

Core Competency Framework for the Protection of Children



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Introduction



Protecting children from harm is a key issue for health and social care. The publication of the Scottish Government's revised National Child Protection Guidance (2010) seeks to take account of recent policy and practice developments and to reflect the principles, values, and National Practice Model of the *Getting It Right for Every Child (GIRFEC)* approach. Ongoing work will explore the role of the National Child Protection Training Framework (Scottish Executive, 2005) and how best to meet the education and training requirements of the wider multi agency workforce. For this document, NHS Education for Scotland (NES) has focussed specifically on the requirements of the NHSScotland workforce, however this Core Competency Framework has been produced with careful reference to developments in partner agencies.

Purpose and Aims of the Core Competency Framework

This Core Competency Framework has been developed for all disciplines, professions and staff groups undertaking a **clinical** role within NHSScotland. The twin aims of the framework are (1) to describe the key areas of child protection work that are common and core across all disciplines, professions and staff groups with a clinical role, and (2) to describe the recommended core knowledge and understanding necessary to support these areas of work. Although this framework will be most appropriate for those with an identified role in relation to protecting children,

the information it contains will be of interest to anyone who needs to know how to recognise and respond to concerns about children, in the course of their other, more regular duties.

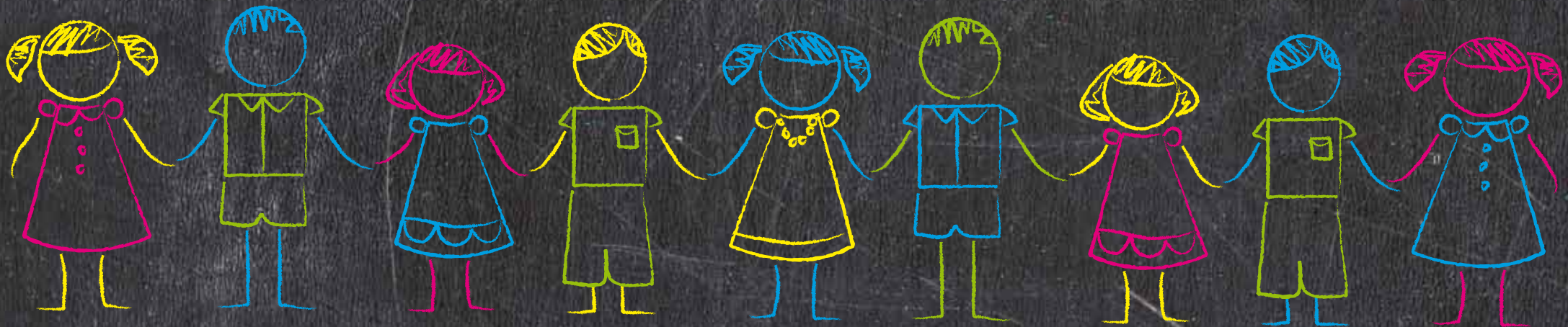
This framework is closely aligned to the NHS Knowledge and Skills Framework (NHS KSF) (Scottish Executive, 2004). It takes the specific dimension HWB3 Protection of Health and Wellbeing as the basis for development, and includes indicative links to other related core and specific dimensions. Those staff groups that do not use the NHS KSF will find they can still use this framework, by locating the areas of child protection work they undertake and then reading across to identify the recommended core knowledge and understanding necessary to support these areas.

This framework is written specifically for the Scottish context. In line with the Revised National Guidance for Child Protection (Scottish Government, 2010), it is based on the principles of the *GIRFEC* (Scottish Government, 2010) approach. Comprehensive definitions of key terms and concepts can be found in the National Guidance and those definitions are used here, in order to support shared understanding through shared language. A short Glossary is included in Appendix B for convenience; however this framework should be read in conjunction with the National Child Protection Guidance.

For ease of reading, the term 'child(ren)' is used throughout this document to refer to infants, children and young people.

Core Competency Framework

Levels 1 - 4



Level 1

LEVEL 1: The practitioner will recognise and report situations where there might be a need for protection

