

# NHS England South West Safeguarding Training Framework 2022 – 2025

(Internal document)

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### Document Management Revision History

Version	Date	Summary of changes
1.0	May 2022	Final Version completed by Mel Munday. Original author Kim Jones.
2.0	October 2022	Add appendix 3 and updated references to NHSE plus published prevent framework

### Document control

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## 1.0 Introduction

Every NHS organisation and each individual healthcare professional working in the NHS has a responsibility to ensure that the principles and duties of safeguarding children and adults are consistently applied, with the well-being of those children and adults at the heart of what we do.

All staff in the NHS, have a responsibility to safeguard children and adults at risk of abuse or neglect and safeguarding should be a fundamental component of the commissioning cycle. Safeguarding is core business for NHS England (NHSE) and should not be viewed as additional work.

Safeguarding means protecting people's health, wellbeing, and human rights, and enabling them to live free from harm, abuse, and neglect. It is a fundamental standard of high-quality health and social care (CQC – Regulation 13) and enables the NHS to adhere to its core humanitarian values and constitution.

Safeguarding involves people and organisations working together to stop abuse and neglect occurring and intervening effectively in situations if we do see abuse taking place. Safeguarding is also about taking preventative measures and approaches to minimise the likelihood of abuse or neglect happening in the first place.

## 2.0 Purpose

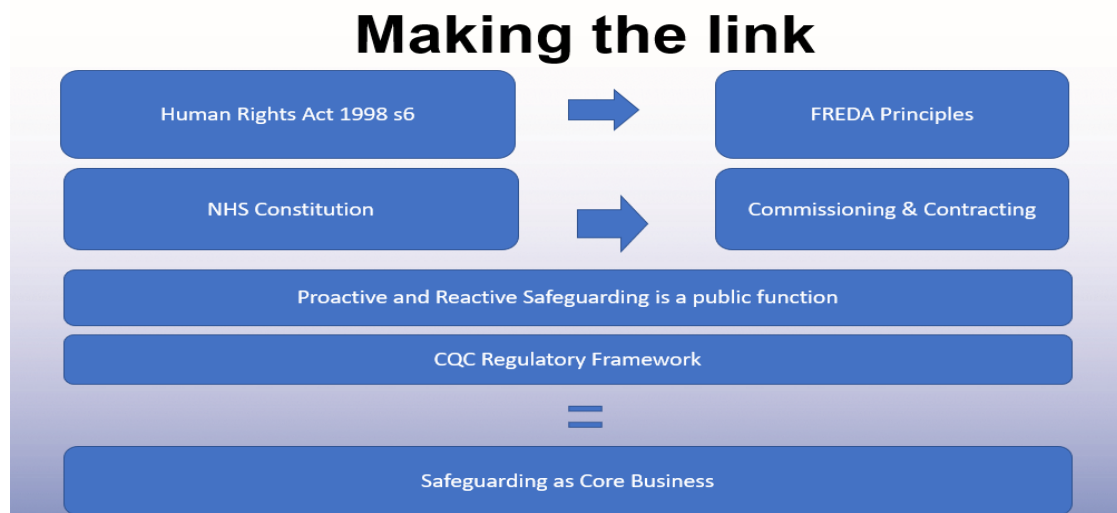
This Framework aims to provide information on mandatory safeguarding training requirements, including Prevent for all staff (and Mental Capacity Act training where required) within NHSE South West. The identification of the level of safeguarding training required is dependent on the staff member's role and responsibilities (please see [Appendix 1](#) for the Training Needs Analysis), and following the completion of the Induction Programme, should be linked to the annual appraisal process, personal development plan and if appropriate to the relevant professional registration revalidation process.

All training provided should respect diversity (including culture, race, religion, and disability), promote equality and encourage the participation of service users - children, families, and adults in the safeguarding process. All training provided should place the child and the adult at risk of abuse as the centre focus and promote the importance of understanding of both the adult and child's daily life experiences. The nature of safeguarding means we work collaboratively with our multi-agency partners, including the development and provision of training.

