



## Review of the Children First Basic Level Training and Keeping Safe Training programmes

Title	Review of the Children First Basic Level Training and Keeping Safe Training programmes
Author(s)	Reddy, John;Devaney, Carmel;McGregor, Caroline
Publication Date	2014-04
Publisher	UNESCO Child and Family Research Centre, National University of Ireland, Galway



**An Ghníomhaireacht um Leanaí agus an Teaghlach**

*Child and Family Agency*

# **Review of the Children First Basic Level Training and Keeping Safe Training Programmes**

**April 2014**

Dr Carmel Devaney and Professor Caroline McGregor,

UNESCO Child and Family Research Centre, National University of Ireland, Galway

## Contents

<b>Foreword</b> .....	<b>5</b>
<b>Chapter One: Introduction</b> .....	<b>7</b>
1.1 Introduction .....	7
1.2 Review of the Children First Basic Level Training and the Keeping Safe training programmes .....	8
1.2.1 Aims and objectives of review process .....	9
1.3 Layout of this Report .....	10
<b>Chapter Two: Methods and Analysis</b> .....	<b>11</b>
2.1 Research Design .....	11
2.2 Sampling .....	11
2.2.1 Participants for quantitative research (Children First Basic Level Training) .....	12
2.2.2 Participants for quantitative research (Keeping Safe training) .....	13
2.2.3 Participants for qualitative research (Children First Basic Level Training and Keeping Safe training) .....	14
2.3 Piloting .....	14
2.4 Data collection.....	15
2.6 Ethical issues .....	16
2.7 Limitations.....	16
<b>Chapter Three: Children First Basic Level Training programme</b> .....	<b>18</b>
3.1 Introduction .....	18
3.2 Children First Basic Level Training programme questionnaire .....	18
3.2.1 Children First Basic Level Training programme .....	19
3.2.2 Children First Basic Level Training: Aims and Objectives.....	22
3.2.3 Children First Basic Level Training: Understanding and Relevance . .....	26
3.2.4 Children First Basic Level Training: Outcomes and Practice .....	28
3.2.5 Summary.....	35
3.3 Children First Basic Level Training programme Interviews.....	37
3.3.1 Children First Basic Level Training: Programme Aims .....	37
3.3.2 Children First Basic Level Training: Relevance of Topic areas.....	44
3.3.3 Children First Basic Level Training: Outcomes and Practice .....	49
3.3.4 Summary.....	52

<b>Chapter Four: Keeping Safe training programme .....</b>	<b>53</b>
4.1 Introduction .....	53
4.2 Keeping Safe training programme questionnaire .....	53
4.2.1 Keeping Safe training programme.....	54
4.2.2 Keeping Safe training: Achieving Aims and Objectives .....	56
4.2.3 Keeping Safe training: Understanding and Relevance .....	58
4.2.4 Keeping Safe training: Outcomes and Transfer of Learning to Practice64	
4.2.5 Summary.....	67
4.3 Keeping Safe training programme Interviews .....	69
4.3.1 Introduction .....	69
4.3.2 Keeping Safe training: Programme Aims.....	69
4.3.3 Keeping Safe: Outcomes and Practice.....	77
4.3.4 Summary.....	80
<b>Chapter Five: Discussion and Recommendations .....</b>	<b>81</b>
5.1 Introduction .....	81
5.2 A brief overview of the literature .....	82
5.3 Children First Training Basic Level Training programme.....	84
5.4 Keeping Safe training programme .....	88
5.5 Overview of Findings from Children First Basic Level Training and Keeping Safe training.....	92
5.6 Conclusion and Recommendations .....	94
5.7 Summary of Recommendations .....	97
5.7.1 Children First Basic Level Training.....	97
5.7.1.1 Changes required to content of programme .....	97
5.7.1.2 Inter-professional and Inter-disciplinary co-operation.....	98
5.7.1.3 On-going Evaluation; Review and Follow-Up Training.....	98
5.7.2 Keeping Safe training programme.....	98
5.7.2.1 Content Changes .....	98
5.7.2.2 Interdisciplinary working .....	99
5.7.2.3: On-going review, evaluation and follow-up.....	99
5.7.3: Children First Basic Level Training and Keeping Safe training .....	99
References.....	102
Appendices.....	104
Appendix A: Membership of Working Group.....	104

Appendix B: List of Designated Officers.....	105
Appendix C: Letter from National Manager Workforce Development Children & Families Services .....	106
Appendix D: Introductory Letters and Questionnaires .....	107
Appendix E: Information & Consent Sheet.....	126
Appendix F: Interview Schedules.....	128
Appendix G: Letter of Reminder ( <i>electronic version</i> ).....	132

**List of Figures:**

Figure One: Participant’s Professions.....	19
Figure Two: Did the Children First Basic Level Training programme adequately meet your practice needs? .....	20
Figure Three: Better equipped to manage risk to children because of participation? .....	30
Figure Four: Improving services through increasing participants understanding of child protection and welfare? .....	39
Figure Five: Enhancing inter-professional and interagency cooperation.....	42
Figure Six: To what extent was participant awareness of child protection issues and reporting procedures increased? .....	71
Figure Seven: To what extent were participants assisted in exploring aspects of the safety and general welfare of children and young people? .....	74
Figure Eight: To what extent were ways of creating an inclusive environment whilst working with children and young people identified? .....	75
Figure Nine: To what extent were issues of recruitment, selection and management of staff and volunteers explored? .....	77

## List of Tables:

Table One: Participants from Children First Basic Level Training.....	13
Table Two: Participants from Keeping Safe training.....	13
Table Three: Rate programme material according to specific role.....	22
Table Four: Aim of improving services to children and families through increased understanding child protection and welfare.....	23
Table Five: Aim of enhancing inter-professional and interagency co-operation	24
Table Six: Understanding of Children First Basic Level Training Topics.....	27
Table Seven: Relevance of Children First Basic Level Training modules in terms of participants' specific role .....	28
Table Eight: More confident in responding to child protection and welfare concerns.....	31
Table Nine: More confident in managing your role after a report of a concern .	32
Table Ten: Rate course material according to specific role.....	55
Table Eleven: Did the training programme meet its aims of exploring recruitment, selection and management of staff and volunteers?.....	58
Table Twelve: Do you have a full understanding of relevant legislation and policies on child protection and welfare?.....	59
Table Thirteen: Do you have a full understanding of the key factors in ensuring the safe management of activities?.....	60
Table Fourteen: Understanding of how to develop an anti-bullying code for children.....	61
Table Fifteen: Understanding of the additional considerations for running residential activities.....	61
Table Sixteen: Do you have a full understanding of the benefits of agencies and disciplines working together? .....	63
Table Seventeen: Do you have a full understanding of ways to include disabled children.....	64

## Foreword

This evaluation conducted by the UNESCO Child and Family Research Centre, was commissioned by TUSLA - Child and Family Agency (formerly the HSE Children and Families Services) to review the Children First Basic Level Training and the Keeping Safe Training Programmes. These two programmes have been the key standardised child protection and welfare training programmes provided by the HSE to support the implementation of *Children First: National Guidance for the Protection and Welfare of Children* (2011). The overall purpose of the Review was to provide some baseline information to inform the requirements of the statutory and community service providers in relation to child protection and welfare training and to establish if the current training is meeting those requirements. This is particularly timely given the establishment of TUSLA – The Child and Family Agency at the beginning of this year and the forthcoming legislation on Children First.

The Working Group and the Researchers who undertook this Review are to be commended on the quality and in-depth findings that this research has made available to TUSLA at this critical time for the development of children and families services. The endorsement that the Review gives to the training programmes that have been provided over a number of years, in for the most part meeting their stated aims, is very reassuring for TUSLA, the trainers and the recipients of the programmes. It is also heartening that recipients of the programme reported increased confidence in dealing with concerns about risk and increased understanding of their roles.

There are key messages from the research that need to be brought forward into the planning for future programmes including:

- The importance of inter-disciplinary and inter-agency training for individuals working in environments where child protection and welfare training is required. More than any other finding this strength for each of the programmes stands out as being highly valued. In fact, it appears that there is a clear message that this strength should be further enhanced by focusing more on role clarification issues and referral pathways between statutory and community sectors.
- The importance of the 'pitch' of the training is also highlighted. While it is important to have a basic programme available for all relevant staff in statutory and community sectors, such a programme will by its very nature not meet the needs of those who require a more advanced programme to deliver on their roles and responsibilities in relation to child protection and welfare. This raises issues about ensuring that the training needs of staff that require a more advanced programme are also addressed.

I would like to thank Dr. Carmel Devaney, Professor Caroline McGregor, and Mr John Reddy, National University of Ireland, Galway for undertaking this excellent review. I would also like to thank the TUSLA, Child and Family Agency working group and the staff who partook in the survey.

Mr Paul Harrison

Director of Policy and Strategy,

TUSLA - Child and Family Agency

## **Acknowledgments**

This report was authored by Dr Carmel Devaney and Professor Caroline McGregor with assistance from Mr John Reddy, UNESCO Child and Family Research Centre, National University of Ireland, Galway supported by a working group consisting of Dr Caroline Cullen, Ms Dympna O'Grady, Mr Blair Mc Clure, Ms Sandra Claxton and Ms Theresa Barnett, TUSLA Child and Family Agency.

The review team would like to thank all who participated in this study and the Regional Managers, Workforce Development and their administrators who assisted with data collection.



## Chapter One: Introduction

### 1.1 Introduction

TUSLA, the Child and Family Agency (the Agency) is<sup>1</sup> committed to ensuring the child protection and welfare training provided is designed and delivered in a responsive and effective manner to all who receive it. Two standardised training programmes are currently provided by the Agency personnel: Children First Basic Level Training is delivered to all Agency and Health Service Executive staff by Workforce Development Training Officers; and Keeping Safe also basic level training, is delivered externally by Children First Information and Advice Officers to those working with children and families in voluntary and community services. The Children First Basic Level Training programme that is delivered to Agency Staff<sup>2</sup> was introduced by the workforce development team in September 2011 in response to the issuing of the Children First National Guidance for the Protection and Welfare of Children (Department of Children and Youth Affairs, 2011). This basic level training programme was developed as a standardised programme prior to this there were different programmes and approaches nationally. Therefore, since 2011 there have been two standardised Children First Basic Level programmes provided by the [then] HSE and the Child and Family Agency, one for internal staff and one for external voluntary and community services staff. A review of these training programmes was commissioned in 2012 to provide the necessary information for the Agency to make an informed decision on the type and amount of child protection and welfare training each course should contain to ensure the training was meeting the needs of the target groups.

To this end the Child and Family Agency Workforce Development team commissioned the UNESCO Child and Family Research Centre (CFRC) at NUI, Galway to undertake this review. A working group was established to design and administer this review process. This group consisted of representatives from the Workforce Development team and the Children First Information and

---

<sup>1</sup> The Child and Family Act 2014 provided for the bringing together of a range of existing services to children and families into one agency, TUSLA the Child and Family Agency. In January 2014, the Health Service Executive (HSE) Children and Family Services became TUSLA the Child and Family Agency.

<sup>2</sup> While the training participants are predominantly Agency staff (previously HSE) there may also be participants from other external agencies where identified staff are working closely with children where there are child protection and welfare concerns.

Advice Officers and the CFRC (see Appendix A). The working group met on a regular basis to agree and oversee the research design and implementation process. An outline of the training programmes, the review process undertaken and its findings are provided in this report.

## **1.2 Review of the Children First Basic Level Training and the Keeping Safe training programmes**

The Children First Basic Level Training programme is based on Children First National Guidance for the Protection and Welfare of Children (DCYA, 2011) and the Child Protection and Welfare Practice Handbook (HSE, 2011). All new and existing Child and Family Agency and HSE staff whose roles involve regular direct or indirect contact with children and families and have not received Children First Basic Level Training previously, are required to attend this one-day training. In line with the expectation of Children First National Guidance for the Protection and Welfare of Children (DCYA, 2011), Children First Basic Level Training has been designed to be delivered on a multidisciplinary interagency basis so that the key learning that takes place results from discussion and the sharing of knowledge, experience and perspectives across disciplines and services. The training is built on the evidence base that inter-disciplinary approaches are the most effective method for protecting children. It highlights the importance of child protection as everyone's concern, while at the same time underpinning the importance of clarity of role and responsibilities and the need for information sharing with and between relevant professionals. The training aims to prepare staff to be alert to child protection issues and to the need for keeping the focus on children when in contact with them.

The Keeping Safe training programme has been provided to voluntary and community organisations by Children First Information and Advice Officers since 2002. In line with the expectation of Children First National Guidance for the Protection and Welfare of Children (DCYA, 2011) (4.7.5) the Keeping Safe programme seeks to support organisations in promoting the general welfare, health and development and safety of children, adopting and consistently

applying a safe and clearly defined method of recruiting and selecting staff and volunteers, developing guidance and procedures for staff and volunteers who may have reasonable grounds of concern about the safety and welfare of children, identifying a designated liaison person to act as a liaison with outside agencies and a resource person to any staff member or volunteer who has child protection and welfare concerns. This training was originally funded by the [then] Department of Health and Children, who contracted the services of the Volunteer Development Agency Northern Ireland (VDA) to deliver a train-the-trainer programme, supply a training manual (*Keeping Safe*) and provide on-going accreditation for the Children First Information and Advice Officers (CFIAO's). The training is still licensed by Volunteer Now who provides the Agency with trainer registration and quality assurance mechanisms for the programme. In order to build further training capacity for voluntary and community organisations CFIAO's have provided a number of Keeping Safe 'Train the Trainers' programme nationally to provide ongoing Keeping Safe training for the various voluntary and community organisations.

### **1.2.1 Aims and objectives of review process**

The overall aim of this review process is to ascertain the requirements of the statutory and voluntary and community service providers in relation to child protection and welfare training and to establish if the current training is meeting those requirements. The specific objectives are:

1. To determine the perceived need of all participants on the Children First Basic Level Training and Keeping Safe training programmes with regard to child protection and welfare training;
2. To establish the relevance of the training programmes vis-à-vis the participants work practice;
3. To evaluate if both training programmes have met their stated aims including an impact on inter-agency relationships; and
4. To establish the necessary components of a child protection and welfare programme.

### **1.3 Layout of this Report**

Following this introductory chapter the research methodology used in this review is presented in Chapter two. Chapter three outlines the findings from the qualitative and quantitative research on the Children First Basic Level Training while chapter four presents the findings from the research on the Keeping Safe training programme. Chapter five discusses the findings on both programmes and makes recommendations for future training.

## **Chapter Two: Methods and Analysis**

This section outlines the research methodology designed and implemented in order to address the overarching aim and objectives of this review of child protection training programmes.

### **2.1 Research Design**

This review was conducted using mixed methods to explore the needs of particular target groups for child protection and welfare training. An anonymous questionnaire was administered to all participants and followed up by a one-to-one interview with consenting participants. Participants were asked a range of retrospective questions relating to their perceived need for child protection and welfare training, their experience of participating on the training workshops, their view on the relevance of the training to their role (at the time of receiving the training and subsequently), and on the impact of the training. Information was also sought from the Workforce Development Training Officers and Children First Information and Advice Officers on their view of the needs of specific target groups and the associated model to meet this need. Documentary analysis of the training programmes was also conducted.

Questionnaires and interview schedules tailored to both the Children First Basic Level Training and the Keeping Safe training programmes were drafted by the research team in the CRFC and finalised in conjunction with the working group.

### **2.2 Sampling**

Those in receipt of the training programmes includes all practitioners working in statutory services and those in voluntary and community organisations who have contact with children. As this is a retrospective review of the child protection training a sample group of participants were selected who had attended the training during a specific time frame.

The sample groups include:

1. Participants of the Children First Basic Level Training and Keeping Safe training programmes over a six month period (Keeping Safe: January – June 2011 and Children First: October 2011 - March 2012).
2. Workforce Development Training Officers and Children First Information and Advice Officers.

The proposed sample includes all statutory service participants as listed in Children First National Guidance for the Protection and Welfare of Children, 2011 (see Appendix B) and all sectors who participate in the Keeping Safe training (pre-school, early years, young people, disability, social inclusion, faith based groups and others).

Participants were randomly selected to participate in this review from the sample group that attended the training and from the sample group of Workforce Development Training Officers and Children First Information and Advice Officers. Two separate processes took place in order to select participants from the sample group of attendees on the Children First Basic Level training and the Keeping Safe training. These are now outlined.

### **2.2.1 Participants for quantitative research (Children First Basic Level Training)**

A data base was established of all Agency employees who attended the Children First Basic Level Training in the four Regions (Dublin Mid Leinster, Dublin North East, West and South) and had provided contact details. Contact details provided by participants were either postal or electronic. The number of participants is outlined below (See Table One). As it was expected that there would be approximately a 50% response rate (Patton, 2002) the sample size was doubled to increase the response rate. Participants were then randomly selected to participate in this review.

**Table One: Participants from Children First Basic Level Training**

Total number of participants <sup>3</sup>	Representative sample required	Total representative sample group <sup>4</sup>
1,245	294	<b>586</b>

### 2.2.2 Participants for quantitative research (Keeping Safe training)

A data base was also established of all participants from each sector who attended the Keeping Safe training. The sample group for each sector was also weighted to allow for equal representation and then doubled to increase the response rate (see Table Two). Once the final sample group was agreed participants were randomly selected to take part in the review.

**Table Two: Participants from Keeping Safe training**

Sector	Pre-school	Disability	Youth	Social Inclusion	Faith	Other
Number of participants	471 <sup>5</sup>	71	126	156	17	207
Total number of participants	1, 048			<b>Representative sample required</b>	281	
Weighted sample group per sector <sup>6</sup>	(n= 127) 45%	(n =20) 7%	(n = 34) 12%	(n = 42) 15%	(n= 6) 2%	(n= 56) 20%
Final sample group (when doubled)	n = 254	n= 40	n = 68	n =84	12	112
Total representative sample group	<b>570</b>					

<sup>3</sup>Participants on the training programme during the timeframe who had provided their contact details.

<sup>4</sup> The final sample group was calculated on a representative basis across the [then] four HSE regions.

<sup>5</sup> This number reflects the large pre-school service numbers in [the then] HSE areas and the priority given to providing training in this sector in particular areas.

<sup>6</sup>Although sample size is quantified by sector the findings and recommendations are reported on across all sectors.

### **2.2.3 Participants for qualitative research (Children First Basic Level Training and Keeping Safe training)**

For the second phase of this review the sample group of participants were randomly selected to participate in the one-to-one interviews. This included Children First Basic Level Training and Keeping Safe training participants who had consented to participate in the qualitative research and the Workforce Development Training Officers and Children First Information and Advice Officers.

### **2.3 Piloting**

As a wide range of disciplines attend Children First Basic Level Training and are included in the review process a Primary Care team were approached and asked to pilot the Children First Basic Level Training questionnaire and interview schedule. The Primary Care team includes a wide range of allied health professionals who all attend Children First Basic Level Training. Eight members of a Primary Care team piloted both the electronic and hard copy version of the questionnaire and the interview schedule. Seven workers from the voluntary and community sector who had completed the Keeping Safe training programme but were not included in the sample group used for this review piloted the Keeping Safe questionnaire and interview schedule.

Participants were asked to consider:

- Clarity of the questions;
- Ease of completion;
- Time taken;
- Suggested additions or amendments.

Following this process minor amendments were suggested to the wording of some of the survey and interview questions which were incorporated into the final design. The main feedback from those involved in piloting concerned the length of time since they had completed the training and their ability to remember the necessary details. Following discussion with the working group



on this feedback it was decided to proceed with the original timeframe. This issue is discussed further in section 2.7 on the limitations of the review process.

## **2.4 Data collection**

As consent had not been obtained for the CFRC to contact participants of the training programmes it was not possible for the CFRC to administer the anonymous questionnaire directly to participants. A separate administration process was agreed for the Children First Basic Level Training and the Keeping Safe training participants.

The research team agreed that the questionnaires would be administered to randomly selected Children First Basic Level Training participants by internal administrators. A letter was issued to all participants from the National Manager for Workforce Development introducing the review of the child protection training, the process involved and requesting participants to participate fully (see Appendix C).

Participants of the Keeping Safe training were contacted by Children First Information and Advice Officers and asked to opt out of the review process if they did not wish to take part. Those who opted out of the review process were excluded from the final sample group.

The anonymous questionnaire was thus issued to both sets of participants with a stamped addressed envelope for participants to return the questionnaire directly to the CFRC (see Appendix D). A separate information and consent form was also included asking participants to participate in a follow-up one-to-one interview (see Appendix E and F). A stamped addressed envelope was also included to return this consent form. Both hard copies and electronic versions of this questionnaire were issued as required. A return date was identified for participants to complete the questionnaire and consent sheet. A reminder was then issued to all participants with an extension of the date to return the questionnaire and consent sheet (see Appendix G)

## **2.5 Data Analysis**

All interviews were transcribed in full. This verbal data alongside documentary and observational data were inputted into a computer assisted qualitative data analysis software package – *Nvivo*. Content analysis was then carried out on the data based on the aims and objectives of the review process. The survey data was analysed using the Statistical Package for the Social Sciences (SPSS). Basic frequencies and percentages were used to describe the quantitative findings. The data was analysed in line with the aims of the review with specific question areas on each module of the training programmes.

## **2.6 Ethical issues**

As this is a review of a training programme full ethical approval was not required from the Research Ethics Committee at NUI, Galway. The main ethical issue that required consideration by the working group concerned the identification of participants on the training programmes. At the time of their attendance at the training programme participants were not asked for permission to share their contact details with an external agency (in this instance the CFRC). To overcome this issue the [then] HSE (now Child and Family Agency) agreed to administer the questionnaire to all attendees on the Children First Basic Level Training programme where contact details were available internally. The Children First Information and Advice Officers contacted all attendees at the Keeping Safe training and requested they opt out of the review process if they did not want their contact details passed to the CFRC.