Indicators	Competency Statements	Knowledge and Understanding	KSF
The worker: a) identifies signs that people are at risk and that there might be a need for protective measures.	- Utilise the <i>GIRFEC</i> National Practice Model as appropriate - Use the <i>Wellbeing Indicators</i> as the broad framework to identify a child's needs - Use the <i>My World Triangle</i> as the starting point for considering what risks might be present - Identify any areas of unmet need and any aspects of the child's well-being that give cause for concern	- Overview of the principles and core components of the <i>GIRFEC</i> approach - Clear understanding of the eight <i>Wellbeing Indicators</i> - Basic requirements of what children need from the people who look after them, including an understanding of the potential impact of adversity in parents'/carers' lives - Basic understanding of the different dimensions of children's growth and development – physical, social, educational, emotional, spiritual and psychological - The general impact of the wider world of family, friends and community on children, including general factors affecting unborn children - The key indicators of abuse and neglect - The kinds of events, characteristics and circumstances that can give rise to concerns about children, including unborn children - General principles of information-sharing, including the distinction between circumstances where there is a need for consent and where there is not - Availability of specialist support and advice and how to access it - Local policies, protocols and systems for sharing information about children and their families - Information needs of those receiving information about children and their families - Local policies, protocols and systems (including chronologies) for recording information about children and their families	C1 C2 HWB2 HWB3
b) reports any suspicions of risk to the appropriate people and/or organisations consistent with legislation, policies and procedures.	- Share essential and relevant information to help identify emerging concerns and unmet needs - Seek appropriate support and guidance from senior colleagues and line manager - Describe any concerns clearly, including the possible impact the concern is having on the child or young person		
c) records and reports any information that is available on the risks.	- Give reasons and evidence to support the concerns raised - Share essential and relevant information about whether there have been any previous incidents or similar concerns		

Level 2

LEVEL 2: The practitioner will contribute to protecting children at risk

Indicators	Competency Statements	Knowledge and Understanding	KSF
The worker: a) contacts people who are at risk taking the necessary action if difficulties are encountered.	- Ensure all contact with children and their families reflects the safety, welfare and well-being of the child as the paramount consideration - If children or their families cannot be contacted and there is a concern they may be missing from the known address, follow locally agreed protocols to ensure they are located	- The specific principles of information-sharing to protect children at risk of harm, including the need to ensure decisions about the appropriate course of action are taken in collaboration with the relevant agencies - Basic understanding of the legal framework governing consent, confidentiality and the sharing of information when a child is considered to be at risk of harm - Clear understanding of national and local alert procedures for the early identification of missing children - Approaches to engaging and working with those children and families who can be 'hard to reach' and who typically find services 'hard to access'	C1 C2 HWB2 HWB3
b) explains to people the purpose for the contact, relevant regulatory powers, whether information will be confidential or disclosed and involves them in shared decision making.	- Communicate openly and honestly with children and their families when information about them needs to be shared, or when particular actions need to be taken, except where to do so would place the child at risk - Work collaboratively with children and their families, promoting their participation in gathering information and making decisions - Work with others in the wider professional network to ensure children and their families are supported when compulsory measures are necessary	- Clear understanding of own agency guidance for information-sharing, including whistleblowing policies - Children's Rights, including their rights to protection and participation, and ways of promoting participation of children and their families - Communication skills that enable children and their families to participate in decisions that affect them - National recommended standards describing what children and their families need from agencies and professionals working to protect and support them	

Level 2

LEVEL 2: The practitioner will contribute to protecting children at risk

Indicators	Competency Statements	Knowledge and Understanding	KSF
c) prepares for and contributes to proactive interventions in a manner that: - is consistent with legislation, policies and procedures; - is appropriate to the people concerned; - is appropriate for the setting; - maintains the health and safety of the people themselves, self and others.	• Use the <i>My World Triangle</i> to help keep the child's whole world in mind and provide immediate help where necessary while assessment continues • Think beyond the immediate concern that has been raised to take into account the wider range of unmet needs • Use clinical supervision to support and enhance reflective practice	• The range of life events; circumstances; and characteristics of the child, family and wider environment that can impact on children • The range of potential effects of childhood abuse and neglect • The potential impact of parental health on parenting capacity including issues like parental substance misuse and domestic abuse • The range of direct and indirect ways children sometimes use to communicate their needs • The ways personal and professional beliefs and values can affect practice • The potential emotional impact (on workers) of protecting children at risk and ways of managing this	C1 C2 HWB2 HWB3
d) takes appropriate and immediate action in response to contingencies.	• Where appropriate provide single agency help without delay • When additional help is required, work with others to ensure this is timely, appropriate and proportionate	• The general range of possibilities for intervention, both single agency and multi agency • General roles and responsibilities of other professionals and partner agencies working to protect and support children and their families	
e) records and reports the interventions consistent with legislation and relevant policies and procedures.	• Document decisions that have been taken and ensure the evidence for taking these decisions is recorded • Ensure information about any interventions is recorded including, what was done, why, whether the desired outcomes have been achieved and what further help is required.	• Standardised systems for recording information about children and their families • How to review and update a chronology of significant events for a child and his/her family	

Level 3

LEVEL 3: The practitioner will implement aspects of a protection plan & review the effectiveness of this