### 3.0 Underpinning Principles

1. Safeguarding is integral to commissioning, contracting and quality and safety of practice. Our principles are underpinned by working collectively with organisations such as our Independent Providers, Local Authority, Police and Education to ensure that there is a robust approach to intervening, protecting and safeguarding individuals of all ages.
2. All staff should work in a trauma informed way by understanding, recognising and responding to the effects of trauma with individuals who receive our services across all ages. Staff recognise the importance of a whole family approach by following 'Think Family' principles (further information in reference list)
3. All staff working in healthcare settings should receive training to ensure they attain the competences appropriate to their role and follow the relevant professional guidance
4. All staff must know what to do if there is a child protection concern involving a child or family, understand the procedures for reporting a safeguarding concern, and have knowledge of policy, procedures and legislation that support child safeguarding activity
5. All staff must understand their role in adult safeguarding work, recognise an adult at risk of abuse or neglect potentially in need of safeguarding and take action, understand the procedures for reporting a safeguarding concern, understand dignity and respect when working with individuals, have knowledge of policy, procedures and legislation that supports adult safeguarding activity.
6. This is also underpinned by a legal framework which includes the below Acts of Parliament: (list not exhaustive)

- The Children Act 1989
- The Children Act 2004
- The Children & Social Work Act 2017
- Working Together to Safeguard Children (2018)
- Care Act 2014
- Health and Social Care Act 2018
- Human Rights Act 1998
- Mental Capacity Act 2005
- Mental Capacity (Amendment) Act 2019
- Domestic Abuse Act 2021



## 4.0 Responsibilities

It is the responsibility of the employer to ensure that employees clearly understand their contractual obligations within the organisation and enable individual staff to access training and education by which the organisation can satisfy its statutory duties.

The Regional Chief Nurse and the Regional Safeguarding Lead, alongside the Regional Safeguarding Team and all line managers have a responsibility to ensure that their staff are trained to recognise and respond to safeguarding concerns and that they are fully aware of their individual and corporate responsibilities for safeguarding both adults and children.

All staff who are employed by NHS England are expected to undertake safeguarding training as part of their induction programme. After the training completed as part of induction and in accordance with roles and responsibilities, all staff are expected to engage in safeguarding training. The training needs analysis section within this strategy describes the levels of safeguarding training, examples of staff that the levels apply to and the mode and approach to learning which enables the learner to achieve the required knowledge and competence required. Levels of training required by different staff groups are set out in Intercollegiate documents for adult safeguarding, children's safeguarding and looked after children (see reference list). Each has an agreed training framework for all healthcare staffing groups. This is collectively agreed by the respective Colleges, therefore outlines professional bodies expectations of the level of knowledge required of these professional groups and roles.

Each employee should record their learning at level 3 and above for their own professional records using the tools provided in [appendices 1](#) and [2](#). Employees should also record their learning on ESR so that their line manager and NHSE SW can ensure their staff are trained to the appropriate level.

## 5.0 Points to consider

### **Learning can be 'passported' from organisation to organisation**

A template for practitioners to record relevant education and training is included within this strategy, enabling them to demonstrate attainment and maintenance of knowledge, skills, and competencies throughout their career. The education, training and learning logs can be used as an up-to-date passport to demonstrate safeguarding knowledge, skills and competence as individuals move from organisation to organisation.

There may be members of the external professional workforce who are undertaking specific work programmes alongside or on behalf of NHSE (such as panel members). There is an expectation that the appropriate safeguarding training competencies will have already been achieved in the employing organisation and that this is the individual's responsibility.

## Flexible approach to learning

The emphasis is upon the importance of maximising flexible learning opportunities to acquire and maintain knowledge and skills. Previous levels of training do not need to be repeated. Staff are directed to the Skills for Health e-learning platform, previously known as National Skills Academy (NSA), for safeguarding training.