## **2.7 Limitations**

As with any research project or review there are limitations to this review process. The first limitation concerns the length of time since participants participated in the training programme. Although over a year had passed since participants had attended the training it is expected that the learning accrued should have a long lasting impact on participants practice. It was therefore decided that it is worthwhile to ascertain the retrospective views of this group

and the level of on-going impact from participation on the training programme. We do however note that ideally, evaluation over the course of the training would have enhanced the findings and the ability to assess the impact of the training in a more in-depth way. For example, 'Carpenter et al concluded their substantial study of safeguarding inter-disciplinary training with a recognition of an urgent need for standardisation of evaluation of training that is rigorous and seeks to take into account the range of variables that impact on training outcomes. To this end, one of their recommendations is that measures should be developed to establish pre-and post-training outcomes (2010; 167). They also encourage the identification of specific foci for study such as: level of knowledge acquired; attitudinal changes and sense of self-efficacy. Likewise, Phillips (1997) sets out a detailed set of ideal requirements for evaluation to ensure maximum accuracy and impact of evaluation of training which again emphasises the importance of staged evaluation to enable a more accurate review process.

The second limitation in this review concerns the overall response rate which is somewhat lower than expected or required. The overall response rate for the Children First Basic Level Training questionnaire is 19 per cent while 13 per cent of respondents returned the Keeping Safe training questionnaire. This must be taken into account when discussing the findings from this review and in making recommendations for a national training programme. While the low response rate was disappointing and such a small sample size could not be deemed generalisable or representative from a quantitative perspective, the themes and findings emerging from this study are nonetheless extremely relevant and useful as they provide qualitative evidence of participants and trainer's views and experience of both training programme's effectiveness. They are especially informative as to how the training can continue to be improved and adapted in light of the wider context of change within child and family services.

## **Chapter Three: Children First Basic Level Training programme**

### **3.1 Introduction**

This chapter presents research findings from the 2013 Review of the Children First Basic Level Training programme. Its purpose is to report an analysis of quantitative and qualitative data gathered from a survey of participants of the training programme and interviews with Workforce Development Training Officers and training programme participants. In doing so the chapter aims to provide a detailed and comprehensive review of the programme and its impacts. The chapter is divided into four sections that present:

- a brief profile of the participants;
- findings concerning the programme's aims and objectives;
- participants and trainers understanding of the programme and its relevance to their practice;
- participants and trainers views as to the outcomes of the training programme and utilisation of the knowledge acquired by programme participants.

Each section concludes by summarising the key research findings to emerge.

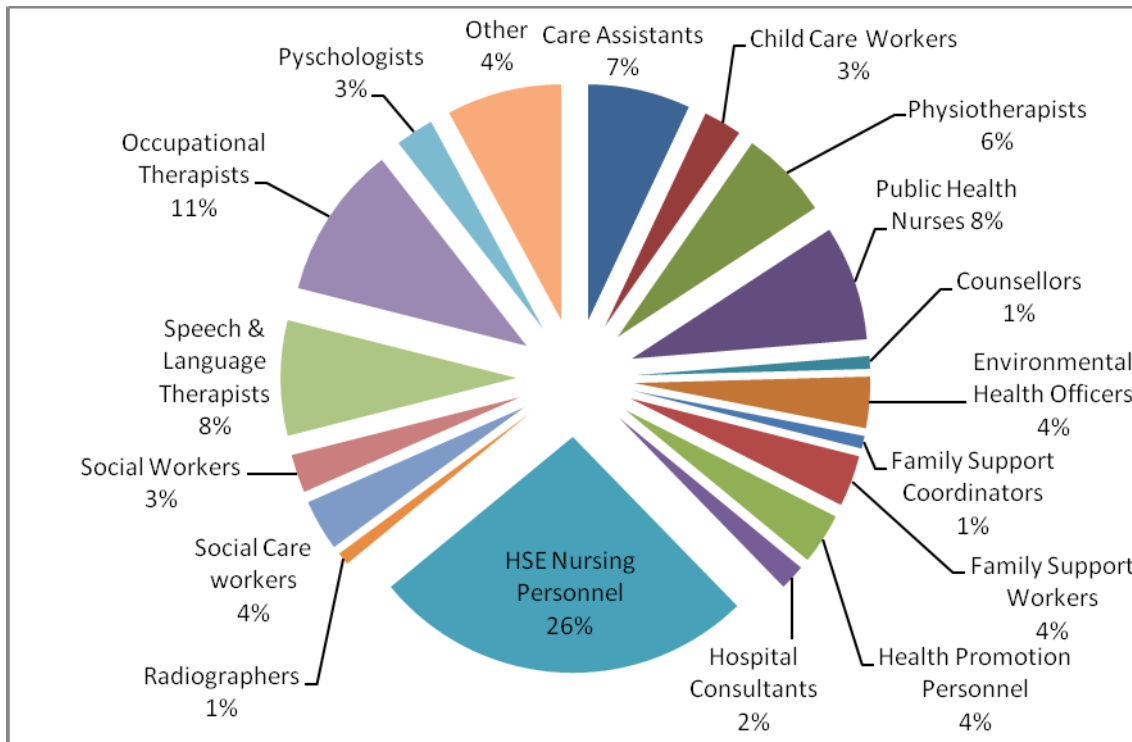
### **3.2 Children First Basic Level Training programme questionnaire**

#### *Participant Profile*

One hundred and twelve people completed and returned the Review of the Children First Basic Level Training questionnaire yielding a response rate of 19 per cent. Forty nine (44%) participants indicated that they have been employed in their current role for greater than 10 years, 30 (26.8%) have been six to 10 years, 18 (16%) three to five years and 11 (9.8%) indicated being less than three years (4 respondents did not indicate the duration they had being in their current role). Just over one quarter (30) of participants were from the nursing profession; occupational therapists (12), public health nurses (9) and speech

and language therapists (9) were the next most popular professions among survey participants. Figure One displays a breakdown of participant's professions by percentage.

**Figure One: Participant's Professions**



### 3.2.1 Children First Basic Level Training programme

A majority of survey respondents felt the Children First Basic Level Training programme adequately met their practice needs in regard to child protection and welfare. For example, almost 80 per cent (89) of participants indicated the training adequately met their needs in this respect. Just seven respondents felt it failed to meet their child protection and welfare needs; a further six did not know and 10 did not answer (see Figure Two). Of the 71 who provided reasons for their answers over half (58) commented positively as to the programme's relevance to their practice and/or service needs. Indeed, 41 respondents (37 per cent) commented that the training had increased awareness of child protection roles and responsibilities strengthening their capacities to protect children and secure their welfare. Others felt the training had been *"informative*

*and comprehensive*” as one respondent put it; thus helping to clarify individual and service child protection roles. The following comments highlight why most respondents felt the training adequately met their practice needs:

*“...very clear and relevant to work”* (health promotion officer)

*“...it covered relevant issues and main aspects of Children First and whose responsibility is to deal with disclosed information”* (social care worker)

*“...succinctly explained my role and what action to take in the event of a child safety concern”* (speech and language therapist)

*“...highlighted role, procedures and processes, and circumstances of cases warranting reporting”* (health promotion officer)

**Figure Two: Did the Children First Basic Level Training programme adequately meet your practice needs?**



A number of survey respondents (13), however, were uncertain as to the applicability and relevance of the training in their particular role and / or service. The Children First training was *“a basic level course”* according to one respondent and had *“not enough specific information”* to meet the practice needs of another. A social worker and a monitoring officer for children in care commenting on whether the programme met their practice needs wrote:

*“...the training was clear in respect to information on referrals but very basic for social worker role”*

*“There was a mix of professional at the training, some with no or little day-to-day dealings with children professionally. The training is good for those with no or little understanding of how the Children and Family Services work”.*

However, the material contained in the training was considered ‘just right’ by 72 of the 112 participants (see Table Three). Of the 62 respondents who commented, 50 generally felt the material used in the programme provided practical advice and examples concerning their professional roles and responsibilities to protect children’s welfare. One commented *“it gave broad overview of my child protection role”*. Others commented that the course material:

*“...was well informed and outlined where help could be accessed”*  
(staff nurse)

*“...defined roles and responsibilities for each designated person”*  
(public health nurse)

*“...good level of detail, well balanced in terms of background information, legislation and group participation in examples of possible child protection issues”* (speech and language therapist)

As noted above in regard to practice needs of participants, some respondents highlighted the lack of specificity and broad nature of the material used in the programme. For example, the material used was ‘not detailed enough’ to their specific role according to 19 participants (17 per cent). Those commenting negatively (11 per cent) [on the material used] mostly felt the information was too broad and thus not specific to their occupation or service. In addition, two respondents (2 per cent) noted the programme’s inter-disciplinary character necessitated this general emphasis and so weakened the programme’s capacity to apply the appropriate in-depth focus on child protection issues relevant to their roles:

*“...the audience was too broad for specific treatment of issues according to one's discipline” (family welfare conference coordinator)*

*“...too many different disciplines (residential to community) present to allow enough time to discuss each different context, responsibilities and recommended actions” (speech and language therapist)*

**Table Three: Rate programme material according to specific role**

<b>Programme material vis-a-vis role</b>	<b>Frequency</b>	<b>Per cent</b>
Just right	72	64.3
Not detailed enough	19	17.0
Too detailed	6	5.4
Don't know	4	3.6
Total	101	90.2
No answer provided	11	9.8
<b>Total</b>	<b>112</b>	<b>100</b>

### **3.2.2 Children First Basic Level Training: Aims and Objectives**

Children First Basic Level Training has two overall aims:

- To improve services to children and families through increased understanding of child protection and welfare; and
- To enhance inter-professional and interagency co-operation.

The findings in relation to both aims are presented.

#### ***Aim One: Improving services to children and families through increased understanding of child protection and welfare***

Two-thirds of survey respondents indicated the Children First Basic Level Training programme had achieved its aim of improving services to children and families through increased understanding of child protection and welfare (42% positive and 24.1% most positive). As Table Four displays another fifth (21.4%) answered ‘somewhat’ and 5.4 per cent of respondents answered negatively as to whether the training achieved this aim. Of 55 respondents expressing an



opinion on whether the programme had achieved this aim just over 80 per cent (45) of those commented positively. A majority (25) pointed to their greater awareness and understanding of child protection and welfare procedures; many outlining the practical application of the knowledge gained and some of the benefits for them in their roles. For example, the training programme “...gave an *in-depth view of the issues and the pathways to refer so that the needs of children are identified and met*” according to an eating disorder therapist. To a public health nurse the programme was “...*very comprehensive and logical, gave clear information on roles and responsibilities of health professionals*”.

**Table Four: Aim of improving services to children and families through increased understanding child protection and welfare**

<b>Increased understanding child protection and welfare</b>	<b>Frequency</b>	<b>Per cent</b>
Most positive	27	24.1
Positive	47	42.0
Somewhat	24	21.4
Negative	3	2.7
Most negative	3	2.7
Total	104	92.9
No answer provided	8	7.1
<b>Total</b>	<b>112</b>	<b>100</b>

Several survey participants also commented that the training programme increased awareness and understanding of the links between child protection and methods of working. For example, one commented that increased understanding of “*early intervention by offering support to a family*” as a way to protect children had brought a greater awareness of her / his role in protecting children’s welfare. Practitioners also pointed to the practical and helpful information the programme communicated:

*“...case studies gave concrete examples of how to put theory into practice, who to contact, process of care, and to discuss with other professionals”*(physiotherapist)

*“Training provided clearer insight into child protection, role of designated officer, when and how to report and role of social worker”*  
(public health nurse)

*“...main issues of child protection adequately described and a focus on the practical relevance and application in everyday practice outlined”* (accommodation support worker)

*“...gave knowledge on referral and information sharing and changing societies and different cultures* (public health nurse)

### ***Aim Two: To enhance inter-professional and inter-agency co-operation***

A majority of survey respondents indicated that the training programme’s second aim of enhancing inter-professional and inter-agency co-operation was achieved. For example, 41 per cent of survey respondents were either ‘positive’ or ‘most positive’ in regard to whether the training met this aim (see Table Five). Nearly a third (32.1%) indicated the training ‘somewhat’ achieved its inter-professional and interagency goals and 13 per cent were negative in this regard.

**Table Five: Aim of enhancing inter-professional and interagency co-operation**

<b>Enhancing professional inter- and interagency co-operation</b>	<b>Frequency</b>	<b>Per cent</b>
Most positive	14	12.5
Positive	32	28.6
Somewhat	36	32.1
Negative	11	9.8
Most negative	4	3.6
Total	97	86.6
No answer provided	15	13.4
<b>Total</b>	<b>112</b>	<b>100.0</b>

Achieving enhanced inter-professional and inter-agency co-operation through the Children First Basic Level Training programme was connected to a number of interrelated reasons. According to a majority of the 55 survey respondents who commented, greater awareness of a need to collaborate with other

disciplines and other service providers in order to better protect the welfare of children was a key learning point. For example, a care assistant wrote *“the programme created more awareness of multi-disciplinary dimensions of child protection”*. It *“highlighted the importance of interagency co-operation and was an opportunity for multi-disciplinary information sharing”* according to a social care manager and was *“a good opportunity to meet other professionals”* a social worker remarked. For several other respondents such collaborative awareness among agencies was essential in order to effectively and efficiently protect children’s welfare:

*“It highlighted the importance of synergy among service providers and [the programme] presented cases where its lack harmed children” (accommodation support worker)*

*“Doing the training as part of a multi-disciplinary team and with other professionals broadened the learning experience” (social care leader)”*

*“...made aware of the need to have a mix of skills available in dealing in child protection cases” (physiotherapist).*

Respondents also pointed to the positive dynamic created by multi-disciplinary make-up of those attending the programme. Several referred to the positive engagement opportunities that the training programme presented. According to a public health nurse, the capacity to engage with other professionals *“broadened the learning experience”*. Another respondent commented that she/he had acquired a *“...more balanced understanding gained due to varied disciplines participating” (family support worker)*

Interaction through the programme’s various themes and discussions gave participants opportunities to experience and learn from differing perspectives on child protection. Several commented that these opportunities clarified roles and inspired confidence to act on child protection concerns:

*“...the group work was good for exploring different views on child protection and welfare concerns, and our different roles in relation to children” (monitoring officer for children in care)*

*“...encouraged me to act on my gut feeling and if there was any doubts as regards child protection and welfare to share my concerns with others i.e. docs, social workers, GPs, Gardaí” (staff nurse).*

However, a minority of respondents (10 of the 55 respondents) while recognising the importance of inter-professional and inter-agency cooperation did feel more time was required during the course to fully explore these themes. In addition, several felt this section of the training programme highlighted “*different and overlapping roles*”, as one put it, among various disciplines present and thereby confusing roles and erecting boundaries between professions. Several respondents also commented that training courses they had attended were HSE (and Child and Family Agency) dominated and thus weakening the interagency aspect of the programme.

*“My understanding was that training would include all professionals however everyone in my training was HSE staff to the best of my knowledge. I felt that there should have been Gardaí present (manager in child care area)*

### **3.2.3 Children First Basic Level Training: Understanding and Relevance**

A very high level of participant *understanding* of the modules contained in the Children First Basic Level Training programme was recorded in the survey data. For example, three-quarters of respondents indicated they understood the principles of best practice in child welfare and protection having attended the training programme (32 per cent felt they had excellent understanding and 52 per cent having a good understanding). Other topic areas were similarly well understood as Table Six displays.

**Table Six: Understanding of Children First Basic Level Training Topics**

Topic areas	Excellent understanding	Good understanding	Total
Principles of best practice in child protection and welfare	32%	52%	84%
Relevant legislation and policies	18.8%	43.8%	62.6%
Roles and responsibilities in relation to child protection and welfare	49.1%	30.4%	79.5%
The categories and definitions of child abuse	44.6%	33%	77.6%
The signs and symptoms of child abuse	42.9%	28.6%	71.5%
How to recognise child abuse	30.4%	45.5%	75.9%
The risk factors in child protection	29.5%	40.2%	69.7%
How to respond to concerns about children	38.4%	41.1%	79.5%
How to report concerns about children and your role afterwards	42.9%	33.9%	76.8%
Issues involved in confidentiality and exchanging information	51.8%	28.6%	80.4%
The benefits of agencies and disciplines working together	51.8%	25%	76.8%
How to work effectively together	38.4%	35.7%	74.1%

Survey respondents also attached very high *relevance* to the individual topics contained in the Children First Basic Level Training programme. Table Seven displays the percentage of the 112 respondents who indicated that modules were of high or good relevance in terms of their specific role.

**Table Seven: Relevance of Children First Basic Level Training modules in terms of participants' specific role**

Topic areas	High Relevance	Good Relevance	Total
Principles of best practice in child protection and welfare	44.6%	30.4%	75%
Relevant legislation and policies	43.8%	28.6%	72.4%
Roles and responsibilities in relation to child protection and welfare	58.9%	24.1%	83%
The categories and definitions of child abuse	51.8%	24.1%	75.9%
The signs and symptoms of child abuse	56.3%	20.5%	76.8%
How to recognise child abuse	53.6%	25%	78.6%
The risk factors in child protection	48.2%	25.9%	74.1%
How to respond to concerns about children	55.4%	24.1%	79.5%
How to report concerns about children and your role afterwards	56.3%	24.1%	80.4%
Issues involved in confidentiality and exchanging information	59.8%	18.8%	78.6%
The benefits of agencies and disciplines working together	63.4%	17%	80.4%
How to work effectively together	63.4%	17.9%	81.3%

### 3.2.4 Children First Basic Level Training: Outcomes and Practice

Many of the survey's respondents felt because of their participation in the Children First Basic Level Training they now were better equipped to manage risk to children appropriate to their roles. Over two-thirds (67.9%) indicated they were either 'immensely' or 'greatly' improved while a further one fifth (20.5%) felt 'somewhat' better equipped following the training (see Figure Three). According to a family support worker the programme *"provided clarity and refreshed knowledge of protection guidelines"*. A large majority offering reasons for their improved capacity (45 of 58 commentators) mostly felt having received the training they now had a greater understanding and awareness of their roles and responsibilities in protecting children from abuse and neglect. In particular, clarity regarding the appropriate procedures necessary when respondents have child protection concerns was among most commonly identified reason for improvements in capacities to manage risk to children:

*"I have better awareness of signs and symptoms of neglect or abuse and of reporting concerns"* (health promotion officer)

*"...better understanding of referral pathways, out of hour's services and social work department"* (public health nurse)

*"... I am now better equipped to understand the needs of children"* (care assistant).

Similarly, most respondents indicated that following the training they were more familiar with their responsibility to manage risk to children. Several commented they had benefitted from the training programme because now they had:

*"...better awareness of reporting responsibilities, signs and symptoms of child abuse and personal risks of working with children"* (public health nurse)

*"...better understanding of my responsibilities and in better position to identify abuse and neglect because of training"* (occupational therapist)

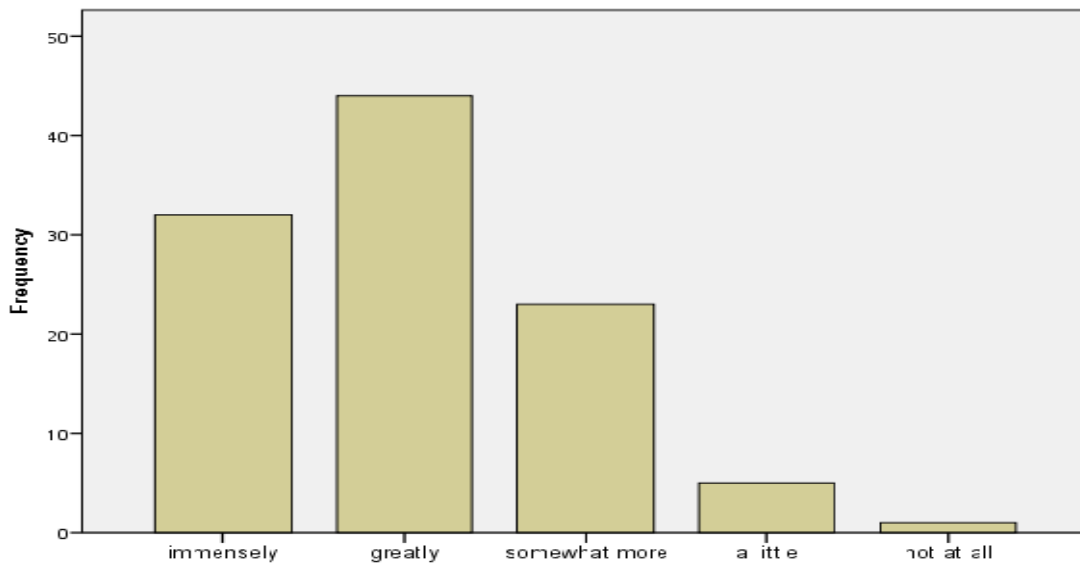
*"...understanding of my duty and responsibilities to children and how to communicate effectively any concerns to appropriate people and agencies in a confidential and respectful manner"* (ward clerk).

Some respondents, however, were of the view that the training course had not affected their capacity to manage risk to children (9 out of 58) and / or increase familiarity of their responsibility to manage risk to children (4 out of 49).<sup>7</sup> According to these participants child protection and welfare were core aspects of their work and the information used in training course in their opinion had not impacted their roles. For example, a social worker commented the *"training did not cater for enhancing social work practice"*. Likewise, a youth worker commented that *"the training was very limited and was side-tracked by those not sure of their roles and work with specific issues"*.

---

<sup>7</sup> These respondents tended to be professionals who may work directly with at risk children and included psychologists, a clinical psychologist, social care workers, a social worker, a social care manager, a clinical placement co-ordinator and a youth worker.