Indicators	Competency Statements	Knowledge and Understanding	KSF
The worker: a) works in partnership with others to identify and assess the nature, location and seriousness of the particular risks	- Working with others, use a structured approach (the <i>My World Triangle</i>) to gather and record information about the child's physical, social, educational, emotional, spiritual and psychological development - Working with others, use a structured approach (the <i>Resilience Matrix</i>) to analyse this information, making sense of the different interacting aspects of the child's world	- From the <i>My World Triangle</i>, the different dimensions of growth and development, including: - Being Healthy (physical and mental health) - Learning and Achieving - Confidence in Self - Being able to Communicate - Learning to be Responsible - Becoming Independent - Enjoying Family and Friends - From the <i>My World Triangle</i>, the different things children need from those who look after them, including: - Everyday Care and Help - Keeping the Child Safe - Being There for the Child - Play, Encouragement and Fun - Guidance and Support to Make the Right Choices - Knowing What is Going to Happen and When - Understanding the Family Background and Beliefs - From the <i>My World Triangle</i>, the different aspects of the child's wider world to explore, including: - School - Support From Family, Friends and Other People - Enough Money - Comfortable and Safe Housing - Work Opportunities for Family Members - Belonging - Local Resources - Understanding of some key theories of child development, including <i>Attachment Theory</i> and the concept of <i>Resilience</i>	C1 C2 C5 HWB2 HWB3 HWB5

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Level 3

LEVEL 3: The practitioner will implement aspects of a protection plan & review the effectiveness of this

Indicators	Competency Statements	Knowledge and Understanding	KSF
The worker: a) works in partnership with others to identify and assess the nature, location and seriousness of the particular risks (continued)		- Detailed understanding of the impact of abuse and neglect, including the cumulative effects of neglect - Basic awareness of the range of serious and enduring mental health difficulties that can be experienced by children - How to judge the balance of strengths and needs using the information gathered, using the concepts, where appropriate, of Resilience, Vulnerability, Adversity and Protective Environment - Understanding of key principles of risk assessment of a single event and also risk assessment of accumulative concerns	C1 C2 C5 HWB2 HWB3 HWB5
(b) prioritises own work in line with areas of highest risk coordinating own actions with anyone else involved	- Demonstrate a clear link between assessment and planning - Identify what needs to be done to support the child and take appropriate action, requesting additional help if needed - Be familiar with the working practices of other agencies	- How to summarise the child's needs, identify priorities and describe what needs to change to improve the child's wellbeing - Awareness of approaches to assessing and managing risk within the context of <i>GIRFEC</i> - Awareness of current evidence-based approaches to the care and protection of children, including theories of early intervention and programmes aimed at prevention of abuse and neglect - Potential significance of accumulating or repeated lower level concerns - The general range of single and multi agency services, including specialist services, available to the child and family; their roles and responsibilities; and how to request their help - Comprehensive understanding of how different agencies can work together effectively when providing services for children and their families	

Level 3

LEVEL 3: The practitioner will implement aspects of a protection plan & review the effectiveness of this

Indicators	Competency Statements	Knowledge and Understanding	KSF
c) contacts people who are at risk taking necessary action if difficulties are encountered	Make sure the child and family understand what is happening at each point so that they can participate in the decisions that affect them	- Different ways of communicating effectively according to the needs of the child and family, supporting all those involved to articulate their thoughts and feelings - Legislative context and specific legislation relating to the care and protection of children, including compulsory measures and associated processes - Local systems and procedures for the care and protection of children - How to focus systematically on the strengths and adversity in the child’s world in order to identify the kind of intervention most appropriate and proportionate to the level of need - The important relationships between focused, shorter term interventions and broad, longer term outcomes that support the child’s future development - The range of potential emotional responses common in workers who provide care and protection for children - How to access and make use of opportunities for support and clinical supervision - How to enable and support critical thinking and self awareness for self and others - How to provide support and clinical supervision for workers who provide care and protection for children	C1 C2 C5 HWB2 HWB3 HWB5
d) explains to people the purpose for the contact, any requirements for statutory enforcement, what people are required to do to comply with statutory enforcement and what will happen if they fail to comply and involves them in shared decision making			
(e) prepares for and undertakes the protective interventions that s/he is responsible for as part of the protection plan in a manner that: - is consistent with evidence-based practice, legislation, policies and procedures; - is appropriate to the people concerned; - is appropriate to the setting; - maintains health and safety	- Working with others, ensure analysis of information gathered informs the planning process in ways that are appropriate and proportionate - Working with others, specify outcomes to be achieved - Understand, plan for and monitor the linkages between shorter term, intermediate and longer term outcomes - Understand and manage own emotional responses to providing care and protection for children, in order to sustain critically reflective practice - As appropriate, provide support and guidance for others helping to provide care and protection for children		
f) undertakes own work in ways which manage risk and are consistent with statutory enforcement			

Level 3

LEVEL 3: The practitioner will implement aspects of a protection plan & review the effectiveness of this

