**NHS Education for Scotland**

**GPST Scotland Deanery Level 3 Child Safeguarding Information**

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Updated 2021

With acknowledgement and thanks to Dr Alison Pirie for her work behind this document during her NES Educational fellowship year ending 2017

**Introduction**

All trainees must have demonstrated level 3 competence in safeguarding children and young people from early in ST1. Child safeguarding encompasses child protection, as well as describing a broader approach to promoting child welfare. The GMC have published [guidance](http://www.gmc-uk.org/guidance/ethical_guidance/13257.asp) (1) on protecting children and young people for GPs. In addition, the [RCGP website](https://www.rcgp.org.uk/training-exams/training/workplace-based-assessment-wpba/cpr-aed-and-child-safeguarding.aspx) (2) states that:

*“The GP curriculum states that all GPs should be competent in dealing with safeguarding. This includes recognising abuse, knowing about local arrangements for safeguarding, referring effectively and playing a part in assessment and continuing management, including prevention of further abuse. GP trainees need to satisfy the GMC and the public that they have the appropriate knowledge, clinical skills and understanding of safeguarding to be able to apply these skills when they arise. Safeguarding training is an integral and ongoing part of both GP training and professional development as a qualified GP”.*

***All trainees require in date evidence of level 3 safeguarding for both adult and child safeguarding****from the start or early part of their training in ST1 and thereafter throughout their training.*

*Going forwards all trainees then need a knowledge update annually and this needs to include a demonstration of their knowledge, key safeguarding information and the appropriate action to take if there are any concerns. In addition, all trainees require a minimum of one participatory piece of learning and reflection for both adult and child safeguarding in each training year. Evidence of learning for both the knowledge component and reflective exercises need to be documented in the trainees learning log”.*

It is likely that you will already have a breadth of knowledge and skills in this area from your training in medical school and previous hospital work, all of which is valuable. The purpose of this document is to help you identify areas for further development, and to provide suggestions of how to approach any learning needs you identify. The document contains a non-exhaustive list of learning opportunities in this area and explains how these might link to other areas of the RCGP curriculum. It is written for current trainees, but hopefully it will help educational supervisors to support their trainees in fulfilling this curriculum area.

**What is level 3 child safeguarding?**

The [intercollegiate guidance](http://www.rcpch.ac.uk/sites/default/files/page/Safeguarding%20Children%20-%20Roles%20and%20Competences%20for%20Healthcare%20Staff%20%2002%200%20%20%20%20(3)_0.pdf) (3) provides a full explanation of what the requirements are for relevant health professionals. The guidance provides a list of Knowledge, Skills and Attitudes and Values for General Practitioners at level 3 (pages 17-21). These outcomes should be achieved in addition to the competences outlined in levels 1 and 2 in the guidance document.

**How do I evidence this?**

Use the e-portfolio as a tool to record your learning activities and reflections. If you complete an e-module or course, be sure to upload any certificates to your mandatory training compliance passport, as well as reflections on what you have learned.

**Opportunities in primary care placements**

**Induction** – Induction is a valuable time to meet your practice team and learn about the systems in place in the practice. Your GP practice placements may be in different health boards, so take this time to identify local child protection contacts.

**Health visitor** – If you have the opportunity, spending time with the health visitor might give you some insight into the families in your practice with ongoing child protection concerns. Even if you cannot spend time with the health visitor, you might wish to ask them about the families they are involved with at an early stage in your placement.

**Midwife/family nurse** – Both midwives and family nurses have a role in supporting women during and after pregnancy (Family nurses usually support young mothers under the age of 19). Safeguarding issues are often identified during pregnancy, so case planning may be started prior to the birth of a vulnerable baby. Spending time with these team members might allow you to see the process for identifying and managing cases of concern during or immediately after pregnancy.

**Team meetings** – Most practices will have meetings about families of concern, which the health visitor will attend. If your educational programme allows, attending these can again highlight families with child protection concerns, or who are otherwise receiving additional support. These meetings can include updates on any changes to local procedures.