**Figure Three: Better equipped to manage risk to children because of participation?**



Most respondents indicated they now were more confident in responding to child protection and welfare concerns and in managing their role after a report of a concern was made. Tables Eight and Nine illustrate the levels of confidence respondents indicated as a result of participating in the Children First Basic Level Training programme. The most significant factor boosting confidence according to a majority of respondents (44 of 51) was their increased awareness and knowledge of the support systems in place and / or procedures for dealing with concerns. For example, an eating disorder therapist was *“more confident due to increased awareness of other services in this area”*. Similarly, a public health nurse was *“more confident now as aware that help and advice is available”*.



**Table Eight: More confident in responding to child protection and welfare concerns**

Confident in responding	Frequency	Per cent
Immensely	31	27.7
Greatly	40	35.7
Somewhat more	26	23.2
A little	4	3.6
Not at all	3	2.7
Total	104	92.9
No answer provided	8	7.1
<b>Total</b>	<b>112</b>	<b>100.0</b>

As Table Nine displays, participation in the Children First Basic Level Training programme enhanced survey respondents' confidence in managing roles after a report of a concern. Greater understanding of follow on procedures (from when a report has being made) and clarification of roles in this regard were common factors for increase confidence recorded in the positive comments (38 from 48) made by respondents. Some respondents also highlighted the experience and practical support gained during the programme's group work sections. An occupational therapist, for instance, remembered having a "good discussion on reporting and what happens after". Other respondents commented similarly:

*"...now I have knowledge in written reports, procedures, discussions with social workers and sharing information with other professionals"* (public health nurse)

*"...understanding my specific role and letting the correct professionals deal with the case as instructed by law and never assuming someone else will"* (home support worker).

**Table Nine: More confident in managing your role after a report of a concern**

Confident in role after reporting	Frequency	Per cent
Immensely	23	20.5
Greatly	30	26.8
Somewhat more	38	33.9
A little	8	7.1
Total	99	88.4
No answer provided	13	11.6
<b>Total</b>	<b>112</b>	<b>100.0</b>

A small number of respondents (4) did comment that their responsibility ceased once a report was lodged and therefore they felt this section irrelevant to their role. In addition, several respondents raised certain role specific contexts that they felt were not covered in this section of the training programme:

*“Training did not really cover the role of PHN following report of child abuse, main focus was on role of social services” (public health nurse)*

*“...better confidence except on retrospective reports which was not addressed (counsellor).”*

### **Specific aspects of the Children First Basic Level Training programme used and applied in Practice**

Over one third (35.7%) of survey respondents indicated they had used (most in multiple instances) the Children First Basic Level Training as a part of their role in the six months prior to the survey. A sample of the most common aspects of the training programme used and applied in practice are listed.

- **Recognising the symptoms of child abuse and neglect** (21 instances noted)

#### *Examples of application in Practice*

- during contact with families using knowledge to recognise child abuse;

- responding to abuse at the time of engagements with families and how families respond when abuse is recognised;
  - identifying what is and what is not child protection;
  - naming the abuse when filling in child protection forms; and
  - reflected on cases known to me and applied knowledge of types of abuse.
- **The referral and / or reporting of child protection and welfare concerns**  
(16 instances noted)

*Examples of application in Practice*

- discussed concern with psychologist and reported it to social work department;
  - made sure social worker was made aware, made child development check to see if child was reaching milestones, and to see if signs of neglect and abuse were present, made home visit with social worker;
  - reporting of child neglect and abuse especially after hours when social workers are off duty because now more confident in engaging with other disciplines e.g. Gardaí;
  - discussed with social worker to decide on need for reporting;
  - I rang social services and followed the call up with a report.
- **Cooperation with other disciplines and agencies in child protection**  
(Seven instances noted)

*Examples of application in Practice*

- cross disciplinary consultation led to case being investigated;
- multidisciplinary response agreed after first discussing the case with a social worker and case assessment;
- safeguarding them (at risk children) through contact with other agencies to ensure this and taking precautionary measures to minimise future risk;
- liaised with child protection services with family concerned;

- attending child protection case conferences and my interaction with family and reports;
- incident from another discipline/service brought to my attention concerning my client had to be dealt with in a priority context.

- **Using the principles of Children First in daily roles** (11 instances noted)

*Examples of application in Practice*

- by making it clear to participants in a parenting course that confidentiality does not include information that may have child protection implications;
- support colleagues in safe reporting on disclosure of child abuse;
- exchange of information and close working relationship with social work;
- educating nursing students, particularly those on paediatric placement;
- knowing not to discuss private details of any child in our care outside the team;
- showing dignity and respect at all times when carrying out personal care such as changing, showering, dressing, etc.;
- being child-centred; and
- giving the child a voice, an opportunity to have their voice heard.

- **The drafting of child protection policies for individual services** (Five instances noted)<sup>8</sup>

---

<sup>8</sup>More specific detail on the drafting of policies were not provided by respondents.

### **3.2.5 Summary**

A majority of 112 of survey respondents indicated that the Children First Basic Level Training programme met their practice needs in regard to child protection and welfare. Respondents identified increased awareness of child protection roles and responsibilities as strengthening their capacities to protect children and secure their welfare. The training was informative and helped to clarify roles and procedures in regard to child protection. The material used in the training programme was considered by most participants as being 'just right' and provided practical examples which explained child protection roles, responsibilities and procedures. However, for a minority of respondents, the training programme was described as basic level course which led some to question its applicability and relevance to their roles. A minority generally were of the view that because the programme had to cater for professionals spread across the too many disciplines, and consequently necessitated the delivering of a broad based programme, reduced its learning value for those directly working with at risk children.

Two-thirds of survey respondents indicated the Children First Basic Level Training programme had achieved its aim of improving services for children and families through increased understanding of child protection and welfare. Greater understanding of child protection and welfare had, for most, led to the practical application of learning acquired in individual roles and in relevant policies for service agencies. Similarly, a significant majority of respondents indicated that inter-professional and interagency cooperation had been enhanced in their view because of their participation in the programme. Greater awareness and knowledge of the links between protecting children's welfare and effective collaboration among disciplines and agencies was identified as a key learning point for a majority of respondents. In addition, the programme's multi-disciplinary and inter-agency character was viewed by most as creating a positive dynamic among audiences, facilitating engagement opportunities and providing a balanced learning experience. However, a minority were of the opinion that broad make-up had created confusion by exposing overlapping roles.

Overall, survey data indicates that the Children First Basic Level Training programme has provided high levels of understanding of child protection and welfare among respondents. A significant proportion of respondents indicated that programme modules either had a high or good relevance in terms of their specific roles. Indeed, a majority suggested they were now better equipped to deal with child protection and welfare concern as the programme had clarified procedures and reporting responsibilities and refreshed their knowledge of Children First guidelines. While a minority indicated that these competencies were intrinsic to their work with children and so their understanding had not appreciably changed, most survey respondent's greater knowledge of the child protection supports and systems led to suggesting more confidence in responding to child protection and welfare concerns.

### **3.3 Children First Basic Level Training programme Interviews**

In this section of the Report, an analysis of qualitative data<sup>9</sup> gathered in interviews with seven randomly selected Workforce Development Training Officers and nine participants of the training programme is presented. In total 14 participants on the training programme consented to participating in the interview. Five of these did not however take part in the interviews. Findings are organised in three sections based on interviewees' views and experiences in relation to:

- The achievement of the aims of the Children First Basic Level Training programme;
- Understanding of programme topics and their relevance to practice; and
- Outcomes of programme and transfer of the knowledge acquired.

In each section the findings from the Workforce Development Training Officers are first presented followed by the feedback from the programme participants.

#### **3.3.1 Children First Basic Level Training: Programme Aims**

##### ***a) Helping candidates to improve services to children through increased understanding of child protection and welfare***

Children First: National Guidance for the Protection and Welfare of Children is intended to assist people in identifying child abuse (Department of Children and Youth Affairs, 2011). The Children First Basic Level Training programme seeks to achieve this aim through promoting increased understanding of child protection and welfare among those working with children or within agencies providing services to children and families. Increased understanding and awareness of child protection and welfare among training programme participants therefore is considered important in improving services to children.

---

<sup>9</sup> Quantitative data gathered in interviews with Workforce Development Training Officers is presented in Figure Four and Five.

**Workforce Development Training Officers** (TO's) interviewed for this review generally regarded the programme as providing participants increased understanding of child protection and welfare. Figure Four displays trainer's ratings as to the extent they believe the programme has helped participants improve services for children.<sup>10</sup> While a number of the Training Officers (four of the seven interviewed) did caution that they were not in a position to assess participants' role in improving services all, however, did feel that enhancing child protection and welfare understanding among those working with children was fundamental in efforts to improve services to children. Thus in terms of increased understanding of child protection and welfare, Training Officers felt participants in their experience mostly benefited from the programme. Six of the seven Training Officers felt participants are either reminded and / or informed of their child protection roles and responsibilities in protecting the welfare of children. For example:

*"They [programme participants] get a lot of information, they get a lot of insights into what's likely for a child and they get the privilege of hearing of real life cases, you know the scenarios and the challenges for workers and because the nature of this work is changing a lot all of the time, it's not static it's moving"* (TO four)

*"I think the clearer people are on their own roles and responsibilities and the issues concerned, the better equipped they are then to pass on concerns which at the end of the day is what improves services for kids"* (TO three)

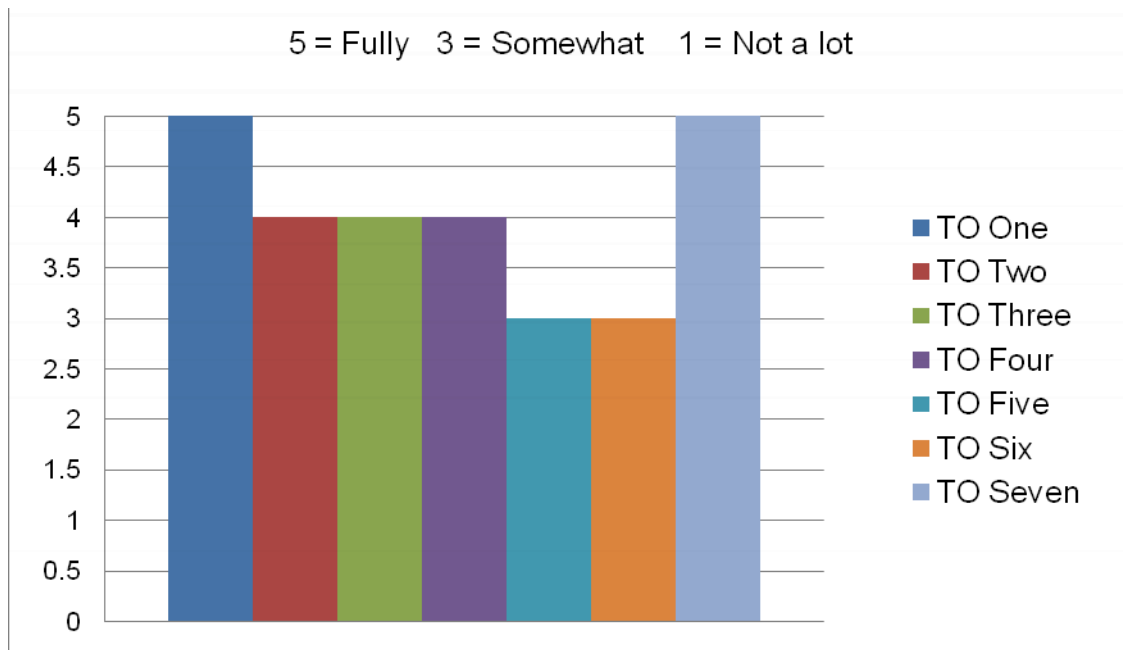
The preceding quotations encapsulate Training Officers feelings on how the programme benefits children's services. Several highlighted awareness and understanding of child protection and welfare is not the exclusive domain of those working directly with abused or neglected children but an essential skill of every person working with children and families.

---

<sup>10</sup> A majority of Training Officers based their estimation on their experience with programme participants and their recollection of evaluation sheets completed by participants at the end of the training programme.



**Figure Four: Improving services through increasing participants understanding of child protection and welfare?**



Similarly, a Training Officer working exclusively with foster carers emphasised a need for those working in areas not traditionally thought of as not having a child protection role to become fully aware of child protection guidelines. Another highlighted that anxieties remained among some participants concerning reporting families they are working with who (especially in rural areas) may be known to them and / or neighbours. Trainers felt that the increased knowledge of child protection has helped professionals in this regard:

*“I think people now are confident in saying ‘I’m a professional, I have no choice but to pass this on, social workers will make an assessment and see what help your family needs to deal with this issue” (TO one)*

*“They understand hopefully a bit more about the seriousness of abuse and neglect and I’m hoping that it gives them the chance to reflect on the impact of that on children and how it determines the child’s ability to attach to them. It’s made very clear to them their responsibility as protectors of children who’ve already had these experiences and it alerts them not to be ridiculously naïve about the fact that allegations could be, made against them, given the children’s previous experience” (TO six)*

Indeed, the value the programme has had in counteracting a common misconception in relation to child protection was highlighted. A Training Officer felt that those working certain children's services, for example, social care and social work, were considered by many working within statutory bodies and voluntary organisations as alone in requiring specific understanding and knowledge of child abuse and neglect. She believed Children First Basic Level Training informs participants from a range of services of their child protection responsibilities.

*"I feel the new principle in the new guidelines is very important and it does make people sit up and listen and it's the one that people working with adults in adult services need to consider the impact of the parent's behaviour on the child and that does get people's attention as well so I think that's very positive" (TO one)*

**Children First Basic Level Training programme participants** spoke of their increased awareness and understanding of child protection as helping them to improve their services. Eight of the nine participants interviewed felt the programme had clarified their role and their service and / or discipline's position in protecting vulnerable children. Several commented:

*"I never understood really about neglect, I thought I did. I would always have thought physical, psychological, emotional, but actual neglect, how to spot neglect in a child; you know, underweight, inappropriate clothing, it pricked my ears about that" (training participant)*

*"I think clarity is the biggest one, being absolutely crystal clear about what your role is in terms of recognising abuse in it's different forms and reporting those concerns and how to go about that and any follow up role or responsibility you or the centre might have as an outcome of that" (training participant)*

*"...we would have had concerns with some young people that we worked with, with their parenting, and I suppose we were very concerned about the relationship with that young person and I found that it [the training] clarified that aspect for us" (training participant).*

Participants also highlighted the programme's multi-disciplinary character as a key learning feature of the training. Several recalled interaction with other professionals from other disciplines in group work as enhancing their awareness and understanding of child protection. A number recalled how they

had benefited from hearing others in different roles and with levels of responsibility speak about child protection and welfare issues. Two participants commented:

*“...the best thing about the whole thing was just the fact that you're meeting other people from different professions. I found that very good that you were getting all different people with different aspects and I found those discussions very interesting looking at it from all different angles”* (training participant)

*“we had to split up into groups and the way people viewed risk or what they should be reporting, that was interesting to see that I might think of something as a high risk and somebody else would see it as a huge risk, so that was good, you were looking at were you being too careful at times and it did make me reflect on my practice I suppose when it comes to reporting and it made me very mindful of the young people that I'm working with and the level of risks”* (training participant)

Two participants also spoke of the help received in updating and drafting child protection policies for their services. The provision of “*very clear guidelines*” in this regard, as one remarked, represented in their view tangible outcomes of the programme helping participants’ improve their service.

#### ***b) Enhancing inter-professional and inter-agency co-operation***

**Workforce Development Training Officers** also emphasised the multi-disciplinary character of the programme as important in increasing understanding of child protection and welfare (see Figure Five). Several felt the mix of professions at training sessions benefited participants’ both in terms of the broader scope and depth of issues considered and in facilitating engagement among professionals. One commented that those active in child protection working together with those who may not allow a two-way flow of information and experience.

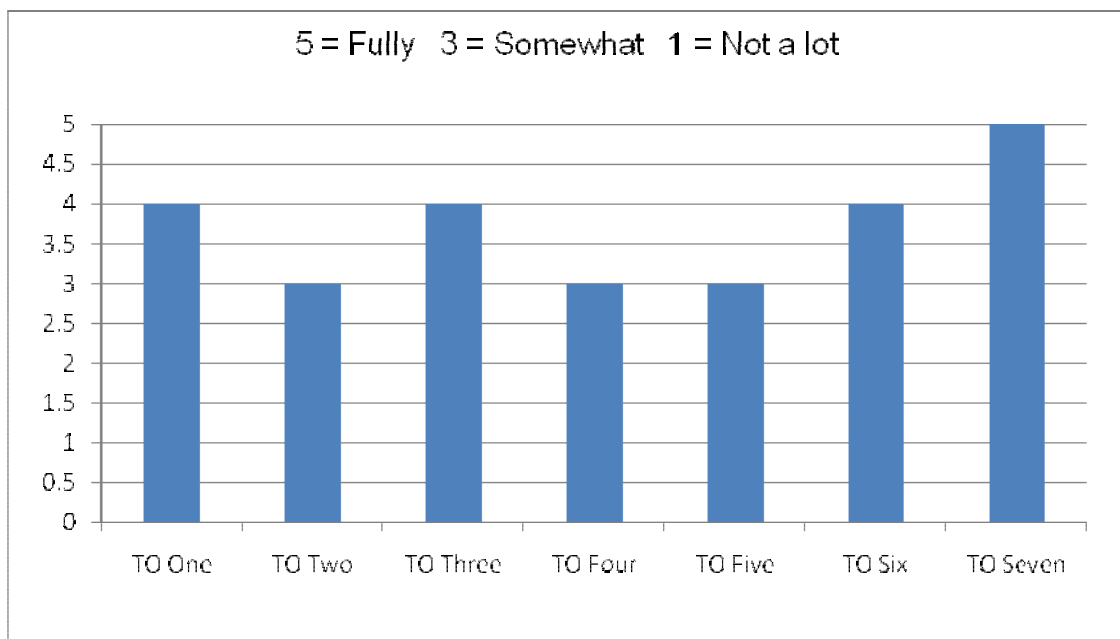
*“...the other good point about that is that you are coming in contact with professions that you might not otherwise have an opportunity to meet and people do get a better understanding of each other’s roles and where people are coming from in terms of their ideas and the information”* (TO one)

*“Even last week I had an example of a social work team leader meeting an education and welfare officer, and the education and welfare board are coming in with us in the new Agency, so they were exchanging telephone numbers and discussing different cases they had worked with” (TO two)*

Training Officers felt the programme’s multi-disciplinary mix created awareness of the necessity of multi-disciplinary and interagency collaboration on child protection and welfare issues. This, several maintained, was a key motivator of the programme. According to one Training Officer most professionals attending the programme already work in partnership with other disciplines and services on many issues, sharing information, expertise and insights. In her view Children First reiterated a need to do likewise in efforts to protect children.

*“...we all work within our own domains to get familiar with our territory but we also have to get out of our comfort zones from time to time and take a look at where people are coming from, and their roles. I suppose there would be a good emphasis on that on the day because no one of us can do this on our own” (TO three)*

**Figure Five: Enhancing inter-professional and interagency cooperation**



In addition to increasing understanding of child protection among participants, a broad mix of participants was considered, by several Training Officers, important in helping such understanding permeate through many service organisations. The drafting of child protection policies by participants (often designated child protection officers in their service) and their feedback to colleagues following the programme were highlighted as providing wider outlets for the dissemination of child protection policies and procedures. However, Training Officers (four) did highlight that training programmes they facilitated were attended exclusively by HSE (and Agency) personnel. One Training Officer felt that for the programme “*to be open and inclusive*” and achieve its child protection goals more participants from the voluntary and community sectors need to be included.

*“...but what happens sometimes is you get a top-heavy end that you could have a lot of nursing staff, maybe a lot of one group or not enough of a mix of groups, and I think it's very valuable when you have a better mix, I think they get a better sense of the working together because they're modelling it within the training” (TO four)*

*“I think it's really important that we get a good mix of people training together... so we have a consistent implementation, but if you have the same groups who are not attending historically are still not attending now, it flies in the face of the need to consistently implement” (TO six)*

A majority (eight from nine) of the **programme participant's** interviewed felt the training programme had enhanced inter-professional and interagency co-operation. As referred to earlier, training with other disciplines was considered beneficial by participants. Several recalled becoming more aware of services and disciplines they previously had being unfamiliar with prior to attending the programme. Apart from the opportunity to engage and build links with other professionals and services, participants welcomed learning of the supports available if faced with child protection concerns.

*“I just found that it was great to know that there was support there, I had support if I needed to phone anyone that they were at the end of the line” (training participant)*

*“I think that’s hugely beneficial because again I was getting exposed to areas that I wouldn’t have been exposed to. If you had a group of people all from the same area then the content wouldn’t have been as rich for everybody. I think the mix is probably essential”* (training participant)

*“...we’re very much in a bubble here; you don’t really get to see people from other services unless they’re directly linked with the teenagers that we’re working with so we got to meet other professionals like occupational therapists and things like speech therapists...it was very helpful for the clients that we work with”* (training participant).

However, one participant did feel more time was required in order to *“tease out some of the problems or questions”* concerning child protection provoked by having a diverse audience. Another highlighted discrepancy in reporting procedures between those working within the [then] HSE and those working for voluntary and community agencies. This issue was not adequately dealt with in the programme in her / his view.