Indicators	Competency Statements	Knowledge and Understanding	KSF
g) works with other members of the protection team to plan, monitor and review the effectiveness of the protection plan	- Working with others, ensure the child's plan includes and records: - Reasons for the plan - Partners to the plan - The views of the child and their parents or carers - A summary of the child's needs - What is to be done to improve a child's circumstances - Details of action to be taken - Resources to be provided - Timescales for action and for change - Contingency plans - Arrangements for reviewing the plan - Lead Professional arrangements where they are appropriate - Details of any compulsory measures if required - Review whether the actions taken have achieved the outcomes specified and whether anything needs to be changed - Review whether the plan can still be managed within the current environment	- Awareness of a range of current research themes and policies that relate to the protection of children - Local models and systems for multi agency approaches to the care and protection of children, including processes for case conferences and for co-ordinating a child's plan - The difference between outputs and outcomes and how to relate the outcomes to the summary of identified needs - Standardised systems for recording, reviewing and sharing a child's plan, in both single agency and multi agency contexts	C1 C2 C5 HWB2 HWB3 HWB5
h) records and reports on the aspects of the overall protection plan for which s/ he is responsible consistent with legislation, policies and procedures			

Level 4

LEVEL 4: The practitioner will develop and lead on the implementation of an overall protection plan

Indicators	Competency Statements	Knowledge and Understanding	KSF
The worker: a) works in partnership with others to identify and assess: - the nature, location and seriousness of risks; - the problems that need to be addressed; - the factors that might be causing the problems; - priorities; - legislative, policy and procedural requirements	• Establish and maintain effective links with partner agencies, at both operational and strategic levels • Ensure assessment of risk is supported by appropriate analysis • Recognise patterns of concern at both individual and population levels • Support investigative processes, ensuring legal requirements are fulfilled	• Principles and practice of interagency working in child protection, including knowledge of current research evidence; local and national structures and systems in place to oversee the protection of children • Theory and research in relation to concepts of risk and need in child protection, including the relationship between risk and need • How to use frameworks for assessment, including the <i>Resilience Matrix</i>, to support interpretive analysis of the strengths and adversity in a child's life in relation to the positive and potentially adverse factors affecting him/her • How health promotion and prevention strategies relate to, and can contribute to, the protection of children • How child protection investigations are conducted, including the full range of roles and responsibilities of all those involved • Current and emerging research themes related to protecting children • The full range of principal theories and concepts that inform approaches to protecting children • Different ways of communicating and sharing key messages about best practice in protecting children, informing individual practitioners; teams; services; and organisations • The evidence base and methodology underpinning the implementation of the <i>Getting It Right for Every Child</i> approach • How children can be protected from harm and abuse within the <i>Getting It Right for Every Child</i> framework • Specific theories relating to the process of decision-making in child protection, including factors that support analysis and those that make it more difficult	C1 C2 C4 C5 HWB1 HWB3 G5
b) identifies and agrees with others a range of options for addressing agreed priorities and selects those that have the best chance of success.	• Inform practice at all levels by leading the dissemination of research evidence and theoretical knowledge concerning the protection of children • Facilitate a shared understanding and conceptual overview of <i>Getting It Right for Every Child</i> principles, values and the National Practice Model, at both operational and strategic levels		
c) develops with the help of others an overall protection plan.			
d) considers each specific case in the context of the overall protection plan and decides with others how to proceed.	• Support a cultural shift from <i>output</i> to <i>outcome</i> led assessment, planning and review		

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Level 4

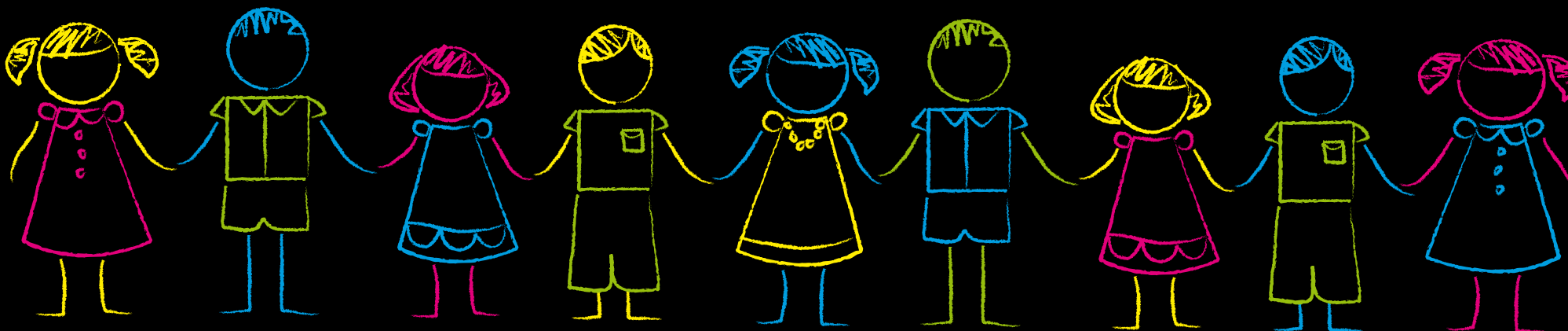
LEVEL 4: The practitioner will develop and lead on the implementation of an overall protection plan

