) for staff and increase numbers of staff being trained to identify potential risks

4.0 Training Needs Analysis

The identification of training needs is not a single event dependent on a grouping, but is a dynamic, on-going process identified through appraisal, clinical supervision, course evaluations and direct contact from staff.

Whilst Level 1 safeguarding training for children and adults is mandatory for **all** staff, training needs will then be dependent on an individual's roles and responsibilities. An individual's training needs should form part of their personal development plan which is to be agreed with their line manager.

This training strategy details the training required for all staff working for the NHS across Greater Manchester and also provides guidance to independent contractor services in determining the level of training required by them and their employees.

The strategy links training with the role, responsibility, performance expectation and level of experience. In addition to learning derived through attendance on training programmes, written update briefings and literature on current safeguarding/protection issues should be circulated to safeguarding leads on an annual basis.

5.0 Monitoring and Assurance

Working collaboratively with NHS Commissioners and Local Safeguarding Partnerships, training will be subject to audit, evaluation, quality assurance, scrutiny and reporting.

All training identified within this document is compliant with the standards required within statutory and national guidance and with the training strategies of Local Safeguarding Children and Adult Boards.

Assurance will be required by the commissioner that all staff have been trained to an appropriate level in safeguarding children and young people, and vulnerable adults.

This assurance should be obtained through relevant organisational quality and performance monitoring processes, internal and external audit, outcomes from inspections (e.g. CQC, Ofsted) as well as providers participating and cooperating with quality assurance processes such as Section 11 audit and Self-Assessment Framework for Adults. In order to provide assurance to the CCG, all contracted practitioners/services will record and provide information including:

- a. Numbers of staff requiring each level of training as set out in this strategy
- b. Attendance figures for all levels of training.
- c. Evidence that outcomes for vulnerable groups have improved as a result of training attended

6.0 References

- *Statutory guidance on making arrangements to safeguard and promote the welfare of children under section 11 of the Children Act 2004* (HM Government 2007)
- *Working Together to Safeguard Children* (HM Government 2018)
- *Statutory Guidance on promoting the Health and well-being of Looked After Children* (DH 2015)
- *No Secrets* (DH and Home Office 2000)
- *Mental Capacity Act 2005: Code of Practice* (Department for Constitutional Affairs 2007)
- *Safeguarding Adults: The Role of Health Services* (DH 2011)
- *The Care Act 2014*

Appendix 1

Training matrix for the CCG

Training level	Child safeguarding/Looked after Children	Adult safeguarding	Domestic abuse	Prevent
Level1	Non-clinical and administrative staff: e.g. Board members, lay members, secretaries; reception staff, GP practice managers; administrative staff	All staff including non-clinical and administrative staff: Board members, lay members, secretaries; reception staff, GP practice managers; administrative staff	Staff who need awareness of domestic abuse but do not have client casework responsibilities.	All staff within the CCG require Basic Prevent Awareness (BPA)
2	Non-clinical and clinical staff who have some degree of contact with children and young people and/or parents/carers	All clinical staff, including GPs, GP practice managers, practice nurses, healthcare assistants, allied healthcare practitioners	Staff who have roles that also involve safeguarding responsibilities for clients they work with (e.g. GP practice safeguarding leads)	All clinical staff, require WRAP 3 Prevent training
3	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	Named adult safeguarding lead and identified specialist safeguarding leads across health organisations	Specialist staff who have roles that involve assessing, supporting or providing interventions to clients that they work with; practice nurses For staff who have lead professional roles in domestic abuse, child protection or adult protection for their organisation, Clinical Lead in GP surgeries	All clinical staff, require WRAP 3 Prevent training

4	Specialist roles and named professionals	lead doctors, heads of adult safeguarding, and named GPs/doctors for organisations commissioning primary care.	For those who have strategic and/or organisation lead roles and responsibilities; e.g. CCG leads, Designated Nurses	WRAP 3 Prevent training
5	Designated professionals	Designated Professionals		WRAP 3 Prevent training
6	Board Level for Chief Executive Officers, Trust and Health Board Executive and non executive directors/members, commissioning body Directors	Board Level for Chief Executive Officers, Trust and Health Board Executive and non executive directors/members, commissioning body Directors		Basic Prevent Awareness (BPA)