### **3.3.2 Children First Basic Level Training: Relevance of Topic areas**

The topic areas used in Children First Basic Level Training most often were described by trainers as providing clarity and understanding of child protection and the roles and responsibilities of participants. The content communicates Children First Guidance by delivering a *“very clear understanding of your obligations and how to go about the different areas in child protection in terms of recognition and identification and reporting”* (TO one). Another Training Officer felt that the content emphasises broadening responsibility for child protection and welfare in order to assist the identification and reporting of child abuse, a core aim of the Children First Guidance. This, she felt, was best achieved through providing the understanding needed to recognise the signs of abuse, the confidence to respond appropriately and the knowledge of child protection supports available. Training Officers asked about the relevance of modules in promoting best practice in child protection remarked:

*“...people need to know their role in this area and know where to go with concerns...because there’s nothing worse than working in doubt and this whole area will throw up an element of doubt so people need to be clear to respond, they know the local GP system, they know to go to their designated people to go to and their role afterwards” (TO three)*

Training Officers viewed the generic focus of the programme as benefitting the vast majority of attendees. This view was unanimously conveyed despite two Training Officers describing the content as at a ‘basic level’ and perhaps “*pitched too low*”, as one remarked, for professionals working extensively with victims of abuse and neglect. The other also felt the programme more suited participants working in community settings rather than those in a clinical or hospital venues. Several Training Officers commented on the content:

*“...for certain groups of people and they would be any primary care workers that are working in the community, I think it’s sufficient for them. Multi-agency, primary carers or community care workers, it’s all very relevant for them. I think for hospital staff it’s too focused on community” (TO five)*

*“...my concern is that some people who come on the course are very experienced in childcare and they’re still required to do the basic level and they maybe would require more in-depth work” (TO two)*

*“I suppose your experienced social workers sitting there but to be fair to them it’s reflective as well for them, I don’t think it’s too basic for anyone to be honest with you. Because I do think we have to start with basics, it’s not therapeutic, it’s not theoretical, this is based on facts and cases and reports” (TO one)*

Nonetheless, the programme’s inclusive nature was valued by Training Officers. Several spoke of the programme’s flexibility as a key asset. Having diverse audiences provided opportunities to incorporate the expertise and knowledge from many backgrounds. According to one, mixed audiences including various levels of experience and needs in terms of child protection require training that clearly addresses and articulates child protection policy and at the same time can include where appropriate the experience and knowledge of participants. Training Officers commented on presenting to mixed groups:

*"I'm not insensitive to anything, I mean I'm open to hear the criticisms but I'm also open to spelling out the realities for the staff here, this is what they deal with and in the context of what they deal with these are the issues sometimes. Now I think it is quite good, well I'm always seeing people come up and say look, they really found it very interesting, and I'm always keen for people to bring forward their own examples or issues because I think that's the best learning" (TO three)*

*"I've had directors of public health nursing, assistant directors, I've had dentists, senior dentists, and again it's just... even though most of them would be very familiar with the material, they engage well on the day, they enjoy giving examples from their work so I do think it's worked well for managers as well as front line people" (TO one)*

Training Officers highlighted individual programme areas as helping to clearly frame child protection policy priorities. One emphasised the clarity provided in a straightforward exposition of the problem, responsibilities and reporting procedures in child protection leaves participants more confident in their roles:

*"...just knowing, being clear what your own responsibility is, and knowing the foundation, the basis of that role and responsibility, and knowing then that passing on concerns you are adhering to what the agency is saying, then I think that in itself because you know you're adhering to Children First, therefore you will be more confident" (TO four)*

Moreover, Training Officers in general were positive when questioned on the individual sections contained in the training programme. As referred to above, a clear explanation of child abuse and neglect and reporting procedures was reported as central feature and a key asset of the programme. One Training Officers felt that the content clearly defines how participants should respond to the risks and factors that may arise. Several commented on where they considered the strengths of the programme lay:

*"...the strengths of the day from my point of view are the categories, definitions and signs and symptoms of abuse. They're basically the three Rs really. I want people to go away at the end of the day being able to recognise, respond and report, and I think they're the most important part of the day" (TO one)*



*"I think categories and definitions of child abuse; practitioners get a lot out of this particular module because...well it's linked to the other one, signs and symptoms, there is an access in that. They talk about the definitions and we have them in working groups. How they would recognise it, what to look out for and the different signs and stuff and it's bringing their own experience out. I would always encourage people to talk about case examples"* (TO three)

Despite Training Officers overall approval of information provided in the programme some did, however, reiterate a need to continually review and update what and how the child protection message is delivered. Several Training Officers highlighted that time and emphasis in some instances needs to reassessed, for example:

*"I find that reporting bit I think could be structured a bit differently in terms of really for me it is this is how the social work department deals with it, how might you fit into this as opposed giving a full big description of the entire social work process. It's where the reporter might fit in if you know the client or you're involved you might have on-going; you may not have, so I think that may be more relevant"* (TO four)

*"I think it's important for people to have a context and there isn't actually an awful lot of time spent on legislation and policies and procedures but I think sometimes people switch off when they hear legislation policies and procedures"*(TO one)

In addition, a majority of Training Officers (five of the seven) considered the last section in the programme concerning the benefits of agencies and disciplines working together as weak. Several felt interagency partnership and collaboration was a subject that featured throughout the programme and should be incorporated accordingly.

*"Benefits of agencies and disciplines working together: this section I think is really weak. I don't like module four at all. I think it comes very late in the day. People are exhausted at that stage because there is a serious amount of material and there's a lot required from attendees"* (TO two)

*"...the last module, working effectively together, I think that's quite weak really and I think that it could be improved an awful lot. I think that there's more done in working together throughout the day as opposed to having a specific module looking at it"* (TO one)

Training Officers did, however, acknowledge the topic areas covered as providing contexts to explore key areas and relevant issues in child protection and welfare. Overall, they welcomed that, in their view, the programme provides them a basis upon which they can train others in protecting children's welfare and their rights.

*"Issues involved in confidentiality: I think that is very relevant and needs to be really highlighted...we have to give that message really strongly. I think the training does and the material does, it's not a breach of confidentiality to share information when you're concerned about children, that's really good"* (TO four)

*"..I try to get across three important messages and they virtually always quote them at the end of the day [in evaluation sheets]. Number one is your personal responsibility with regard to reporting; two, children have rights and three, have the paramount interest"* (TO seven)

Several of the programme participants interviewed also acknowledged the value of the programme's consistent and broader model of child protection and welfare. One remarked that Children First principles as outlined in the programme *"open up people's eyes who didn't think they have a responsibility to the fact that they actually do"*. Some participants (four of the nine) felt as professionals become more aware and knowledgeable in child protection the more comprehensive and effective this model of protecting children will become.

*"...on the course people from adult services and they are wondering what are we doing here, we don't work with children? But they actually realise that these adults that you work with, some of them have access to children and if you have a concern that this adult did something to someone, be it another adult, and they have access to children, then that's something you should be considering"* (training participant).

Participants also appreciated the clarity felt inherent in the programme content. For example, one remarked:

*"...it kind of wakes you up a little bit and you're not as desensitised, you look at things and think actually this isn't right and it isn't normal"* (training participant)

Another pointed to what she felt was the relevance to her work in the information provided. She and several others commented that having received the training they now were more perceptive in their work as regards child protection:

*“...the definitions of abuse and they gave an example of chronic chaotic parenting, which is something we see a lot of in early intervention. That was very good because it actually gave a framework for reporting and a framework for being able to go, ‘do you know what, that actually, long term isn’t good, I should do something about it’”* (training participant)

One area highlighted by participants as important was outlining the roles and responsibilities of [the then] HSE staff and designated child protection officers. For several its value was in eliminating doubts surrounding child protection procedures:

*“I got it in a nutshell that you report to the social worker, the manager on call or whatever and I wouldn’t have known really what to do or where to go before and it taught me definitely to pass it on to somebody and not to try to maybe handle it yourself”* (training participant)

*“I had a certain amount of awareness of it but I wouldn’t have the specifics. I knew there was probably someone out there that I could contact but I’d be chasing them down whereas now I have very specific people...it’s more precise”* (training participant)

### **3.3.3 Children First Basic Level Training: Outcomes and Practice**

A majority of Training Officers felt<sup>11</sup> participants were better equipped to manage child protection concerns appropriate to their role having received the Children First Basic Level Training. For example, while cautioning that the programme was *“a general course for general roles”*, one believed the central tenets of the programme – *recognition, identification and reporting* – had being reinforced among participants. Others considered participants had benefited as

---

<sup>11</sup> Two Training Officers felt they could not comment with any authority in regard to whether programme participants had improved in their roles in relation to child protection. Both did, however, comment that in their view and from what they read in end of course evaluation forms completed by participants they had improved their knowledge and understanding of child protection.

the programme had explained child protection roles and emphasised the collaborative responsibility inherent in child protection. According to Training Officers, participants now knew they were part of a wider team and “*not working alone*” as one remarked when it came to protecting children.

*“I do feel that they do feel better equipped to manage risk appropriate to their role and that they're reminded about working together and it isn't their full responsibility, that it's about people working together”* (TO one)

*“I think they are because I keep reiterating through the training...look if you have any concerns, don't keep it to yourself, discuss the concern, you're not making a referral. And I always give them the line contact the duty social worker for advice. So that's helping them to manage the risk, helps them to share the risk”* (TO three)

Similarly, knowing supports are available if one has to report child abuse and / or neglect was identified by five of the nine participants as an important outcome of the programme. One commented “*the biggest thing is I know that support is there behind me*”. Another participant felt the programme refreshed her understanding of child protection and commented it was reassuring to know that others had been made aware of their responsibilities also. Programme participants remarked:

*“it was really good what the social worker said to us that you can actually ring and just check in with them and like I've done that recently, I saw a name and I recognised it as someone who's in the child protection team and I did feel that I was able, because of the way that the trainers were saying 'oh you can just ring us and check in', so that I think is better because I was just able to ring”* (training participant)

*“I think its raising awareness generally; I think that's a really useful thing. Making people aware of their own personal responsibility, their own ethics within the system, I think that's really important. So think on a general level it can only be a good thing in terms of making people cognisant of that they play an integral part of moving this forward and improving child protection”* (training participant)

An important outcome of Children First Basic Level Training according to several Training Officers was an increased willingness and confidence they felt now existed among professionals to report child abuse concerns. While as one commented “*there will always be anxieties around reporting child abuse no*

*matter how well trained people are*”, she felt people’s confidence to act on concerns has grown with increased awareness of the duty to care and procedures thereafter. Knowing that they can consult with, for example, social workers, regarding whether there are reasonable grounds to report was highlighted by Training Officers and participants alike as a key learning from the programme.

*“I think up to the last few years there were fears around what would happen when a report was made so I don’t see that as much anymore. I think people are confident in saying ‘I’m a professional, I have no choice but to pass this on, social workers will make an assessment and see what help your family needs to deal with this issue’”* (TO one)

*“...just knowing, being clear what your own responsibility is, and knowing the foundation, the basis of that role and responsibility, and knowing then that passing on concerns you are adhering to what the agency is saying, then I think that in itself because you know you’re adhering to Children First, therefore you will be more confident”* (TO four).

### 3.3.4 Summary

Training Officers and participants welcomed the implementation of a standardised child protection training programme. Both identified increased participant understanding of child protection and welfare as providing skills and confidence to recognise, respond and report concerns regarding children's safety and welfare. Some interviewees did highlight what they perceived as limitations of the programme. These mainly included the value of mixing those directly working with at risk children and others with lesser roles as regards children and child protection in a generic programme and also a need to involve more professionals from the voluntary and community sectors. Overall, the research findings indicate Training Officers and participants had broadly positive perceptions of the Children First Basic Level Training programme in terms of its impact.

*"I think it made people aware that they have the responsibility, it made people more open to the fact that this happens, how to recognise it and then it needs to be reported and where to report it to. It increases the opportunity for people to report stuff so that the risk to children is less"* (training participant)

*"I think clarity is the biggest one, being absolutely crystal clear about what your role is in terms of recognising abuse in it's different forms and reporting those concerns and how to go about that and any follow up role or responsibility you might have as an outcome of that"* (training participant).

## **Chapter Four: Keeping Safe training programme**

### **4.1 Introduction**

This chapter presents research findings from the 2013 Review of the Keeping Safe training programme. Its purpose is to report the analysis of findings from a survey of participants of the Keeping Safe training programme and interviews with Children First Information and Advice Officers and training programme participants. In doing so it provides a detailed and comprehensive review of the programme and its impacts. The chapter is divided into sections that present findings concerning:

- the training programme's aims and objectives;
- participants and Children First Information and Advice Officers understanding and relevance of the programme; and
- participants and Children First Information and Advice Officers views as to the outcomes of the Keeping Safe and transfer of the knowledge acquired by programme participants to practice.

Each section concludes by summarising key research findings to emerge.

### **4.2 Keeping Safe training programme questionnaire**

#### *Participant Profile*

A total of 73 people responded to the Keeping Safe questionnaire survey yielding an overall response rate of 13 per cent. Of those who responded 30 were in management positions, 32 classed themselves as 'workers', seven were volunteers, and three were self-employed. Seventeen (23%) participants indicated that they have been in their current role for greater than 10 years, 23 (31%) have been six to 10 years, 21 (29%) three to five years and 11 (15%) indicated being less than three years.<sup>12</sup>

---

<sup>12</sup> One respondent did not indicate the duration they had been in their current role

#### 4.2.1 Keeping Safe training programme

Nearly all survey respondents (96%) indicated that the Keeping Safe training programme adequately met their practice needs in terms of child protection and welfare. A majority who commented (55) felt the training had increased awareness of child protection and welfare. Many commented that the programme clarified child protection policies, informing participants of relevant procedures and had enhanced existing knowledge in this area. For example:

*“...it answered all questions, common situations and broadened knowledge of child safety and what to watch out for”*

*“It gave me greater understanding and awareness of policies and procedures that need to be in place to protect children and staff”*

*“...created the understanding and knowledge to form new policies on child protection after training programme”*

This last comment regarding increased understanding of child protection policies was a feature in many responses by participants through the survey. Another commenting in this section felt that the programme “*covered legislation and core ethos of working with children and keeping both you and children safe*” and “*that provided help in drafting child protection policy*”. Moreover, four out of every five (83.6%) respondents felt the material used in the training programme was ‘just right’ for their specific role (see Table Ten). Of the 52 respondents who commented, 46 generally felt the material used in the programme was relevant to their role, detailed but clear and informative. One commented that the programme “*gave clear information and knowledge on what to do if help is needed*”. Others commented on the course material:

*“...it worked from definitions of different abuse to reporting forms which I did find useful”*

*“Children First book is useful and detailed and now have it in the service regarding child protection”*



A small number of respondents (4) commented that they would have preferred if the training material was more detailed in its treatment of child abuse and its aftermath indicating an interest in more advanced training to follow the basic level inputs<sup>13</sup>:

*“...still a lot of grey areas in relation to therapeutic work, retrospective work and domestic violence”*

*“... it was vague on how it works, would have liked more information on working with abused children, how to listen to them and some role playing in doing this”*

**Table Ten: Rate course material according to specific role**

Course material specific to role	Frequency	Per cent
Just right	61	83.6
Too detailed	4	5.5
Not detailed enough	3	4.1
Don't know	1	1.4
Total	69	94.5
Missing	4	5.5
<b>Total</b>	<b>73</b>	<b>100.0</b>

Another significant issue raised by several respondents in relation to the programme material (and in other sections of the questionnaire) was the programme's propensity to encourage discussion on child protection roles and procedures. This group dynamic was viewed as resulting in a more comprehensive learning experience as the following comments demonstrate:

*“...general information and good opportunity for participants to engage in discussion”*

*“...good discussion and personal and individual queries; therefore existing material could be elaborated on and discussed regarding particular roles in setting and situations”*

---

<sup>13</sup> Detailed specialised training in therapeutic work with abused children, retrospective work with adults and domestic violence are not included in the Keeping Safe training programme.

#### **4.2.2 Keeping Safe training: Achieving Aims and Objectives**

##### ***Aim One: Raising awareness of child protection issues and reporting procedures***

Most survey respondents were positive regarding whether the Keeping Safe training programme had achieved its overall aims. For example, 52 (71.2%) respondents were 'most positive' that the training had raised awareness of child protection issues and reporting procedures; a further 18 (24.6%) indicated they were 'positive' in this regard. Indeed, of 49 respondents who commented all but three felt the programme had raised awareness of child protection and explained reporting procedures. It provided "*a clear understanding of child protection and protocols and reporting procedures*" as one respondent commented. A significant number of respondents also commented that the programme highlighted a need to have a person delegated to manage child protection concerns and to implement appropriate procedures once a child protection report has been lodged. The following sample comments display a cross section of training participants' views on how the programme increased awareness of child protection:

*"...we knew exactly in the organisation who to report concerns to and who in turn they are reported to"*

*"...gave awareness of need to have a delegated person and the procedures to follow after a report is made"*

*"...really clarified for me the exact steps to take if I had a concern which is vital in order to maintain confidentiality and made me more aware of different levels with issues"*

##### ***Aim Two: Assisting organisers of activities to explore all aspects of safety and general welfare of children and young people***

A high percentage of respondents also indicated that the Keeping Safe training had met its aim of assisting organisers of activities to explore all aspects of safety and general welfare of children and young people; 67 per cent most positive and 20.5 per cent positive. A significant topic for respondents commenting (40) was the assistance that the programme provided participants in the development of child protection policies for their services and/or departments. Several respondents, a number working with children in the pre-

school sector, commented that the “well structured” explanation of child protection and welfare policies and procedures was particularly useful. It “*emphasised the importance of having all these in place*” according to one. Another felt the programme “*highlighted policies and procedures making operating a pre-school go more smoothly*”. Some respondents also commented the group work discussions were particularly beneficial in achieving this aim:

*“...group discussions were very beneficial in allowing personal thoughts and views on approaches and to have proper procedures clarified and made concise”*

*“...given a lot of information and role play activities”*

*“...very good delivery and input from participants concerning the importance of procedures underpinning policies creating a safe environment”*

### ***Aim Three: To identify ways of creating an inclusive environment whilst working with children and young people***

Three-quarters (77%) of survey participants indicated they were ‘most positive’ or ‘positive’ that the training programme had identified ways of creating an inclusive environment for those working with children and young people. A majority of those commenting (32 out of 39 respondents) were positive in their view that the programme had achieved this aim. One response typical of survey participants emphasised that the programme had “*explained the importance of inclusivity and catering for additional needs*”. While seven respondents did feel the programme had not sufficiently dealt with inclusivity, for most it had created much needed awareness:

*“...gained knowledge about the medical and social models of disability and that they do not aid in creating an inclusive environment. It informed me about the factors of vulnerability and communication approaches.*

*“Child protection protects everyone, no one is excluded. A focus on children with disabilities and special needs is most urgent and important that their individual needs is at all times safeguarded and protected”*

***Aim Four: To explore issues of recruitment, selection and management of staff and volunteers***

A majority of survey respondents indicated the Keeping Safe training programme also had achieved aim of exploring recruitment, selection and management of staff and volunteers (see Table Eleven for a breakdown of respondents' answers). Of the 41 respondents who commented most (36) generally were positive that the programme had updated their knowledge and had increased awareness of recruitment and Garda vetting procedures.

**Table Eleven: Did the training programme meet its aims of exploring recruitment, selection and management of staff and volunteers?**

<b>Recruitment, Selection, Management</b>	<b>Frequency</b>	<b>Per cent</b>
Most positive	45	61.6
Positive	13	17.8
Somewhat	5	6.8
Negative	3	4.1
Most negative	2	2.7
Total	68	93.2
No answer provided	5	6.8
<b>Total</b>	<b>73</b>	<b>100.0</b>

**4.2.3 Keeping Safe training: Understanding and Relevance**

Nearly four out of every five respondents indicated that they had a full understanding of relevant legislation and policies concerning child protection and welfare as displayed in Table Twelve. In addition, nearly 90 per cent of the survey's respondents indicated that they either had an 'excellent' or 'good' understanding of identified procedures for reporting child protection and welfare concerns. A similarly high percentage of respondents (81%) had 'excellent' or 'good' understanding of the supports available in relation to child protection and welfare. Sixty-two (85%) respondents found the sections on child protection and welfare policy and legislation and dealing with reporting procedures and

supports available relevant to their roles. Indeed, most respondents valued these programme sections, one describing them as “*giving essential information*” to those working with children and young people. However, several respondents (3) did comment that the legislation and policy material was quite detailed and could, in their view, be summarised in order to make it more accessible.

**Table Twelve: Do you have a full understanding of relevant legislation and policies on child protection and welfare?**

Understanding of legislation & policies	Frequency	Per cent
Excellent	29	39.7
Good	29	39.7
Moderate	7	9.6
Little	4	5.5
No	1	1.4
Total	70	95.9
No answer provided	3	4.1
<b>Total</b>	<b>73</b>	<b>100.0</b>

A significant majority of survey respondents also indicated they had ‘excellent’ or ‘good’ understanding of child abuse. For example, 49 (67%) had an excellent understanding of the categories and definitions of child abuse whereas 15 (20.5%) respondents indicated having a good understanding in this area. Four out of every five respondents indicated they either had an ‘excellent’ or ‘good’ understanding of the signs and symptoms of abuse, how to recognise abuse, and the risk factors in child protection. Overall, sixty (82%) participants indicated that the section of the training concerning child abuse was relevant to their role. Many respondents positively commenting (40 from 43) the section communicated well-defined and clear knowledge concerning recognising the risks factors in child protection. For example:

*“I have a clear understanding of definitions of child abuse and knowledge was tested with written assignments”*

When questioned on applying the child protection and welfare knowledge if and when necessary in their specific role most respondents indicated a high level of understanding. Table Thirteen displays respondents understanding of the key factors in ensuring the safe management of activities. Knowledge of risk assessment and of the key elements in a code of behaviour was similarly of a high level with approximately half of respondents reporting an excellent understanding of these processes. Several respondents commented that the section has since helped them to devise behavioural guidelines for their service:

*“It allowed me to better understand child protection and how to devise a child protection policy”*

*“...have drawn up code of behaviour and bullying for classroom”*

*“I now have knowledge of risk assessment and know how to develop an anti-bullying code for children”*

**Table Thirteen: Do you have a full understanding of the key factors in ensuring the safe management of activities?**

Safe management of activities	Frequency	Per cent
Excellent	38	52.1
Good	19	26.0
Moderate	10	13.7
Little	2	2.7
Total	69	94.5
No answer provided	4	5.5
Total	73	100.0

However, the more role specific activities of developing an anti-bullying code for children and of the additional considerations for running residential activities did receive more moderate levels of understanding among survey participants (see Table Fourteen and Fifteen). A number of respondents (15) commented that these sections either were not relevant to their role or were in their recollection

not covered in the training programme they had attended.<sup>14</sup> It should be noted that the Keeping Safe training programme is intended to raise awareness of the need for procedures and policies to be put in place by organisations in relation to bullying and carrying out residential rather than provide in-depth training on their design.

