Guidance from the Swindon named GP for Safeguarding

Adult and child safeguarding have changed, with the release of the two new intercollegiate documents. These documents are co-published by the RCGP.

These two documents are:

1. [Safeguarding Children and Young People: Roles and Competencies for Health Care Staff; Intercollegiate Document, January 2019](https://www.rcn.org.uk/professional-development/publications/007-366)
2. [Adult Safeguarding: Roles and Competencies for Health Care Staff; Intercollegiate Document, August 2018](https://www.rcn.org.uk/professional-development/publications/pub-007069)

The overall aim of safeguarding training is that practitioners remain aware of how to identify abuse, what to do when they identify abuse and what the local processes are for their area.  The training done by a GP should cover each of these areas, for both adult and child safeguarding.  The emphasis is moving towards more of a practical knowledge of managing safeguarding cases rather than certificates as this is more likely to have the desired impact.

[Several documents exist](http://www.gpappraisals.uk/safeguarding-children.html) that can help you keep track of your safeguarding learning; a learning log, a summary of competencies required, and an example template to record your learning.

The number of hours required for child safeguarding is 12 over 3 years, unless you are a Practice Safeguarding Lead, in which case the number of hours required is 16 over 3 years.    
  
The number of hours required for adult safeguarding is 8 hours over 3 years, and this is the same for Practice Safeguarding Leads.

Other key points:

* Certificates are not required, either for CQC or for eportfolios
* All elements of safeguarding work can be reflected upon, and these will count towards the number of safeguarding hours required.  For example, attendance at a Strategy meeting that takes 30 minutes or a practice Safeguarding MDT could be written up with learning acquired and would count towards the Child Safeguarding Training Hours.
* CQC will accept reflective learning as part of the hours, so it is important to give your reflective summaries and learning log to your practice manager / keep handy if you are a locum.
* Certain areas count as both adult and child safeguarding hours, for example learning on domestic abuse, radicalisation, information sharing and consent.
* 50% must be participatory ie face to face and the gold-standard is multi-agency learning ie alongside police, social workers etc.

Best wishes,

Dr Michelle Sharma

Named GP for Safeguarding

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Swindon CCG  
The Pierre Simonet Building,

North Swindon Gateway,

North Latham Road,

Swindon, SN25 4DL  
TEL: [01793 683700](tel:01793%20683700)