**Case discussion/CBD** – It is almost certain that you will encounter a case featuring a child protection concern during your training. This may be when you are seeing a parent rather than a child, for example a patient with drug or alcohol issues. You might find it helpful to discuss how you manage these cases with your educational supervisor, and you could consider suggesting such a case as a CBD. Issues that might arise from these cases could include ethical considerations around confidentiality, and how to include relevant team members.

**Case conferences** – Attending a case conference may not be possible if you are not directly involved in a child protection case. However, should the opportunity arise for you to attend a conference, consider taking the chance to see how these run, and what information various team members provide for during the meeting.

**Writing case reports** – Even if you are unable to attend a case conference, you might be asked to submit evidence for discussion by other members reviewing a case. This is a competence expected for level 3 child safeguarding. If it is appropriate for you to be writing a report for this reason, try to gain feedback from your supervisors on the quality of your report. Again, this might raise issues of confidentiality when deciding on the content of your report.

**Practice swaps** – During your training, you may be allocated to one or two practices throughout in your training period to allow experience of a different demographic. If you feel that you would like to experience working in a different environment before the end of your training, this may be arranged in your local region. Practice swapsshould be for educational reasons, for example allowing you exposure to a more affluent or deprived area, or an area which has a different way of delivering paediatric services.

**Other community learning opportunities**

During your time in general practice, you will have contact with multiple community based teams who each play a role in supporting vulnerable children and families. Below are some examples of services that you could consider spending time with. If you discuss this with your educational supervisor, they could guide you to the local services that might be most relevant.

**Alcohol and drug team –** The local alcohol and drug teams have systems in place to support vulnerable families.

**Community child health –** Community paediatricians often have an active involvement in child protection cases. You may be able to attend a clinic if you contact the local team.

**Sexual health –** Sexual health clinics can be the first point of contact for adolescents affected by sexual abuse. The local clinic might be able to provide you with information on how to manage similar presentations.

**Social work –** Spending time with social work might be possible, although it is likely to be more beneficial if you can spend time with them during direct client contact.

**Other third sector organisations –** There are a vast multitude of local organisations that provide support to families in need. Some organisations are willing to attend GP practices to provide training. Organising a teaching session by one of these groups for your practice could also help demonstrate your leadership skills.

**Opportunities in Educational Release Programme**

The educational release programmes across general practice in the Scotland deanery will usually have teaching and/or educational materials available on child protection. Some examples of these are given below.

**PBSGL module –**There is a PBSGL module titled Child Protection that your study groups might opt to do in either ST1 or ST3. Discussing this topic in your group will also allow you to learn from your peers about cases they have experienced.

**South-East**

ST1 ERP – During the ST1 ERP programme there is a scheduled session on child protection with a Lothian based paediatrician.

ST3 ERP – In your ST3 ERP group you will cover the topic of vulnerable patients – including child protection & Looked After and Accommodated Children (LAAC)/fostering.

**West**

ST1 and 2 while in hospital posts:  Regional Teaching session on “Child Safeguarding”

ST1 and 3 while in GP post day release – local sessions on safeguarding may be organised as part of the programme.

**North**

All trainees are expected to attend a Level 3 face-to-face child protection training course at any point in their GP training programme.  This is provided as part of the Educational Release programme.

**East**

ST1 ERP - As part of the introductory programme in ST1 there is a scheduled session on child protection

ST3 ERP - During the ST3 ERP programme there is a level 3 multidisciplinary session organised by the Child Protection Team

**Other Local Teaching**

Hospital-based Teaching**.** There are teaching programmes run by hospital departments for paediatric trainees that are often available to all GPSTs. These will usually include child safeguarding cases. For those who cannot attend in person, some may have video conference links these will need to be arranged). Details of the programme and available locations should be obtained through local resources, or by contacting the GP unit in your region.

**Opportunities in hospital posts**

Paediatrics posts might offer opportunities to attend significant case reviews and other arranged learning activities on this topic. Again, these may have a secondary care focus, so try to think about how they will help you in primary care.

Although you may not have completed a paediatrics post during your training, you will likely have exposure to children and young people in other areas such as accident and emergency. You might also be involved with managing child protection concerns in adult hospital posts whilst treating parents of children. When you encounter these situations, consider how the skills you have learned might be transferred to the primary care setting.