**Table Fourteen: Understanding of how to develop an anti-bullying code for children**

How to develop anti-bullying code	Frequency	Per cent
Excellent	28	38.4
Good	18	24.7
Moderate	12	16.4
Little	9	12.3
Total	67	91.8
No answer provided	6	8.2
<b>Total</b>	<b>73</b>	<b>100.0</b>

**Table Fifteen: Understanding of the additional considerations for running residential activities**

Running residential activities	Frequency	Per cent
Excellent	23	31.5
Good	18	24.7
Moderate	12	16.4
Little	6	8.2
No	3	4.1
Total	62	84.9
No answer provided	11	15.1
<b>Total</b>	<b>73</b>	<b>100.0</b>

---

<sup>14</sup> A significant number of survey respondents did indicate in their responses (at various points in the survey) that because it had been 12 to 18 months since they had attended the Keeping Safe training programme they therefore were vague as to the content of some modules.

Over 90 per cent of the survey's respondents indicated they had excellent or good understanding of how to respond to concerns about children having completed the training programme. Moreover, 45 (61.5%) respondents had excellent and a further 19 (26%) a good understanding of how to report concerns about children and their respective roles afterwards. Likewise, a high level of understanding of the issues involved in confidentiality and exchanging information was recorded with 71% and 18% of respondents having an excellent or a good understanding of these issues respectively.

Several respondents commented the clear explanation of appropriate child protection responses and reporting procedures had instilled a confidence to act on concerns. One commented responding to concerns and reporting procedures had been *“made particularly clear and the main benefit of the training”*. Another respondent was *“now more confident to report suspected abuse”* because of the greater understanding of how to respond to child protection concerns. Several also identified that because they became more aware of a need and how to engage with other disciplines and / or agencies in protecting children they now were less fearful of reporting concerns. For example:

*“Yes I found the whole fear, worries, lack of knowledge was set aside after I completed the course. I am not alone trying to understand child protection. I am now part of a group who have child protection knowledge as a tool which I must link into and work with”*

*“After the programme felt comfortable responding to issues regarding children, previously the author felt frightened of the prospect of having to respond to concerns”*

The benefits of agencies and disciplines working together was widely recognised by survey participants. Table Sixteen displays the participants understanding of such benefits. Most respondents indicated an excellent (65.8%) or good (20.5%) understanding of how to work together effectively and four out of five respondents indicated that this section of the training was relevant to their roles. Moreover, a need for effective working relations with others disciplines and agencies in order to protect children from neglect and



abuse were a common theme among those commenting (12 of the 35 respondents) in this section. For example:

*“...it made me more aware of how important it is for agencies working with to work together effectively and now I am fully aware of how to respond to concerns about children”*

**Table Sixteen: Do you have a full understanding of the benefits of agencies and disciplines working together?**

Benefits of agencies & disciplines working together	Frequency	Per cent
Excellent	48	65.8
Good	15	20.5
Moderate	6	8.2
Little	1	1.4
Total	70	95.9
No answer provided	3	4.1
<b>Total</b>	<b>73</b>	<b>100.0</b>

There was a high level of understanding among survey participants of a need for inclusivity and of being child centred in their work. Ninety per cent of respondents either had an excellent or good understanding of being child centred. In addition, the survey found 60 per cent (44) and 25 per cent (18) of respondents had excellent or good understanding of attitudes to disability respectively. Table Seventeen displays the level of participant understanding of ways to include disabled children. Knowledge of communication strategies in terms of inclusiveness was similarly of a high level with 55 per cent and 30 per cent of respondents indicating an excellent or good understanding of these processes.

Finally, 82 per cent of respondents indicated modules concerning inclusiveness as relevant to their role. A child care worker commented on the importance of issue for her role “...centre staff needs to know these skills as they are very important for the safe and smooth running each day”. Another respondent also highlighted the value of this section of the training programme:

*“...yes I understand the importance of our centre being child centred, knowledge on disability is needed to include disabled children. This section very relevant to my role and how to advice, help and support staff, children and parents”*

**Table Seventeen: Do you have a full understanding of ways to include disabled children**

Including disabled children	Frequency	Per cent
Excellent	34	46.6
Good	28	38.4
Moderate	5	6.8
Little	2	2.7
Total	69	94.5
No answer provided	4	5.5
<b>Total</b>	<b>73</b>	<b>100.0</b>

#### **4.2.4 Keeping Safe training: Outcomes and Transfer of Learning to Practice**

Thirty-three respondents indicated using the Keeping Safe training as part of their role in the six months prior to the survey (some in multiple instances). A sample of the most common aspects of the training programme used and applied in practice includes:

- **Recognising the symptoms of child abuse and neglect** (Eight instances noted)

##### *Examples of application in Practice*

- continual adherence to what is best for the child when there is a risk factor in their family;

- took daily observations for four weeks and created a written observation to back up protecting pre-school and staff;
  - used Children First National Guidance and training material in order to know what steps to take;
  - have had concerns about one or two children and have followed procedures learnt at training and followed up with management; and
  - watching children more closely or their safety and wellbeing.
- **The referral and/or reporting of child protection and welfare** (Seven instances noted)

*Examples of application in Practice*

- acted on report made by staff member;
  - referred to social work department;
  - made child protection referrals since course;
  - understanding of how to fill in the form and what happens after the issue has been reported;
  - training has been useful in instances where I had to collaborate with other professionals in obtaining care orders and working with families; and
  - clear understanding of reporting child abuse and what it entails.
- **Using the principles of Keeping Safe in daily roles** (14 instances noted)

*Examples of application in Practice*

- continual adherence to what is best for the child when there is a risk factor in their family;
- worked with parents to address situation;
- games used to provide key strategies for children to employ in situations that they are not used to;
- helping children with difficulties to be independent as much as possible and to encourage other children to interact with children with special needs; and

- more conscious of how I come across to the children and awareness of physicality, not too familiar and act with respect.

- **Adapting policies and procedures** (11 instances noted)

*Examples of application in Practice*

- created new policy and procedures for pre-school and afterschool care;
- made sure all clients received updated Child Protection policy;
- dealing with achieving sufficient Garda vetting for students;
- invited social work leader to come to centre to discuss future concerns;
- service reviewed behaviour management policy and worked in partnership with the children to develop a policy that promotes good behaviour e.g. picture messages are located around the room;
- helping and assisting me and my colleagues to write a code of behaviour for afterschool clubs for primary school students; and
- maintenance of standards of child-centeredness in the project where children are.

#### **4.2.5 Summary**

The Keeping Safe training programme met the child protection and welfare practice needs of 70 of the 73 respondents to this survey. Most respondents indicated the programme had an increased awareness of child protection and welfare. Many felt the programme clarified child protection policies, informing participants of relevant procedures and had enhanced existing knowledge in this subject area. The programme's propensity to encourage discussion on child protection roles and procedures was highlighted as resulting in a more comprehensive learning experience.

Survey respondents overwhelmingly agreed the Keeping Safe training had increased their awareness of child protection issues and reporting. A majority felt the programme emphasised a need to appropriately manage child protection concerns. For example, having a person delegated within a service or department in order to implement appropriate child protection and welfare procedures was a need highlighted by several respondents. Similarly, respondents felt their capacity to explore all aspects of safety and general welfare of children and young people had been enhanced in their view because of their participation in the programme. Indeed, several felt the programme provided the knowledge and understanding required in developing their own services' child protection policies and procedures.

Survey participants also indicated that the Keeping Safe training had helped them identify ways of creating an inclusive environment whilst working with children and young people. While a small number of respondents felt the programme had not sufficiently dealt with inclusivity, for most it had created much needed awareness. Likewise, respondents indicated the programme had updated their knowledge and had increased awareness of safe recruitment procedures.

A very high level of satisfaction was recorded among survey participants in relation to the programme's modules. Key elements of the programme including child protection and welfare legislation and policies, reporting procedures, understanding the categories, definitions, signs of child abuse, how to recognise abuse and the risk factors in child protection all achieved high levels of understanding among respondents. Modules concerning risk assessment, the safe management of activities and of the key elements in a code of behaviour also were identified by several respondents as providing key learning points.

A clear explanation of how to appropriately respond to child protection concerns and reporting roles afterwards was considered important and a major benefit of the programme. Several respondents identified these and the modules concerning child protection procedures as providing confidence to act on concerns they have had since attending the training programme. Respondents felt they became more aware of a need to collaborate with other disciplines and agencies in protecting children. Indeed, a need for effective working relations with others disciplines in order to protect children from abuse and neglect was a common theme recorded in survey data. Finally, inclusivity and being child-centred in providing services for children received a high level of understanding from survey participants.

## **4.3 Keeping Safe training programme Interviews**

### **4.3.1 Introduction**

In this section of the Report, an analysis of qualitative data<sup>15</sup> gathered in interviews with four randomly selected Children First Information and Advice Officers and with 12 participants of the Keeping Safe training programme is presented. 14 participants of the Keeping Safe training consented to participate in the interview process however two of these interviews did not proceed. Findings are organised based on interviewees' views and experiences in relation to:

- The achievement of the aims of the Keeping Safe training programme;
- Understanding of programme modules and their relevance to practice;  
and
- General views on the Keeping Safe training programme.

### **4.3.2 Keeping Safe training: Programme Aims**

#### ***a) Raising awareness of child protection issues and reporting procedures***

Children First Information and Advice Officers (CFIAO's) indicated the aim of increasing participants' awareness of child protection issues and reporting procedures had in their view been met (see Figure Six). Many (three of four) specifically identified the programme as clarifying child protection issues for participants, focusing on how to recognise, respond and report child abuse and neglect. While emphasising they had no way of measuring people's practice following the training, three CFIAO's spoke of the positive feedback they received from participants indicating increased awareness and understanding of child protection procedures.<sup>16</sup> CFIAO's thought participants benefited from hearing examples of abuse cases and the procedures subsequently employed. For example, trainers and a participant remarked the programme:

---

<sup>15</sup> Quantitative data gathered in interviews with CFIAO's is presented in Figure Six.

<sup>16</sup> Participants complete evaluation forms at the end of the training programme.

*“...gives clear information in relation to the definitions; it also then gives very clear guidance around responding to disclosure, why children may not tell. Looking at things like our own initial response to having to deal with a disclosure and then as a worker what you need to do with that concern in terms of looking at the reporting procedure”* (CFIAO four)

*“...is very comprehensive in the depth that it goes into each of the sections of what might constitute child abuse. Attitudes, values and beliefs around abuse, and then signs and symptoms of abuse which is one of the main recommendations from Children First”* (CFIAO two)

*“...was a very detailed and well-structured course and I felt when we came out kind of going ‘wo, these are the things we need to be aware of’”* (training participant)

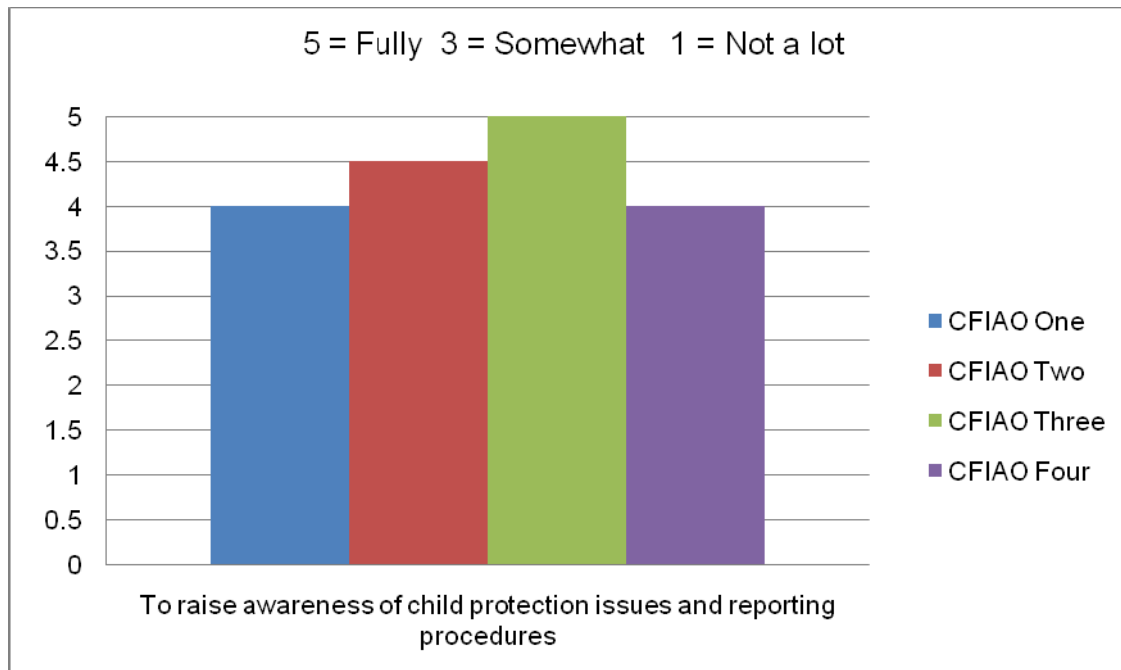
Research findings indicate participant awareness of child protection had been increased as the programme focused on best practice for those working with children. One CFIAO felt the programme contained a preventative element alongside providing information on child abuse and neglect. Another highlighted a section of the programme focusing on drafting codes of behaviour as helpful in this regard. It helps participants *“because it addresses some of the practicalities of working with children and being child-centred”* (CFIAO two). A CFIAO and programme participant felt the programme:

*“...raises awareness around child protection issues and important procedures but it also raises awareness about individual safe practice and good practice. What I would say is that it allows you to discuss practice issues and how it's not all about reporting, it's about prevention as well, keeping safe”* (CFIAO one)

*“...made me aware that as a volunteer even something very simple like giving them a hug or putting a hand on their shoulder or very simple things like that, they could see it as a form of affection or on the other side of the coin they could see it as you're hitting on to them. It depends on where they're at, particularly vulnerable children and you need to be aware”* (training participant)



**Figure Six: To what extent was participant awareness of child protection issues and reporting procedures increased?**



As previous quotations suggest the incorporation of participant knowledge and experience was considered important in increasing awareness of child protection and reporting procedures. Several CFIAO’s highlighted a value in participants discussing child protection issues with people working in other disciplines and with various levels of experience. One commented that *“just hearing different ways of looking at things; it just gives them [participants] a different perspective”*. Another CFIAO spoke of benefits of mixed groups especially when management levels are represented alongside frontline staff. This she felt allowed those drafting child protection policies for their service discuss relevant issues with those who will eventually implement these procedures. Two CFIAO’s described what they considered was a key feature of the programme increasing awareness of child protection:

*“...it’s a very constructive format, is the word I would use, for practitioners to come together and to raise awareness [of child protection] and the benefits also would be that people learn from the material but also learn from each other and it allows the facilitator to draw out good learning points as you go along”* (CFIAO one)

*“In my area we do this training with the preschool early years sector and they’re generally managers and I would say a lot of them gain an awful lot of information from sharing information with one another”*

*around how they manage situations and the training facilitates that forum for them to discuss it” (CFIAO four)*

However, CFIAO’s (two) did caution that the programme’s inter-professional and management / frontline mix limited the scope and depth of the material covered. One CFIAO commented *“because it is for everybody, that can be a difficulty”*. The other while welcoming its generic character as providing the base to provide *“really relevant information for organisations”* also commented:

*“...it is aimed at people with no prior knowledge so I think it can be limited in what you're actually giving people sometimes. If you have people there with a lot of experience they can feel that it's too limited, a bit too basic almost” (CFIAO three)*

***b) Assisting organisers of activities to explore all aspects of safety and general welfare of children and young people***

A majority of training programme participants felt Keeping Safe training had helped them in their work with children and young people. For example, some participants highlighted that they benefited through the programme’s clarification of how to appropriately interact and communicate with children and young people in their work. Others commented that they felt *reassured* by the comprehensiveness of the training they had received. *“I felt very well armed for my role because I was fully briefed on child protection, report procedures”*, one remarked. Several also spoke of increased understanding of child protection being translated into greater confidence when working with children.

*“...it clarified for me what was good practice and it took some of the anxiety out of some of the things that we may have been doing [with children]” (training participant)*

*“...some of the staff would have said to me ‘am I even able to put a hand on their shoulder’ or stuff like that and I was able to get that ventilated in the course and come up with sensible and achievable policies in that area, which were liberating for the company in a sense because it gave them a bedrock of behaviours that they could rely on” (training participant)*

Similarly, three of the four CFIAO's interviewed agreed in general the programme assisted participants in exploring aspects of the safety and general welfare of children and young people. All three felt the programme's group work sessions in particular, provided opportunities for participants to discuss child protection policies identifying and examining issues relevant to their roles and / or services. One CFIAO suggested the group format "*does make them think a little bit about the service they're providing...and...we say 'look, this may not be relevant to you but however in other aspects it may'*". Another described why in her view the programme benefits participants exploring issues of children's safety and welfare:

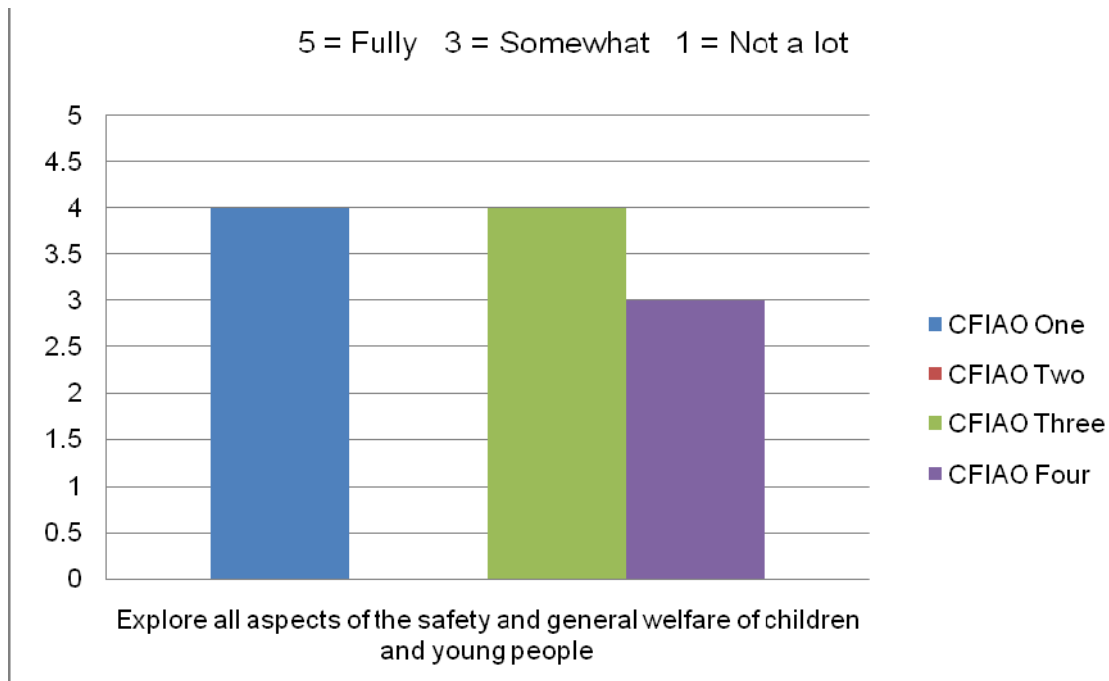
*"...because it's done in a small group discussion feedback way it's not prescribed this is what you do. It allows people the opportunity to discuss and to challenge themselves a little bit about it. It allows for them to reflect on the way that they do manage risk for children"*  
(CFIAO one)

Developing local child protection guidelines and codes of behaviour facilitated important learning processes for participants. A CFIAO suggested support in drafting policies based on the Children First guidelines enabled participants and their organisations spend valuable time evaluating their practice in relation to children's safety. She believed such activity "*really useful for organisations to spend some time going through and working out for themselves in terms of creating a safe environment for children*". Figure Seven displays CFIAO's assessments on whether Keeping Safe training assisted participants to explore all aspects of safety and general welfare of children and young people.<sup>17</sup>

---

<sup>17</sup> CFIAO two did not indicate a preference as she felt not in a position to assess participants practice following their attendance at the Keeping Safe training programme.

