

CQC Safeguarding children training position statement

CQC receive frequent questions about the competency levels for health care staff in relation to safeguarding children. This statement sets out our position.

Roles and competencies for child safeguarding training are outlined in ‘*Safeguarding children and young people: roles and competences for health care staff INTERCOLLEGIATE DOCUMENT Third edition: March 2014¹*’. This guidance sets out ‘minimum training requirements’, emphasising the importance of maximising flexible learning opportunities to acquire and maintain knowledge and skills, drawing upon lessons from research, case studies, critical incident reviews and analysis, and serious case reviews.

The intercollegiate document states that;

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. 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.

The document describes 5 levels of competency:

- *Level 1: All staff working in health care settings*.*
- *Level 2: All non-clinical and clinical staff who have any 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 needs of a child or young person and parenting capacity where there are safeguarding/child protection concerns.***
- *Level 4 specialist roles - named professionals.*
- *Level 5 Specialist roles - designated professionals.*

**This means all healthcare settings, including those that do not treat children*

Level 4 and 5 specialist roles refer to the statutory roles at level 4 i.e. Named Doctors, Nurses or Midwives for safeguarding children and young people or level 5 Designated doctors or nurses for safeguarding children and young people

All providers of NHS funded health services including NHS Trusts, NHS Foundation Trusts and public, voluntary sector, independent sector and social enterprises require level 4 and level 5 specialist roles and should identify a named doctor and

a named nurse (and a named midwife if the organisation provides maternity services) for safeguarding.

In the case of NHS 111, ambulance trusts and independent ambulance providers, there should be a minimum of one level 4, a named professional.

GP practices should have a lead and deputy lead for safeguarding, who should work closely with named GPs. Named professionals have a key role in promoting good professional practice within their organisation, providing advice and expertise for fellow professionals, and ensuring safeguarding training is in place.

Key principles when assessing child safeguarding arrangements

The intercollegiate document is a guidance document and while the level of safeguarding training is a good indication as to how well the provider responds to safeguarding concerns, it is not the sentinel indicator of good child safeguarding arrangements in an organisation. The organisation needs to demonstrate that they have a 'comprehensive safeguarding system' underpinned by policies, effective risk assessments, and high profile leadership as well as quality assured training and that they know that these are consistently in place.

1. We need to equally apply the regulations and the associated policy frameworks across all sectors
2. We need to use '*Working Together to Safeguard Children*' (2015)ⁱⁱ and the intercollegiate guidance to be assured that providers have made the appropriate risk assessments for children's safeguarding.
3. Risks and expectations of child safeguarding training and competencies are the same across all sectors. All staff working in a care setting should be given a mandatory induction, which includes familiarisation with child protection responsibilities and procedures to be followed if anyone has any concerns about a child's safety or welfare.

The job titles used in the health and care sector are becoming ever more complicated and difficult to map against current wording in guidance. Instead we need to consider the following:

- Can the provider demonstrate they have considered the roles of different members or groups of staff and determined which members of staff is required to have which level of children's safeguarding training? If the level of training does not align with the intercollegiate guidance, (specifically where they are deciding to use a lower level of training) can the provider demonstrate how they know that their staff are competent to deal with a safeguarding issue and that their system effectively identifies risk and prevents harm?
- How does the leadership and culture of the organisation support a culture of openness and encourage staff to think the unthinkable and come forward with concerns?

- Are providers able to demonstrate examples of safeguarding referrals and the impact that their processes have made.

If on investigation, it then does not seem like staff are competent to carry out their responsibilities for safeguarding and promoting the welfare of children and creating an environment where staff feel able to raise concerns and feel supported in their safeguarding role, then we should be looking at more than just whether they need additional training, but at all aspects of the system described.

We would also expect as in all our sectors that the method and expectations of training was properly designed, delivered and evaluated, and whilst there is room for some element of on-line training this is not a substitute for face to face training especially discussion of case studies and personal cases.

ⁱ [https://www.rcpch.ac.uk/sites/default/files/page/Safeguarding%20Children%20-%20Roles%20and%20Competences%20for%20Healthcare%20Staff%20%2002%20%20%20%20\(3\).pdf](https://www.rcpch.ac.uk/sites/default/files/page/Safeguarding%20Children%20-%20Roles%20and%20Competences%20for%20Healthcare%20Staff%20%2002%20%20%20%20(3).pdf)
ⁱⁱ <https://www.gov.uk/government/publications/working-together-to-safeguard-children--2>