Indicators	Competency Statements	Knowledge and Understanding	KSF
	Facilitate the critical application of decision making processes that are evidence based and analytical	How to influence and contribute to an organisational climate that enables practitioners to think clearly, in order that children receive the help they need when they need it	
(e) identifies and agrees in partnership with others: - who will be involved in the management of specific risks; - how the risks can best be managed; - who needs to be kept informed.	- Reduce likelihood of parallel pathways emerging for the assessment and recording of needs, and the development of a child's plan - Facilitate the management of key transition points, such as moving from health to nursery, or from children's services to adult services, at both operational and strategic levels - Contribute to the management of inter-agency concerns about the sharing of sensitive information - Facilitate provision of appropriate specialist support, supervision and consultation for practitioners, across traditional professional and organisational boundaries	- The relationship between National Outcomes and Indicators, the HEAT Targets, the local Single Outcome Agreement and the outcomes identified in the Children's Service Plan - Principles and practice of integrated, seamless support for children, coordinated at the point of delivery and supported by a single planning process - How to ensure planning meets children's longer term needs (including specialist and therapeutic support for recovery) as well as their immediate safety - Legislative context and specific legislation relating to sharing confidential information in relation to protecting children - Theories of dynamics and interpersonal processes in protective work with children and families - Theories concerning the impact of protective work with children and families, on practitioners and on those supervising them - Models of supervision and consultancy appropriate for those working to protect children - Strategies for dealing with emotionally powerful situations, both for self and others	C1 C2 C4 C5 HWB1 HWB3 G5
f) coordinates across the different people involved to effectively manage risks facilitating swift and effective communication and support.			
g) undertakes any protective interventions that are necessary for the management of risks, their complexity and for which s/ he holds responsibility.			
h) maintains an on-going accurate record of risks, the actions taken and other investigations that have been put into effect.			

Level 4

LEVEL 4: The practitioner will develop and lead on the implementation of an overall protection plan

Indicators	Competency Statements	Knowledge and Understanding	KSF
i) reviews with others the effectiveness of protection plans, any issues with their implementation, and makes the necessary changes as a result.	- Review local operational systems and procedures for protecting children - Identify and address barriers to the delivery of appropriate, timely and proportionate support, at both operational and strategic levels - Identify, share and promote good practice within and between services and organisations - Review and interpret national and international advice, guidance and legislation on the protection of children, advising on implementation of recommendations	- Methods of audit and evaluation appropriate to systems and processes supporting the protection of children - Quality Indicators used in joint inspections, and the framework for self-evaluation processes, to evaluate the help children get when they need it - Case Review and Significant Case Review processes, procedures and requirements - Current and proposed policy, standards, guidance and recommendations that impact on the protection of children, including in response to Case Reviews and Significant Case Reviews	C1 C2 C4 C5 HWB1 HWB3 G5



Using the Core Competency Framework

Using this framework is not about every employee attending a set number of hours of training (Scottish Executive, 2004). It is about reflecting on what employees are being asked to do to protect children, and identifying what they need to know and understand in order to do it. Then, it is about reviewing what employees already know and understand, and identifying appropriate opportunities for development.

Identifying the Appropriate Level

In accordance with the NHS KSF guidance (Scottish Executive, 2004), progression through the four levels of this framework is characterised by:

- Moving from recognising potential risks and hence a possible need for protection to actively addressing risks through a wide range of protective measures
- Increasing knowledge and skills in relation to the seriousness and frequency of risks
- An increasing understanding of the legislative context and its application in different circumstances
- An increasing involvement in inter-agency and partnership working at a range of levels to improve the protection of the public (Scottish Executive, 2004)

The simplest way to identify the appropriate level is to examine the descriptive titles for each level, and then use those, together with the Indicators, as a guide to see which level best reflects the work undertaken. The *Competency Statements* and *Knowledge and Understanding* sections of this framework are incremental and build on previous levels; for example, it is assumed that a practitioner using Level 3 will be confident with all aspects of levels 1 and 2.

Employer and employee are best placed to decide the most appropriate level for a particular post, because similar roles can vary considerably in their work functions according to local arrangements. However, the following examples provide guidance about the levels most likely to suit some specific job roles. It is not possible to include examples that address every situation, and so the following illustrations are intended to show how the levels of the framework could be applied in particular circumstances.

At level 1 the practitioner recognises and reports situations where there might be a need for protection.