**Figure Seven: To what extent were participants assisted in exploring aspects of the safety and general welfare of children and young people?**



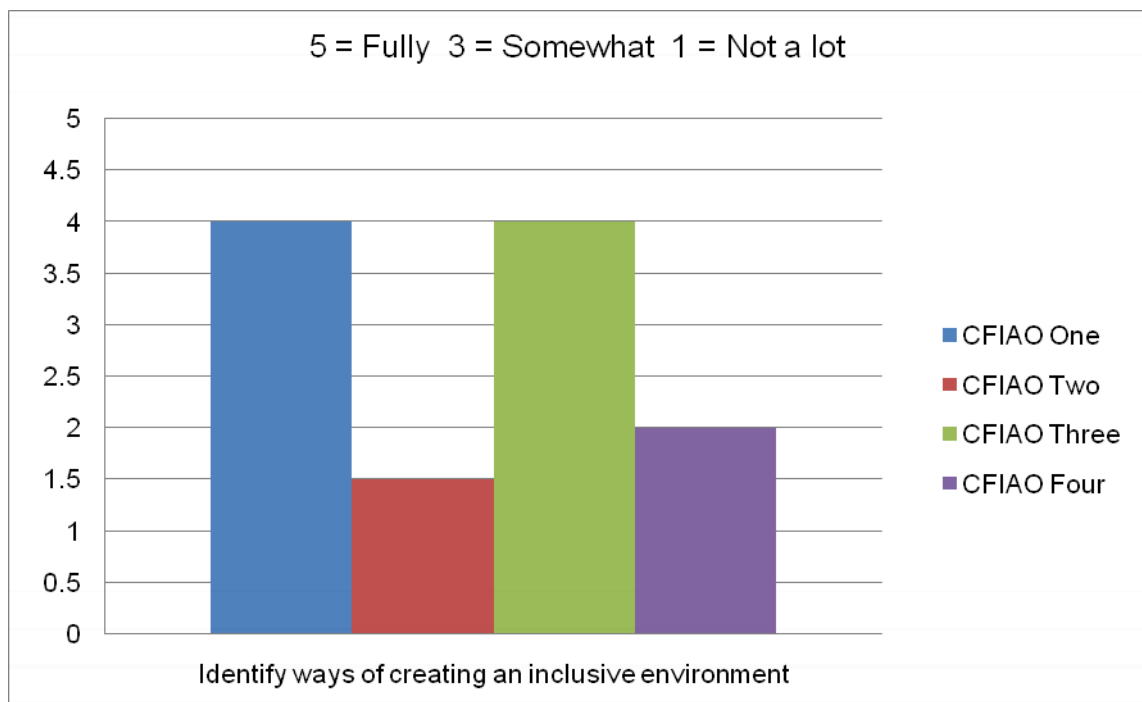
**c) To identify ways of creating an inclusive environment whilst working with children and young people**

A central aim of the Keeping Safe training programme is to maximise the capacity of staff and organisations to effectively provide inclusive and safe environments for children. CFIAO’s were mixed in their assessment regarding how the programme promotes inclusiveness and child-centeredness (see Figure Eight). Three CFIAO’s suggested participants generally understood and accepted a need for inclusiveness in providing children’s services and felt the programme underlined this imperative. Two spoke of a need to explore (in the training programme) the depth of this inclusivity:

*“They know what it means but it's looking at how are we actually doing that, do we listen to children, do we ask them for their opinion and give them a voice?...Are they actually being inclusive in what they're actually providing to the child and family” (CFIAO three)*

*“...a lot of services now anyway have children attending with some form of disability, be it physical or intellectual. I think sometimes they can have an attitude that it's nearly too hard to do it but I'd like to think that the strength in the training is that they go away a little bit happier and a little bit more aware that they have an obligation to ensure that their services are being inclusive” (CFIAO three)*

**Figure Eight: To what extent were ways of creating an inclusive environment whilst working with children and young people identified?**



The inclusion of children with disabilities was considered a particularly strong and welcomed feature of the programme. However, all trainers felt this strength came at the expense of a wider focus on inclusivity in children services. One commented *“it's important [a focus on disability] but I think it should be about broader inclusivity, children who are maybe marginalised or disadvantaged or different ethnicity”*. Another remarked the programme fails to address *“children of other cultures or really looking a little bit more into that aspect of inclusiveness. I think that would add benefit to the programme”*. Moreover, one trainer considered a section devoted to the theme of inclusivity as unclear and conflicting:

*“...it was very hard, it didn’t flow, it didn’t work, it looked as if you were separating, actually doing the exact opposite to what you were going to do which was you were supposed to make disabled children as part of the general, of all children being abused and it separates out even though disabled children are three times more likely to be abused” (CFIAO two)*

**d) To explore issues of recruitment, selection and management of staff and volunteers**

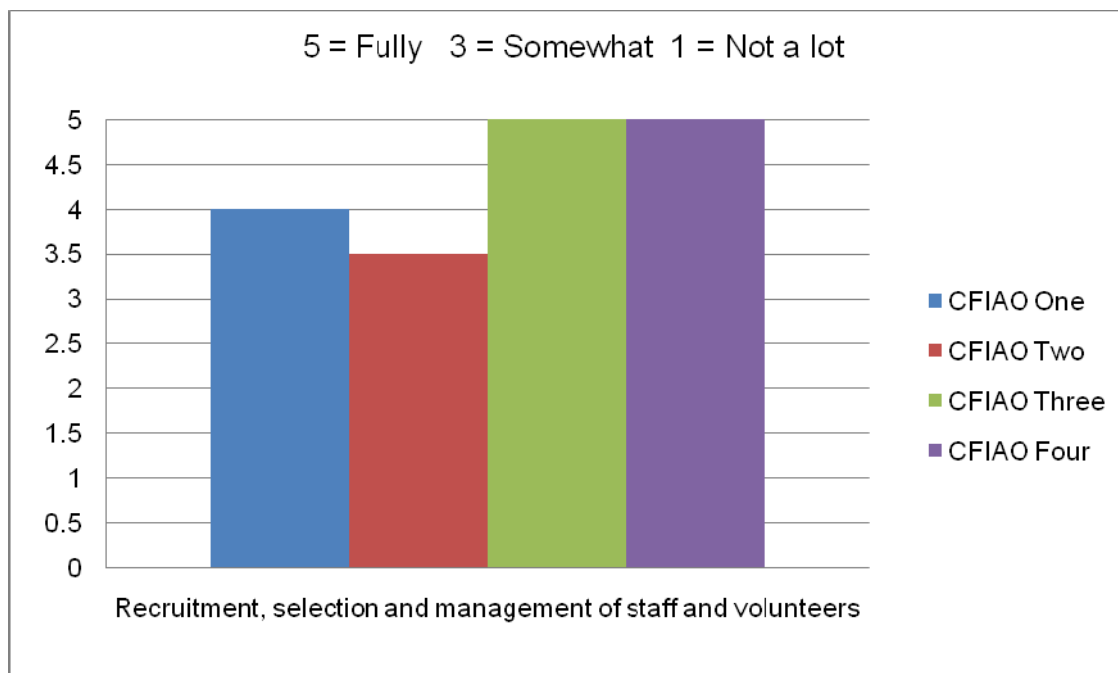
Information concerning recruitment, selection and management of staff and volunteers was welcomed by participants. Several commented that this section of the programme had created greater awareness of appropriate procedures and their personal and / or organisation responsibilities in this area. Four (of 12) participants specifically spoke of revisiting their own local guidelines in this regard on completion of the training programme. One commented that her / his organisation’s recruitment policies now were applied *“far more rigorously”*. This view echoed points made by several participants that safe practice in recruitment now was far more extensive in their organisations than merely applying prospective staff and volunteers to Garda vetting procedures.

*“...it certainly made me sit up and take notice of the importance of making those calls and just not having it be a formality, it needs to be a more rigorous process and documenting it in some way” (training participant)*

As displayed in Figure Nine, CFIAO’s rated the programme’s exploration of recruitment and management of staff and volunteers highly. One CFIAO felt this section *“worked”* as it brought together many aspects of safe management and recruitment – for example, employment law, probationary periods, drafting references, etc., – underlining the message that the adoption of safe practices ultimately minimises risks for children.

*“...the feedback we get is that people find it interesting because there’s a couple of case studies in that as well about managing your staff and your volunteers and I think people generally leave that session feeling an awful lot of the issues raised in the case studies wouldn’t have happened if management had done proper induction with staff and volunteers and had good policies and procedures” (CFIAO three)*

**Figure Nine: To what extent were issues of recruitment, selection and management of staff and volunteers explored?**



#### 4.3.3 Keeping Safe: Outcomes and Practice

Keeping Safe programme modules increased awareness of child abuse and appropriate ways of responding to child protection concerns. A number of CFIAO's (three) felt clearly defining child abuse and neglect and outlining the signs and symptoms of abuse were particularly important in helping participants achieve a broad understanding of child protection. While they characterised programme material as being of general nature in terms of child abuse, modules had, in their view, a capacity to educate participants regarding how to recognise child abuse and neglect in the many forms that it may present in victims lives. In addition, modules focusing on providing safe environments for children - safe management of activities, code of behaviours, child centeredness - particularly benefitted participants. For example:

*"...it's about getting them to take it back and look at the whole area themselves around communication and touch, about what is appropriate for their age group. I think it certainly encourages people to be a bit more mindful in writing their own codes of behaviour for staff and volunteers" (CFIAO three)*

*“I found that very useful because it enabled me to be able to say definitively this kind of behaviour is permissible and can be seen as part of your day to day job if it is done under these certain conditions, and that kind of liberated my staff” (training participant)*

As the above quotations suggest, clarification of roles and appropriate behaviours led to practical applications of the learning achieved through the programme. CFIAO’s also spoke of adapting training material or perhaps spending more time on a particular topic or area more relevant to an audience. CFIAO’s considered this flexibility important in a training programme they deemed had a very extensive and compact agenda. Several commented their experience over years had allowed them accommodate groups by focusing in on what they considered were pertinent issues in programme modules for the audience in question.

Several of the participants interviewed spoke of being more confident in fulfilling child protection duties having completed the Keeping Safe training. Four identified increased knowledge of reporting procedures as having helped them respond to child protection concerns. One welcome the transparency of guidance in relation to reporting *“...she [the CFIAO] was very clear on it [reporting], when you are working with children it doesn’t matter who you know or how you know them, it has be done right”*. Others spoke of being more aware and confident in adhering to Children First Guidance:

*“...it did give me the confidence where I informed the parent before I did anything I informed the parent that I was going to do it because she hadn’t been listening to me and then she came to me afterwards and she was very angry with me because I reported her. I said ‘I didn’t go behind your back, I did let you know upfront’” (training participant)*

*“...if anything I was helping the child. If you report on the mother about the child it’s not something that you would find easy to do but having done the course I would realise that it was the right thing to do” (training participant)*



Similarly, the importance of confidentiality and of exchanging information in relation to child protection was acknowledged by number of participants as aiding their practice. In addition to confirming one's responsibility to act in the best interest of children, the programme was credited with providing practical help in achieving this goal.

*"I would have felt that if I hadn't said something I would be neglectful in allowing the professionals complete the picture of the person. I was freed up from the point of 'I'm betraying somebody'" (training participant)*

*"The main benefits of the training would be that it gave you the confidence to pursue something, it also gave you the tools, you might say, to assess and document everything that's needed and it also gives you the ability to encourage your staff to not be afraid to talk to you about something" (training participant)*

All CFIAO's stressed there was a need to build upon the important progress in child protection and welfare they felt had being achieved through the Keeping Safe training. In order to maintain and increase awareness of child protection and the reporting structures in place, three suggested general refresher courses and / or specific programmes to catering for those with particular child protection responsibilities should be considered. One CFIAO also proposed training programmes assess participant's knowledge of child protection policies and procedures in order to encourage active participation in the learning process.

*"...it raises awareness but there needed to be something, it was not enough in isolation; it never was. You needed follow-up and they needed to be assessed as part of it" (CFIAO two)*

*"I would say that there is further training required for designated liaison people, so designated liaison persons that are actually expected to make the reports to the [then] HSE and follow up on those" (CFIAO three)*

Most participants felt refresher courses in child protection would be valuable.<sup>18</sup> In addition, several felt Keeping Safe training should be more inclusive of staff from the voluntary and community sectors and several felt all community and voluntary workers should attend the Keeping Safe training programme. This perhaps may also facilitate greater collaboration between statutory institutions and agencies and community groups on child protection, an important need highlighted by two participants.

*“I feel everyone should have it, it's not just...like who's to say who the child will turn to should they need to say something, you don't want somebody going ‘oh don't be saying that’, you need somebody that as I said all my staff know how to go about it”* (training participant)

*“...what needs to be in Keeping Safe is how the voluntary and statutory agencies can cooperate best. I suppose part of the dilemma of voluntary agencies is that they come into contact with families perhaps quicker than the statutory agencies. When statutory agencies come into contact with families it's probably a crisis at that stage whereas voluntary agencies can see it emerging”* (training participant)

#### **4.3.4 Summary**

Research findings indicate the Keeping Safe training programme increased awareness of child protection and welfare among programme participants. A clear explanation of how to appropriately recognise, respond and report child abuse and neglect concerns was considered by research participants as important benefits of the programme. Participants and CFIAO's identified mixed audiences, incorporation of participant knowledge and experience, and a focus on best practice for those working with children and appropriate recruitment and management staff procedures as key features helping improve child protection procedures. While welcoming the programme's focus on a need for organisations to create inclusive environments for children, CFIAO's did feel a deeper engagement on the topic of inclusivity in children services was needed. Overall, the CFIAO's and participants had positive perceptions of the Keeping Safe training programme in terms of its impact.

---

<sup>18</sup> A majority of participants who indicated a preference felt follow-on courses should be scheduled between three - four years after the original training programme.

## **Chapter Five: Discussion and Recommendations**

### **5.1 Introduction**

Overall, the review indicates that participants and trainers were mostly satisfied with the Children First Basic Level Training and the Keeping Safe training. Most found that it had enhanced their understanding of child welfare and protection policy and responsibilities and the majority considered the content to be, for the most part, relevant. For the majority, the training met their needs. Perhaps most importantly, the majority of participants reported increased confidence and competence in managing risk. Greater awareness of their own role and the role of others was also emphasised. Some areas for improvement and development were identified, in particular the need to continue to develop opportunities for learning about inter-agency relations especially with regard to co-operation between statutory and voluntary and community sectors. As one might expect, the need to recognise Children First Basic Level Training as a generic training was also emphasised with those who were more experienced in working with children and families on a daily basis finding it least relevant to their practice and conversely, those who were most removed from day to day child welfare and protection work generally valued the training most highly. Overall, results from the Keeping Safe training were most positive.

This chapter begins with a brief commentary on the existing literature of training evaluation to contextualise the study. Although this is a review of the child protection training the evaluation literature is very relevant to this study. This is followed by discussion of the main findings regarding Children First Basic Level Training and the Keeping Safe training. The common themes emerging from both studies are then considered. The final section concludes the chapter with reference back to the four main aims of the review and sets out a series of recommendations to follow. The current context of child welfare, in light of the establishment of TUSLA, the Child and Family Agency, has been taken into account in these recommendations.

## 5.2 A brief overview of the literature

Although training based on the Children First National Guidelines has been carried out in Ireland since 1999 this study is the first comprehensive national review of the Children First Basic Level Training and Keeping Safe training.<sup>19</sup> It is therefore a significant step towards establishing a sound basis from which to evaluate the impact and effectiveness of training for individuals and organisations.

Interestingly, there is not a significant literature on evaluation of child protection training and its impact. The literature from the general field of evaluation highlight the various dimensions to training evaluation in terms of impact on the individual (e.g. cognitive, self-efficacy and goal orientation) and organisations (outcomes, productivity, transferability of learning and impact of training on practice). The most effective strategies are argued to centre around four principles: the concepts to be learnt, the knowledge skills and attitudes to be developed the opportunity to practice skills and the opportunity to provide feedback after the training (Salas & Cannon-Bowers, 2001; 481). Pre-training conditions are also important with studies showing that the way training is presented to the participants and their previous experiences can have an impact on their learning outcomes. Equally, post-training conditions in terms of evaluation of training and transfer of learning are likewise significant. A distinction needs to be made between the effectiveness of training- which is mostly a macro organisational concern (asking the question: has the training improved practice?) and evaluation of training which is more micro-focused and concerned with what has been learned and perceptions of its usefulness, impact and relevance (e.g. questions such as 'has the training increased my perceived confidence and competence?'). Indeed, as Phillips (1997) shows, the number of considerations when evaluating training and its outcomes are quite immense and clarity of purpose is essential in terms of intended aims and

---

<sup>19</sup> An analysis of the Children First Training in the Western Health Board was undertaken in 2004 by Ms. Dympna O'Grady while Professor Helen Buckley published an 'Evaluation of the Child Protection Training Programme used with Staff & Volunteers of Catholic Church Organisations' in 2008.

methods employed to measure these in a way that isolates the impact of training from other factors that may influenced outcomes. In 1996 he adapted the well-known four level model of evaluation by Kirkpatrick (1994) which measures reaction, behaviour, learning and results, to add a fifth consideration, return on investment (ROI).

In child protection training specifically, it is well-acknowledge that while much excellent training exists, there remains a limited evidence based approach to its implementation and measures of effectiveness. One of the biggest reviews of child protection training which took place in England in 2010 (Carpenter et al) is especially useful and informative in this regard. Citing the only substantial systematic review of training and procedural evaluation in child protection (i.e. Carter et al, 1996) , they conclude that ‘ It is fair to conclude that, in contrast to a substantial number of studies of inter-professional education and training in health and social care for adults (Barr et al., 1999, 2005; Freeth et al., 2002; Zwarenstein et al., 2005), the evidence base for inter-professional and interagency training for safeguarding children is decidedly thin’ (2010; 5) . They also highlight the difficulty of establishing the impact of training: for example, there have been some attempts to match training with outcomes such as increased number of referrals of child welfare concern or measurement of new cases of abuse as a result of increased awareness. However, too many other variables are significant here and thus it is acknowledged to be fairly difficult to ascertain from this whether an action was directly the result of training or not. There are a number of systematic methods proposed by Carpenter et al (2010) however that indicate best practice in this regard. For example, evaluation of factual knowledge as opposed to perceived efficacy needs to be differentiated. After reviewing a range of options, Carpenter et al focused on four core areas influence by Kirkpatrick’s model referred to above. In particular, they researched: attitudes to inter-professional learning, knowledge of the topics covered, attitudes to children and family work and inter-disciplinary practice and self-efficacy which means belief in ability to practice in a certain way. While this study was informed by such intentions a specific model was not applied. Future research in the Irish context on child protection and welfare training could be

informed by a more systematic evaluation of these themes over a period of time, drawing from the work of Kirkpatrick and Phillip in general and the studies of Carpenter et al (2010) in particular.

### **5.3 Children First Training Basic Level Training programme**

The majority of participants indicated that the Children First Basic Level training had met their learning needs and was relevant to their role. The findings show a very high level of understanding of all of the modules taught with most giving a rating of 'excellent' or 'good' understanding. The module which rated lowest in terms of understanding was relevant legislation and policy (62.6 per cent rated it excellent or good) and the highest was for 'Issues involved in confidentiality and exchanging information' (80.4%) The findings also show that the majority of respondents found the training to have high or good relevance to their role ranging from 72.4 per cent for 'Legislation and Policies' to 81.3 per cent for 'how to work effectively together'.

In general, inter-professional and interagency training was welcomed and found to be of value for the majority of participants. In particular, increased understandings of respective roles and the opportunity to learn together were emphasised. Training Officers were particularly positive about the benefit of this element of the programme, emphasising the value of those working in child protection on a regular basis and those less experienced in this field learning together. However, some participants found that the broad inter-disciplinary nature of the training resulted in some of the training as not being specific enough. Participants were slightly less positive in their rating of the aim of 'enhancing inter-professional and interagency co-operation' being met than other aims of the programme. Only 41 per cent rated this as positive or very positive. A third (32 per cent) rated this as 'somewhat' showing mixed thoughts about the aim while 13 per cent rated this aim as negative or most negative. As reflected in the qualitative feedback and the interviews, when rated negatively, the main reasons were as follows. While intended to have a broad disciplinary make-up, sometimes the training was dominated by [the then] HSE staff and/or large groups of one profession. The need for more emphasis on interface between statutory and voluntary organisations in relation to reporting was

highlighted by an interview candidate. The need for more space to explore child protection issues within a diverse audience was also identified as an area for improvement. It is of significance to note that though there were more mixed views on how this aim was met over others; when it came to rating the modules themselves relating to inter-professional practice, the feedback was overwhelmingly very positive. This finding suggests that participants recognise the importance of inter-agency and inter-professional working. They rated the modules very high overall, Yet, they show a critical awareness, reflecting what is well known from the literature that this element of interagency and inter-professional practice can be one of the most challenging to achieve effectively. Training Officers focus on the need to keep working on this area reinforces this point.

#### **Recommendations**

- **Consideration could be given to a review of the content and delivery of the Legislation and Policy module.**
- **The evaluation of modules could be reviewed to collect more systematic data on understanding, relevance and outcomes of the training.**
- **Ensure training includes a wide mix of disciplines and professions**
- **Attribute more time in training to focus on specific examples more fully, especially with regard to how different roles overlap and ways to manage this effectively**
- **Place greater emphasis on relations between voluntary and statutory organisations with regard to child protection roles and responsibilities especially in light of the Child and Family Agency and the proposed Service Delivery Framework**
- **While keeping the specific modules, ensure the practice and challenge of inter-professional and inter-agency working are focused on throughout the training as a CORE AIM throughout.**

Overall, it would appear that the training meets the needs of most participants in relation to increasing their awareness of responsibility and processes for risk management. Training Officers emphasised the particular value of the training in increasing participant confidence and reducing anxiety regarding addressing a concern. A significant majority of the participants found that the training resulted in them being better equipped to manage risk because of the training. This is a very important finding from this study. In particular, participants attributed this to: the increased understanding of their roles and responsibility as well as greater clarity around procedure. Awareness of other support systems/services available to refer families and children to was found to be another key factor in increasing participant's confidence in managing risk. This was reinforced by feedback from the trainers who emphasised the value of participants discovering new opportunities for links with services and other professionals. One area where participants seemed less confident was in relation to their role after a report of concern. It is worthy of note also that those least affected by the programme with regard to managing risk were those for whom child protection and welfare practice were core elements of their work. Trainers also acknowledge that while overall, the training seemed to be appropriate for participants; it was probably pitched at too low a level for those who are working extensively in the field of child welfare and protection. This indicates the need to consider how training provided in the Children First Basic Level Training is built on and followed up for developing the skills of practitioners who are frontline in working with children and families at risk and in need.