**Online modules and toolkits**

[**E-LfH**](http://www.e-lfh.org.uk/programmes/safeguarding-children/)(5) **–** A module on Child Safeguarding has been created in partnership with various other organisations, including RCPCH and RCGP**.** It has content applicable to level 3 safeguarding competences. Once registered with E-LfH, you can also access a module on Female Genital Mutilation.

[**RCGP toolkit**](https://www.rcgp.org.uk/clinical-and-research/resources/toolkits/child-safeguarding-toolkit.aspx)(6)**-** RCGP have a toolkit with NSPCC, which particularly focuses on the GP’s role in child safeguarding.

**Courses**

[**CPD connect**](http://www.cpdconnect.nhs.scot/courses/)(7) **–** NES CPD Connect run courses that cover some of the key level 3 safeguarding competencies.

**Other Useful Links**

**National Resources**

[**Getting it Right for Every Child (GIRFEC)**](http://www.gov.scot/Topics/People/Young-People/gettingitright/what-is-girfec)(8)– Government website explaining GIRFEC and roles of professionals.

[**Legislation in Scotland via NSPCC**](https://www.nspcc.org.uk/preventing-abuse/child-protection-system/scotland/legislation-policy-guidance/)(9) – Summary of relevant legislation around Child Protection procedures in Scotland.

[**Children’s Hearings Scotland**](http://www.chscotland.gov.uk)(10) – Information on the Scottish Children’s Hearing system.

**Local Resources**

**South-East**

Edinburgh and Lothians Child protection: Link to downloadable guidance on local procedures in Child Protection, Child Sexual Exploitation, Female Genital Mutilation and families with Drug and Alcohol problems. Applicable to Edinburgh, Midlothian, East Lothian and West Lothian Councils. The Child Protection Procedures document has local contact details for each area.

[**https://www.edinburgh.gov.uk/downloads/file/23055/child-protection-procedures**](https://www.edinburgh.gov.uk/downloads/file/23055/child-protection-procedures)

Fife Child protection: Information on Fife Child Protection Committee.

<https://www.fife.gov.uk/kb/docs/articles/health-and-social-care2/help-for-young-people/child-protection>

Borders Child protection: – Information on Borders Child Protection team.

<https://www.scotborders.gov.uk/info/20054/children_and_families/596/child_protection>

**West**

Glasgow Child protection:

<https://www.glasgowchildprotection.org.uk/index.aspx?articleid=1653>

GG&C Health Board:

<http://www.nhsggc.org.uk/about-us/professional-support-sites/child-protection-unit/>

Lanarkshire:

<https://www.nhslanarkshire.scot.nhs.uk/downloads/ph-2/>

Ayrshire and Arran:

<http://www.knowledge.scot.nhs.uk/child-services/communities-of-practice/child-protection/regional-child-protection-mcns/west-of-scotland-child-protection-network/local-service-information/ayrshire-and-arran.aspx>

Forth Valley:

<https://nhsforthvalley.com/health-services/az-of-services/childrens-services/child-protection/>

Dumfries & Galloway:

<https://www.dumgal.gov.uk/article/15775/Child-protection>

**North**

For local Child Protection guidance, and details of who to contact locally, access your local Child Protection Committee websites as follows:

Aberdeen: <http://www.aberdeencity.gov.uk/childprotection/>

Aberdeenshire: <https://www.aberdeencity.gov.uk/services/social-care-and-health/child-protection>

Moray Child: <http://www.moray.gov.uk/moray_standard/page_55497.html>

Highland: <http://hcpc.scot/>

Shetland: <http://www.safershetland.com/child-protection>

Orkney: <http://www.orkney.gov.uk/Service-Directory/S/the-orkney-child-protection-committee.htm>

Western Isles: https://www.cne-siar.gov.uk/social-care-and-health/children-and-families/child-protection/

**East**

Tayside - <https://www.nhstayside.scot.nhs.uk/GoingToHospital/ProtectingChildren/index.htm>

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