For example, John is a speech and language therapist working with children. Some of the children he works with are already known to be at risk of harm, and others could be in need of protection but are not currently known to protective services. Communication difficulties can add another layer of vulnerability for some children, because they can find it harder to let someone know they need help. John needs to understand the kinds of experiences that can affect children's wellbeing, including the kinds of family circumstances that can indicate a need for protection, or that might place a child at increased risk of harm. Although John would not be expected to make decisions about level of risk or protective interventions, he does need to know what kinds of things should make him concerned, what to do about those concerns and what information he needs to record. He also needs to understand that repeated low level concerns, and combinations of concerns, can present a significant risk to children's wellbeing. This level covers the basic requirements of recognising and reporting situations where children might need protection.

At level 2 the practitioner contributes to protecting people (children) at risk.

For example, Sanjay is a mental health nurse, and he works with adults who are drug and alcohol dependent. He does not work directly with children, but many of the adults he supports, are parents of children of all ages. Sanjay needs to actively consider the needs of his clients' children, and must be able to contribute to an assessment of children's circumstances when necessary. This means he needs to understand how aspects of parenting capacity can be affected by substance misuse, including for example the ability to provide a safe and secure environment, the ability to be emotionally available to the child, and the ability to be able to anticipate and meet the child's needs in an age-appropriate way. Sanjay needs to understand the kinds of difficulties facing these children and their families, and that children suffering negative effects of parental substance misuse can use a range of ways to communicate what they feel about what is happening to them. He needs to know that experiences of abuse and neglect can have consequences for the children involved. Sanjay must be able to recognise when children might need additional help or protection, and be able to share this information with the appropriate professionals. This level contains information about working with situations where children are known to be at risk of harm, which is not included at level 1.

At level 3 the practitioner implements aspects of a protection plan and reviews its effectiveness.

For example, Maria is a health visitor, working with a wide range of families. She often supports children who are very vulnerable, and her work involves regular collaboration with other professionals such as social workers and nursery teachers. Maria frequently supports child protection plans by sharing her experience of working with particular families, or her observations of interactions between parents and their children. In order to do this effectively, she needs to know how to systematically gather information about the lived experience of the child, as well as how to record and make sense of this information in a way that helps guide any interventions. Maria needs to have a clear understanding of the kind of parenting that best supports children of different ages, as well as a sound grasp of the implications of abuse and neglect. She needs to be able to identify and respond to changes in the child's experience, for example an escalation of difficulties or an improvement in circumstances. In particular, she must be able to see when additional help or protection is needed, and know how to share information, including clear evidence for her concerns, quickly and appropriately. Maria is never solely responsible for a child's protection plan, rather she works together with colleagues in her own agency and other agencies in order to support and inform judgements about risk, and decision-making about appropriate interventions. This level has an increased focus on theoretical frameworks and research evidence for practice, which is different from levels 1 and 2.

At level 4 the practitioner develops and leads on the implementation of an overall protection plan.

This does not mean co-ordinating a child's protection plan, it means playing a senior role in leading (with others) the protective interventions for which the practitioner's NHSScotland service or Board takes responsibility. For example, Amreen works as a Nurse Consultant for Child Protection, ensuring her NHS Board's policies and procedures enable timely, appropriate and proportionate help for children who need it. In order to achieve this, Amreen needs to understand the role NHSScotland plays in the protection of children. She needs a clear grasp of the up-to-date policy context, underlying philosophies and methodologies for protecting children in Scotland. Amreen needs to be able to review and interpret (with others) guidance, advice and legislation, so that she can take the lead in developing action plans in response to recommendations – for example, from Significant Case Reviews and Case Reviews. She needs to be confident in assessing how an organisational action plan will impact on outcomes for children, and be able to play a lead role in quality assurance and self-evaluation processes. Amreen also requires a comprehensive knowledge of the research evidence that underpins approaches to the protection of children, in order that she can support practice by leading on the dissemination of findings. This level differs from levels 1, 2 and 3 by focusing on expert provision of strategic and operational consultation and advice across service(s) and organisation(s).

Identifying Appropriate Learning and Development Opportunities

Each profession and staff group will vary in what they have learned in their initial programmes of education and also in their practice experience. In addition there is a range of different types of learning and development activities including (but not restricted to) reflective practice; distance learning; work based learning; private study; e-learning; further and higher education programmes; training courses; and conferences. Child Protection training will be available locally through NHS Boards and Child Protection Committees and this framework will help practitioners and their managers to identify the most appropriate resources and opportunities.