## Recommendations

- **More emphasis on supports and services available and how to access them for children and families are key to ensuring confidence for practitioners to manage risk; this section should be revised and emphasised in light of the Child and Family Agency context.**
- **More emphasis needs to be placed on roles and responsibilities after a concern has been reported.**
- **Consideration could be given in the training to how those more extensively involved in child protection and welfare practice could contribute cases/lead discussions to enhance their participatory experience on the programme.**
- **Consideration should be given (in Training Needs Analysis<sup>20</sup>) to how more experienced practitioners can receive more in-depth follow-up training in this area given its centrality to their work**

The final aim of the study was to examine the extent to which Children First Basic Level Training was used in practice. In their responses, one third of all participants specified that they had used Children First Basic Level training, most in a number of instances. The detailed examples demonstrate the breadth of applicability of the training for participants depending on their setting and role. The examples provided could be used in future training programmes as examples for participants as to how this training is applicable to their practice.

While not specifically asked about impact on service, the findings from the interviews also indicate that Training Officers perceived the training had an

---

<sup>20</sup> Training Needs Analysis (TNA) is a process to identify learning and development needs of a Team/Department. It focuses on the identification of the Continuing Professional Development needs of the team as a whole rather than individual personal development needs. The [then] HSE Workforce Development Children and Family Services have developed Guidance on TNA as part of the CPD strategy for the Child and Family Agency (forthcoming)

impact on improving children's services although acknowledging that further evidence would be needed to confirm this.

#### **Recommendations**

- **Examples of the application of the Children First Basic Level Training from this Review to be included in future training programmes.**
- **Further research focused on the direct relationship between training and improvement of services could be considered for the future such as effectiveness /outcome studies.**

#### **5.4 Keeping Safe training programme**

It is welcome to note that an overwhelming majority of respondents (96%) indicated that the Keeping Safe programme met their needs, increased awareness and clarified policy and procedure. The course material was very highly rated with 84 per cent describing the content as 'just right' for their role. The main area identified (by a small number of participants) for improvement, reflected also in findings from Children First Basic Level Training, was the need to have more training on what to do in the aftermath of a concern being reported.

#### **Recommendations**

- **Include a section in the training on post-reporting of concerns**

#### *Aims, Objectives and Understanding*

The vast majority of the participants felt the four aims had been met. They particularly emphasized: clarity of child protection procedure and responsibility; the value of how the programme assisted them in developing child protection policies in their agencies; creating an inclusive environment for children and knowledge about Garda vetting procedures for appointment of staff and volunteers. It is pleasing to note that 90 per cent of respondents either had

excellent or good understanding of the benefits of working together. Confidence about responding to disability was also high amongst participants, 85 per cent of whom rated their understanding as good or excellent. Only 2.7 per cent reported having little understanding. The vast majority of respondents indicated that they had a good or excellent understanding of child protection (90%) and of supports available (81%). A majority, 85 per cent reported a good or excellent understanding of legislation and policy though some respondents did comment that it could have been made more accessible.

The value of the need to engage with other agencies and disciplines was recognised by most participants (86 per cent rated this as good or excellent) and this was reinforced in their comments and in the interviews. Only 1.4 per cent reported that they had little understanding. CFIAO's also emphasised this in their interviews, emphasising the value of not only cross-discipline and agency training but also cross-grade between managers and front line staff. Though, as in the case of Children First Basic Level Training, CFIAO's did note the limitation of the generic training in terms of its scope or depth. This however did not come up in the participant's comments who seemed overall to find the training comprehensive and appropriate.

CFIAO's were also more mixed in their view of the extent to which the training maximised the capacity of staff and organisations to promote inclusiveness and child-centeredness though participants in the survey and interviews were largely positive about this feature. CFIAO's confirmed that the inclusion of children with disabilities was a strong feature of the programme but expressed some reservation that it took away from a wider focus on inclusivity with regard to children from different cultures and other children who are marginalised within a variety of contexts. The question of whether dealing with disability was in itself the best approach to 'inclusivity' was raised by one of the CFIAO's and is worthy of further consideration.

<b>Recommendations</b>
------------------------

- **Review the section on Legislation and Policy**
- **Review section on Disability to include a broader focus on inclusivity with an emphasis on needs of particular categories of children such as those from different cultural backgrounds.**

#### *Views on outcome of training/transfer of knowledge*

Most respondents responded positively to their views on the outcomes and utilization of knowledge. In particular, they found the knowledge of risk assessment helped them to develop codes of behaviour and the majority (78.1) responded 'good' or 'excellent' to the question 'do you have a full understanding of the key factors in ensuring safe management of practice'? Very positive outcomes are also indicated in relation to participants understanding of risk, their roles and responsibilities, how to report concerns about child abuse and processes for information sharing and maintaining confidentiality. This high level of satisfaction may be attributable to the fact that trainers, as outlined in the interviews, seek to adapt their material to meet the needs of the training group. Using group work skills and approaches, this ability to be responsive to need seems highly valuable and commendable.

While generally very positive about all aspects of the training, there were a few areas where participants were less clear about specific aspects. For example, with regard to developing an anti-bullying code some did not recall its inclusion. 12 per cent reported having only little understanding and just over 50 per cent had a good or excellent understanding. There were similarly more mixed responses in relation to understanding of the additional considerations required for running residential activities with almost a third rating this between no understanding and moderate understanding. Another third rated this at excellent and a quarter as 'good'. It should be noted here that it is possible that in some of the courses, depending on the background of the participants, specific issues such as residential activities or bullying may not have been included.

Regarding the transfer of knowledge, participants provided a range of examples of where they had utilised their training which indicate a range of usages under

the main themes of recognising symptoms of child abuse and neglect (e.g. greater observation; use of the Children First National Guidelines and following of procedure); referral and reporting (procedure followed; acted on reports and contacted social work department); using the principles of Keeping Safe (e.g. adhering to best interests of child; working with parents; promoting independence; use of games to help children develop strategies for protection); adapting policies and procedures (e.g. reviewing and writing codes; invited social worker to organisation; maintaining child-centred standards).

#### **Recommendations**

- **The examples of transfer of learning to practice should be used in the Keeping Safe training**
- **A new section should be included on how voluntary and statutory organisations can cooperate best**
- **Consideration should be given to follow up training in Keeping Safe to help maintain learning**

#### *Further Comments from CFIAO's*

All CFIAO's emphasised that there was a need to continue to build on the progress achieved through the Keeping Safe training. Suggestions made included 'refresher courses' and assessment of participant knowledge to help encourage active learning. Some CFIAO's also emphasised that the Keeping Safe training could be used to facilitate better collaboration between statutory and voluntary agencies and community groups. Inclusion of content on this was recommended with an emphasis on how voluntary and statutory agencies can communicate best. This seems especially important in light of the Child and Family Agency.

## **5.5 Overview of Findings from Children First Basic Level Training and Keeping Safe training**

It is very encouraging to note that both training programmes are generally very highly rated by participants. The findings indicate that for the most part, the training achieves its aims. The Keeping Safe training participants were especially positive about the benefits of the training indicating the crucial importance of this to participants who may not have accessed this knowledge previously in their roles/own training and/or experience. The more experienced the participants are, the less relevant the training becomes; this should be expected and thought could be given as to how to use the expertise of the trainers in group work learning to design modules to specifically assist shared learning between those with a lot of experience and those less involved on a day to day basis. The training would also be enhanced by including the examples of transfer of learning to practice of Children First Basic Level Training and Keeping Safe training provided by participants. Both sets of participants are mostly positive about how the programme enhances understanding of the benefits of inter-agency and inter-professional co-operation. Children First Basic Level Training participants gave a lower rating to the question of whether the training met their needs with regard to inter-agency and inter-professional. It would seem that this was less about the quality of the training (the modules themselves being rated very highly) and more about a critical awareness that this element of practice is one of the most challenging for reasons set out in this report and supported in other research and literature (See for e.g. Carpenter et al, 2010). Feedback from TO's and CFIAO's in this study also shows their critical awareness of the challenge of this element of the training. It is interesting to note that while participants were wholly positive about the modules, TO's and CFIAO's saw them as in need of improvement showing a strong commitment to ongoing enhancement in quality and impact.

In both instances, there is a view that the section on policy and legislation could be revised. While participants in neither programme specifically referred to how the training emphasises working with diversity in a broad sense, especially with regarding to cultural diversity, trainers have appropriately identified this as a key

area that should be incorporated more fully into the training programmes. Another theme absent from the study, but of importance, is the specific area of learning in relation to cyber-bullying and wider risks of child abuse in the context of internet and social media. An area that received limited attention is service users' perspectives on the relevance, usefulness and impact of the training on their experiences of services.

#### **Recommendations**

- **The current instrument for evaluating the programme could be revised to place more focus on participant knowledge, attitude and perceived self-efficacy as a result of the training. This should include the use of pre-post- and 6 months-on questionnaires.**
- **Consideration should be given to measurement of the effectiveness of the training in enhancing child protection and welfare practice in organisations**
- **Consideration should be given to how the group work approach to the training can be used to enhance participation of and engagement that better recognises the different levels of experience.**
- **The Children First Basic Level Training and Keeping Safe training should be revised alongside the proposed new legislation placing Children First National Guidance on a statutory basis and the establishment of the Child and Family Agency.**
- **In particular, emphasis in the revised training should be placed on:**
  - **New structures of the Child and Family Agency and roles and responsibilities**
  - **Opportunities for enhanced inter-professional and inter-agency cooperation, especially with regard to voluntary and statutory organisations working together.**
  - **Application of policy and procedure to practice with use of examples from former participants**

- **Involvement of Service Users/Carers in the review of the training and consideration of how their views and experiences can be considered**
- **Consideration given to a separate section on Child Abuse, the Internet and Impact of Social Media**
- **Consideration should be given to the development of advanced training to build on the basic training model.**

## **5.6 Conclusion and Recommendations**

It is well-recognised generally that even when very sophisticated methods are applied, it is difficult to evaluate the impact and effectiveness of training (including inter-disciplinary training), given the range of variables that influence what an individual learns and how they apply it (see for e.g. Carpenter et al, 2010; Reeves et al, 2009). But it seems to be agreed that in such evaluations, attention to the environment of inter-disciplinary training; the different roles and perceptions of participants and the 'pitch' of the training is especially important. This study echoes these points. In terms of what we can deduce from the findings, in addition to recognising the limit of a retrospective study alone as a measure, the disappointingly low response rate must also be noted in that the views represent only a minority of the potential survey population (19 per cent and 13 per cent). Thus caution should be exercised in generalising from these results from a quantitative perspective. It must also be acknowledged that this review was based on the views and experiences of participants and trainers. While there are indicators that the training improved understanding and perceived ability to respond to child abuse concerns, more in-depth studies would be necessary to determine a closer relationship between the training and its impact on the participant's ability (self-efficacy); outcomes and effectiveness.

However, notwithstanding these limits, the study provides a very encouraging message in relation to the Children First Basic Level Training and the Keeping Safe training and points to some important areas for enhancement that should



inform the ongoing development and review of the training in light of the Child and Family Agency.

A brief concluding comment on the objectives and a full list of recommendations are set out below.

The objectives of the review were:

- 1. To determine the perceived need of all participants on the Children First Basic Level Training and the Keeping Safe training programmes with regard to child protection and welfare training.**

This review confirms that for those participants who responded, the training programmes meet their needs overall although this is less the case for those involved in child protection and welfare practice on a day-to-day basis. A clear distinction has emerged between the need for basic and advanced training which needs to be considered in the future. Also while most participants did not specifically refer to the need for 'refresher courses' to integrate learning, this is a need identified by the trainers.

- 2. To establish the relevance of the current child protection and welfare training programmes vis-à-vis the participants work practice.**

The review confirms that for those participants who responded, the training was found to be overall relevant. As above, the rating for this was higher for those with less experience of child protection and welfare in their practice. Keeping Safe training participants were especially positive about the relevance for their practice. In particular, most participants reported increased confidence in

dealing with concerns about risk and increased understanding of their roles which is a very important and significant outcome.

### **3. To evaluate if both programmes have met their stated aims including an impact on inter-agency relationships**

On the whole, participants who responded were very positive about this aspect of the training. The findings indicate that for the most part, the training achieves its aims. The Keeping Safe training participants were especially positive about the benefits of the training indicating the crucial importance of this to participants who may not have accessed this knowledge previously in their roles/own training and/or experience. The more experienced the participants are, the less relevant the training became. The findings show that for both Children First Basic Level Training and Keeping Safe training the benefits of inter-agency and inter-disciplinary working together was widely recognised. At the same time, the inevitable limitations of this form of training were also acknowledged and the need for more advanced training for experienced practitioners, in particular, identified. The data from Children First Basic Level Training survey also highlights the need to continue to develop the training to maximise learning around areas such as role boundaries and interfacing between voluntary and statutory organisations.

### **4. To establish the necessary components of a child protection and welfare training programme**

It is clear this is a generic inter-agency/inter-professional programme and this was well understood by the participants who responded. The basic level nature of the programme was most positively commented on by the Keeping Safe training participants. While also generally positive, Children First Basic Level Training participants did highlight more strongly the issue of how the basic training can meet the diverse needs of the different disciplines. The adaptability of the trainers to the groups, and ability to refine the training accordingly seems to be key to ensuring the effective delivery of the programme. The need for advanced programmes for those who were more directly involved with child welfare and protection practice in their day-to-day roles was identified. It would also be useful to incorporate this experience into

the process of the basic level training through building in more opportunities for sharing of case examples in group work sessions. There are specific content areas that need to be included in the training to take account of the new Child and Family Agency structures and changing roles and relationships as a result of this. The contemporary context of child welfare and protection could also be reflected better with more emphasis on cultural diversity; impact of social disadvantage and marginalisation on children and families and protecting children in the virtual (internet/social media) as well as the real world context in future revisions.

## **5.7 Summary of Recommendations**

The recommendations provided throughout this chapter are summarised below under main themes emerging.

### **5.7.1 Children First Basic Level Training**

#### **5.7.1.1 Changes required to content of programme:**

- Consideration could be given to a review of the content and delivery of the Legislation and Policy module.
- Understanding of support services and systems for children and families, and how to access them, are key to ensuring confidence for practitioners to manage risk; this section should be revised and emphasised in light of the Child and Family Agency context.
- More emphasis needs to be placed on roles and responsibilities after a concern has been reported.
- Consideration could be given in the training to how those more extensively involved in child protection and welfare practice could contribute cases/lead discussions to enhance their participatory experience on the programme.
- Examples of the application of the Children First Basic Level Training from this review should be included in the training.

- Attribute more time in training to focus on specific examples more fully, especially with regard to how different roles overlap and ways to manage this effectively.

#### **5.7.1.2 Inter-professional and Inter-disciplinary co-operation**

- Ensure training includes a wide mix of disciplines and professions.
- Place greater emphasis on relations between voluntary and statutory organisations with regard to child protection roles and responsibilities especially in light of the Child and Family Agency and proposed Service Delivery Framework.
- While keeping the specific modules, ensure the practice and challenge of inter-professional and inter-agency working are focused on throughout the training as a CORE AIM throughout.

#### **5.7.1.3 On-going Evaluation; Review and Follow-Up Training**

- The evaluation of modules could be reviewed to collect more systematic data on understanding, relevance and outcomes of the training.
- Consideration should be given (in Training Needs Analysis) to how more experienced practitioners can receive more in-depth follow-up training in this area given its centrality to their work.
- Further research focused on the direct relationship between training and improvement of services could be considered for the future such as effectiveness /outcome studies.

### **5.7.2 Keeping Safe training programme**

#### **5.7.2.1 Content Changes**

- Include a section in the training on Post-reporting of Concerns
- Review the section on Legislation and Policy.

- Review section on Disability to include a broader focus on inclusivity with an emphasis on needs of particular categories of children such as those from different cultural backgrounds.
- The examples of transfer of learning to practice should be used in the Keeping Safe training.

### **5.7.2.2 Interdisciplinary working**

- A new section should be included on how voluntary and statutory organisations can cooperate best together.

### **5.7.2.3: On-going review, evaluation and follow-up**

- Consideration should be given to follow up training in the Keeping Safe training to help maintain learning.

### **5.7.3: Children First Basic Level Training and Keeping Safe training**

- The instruments for evaluating the programme could be revised to place more focus on participant self-efficacy by the use of pre- post- and 6 months on questionnaires.
- Consideration should be given to measurement of the effectiveness of the Training in enhancing practice in organisations.
- Consideration should be given to how the group work approach to the training can be used to enhance participation of and engagement that recognises better the different levels of experience.
- The Children First Basic Level Training and the Keeping Safe training should be revised alongside the implementation of the Agency. In so doing, findings from this study can inform such a revision.
- In particular, emphasis in the revised training should be placed on:
  - New structures of the Agencies and roles and responsibilities;
  - Opportunities for enhanced inter-professional and inter-agency cooperation, especially with regard to voluntary and statutory organisations working together;

- Application of policy and procedure to practice with use of examples from former participants;
- Consideration should be given to taking on board review of both programmes and developing a common basic training programme;
- Involvement of Service Users/Carers in the review of the training and consideration of how their views and experiences can be considered;
- Consideration given to a separate module on Child Abuse, the Internet and Impact of Social Media.

***Post-script: Informing Future Developments within TUSLA, the Child and Family Agency***

While not an explicit aim of this review, the timing is such that it seems appropriate to conclude with some commentary on how these findings and recommendations may inform developments in training in light of the Child and Family Agency.

Given the forthcoming Children First legislation and the establishment of the Child and Family Agency, there is a unique opportunity emerging to look at the findings from a perspective of how best the leanings from this review can inform the development of models and approaches to the provision of Children First training and more generally child protection and welfare (CPW) training. While the legislation and details of future training requirements are not clear, it is hoped that this review can inform new models of practice.

- There is a need to consider the target groups for Children First training and CPW training given that the findings indicate that while both existing programmes are highly rated by participants there are concerns raised that they are 'basic' in terms of meeting the needs of staff that work in CPW roles. Similarly, there is evidence that the inter-agency and inter-professional basis on which the existing programmes are based is highly valued and needs to be further enhanced particularly in terms of role clarification issues, referral pathways between statutory and community,

voluntary sectors. This has an added importance given the proposed plans for a new service delivery framework for the Child and Family Agency. Thus, while we have reviewed the two programmes and made separate recommendations for their development, it is suggested that it may be more advisable to consider developing a common basic level training programme and then build on from this to establish an advanced level training to follow. **Such new training should be developed as one common programme rather than as two separate basic level training modules. In so doing, findings from this study can inform the design of future models for delivering child protection and welfare training in general to Agency staff and voluntary and community sector staff.**

Both levels of programme should involve statutory and community, voluntary sector staff coming together for training as appropriate. This would also be consistent with the underpinning philosophy of the Child and Family Agency.

## References

Barr, H., Hammick ,M., Koppel ,I., and Reeves, S. (1999) 'Evaluating inter-professional education: two systematic reviews for health and social care'. *British Educational Research Journal*, 25: 533-44.

Barr H., Koppel I., Reeves S., Hammick M., and Freeth D. (2005) *Effective inter-professional education: argument, assumption and evidence*. Oxford, Blackwell Publishing.

Carpenter, J, Hackett, S., Patsios, D and Szilassy E. (2010) *Outcomes of Inter-Agency Training to Safeguard Children*, University of Bristol, Bristol.

Carter, Y., Bannon M., Limbert , C., Docherty, A. and Barlow, J. (2006) 'Improving child protection: a systematic review of training and procedural interventions', *Archives of Disease in Childhood*, 91:740-43.

Department of Health and Children (1999) *Children First National Guidelines for the Protection and Welfare of Children*, Stationary Office, Dublin.

Department of Children and Youth Affairs (2011) *Children First: National Guidance for the Protection and Welfare of Children*, Government Publications, Dublin.

Freeth, D., Hammick, M., Koppel, I., Reeves, S. and Barr, H. (2002) 'A Critical Review of Evaluations of Inter-professional Education'. LTSN (Learning, teaching and support network) for Health Sciences and Practice, King's College, London.

Health Services Executive (2011) *Child Protection and Welfare Handbook*, HSE, Dublin.



Kirkpatrick, D. L. (1994) *Evaluating Training Programmes*, Berrett-Koehler Publishers, CA.

Kirkpatrick, D. L. & Kirkpatrick (2006) (3<sup>rd</sup> ed.) *Evaluating Training Programmes: The Four Levels*, Berrett-Koehler Publishers, CA.

Patton, M. Q. (2002) *Qualitative Research and Evaluation Methods*, Sage, London.

Phillips, J.J. (1997) (3<sup>rd</sup> Ed.) *Handbook of Training, Evaluation and Measurement Methods*, London, Routledge.

Phillips, J. (1996). 'How much is the training worth?' *Training and Development*, 50(4),20-24.

Reeves S, Zwarenstein M, Goldman J, Barr H, Freeth D, Hammick M, Koppel I (2009) Interprofessional education: effects on professional practice and health care outcomes (Review: The Cochrane Collaboration), John Wiley & Sons Ltd.

Salas, E. and Cannon-Bowers, J. (2001) 'The science of training: a decade review of progress', *Annual Review of Psychology*, 52: 471-499.

Zwarenstein, M., Reeves, S., and Perrier, L. (2005) 'Effectiveness of pre-licensure inter-professional education and post-licensure collaborative interventions'. *Journal of Inter-professional Care*, 3: 148-65.