**Safeguarding Core Learning Links:** [E-LFH Safeguarding Children](#) [E-LFH Safeguarding Adults](#)

Prevent Links: Basic (Level 1 & 2) Accessed via ESR. Workshop Raising Awareness of Prevent (Level 3, 4 & 5) [E-LFH Preventing Radicalisation](#)

## 6.0 Training Needs Analysis

Definition of Training Level	Staff Groups	Hours to achieve competence and mode
<b>Induction</b>		
All health staff should complete a mandatory 30-minute session during their induction, within 6 weeks of commencing their role.		
<b>Level 1 &amp; Prevent Level 1 competencies</b>		
<b>Children and Adults:</b> All staff working in healthcare services.	Examples: <ul style="list-style-type: none"> <li>All NHSE staff</li> </ul>	2 hours over 3 years  <b>Mode:</b> E-learning
<b>Level 2 &amp; Prevent Level 2 competencies</b>		
<b>Children:</b> Non-clinical and clinical staff who, in their role, have contact ( <b>however small</b> ) with children, young people and/or parents/carers <b>or adults who may pose a risk to children.</b>	Examples: <ul style="list-style-type: none"> <li>Commissioners</li> <li>Direct Commissioning (DC) Case Managers</li> <li>Regional safeguarding team business support</li> </ul>	4 hours over 3 years for children  3-4 hours over 3 years for adults

Definition of Training Level	Staff Groups	Hours to achieve competence and mode
<p><b>Adult:</b></p> <p>All non- clinical and clinical staff who have contact with adults and those adults with care and support needs. In addition to level 1 training, over a three-year period, refresher training equivalent to a minimum of 3 – 4 hours.</p>	<ul style="list-style-type: none"> <li>• Continuing Health Care team (non-clinical)</li> <li>• Complaints team (those dealing with the public)</li> <li>• Children and Young people commissioners (non-clinical)</li> <li>• Safeguarding team members (non-clinical e.g. admin)</li> </ul>	<p>Mode: E-learning</p>
<p><b>Level 3 &amp; Prevent Level 3 competencies</b></p>		
<p><b><u>All clinical staff working with children and/or adults with care and support needs</u></b></p> <p><b><u>In particular:</u></b></p> <p><b>Children:</b></p> <ul style="list-style-type: none"> <li>• working with children, young people and/or</li> <li>• their parents/carers and/or</li> <li>• any adult who could pose a risk to children</li> </ul> <p>And</p> <ul style="list-style-type: none"> <li>• who could potentially contribute to assessing, planning, intervening and/or evaluating the needs of a child or young person and/or parenting capacity.</li> </ul> <p><b>Adults:</b></p> <ul style="list-style-type: none"> <li>• who potentially contribute to assessing, planning, intervening, and evaluating those needs.</li> </ul>	<p>Examples:</p> <ul style="list-style-type: none"> <li>• Quality Leads</li> <li>• Commissioning Leads</li> <li>• Professional Standards Programme Managers and those with responsibility for PAG/PLDP</li> <li>• Heads of Primary Care, Public Health, Specialised Services and Health &amp; Justice</li> <li>• Deputy Director of Nursing and Quality</li> <li>• Continuing Health Care clinical staff with a responsibility for case assessment/review</li> <li>• Learning Disability Specialist commissioning team (including those undertaking assessments on behalf of NHSE)</li> <li>• Children and Young people commissioners (clinical)</li> </ul>	<p>Children and adults:</p> <p>8 hours over 3 years (core)</p> <p><b>Mode:</b> Blended Learning</p> <p>50% Face to face (inc interactive Teams sessions)</p> <p>50% blended learning approach (E-learning, webinars, reflective practice, research (evidenced), safeguarding supervision).</p>