For example, Fergus is a Psychologist working with a Child and Adolescent Mental Health Service. He has identified that Level 2 is appropriate for his role and can use the Knowledge and Understanding points to decide whether he requires any further learning and development in this area. Fergus's professional psychology training has equipped him with a clear understanding of most aspects of Level 2, for example how to engage and work with children and families and the impact of abuse and neglect. He is confident working with parents and understands how their approach to parenting can be affected by different factors. Fergus feels he needs to develop his understanding of interagency working, in particular the legal

framework around sharing information and the local systems and protocols that support the protection of children. He can also use Level 1 because in this core competency framework, each level builds on previous levels. This helps Fergus identify the GIRFEC National Practice Model as something else he needs to learn more about. Fergus can now seek training courses that include these themes in their learning outcomes, raise these issues with colleagues in supervision sessions, find a conference exploring these topics and/or undertake private study in these areas.

In a different context, Maureen works as a training manager and her NHS Board have asked her to recommend training courses in child protection for a range of Primary Care staff groups. Using the framework, Maureen and the staff groups can identify the required areas of knowledge and understanding, and then map these to the learning outcomes of available training courses. Maureen will be able to see the courses that best meet the needs of different staff groups, and she will also be able to see if there are particular gaps that are not currently met by existing provision. If Maureen decides to commission a bespoke training course, she will be able to use the required areas of knowledge and understanding she has identified, to inform potential providers about appropriate learning outcomes and content.

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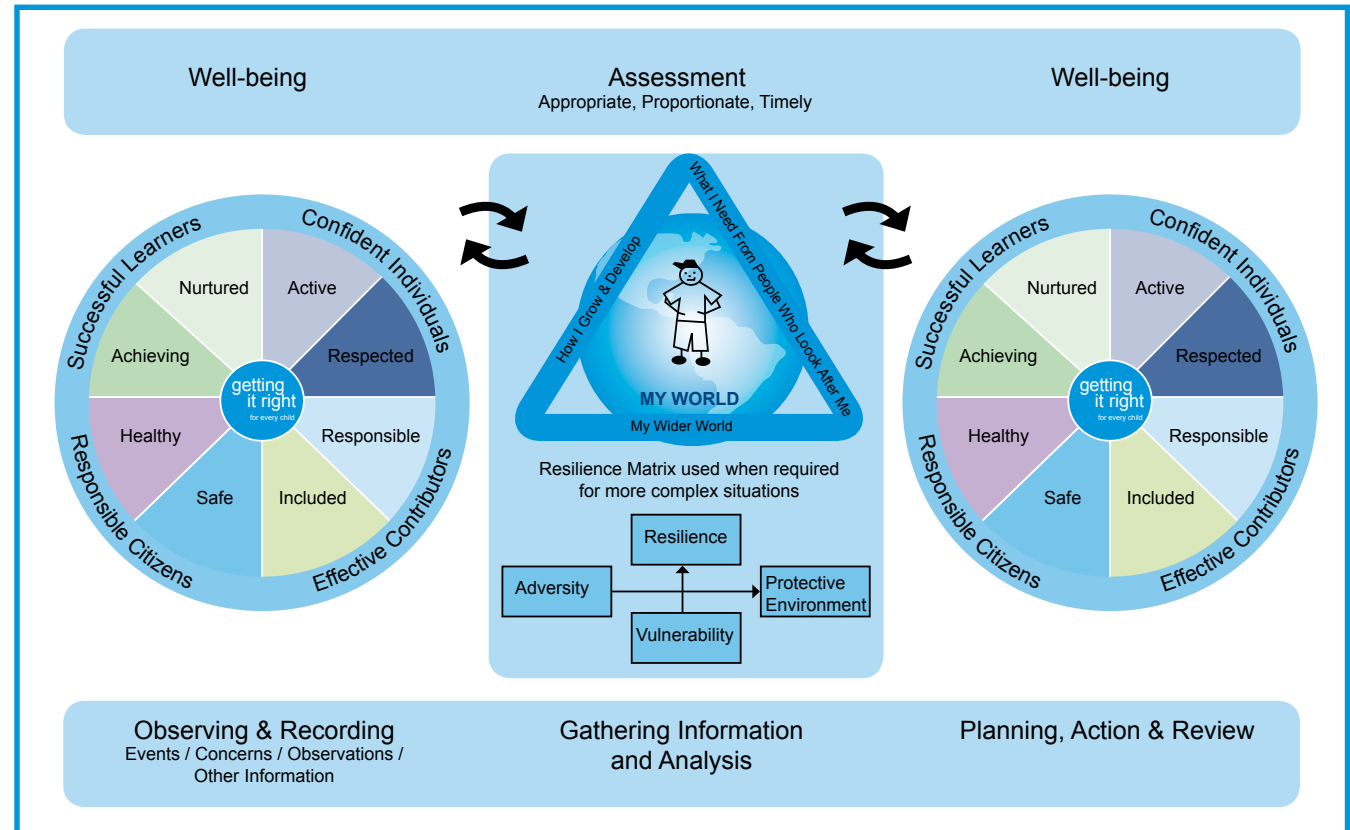
Appendix A - Development of the Core Competency Framework