## **Appendices**

### **Appendix A: Membership of Working Group**

Dr Carmel Devaney and Professor Caroline McGregor, UNESCO Child and Family Research Centre, NUI, Galway

Dr Caroline Cullen, National Manager, Workforce Development, Child and Family Agency

Ms Dympna O' Grady, Regional Manager, Workforce Development, Child and Family Agency

Mr Blair McClure, Child Care Training Co-ordinator, Child and Family Agency

Ms Sandra Claxton, Children First Information and Advice Officer, Child and Family Agency

Ms Theresa Barnett, Regional Manager, Workforce Development, Child and Family Agency

## **Appendix B: List of Designated Officers**

### **(Protections for Persons Reporting Child Abuse Act 1998)**

- Social Workers Child Care Workers Public Health Nurses  
Hospital Consultants Psychiatrists
- Non-Consultant Hospital Doctors
- All other HSE Medical and Dental Personnel
- Community Welfare Officers Speech and Language Therapists All  
HSE Nursing Personnel Psychologists
- Radiographers Physiotherapists Occupational Therapists
- Health Education/Health Promotion Personnel
- Substance Abuse Counsellors
- Care Assistants
  
- Designated person within the HSE Family Support  
Coordinators
- Family Support Workers Environmental Health Officers Pre-  
school Services Inspectors Childminder Coordinators  
Managers of Disability Services
- Residential Care Managers/Residential Child Care Workers
- HIV and AIDS Services
- Counsellors in Services for AVPA
- *Children First* Information and Advice Persons
- *Children First* Implementation Officers
- Quality Assurance Officers
- Advocacy Officers Access Workers Project  
Workers
- Training and Development Officers

**Appendix C: Letter from National Manager Workforce Development  
Children & Families Services**



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive

Children & Family Services,  
1 Hartstonge Street,  
Limerick.

061-310437

1<sup>st</sup> May 2013

**NUIG Review of Children First Training Programme**

Dear Colleague,

The Health Service Executive Children and Families Services is committed to ensuring that the Children First training programme for staff and allied agencies is delivered to a high standard and meets the training needs of those who receive it.

In line with Children First National Guidance (2011), the HSE developed a standardised basic-level training course nationally to ensure that all staff receives the same level of training.

In order to evaluate the effectiveness and relevance of this programme, the UNESCO Child & Family Research Centre, NUI, Galway has been commissioned by HSE Workforce Development to undertake a review of the Children First training programme.

Our records indicate that you attended the one-day Children First basic-level training course between 1<sup>st</sup> October 2011 and 31<sup>st</sup> March 2012 and you have been randomly selected to be included as a participant in this research.

Please find enclosed questionnaire to be completed as instructed.

May I use this opportunity to thank you for giving your time to this important research study and contributing to the development of Children First training courses in the future.

Kind regards,



Dr. Caroline Cullen  
National Manager  
HSE Workforce Development  
Children & Families Services

## **Appendix D: Introductory Letters and Questionnaires**

### **Children First Basic Level Training Letter and Questionnaire**

Dear staff member,

As you are aware the Children First Basic Level Training is offered to all HSE employees whose role involves regular direct or indirect contact with children and families. As a participant on this training course the HSE Children and Family Services Workforce Development team are very interested in hearing your views on your experience of this training and its relevance for your work practice. To this end they have commissioned the UNESCO Child and Family Research Centre, NUI, Galway to review the experience of participating in Children First Basic Level Training and its impact on day-to-day work practice. All disciplines who have attended the training are being included in this review process.

Therefore, in order to do this, I am asking you to please complete the attached questionnaire by **Friday May 17<sup>th</sup> 2013**. In advance of completing the questionnaire please note:

- 1. You are being asked about your experience of attending the Children First Training Basic Level Training between October 2011 and March 2012. Please allow time to reflect on the training attended at this time and its subsequent impact on your practice**
- 2. This survey is anonymous and all information provided will be treated confidentially and reported on anonymously.**
- 3. You are also asked if you agree to participate in further research (a telephone interview). If agreeable to this complete the section on contact details and return in the stamped addressed envelope provided.**

Please contact me if you have any queries,

Kind regards, Carmel

Dr. Carmel Devaney,  
UNESCO Child and Family Research Centre,  
School of Political Science & Sociology, NUI,  
Galway

Tel: 00353 91 495733  
Email: [carmel.devaney@nuigalway.ie](mailto:carmel.devaney@nuigalway.ie)

# Review of Children First Training Programme

## Questionnaire





## Review of Children First Training Programme Questionnaire

### Section A: Participant Profile

1. What is your current job title? \_\_\_\_\_

\_\_\_\_\_

2. Please select your discipline

<b>Designated Officer</b>		<b>Designated Officer</b>
Access Workers		Managers of Disability Services
Advocacy Workers		Physiotherapists
Care Assistants		Pre-School Service Inspectors
Child Care Workers		Project Workers
Childminder Coordinators		Psychiatrists
Children First Implementation Officers		Psychologists
Children First Information & Advice Officers		Public Health Nurses
Community Welfare Officers		Quality Assurance Officers
Counsellors In Services For AVPA		Radiographers



Coordinators	Environmental Health Officers	Residential Child Care	
	Family Support	Monitored/Supported of Child Care Workers	
	Family Support Worker	Social Care (All Grades)	
	Health Education & Promotion Personnel	Speech and Language Therapists	
	HIV and Aids Services	Substance Abuse Counselors	
	Hospital & Specialist	Training & Development	
	HSE Occupational & Medical Personnel	Physiotherapists	
	Non Consultant Hospital Doctors	Pro-School Services Officers	
	All HSE Nurses	Practical Workers	
	Qualification Therapists	Physiotherapists	
Coordinators in Services For AVPA	Residential Child Care Workers		
Other (please specify)			

- 3 Please specify region you work in  
 Dublin NMH Eos1     Dublin Mid-telelsw     OW...     South
- 4 How long have you been employed in this role?  
 <3 years     3-5 years     6-10 yrs     >10 years

Section 8: Children First Training Programme

5. Overall, do you think the programme is good for you and the children in your school?

No  Don't know

Please outline reasons for your answer. \_\_\_\_\_

---



---



---



---



---

6. Overall, with regard to your school, do you think the programme is good for you and the children in your school?

Yes, very  Too detailed  No, detailed too  Don't know

Please outline reasons for your answer. \_\_\_\_\_

---



---



---



---



---

Please indicate your response to the questions below by circling the appropriate number with

1 = Most Negative and 5 = Most Positive

7. The programme is good for you and the children in your school.

1) To improve services to children and families involved in the programme of child protection work

2 3 4 5

Please write reasons for your answer. \_\_\_\_\_

---



---



---



---



---

b) To enhance inter-professional and inter-agency co-operation

2 3 4 5

Please outline reasons for your answer: \_\_\_\_\_

---

---

---

---

---

8 Do you have a full understanding of:

a) principles of best practice in child welfare and protection

2 3 4 5

b) relevant legislation and policies that concern child protection and welfare

1 2 3 4 5

c) role and responsibilities of the staff and HSE designated officers in relation to child protection and welfare

2 3 4 5

d) your own responsibility in relation to child protection and welfare

1 2 3 4 5

9 Please indicate, in the relevance of each module section in terms of its relevance to your specific role?

a) principles of best practice in child welfare and protection

1 2 3 4 5

b) relevant legislation and policies that concern child protection and welfare

2 3 4 5

c) role and responsibilities of HSE staff and HSE designated officers in relation to child protection and welfare

3 4 5

10 Do you have a full understanding of?

a) the definitions of child abuse

2 3 4 5

b) the signs and symptoms of child abuse

2 3 4 5

c) how to recognise child abuse

2 3 4 5

d) the risk factors in child protection

2 3 4 5

11) The importance of the relevance of food module section: In arms of ITT; relevant to your course; please fill in.

a) the categories and definitions of child abuse

1 2 3 4 5

b) the signs and symptoms of child abuse how to recognize

2 3 4 5

c) how to recognize child abuse

2 3 4 5

d) the risk factors in child protection

2 3 4 5

12) Do you have a full understanding of

a) how to respond to concerns about children

2 3 4 5

b) how to respond to concerns about children & your role as a professional

1 2 3 4 5

c) issues involved in confidentiality and data protection

1 2 3 4 5

d) the benefits of guidelines and disciplines for working together

1 2 3 4 5

e) how to work together effectively

1 3 5

13) The importance of the relevance of food module section in terms of its relevance to your course; please fill in.

a) how to respond to concerns about children

2 3 4 5

b) how to report concerns about children & your role as a professional

3 4 5

c) issues involved in confidentiality and data protection

1 3 5

d) the benefits of guidelines and disciplines for working together

1 3 5

h9W 1Qm< \. Pg> \wr. 'lY'!ly

1 2 3 4 5

14. As a result of the porting in the initial report (CO);

Of the reasons for the 5 children's role

1 2 3 4 5

Please outline the reasons for your answer: -----

---

---

---

---

---

Of the reasons for the 5 children's role

1 2 3 4 5

Please outline the reasons for your answer: -----

---

---

---

---

---

Of the reasons for the 5 children's role

1 2 3 4 5

Please outline the reasons for your answer: -----

---

---

---

---

---

Of the reasons for the 5 children's role

1 2 3 4 5

Please outline the reasons for your answer: -----

---

---

---

---

---

15. Have you used the training received in Children First as part of your role in the past six months?

Yes

No

Don't know

If yes; Please outline the specific aspects of the training programme used **and** how you applied this in practice

(i) Specific aspect of training \_\_\_\_\_

---

---

---

---

---

Application in Practice \_\_\_\_\_

---

---

---

---

---

(ii) Specific aspect of training \_\_\_\_\_

---

---

---

---

---

Application in Practice \_\_\_\_\_

---

---

---

---

---

(iii) Specific aspect of training \_\_\_\_\_

---

---

## Keeping Safe Training Letter and Questionnaire

A chara,

As you are aware the Keeping Safe training is offered to all workers whose role involves regular direct or indirect contact with children and young people. As a participant on this training course the HSE Work Force Development team are very interested in hearing your views on your experience of this training and its relevance for your work practice. To this end they have commissioned the UNESCO Child and Family Research Centre, NUI, Galway to review the experience of participating in Keeping Safe training and its impact on day-to-day work practice. All disciplines who have attended the training over a particular time period are being included in this review process.

Therefore, in order to do this, I am asking you to please complete the attached questionnaire by **Friday May 17<sup>th</sup> 2013**. In advance of completing the questionnaire please note:

- 1. You are being asked about your experience of attending the Keeping Safe training between January 2011 and June 2011. Please allow time to reflect on the training attended at this time and its subsequent impact on your practice.**
- 2. This survey is anonymous and all information provided will be treated confidentially and reported on anonymously.**
- 3. You are also asked if you agree to participate in further research (a telephone interview). If agreeable to this please complete the section on contact details and return in the stamped addressed envelope provided.**

Please contact me if you have any queries,

Kind regards Carmel

Dr. Carmel Devaney,  
UNESCO Child and Family Research Centre,  
School of Political Science & Sociology, NUI,  
Galway

Tel: 00353 91 495733  
Email: [carmel.devaney@nuigalway.ie](mailto:carmel.devaney@nuigalway.ie)

**Review of Keeping  
Safe Training  
Programme**

**Questionnaire**







## Review of Keeping Safe Training Programme

As part of the Keeping Safe Training Programme, you are invited to complete this questionnaire to allow time to reflect on the training attended at this time and its subsequent impact on your practice.

Please complete & return this questionnaire by: \_\_\_\_\_

### Section A: Participant Profile

1. What role are you currently employed in?

Manager

Worker

Volunteer

Student

Other

2. How long have you been employed in this role?

<3 years

3-5 years

6-10 yrs

>10 years

3. Where did you participate on the Keeping Safe Training Programme?

---

---

---

### Section B: Keeping Safe Training Programme

4. Overall, did the training programme adequately meet your practice needs with regard to Child Protection and Welfare?

Yes

Don't know

Please outline reasons for your answer: \_\_\_\_\_

---

---

---

---

---

5. Overall, how do you rate the amount of money covered in the training programme?

**D** Just right      **D** Too little      **D** Not decided enough      **D** Don't know

Please outline reasons for your answer: \_\_\_\_\_

---

---

---

---

---

Please indicate your response to the questions below by circling the appropriate number with 1= Most Negative and 5 = Most Positive

6. Did the training programme meet its overall aims?

a) To raise awareness of child protection issues and reporting procedures (e.g. Who to report to if you have child protection concerns)

2    3    4    5

Please outline reasons for your answer: \_\_\_\_\_

---

---

---

---

b) To assist organisers of activities to explore all aspects of the safety and general welfare of children and young people (e.g. holding child protection policies and procedures in place)

2    3    4    5

Please outline reasons for your answer: \_\_\_\_\_

---

---

---

---

---

c) To identify ways of rooting on inclusion on environment whilst working with children, including people (e.g. inclusion of children with disabilities) into services)

2 3 4 5

Please write your response for VOIX or Vker: \_\_\_\_\_

---

---

---

---

---

d) To explore issues of recruitment, selection and management of staff and volunteers (e.g. roles, needs, good practice, supervision of staff and volunteers)

2 4 5

Please write your response for VOIX or Vker: \_\_\_\_\_

---

---

---

---

---

7. Do you have a full understanding of the:

a) relevant legislation and policies on child protection and welfare

2 3 4 5

b) reporting procedures for reporting concerns

1 2 3 4 5

c) support available for children and young people

1 2 3 4 5

Do you find this section relevant to VOIX or Vker? **Yes** **No**

Please comment: \_\_\_\_\_

---

---

---

---

---

8. Do you have any further comments?  
a) the content of the findings and definitions of child abuse

2 3 4 5

b) the signs and symptoms of child abuse.

2 3 4 5

Q how to recognize child abuse

1 2 3 4 5

Q the risk of US-11's child protection

1 2 3 4 5

Did you find this section relevant to your role?

Yes

Please comment: \_\_\_\_\_

---

---

---

---

---

9. Do you have any further comments?

a) key factors in the safe environment of children

1 2 3 4 5

b) risk assessment

1 2 3 4 5

c) the key elements of behaviour

3 4 5

d) how to develop a quality code for children

2 3 5

e) the additional considerations for residential activities

3 5

Did you find this section relevant to your role?

Please comment: \_\_\_\_\_

---

---

---

---

---

10. Do you have any concerns regarding?

c) how to respond to concerns about children

1 2 3 4 5

b) how to report concerns about children and your role

2 3 4 5

d) issues involved in dealing with children's long-term vision

1 2 3 4 5

d) the benefits of good and discipline working together

1 2 3 4 5

e) how low cost to get help for visually

2 3 4 5

Did you find this section relevant to your role? **Over**

Please **comment:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. Do you have any concerns regarding?

a) being called out

2 3 4 5

b) how to deal with

2 3 4 5

d) ways to include disabled children

1 2 3 4 5

d) effective communication strategies

2 3 5

Did you find this section relevant to your role? **0No**

Please **comment:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. Have you used deterring received Keeping Safe as part of your role in the past six months?

Yes

Or I know

If yes; Please describe the specific aspects of the training programme used **and** how you applied it in practice

6.1 Specific aspect of working \_\_\_\_\_

\_\_\_\_\_

Application in Practice \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ii Specific aspect of training \_\_\_\_\_

\_\_\_\_\_

Application in Practice \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

iii Specific cost of introducing \_\_\_\_\_

\_\_\_\_\_

Application in Practice \_\_\_\_\_

---

---

---

---

---

---

---

---

**Thank you**

**Once the questionnaire is completed please return it in the stamped addressed envelope provided.**

Office use only
I.D. _____

## Appendix E: Information & Consent Sheet



### Section C: Further Research

#### (Participation in a Telephone Interview)

In order to gain a comprehensive view of the relevance and impact of the Children First Training the research team would also like to interview participants. Would you be interested in participating in a telephone interview to discuss further your experience of this training? This interview will be arranged at a suitable time for you.

Yes, I agree to participate in a telephone interview

My contact details are as follows:

Name: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Current Role: \_\_\_\_\_

Discipline: \_\_\_\_\_

HSE Region: \_\_\_\_\_

**Thank you**

**Please return this section in the stamped addressed envelope provided.  
Consent to participate does not automatically mean you will be interviewed:  
a representative sample will be selected.**

**A member of the research team may be in contact to arrange a suitable time for the interview.**





## Review of Keeping Safe Training Programme

### Section C: Further Research

#### (Participation in a Telephone Interview)

In order to gain a comprehensive view of the relevance and impact of the Keeping Safe Training the research team would also like to interview participants. Would you be interested in participating in a telephone interview to discuss further your experience of this training? This interview will be arranged at a suitable time for you.

Yes, I agree to participate in a telephone interview

My contact details are as follows:

Name: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Current Role: \_\_\_\_\_

Discipline: \_\_\_\_\_

**Thank you**

**Please return this section in the stamped addressed envelope provided.  
Consent to participate does not automatically mean you will be interviewed:  
a representative sample will be selected.**

**A member of the research team may be in contact to arrange a suitable time for the interview.**

## **Appendix F: Interview Schedules**

### ***Schedule for Children First Basic Level Training***

*This interview schedule is a semi structured guide*

*Please use these as prompts and add follow up questions as appropriate*

#### **1. General Aims**

As you know, the Training has two aims

- a) Helping candidates to improve services to children and families through increased understanding of child welfare?
- b) Enhancing Inter-professional and inter-agency co-operation

(for each aim ask):

To what extent do you think those aims are met? (prompt – 1 not a lot.....5 fully met)

#### **2. Relevance of Modules for Practitioners**

From your experience of delivering the training, can you comment on the strengths, limitations and relevance of the modules (prompts: ask them to select a few examples to illustrate)

Prompt: Modules covered are:

- Principles of best practice in child welfare and protection
- Relevant Legislation and Policies that concern child protection and welfare (CP&W)
- Role and Responsibilities of HSE staff and designated officers re CP&W
- Categories and Definitions of Child Abuse
- Signs and Symptoms of Child Abuse
- How to recognise child abuse
- Risk factors in child protection
- How to respond to concerns about children
- How to report concerns about children and your role afterwards
- Issues involved in confidentiality and exchanging information
- Benefits of agencies and disciplines working together
- How to work together effectively

From your experience of training participants, please comment on the extent to which they training helps them to:

- feel better equipped to manage risk appropriate to their role?

Can you give some examples /develop your questionnaire response

- Familiar with their responsibility to manage risk?

Can you give some examples /develop your questionnaire response

- More confident in responding to PP&W concerns?

Can you give some examples /develop your questionnaire response

- More confident in managing their role after a report ?

Can you give some examples /develop your questionnaire response

Do you think the training is sufficient for participants?

*Please elaborate*

Does it need follow- up /refresher training?

*Please elaborate*

Does the training meet the needs of some disciplines more than others?

*Please elaborate*

### **3. General views on Training**

What do you think are the benefits of a generic training programme? And what are the limitations?

Tell us what aspects of the training could be improved from your experience?

Anything else you wish to add about the Children First Basic Level Training Programme

THANK YOU VERY MUCH FOR YOUR TIME.

## **Keeping Safe training interview schedule**

*This interview schedule is a semi structured guide*

*Please use these as prompts and add follow up questions as appropriate.*

### **4. General Aims**

As you know, the Training has four aims. Please comment on how each of the aims are met in the training (e.g. prompt: for each aim ask To what extent do you think those aims are met? – 1 not a lot.....5 fully met)

- a) To raise awareness of child protection issues and reporting procedures
- b) Assist organisers of activities to explore all aspects of the safety and general welfare of children and young people
- c) To identify ways of creating an inclusive environment whilst working with children and young people
- d) To explore issues of recruitment, selection and management of staff and volunteers

(Please ask for examples for application of each aim).

### **5. Relevance of Modules for Practitioners**

From your experience of delivering the training, can you comment on the **strengths, limitations and relevance** of the module sections (*prompt, encourage interviewee to select a few examples to illustrate*)

Prompt: Module sections were:

Categories and definitions of child abuse	Key factors in ensuring the safe management of activities	How to respond to concerns about children	Being Child Centred
Signs and symptoms of child abuse	Risk assessment	How to report concerns about children and your role afterwards	Attitudes to disability
How to recognise child abuse	Key elements in a code of behaviour	Issues involved in confidentiality and exchanging information	Ways to include disabled children
The risk factors of child protection	How to develop anti-bullying code for children	Benefits of agencies and disciplines working together	Effective communication strategies
	Additional considerations for running residential activities	How to work together effectively	

### **3. General views on Training**

What do you think are the benefits of the keeping safe programme? And what are the limitations?

Tell us what aspects of the training could be improved from your experience?

Anything else you wish to add about the Keeping Safe training programme

THANK YOU VERY MUCH FOR YOUR PARTICIPATION.

## Appendix G: Letter of Reminder (*electronic version*)

Dear all,

Many thanks to those of who you who have completed the online survey on the Review of the Children First Basic Level Training. As a participant on this training course the HSE Workforce Development Children and Family Services team are very interested in hearing your views on your experience of this training and its relevance for your work practice.

If for any reason you have not yet completed the online survey I ask that you please do so as soon as possible and **by Wednesday May 29<sup>th</sup>** at the latest.

In advance of completing the survey, there are a number of specific requirements to be aware of:

1. You are being asked about your experience of attending the Children First Training between October 2011 and March 2012. In advance of completing the survey please allow time to reflect on the training attended at this time and its subsequent impact on your practice.
2. Please complete the survey in one go – you cannot start the survey and close out of it mid-way through with the intention of returning later to it. This will be reported as an incomplete survey.
3. As you complete the survey you can return to previous questions and adjust your answers if/as you think of additional comments.
4. At the end of the first survey you will be asked if you agree to participate in further research (a telephone interview). If agreeable to this please click on the 2<sup>nd</sup> link below to complete your contact details when asked.
5. There are no issues with a number of workers completing this survey on the same PC if required. They will all be counted individually.
6. This survey is anonymous and all information provided will be treated confidentially and reported on anonymously.

To start completing your survey please click on the 1<sup>st</sup> link below, the survey will be automatically returned to me once you finish.

You are also asked to participate in further research. This will take the form of a telephone interview to discuss in more detail your experience of the Children First Basic Level Training. Please click on the 2<sup>nd</sup> link below in order to provide your contact details for this. Once again, please complete **by Wednesday May 29<sup>th</sup> 2013** at latest.

Kind regards,