Definition of Training Level	Staff Groups	Hours to achieve competence and mode
<b>Level 4 &amp; Prevent Level 4 Competencies</b>		
<p><b>Specialist Safeguarding Roles – Children and Adults</b></p> <p>Named professionals for safeguarding children and adults.</p>	<p>Examples:</p> <ul style="list-style-type: none"> <li>• Head of Quality &amp; Safeguarding Direct Commissioning<sup>1</sup></li> <li>• Head of Safeguarding</li> </ul>	<p>24 hours over 3 years</p> <p><b>Mode:</b> Blended Learning</p> <p>50% Face to face (inc interactive Teams sessions, conferences)</p> <p>50% blended learning approach (E-learning, webinars, reflective practice, research (evidenced), safeguarding supervision).</p>
<b>Level 5 &amp; Prevent Level 5 Competencies</b>		
<p><b>Specialist Roles – Strategic Roles – Children and Adults</b></p> <p>Designated Professionals for safeguarding children and adults.</p> <p>Regional Safeguarding Lead and Regional Professional Safeguarding Lead<sup>2</sup></p>	<p>Examples:</p> <ul style="list-style-type: none"> <li>• Designated Professionals (not employed in NHSE)</li> </ul>	<p>24 hours over 3 years</p> <p><b>Mode:</b> Blended Learning</p> <p>50% Face to face (inc interactive virtual sessions, conferences)</p> <p>50% blended learning approach (E-learning,</p>

<sup>1</sup> Regional Heads of Safeguarding, Regional Head of Quality & Safeguarding Direct Commissioning may have acquired Level 5 if formerly Designated Nurses.

<sup>2</sup> Regional Safeguarding Professionals may have acquired and will therefore attain Level 5 if formerly Designated Nurses.

Definition of Training Level	Staff Groups	Hours to achieve competence and mode
		webinars, reflective practice, research (evidenced), safeguarding supervision).
<b>Board Level &amp; Prevent Level 6 Competencies</b>		
<b>Board level</b>	Board level for NHSE regional wider leadership team (i.e. all Directors)	This will require a tailored package to be delivered every 3 years which encompasses level 1 knowledge, skills and competencies, as well as Board level specific information.

## 7.0 Further eLearning for Healthcare accredited links:

### **Looked After Children competencies:**

<https://portal.e-lfh.org.uk/Component/Details/12676> - Part 1

<https://portal.e-lfh.org.uk/Component/Details/31575> - Part 2

### **Child sexual abuse:**

<https://www.e-lfh.org.uk/programmes/child-sexual-abuse-awareness/>

### **Domestic Abuse:**

<https://www.e-lfh.org.uk/domestic-violence-and-abuse-e-learning-new-sessions-available/>

### **Modern Slavery:**

<https://www.e-lfh.org.uk/programmes/modern-slavery/>

## 8.0 References and further reading:

[NHS Prevent training and competencies framework - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/nhs-prevent-training-and-competencies-framework)

### **Intercollegiate Guidance (training and specific competency information):**

Safeguarding Children and Young People: Roles and Competencies for Health Care Staff

[Safeguarding Children and Young People: Roles and Competencies for Healthcare Staff | Royal College of Nursing \(rcn.org.uk\)](https://www.rcn.org/intercollegiate-guidance)  
(Intercollegiate Guidance Fourth edition January 2019)

[Adult Safeguarding: Roles and Competencies for Health Care Staff | Royal College of Nursing \(rcn.org.uk\)](https://www.rcn.org/intercollegiate-guidance) (Intercollegiate Guidance August 2018)

[Looked After Children: Roles and Competencies of Healthcare Staff | Royal College of Nursing \(rcn.org.uk\)](https://www.rcn.org/intercollegiate-guidance)

### **Further reading:**

Promoting the health and wellbeing of looked-after children (Dept for Education 2015) Statutory Guidance on the planning, commissioning, and delivery of health services for looked-after children. <https://www.gov.uk/government/publications/promoting-the-health-and-wellbeing-of-looked-after-children--2>

[Working Together to Safeguard Children 2018 \(publishing.service.gov.uk\)](https://publishing.service.gov.uk) A Guide to interagency working to safeguard and promote the welfare of children. (Appendix A from page 106 contains a glossary of definitions you may find helpful)

Care Act 2014: Safeguarding Adults at Risk- further reading here. [The Care Act: Safeguarding adults \(scie.org.uk\)](https://scie.org.uk)