Development of the Core Competency Framework

The Scottish Government asked NHS Education for Scotland (NES) to develop this Core Competency Framework. The Chief Nursing Officer Directorate, the Child and Maternal Health Directorate, the Child Protection Policy Unit and the Getting It Right for Every Child Team have overseen its development and supported the project team at NES throughout. The project team also worked closely with a small reviewing group who shaped and commented on early drafts of the Competency Statements and Knowledge and Understanding sections. This reviewing group included representatives from Higher Education providers of postgraduate child protection programmes; members of the national Child Protection Committees Training Group; and members of the Scottish Child Protection and Vulnerable Children Lead Nurses Executive Group. Advice was sought from the national NHS Knowledge and Skills Framework (KSF) Team. Lastly, the framework draws heavily on the evaluation and briefings of the Getting It Right for Every Child Highland pathfinder project (Scottish Government, 2010), as well as the multi agency inspection reports from HMIE (2009) and the recommendations therein.

Getting It Right for Every Child National Practice Model



Appedix B - Glossary



Glossary

This Glossary of Terms is taken from the National Guidance for Child Protection in Scotland (Scottish Government, 2010) and should be read in conjunction with the definitions of key concepts therein.

Child

A child can be defined differently in different legal contexts. Under the Children (Scotland) Act 1995, a child is defined in relation to the powers and duties of the local authority. However the importance of context is critical for those aged between 16 and 18. Those in this age group who are still subject to a supervision requirement by a Children's Hearing can still be viewed as a child. Moreover, the United Nations Convention on the Rights of the Child applies to anyone under the age of 18.

Child Abuse

Abuse (and neglect) is a form of maltreatment of a child. Somebody may abuse a child by inflicting, or by failing to act to prevent, significant harm to the child. In a child protection context, there are three different types of abuse that can be identified. Physical abuse is the causing of physical harm to a child or young person. Emotional abuse is persistent emotional neglect or ill treatment of a child causing severe and persistent adverse effects on the child's emotional development. Sexual abuse is any act that involves the child in any activity for the sexual gratification of another whether or not it is claimed that the child either consented or assented.

Child Neglect

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. It may involve a parent or carer failing to provide adequate food, shelter and clothing, to protect a child from physical danger, to ensure

access to appropriate medical care or treatment and to provide a child's basic emotional needs.

Child Protection

Child protection is when a child requires protection from child abuse or neglect. For a child to require protection, it is not required that child abuse or neglect has taken place, but rather a risk assessment has identified a likelihood or risk of significant harm from abuse or neglect.

Getting It Right for Every Child (GIRFEC)

The GIRFEC approach is a Scotland wide programme of action to improve the well being of all children and young people. It's primary components include: a common approach to gaining consent and sharing information where appropriate; an integral role for children, young people and families in assessment, planning and intervention; a co-ordinated and unified approach to identifying concerns, assessing needs, agreeing actions and outcomes, based on the wellbeing indicators; a Named Person in universal services; a Lead professional to coordinate and monitor activity where necessary; and a skilled workforce within universal services that can address needs and risks at the earliest possible point.

Harm/Significant Harm

'Harm' means the ill treatment or the impairment of health or development of the child – in this context, 'development' can mean physical, intellectual, emotional, social or behavioural development and 'health' can mean physical or mental health. Child Protection is closely linked to the risk of significant harm – whether the harm suffered, or likely to be suffered, by a child is 'significant' is determined by comparison of the child's health and development with what might be reasonably expected of a similar child.

My World Triangle

As part of the GIRFEC 'practice model' for assessing risk and need, the My World Triangle is a framework that provides a starting point for considering what risks might be present in a child's life. It focuses attention on the three dimensions of a child's world: the child themselves; their family; and their wider environment.

Resilience Matrix

The Resilience Matrix is a tool for analyzing what the information gathered around a particular child protection concern might mean for a child. It provides practitioners with a framework for weighing up the particular risks against any protective factors for the individual child in relation to resilience, vulnerability, adversity and the protective environment.

Risk

In the context of the National Guidance for Child Protection in Scotland, risk is the likelihood or probability of a particular outcome given the presence of factors in a child's or young person's life. What is critical with respect to child protection is the risk of significant harm from abuse or neglect.

Wellbeing Indicators

The Wellbeing Indicators are the broad framework for identifying a child's needs where potential child protection (and other) concerns are identified. They do so under eight headings – safe; healthy; achieving; nurtured; active; respected; responsible; and included – which are used to identify what needs to change in the child's plan (or child protection plan) and how progress on outcomes should be monitored and recorded.

*Core Competency Framework
for the Protection of Children*

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