[Care Act 2014 \(legislation.gov.uk\)](https://legislation.gov.uk) (Section 42 Safeguarding adults at risk of abuse or neglect)

Think Family is an approach that offers joined up support to families at every point of entry. By looking at the whole family services better coordinate care. [Think child, think parent, think family: Introduction - Think Family as a concept, and its implications for practice \(scie.org.uk\)](https://scie.org.uk)

Contextual safeguarding is an approach to understanding, and responding to, young people's experiences of significant harm beyond their families. [www.csnetwork.org.uk/en/about/what-is-contextual-safeguarding](https://www.csnetwork.org.uk/en/about/what-is-contextual-safeguarding).



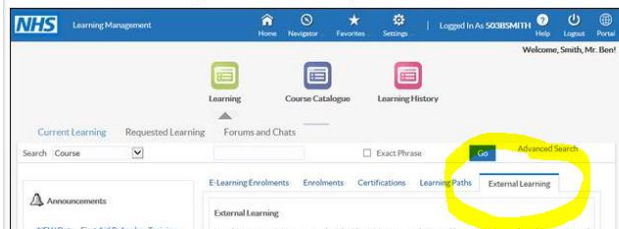
## Appendix 2: Education, training and learning reflection record

The below reflection record is to be completed following each individual learning activity and can be incorporated into the Dynamic Conversations process. Information here: [Dynamic Conversations – Human Resources & Organisational Development \(england.nhs.uk\)](http://dynamicconversations.org.uk)

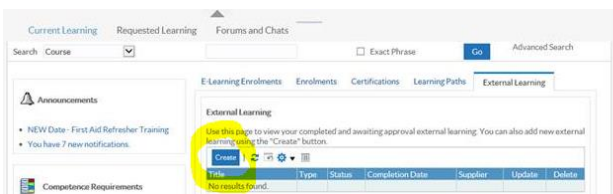
<b>Date:</b>
<b>Topic and learning activity:</b>
<b>What did you learn? Key points</b>
<ul style="list-style-type: none"><li>•</li><li>•</li><li>•</li><li>•</li></ul>
<b>How does this relate to the knowledge, skills, attitudes, values and competencies within your role?</b>
<b>How will the learning affect your future safeguarding practice?</b>

## Appendix 3: How to record external training on ESR

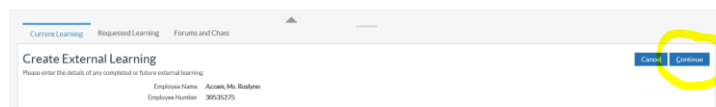
1. Log in to ESR
2. Go to My Learning (on the left-hand column)
3. Click External Learning tab



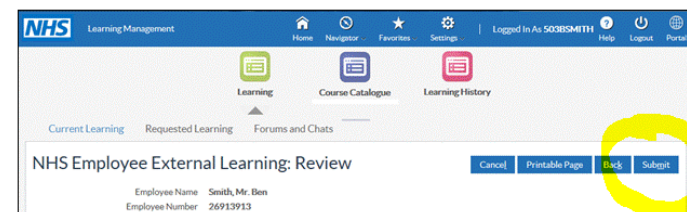
4. Click Create button



5. Click in the **Title** field and enter. NB it is important to include exact wording of **Bold** text.  
**Safeguarding Adults Level 3:** topic/title (amend to **Level 4,5 or 6** as appropriate)  
**Safeguarding Children Level 3:** topic/title  
**Safeguarding Level 3:** topic/title
6. Click in the **Completion Date** field and enter the date course completed.
7. Click in the **Supplier** field and enter the name of the training provider.
8. Click in the **Location** field and record where the training took place.
9. Click the dropdown arrow in the **Training Type** field and choose correct type.
10. Click in the **Duration** field and enter the appropriate value. This is essential to record in order to demonstrate that safeguarding competencies are met.
11. Click the dropdown list to select the appropriate unit of time.
12. Click in the **Status** field and select COMPLETED.
13. Click Continue



14. Click Submit



You will see confirmation that a change has been submitted for approval.