

# Safeguarding Children Policy

**Sample policy template.** This is a Verivius-authored template anchored to the statutory regulation and current CQC/professional guidance. Tenants must adapt the operational sections to their own organisation, service type, workforce, premises and professional requirements. Where this template and live law or regulator guidance diverge, the live source wins.

**Statutory anchor:** Regulation 13 (safeguarding service users from abuse and improper treatment), Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (SI 2014/2936). This policy also engages the Children Act 1989, the Children Act 2004, and the statutory guidance Working Together to Safeguard Children 2026. It also engages Regulation 12 (safe care and treatment), Regulation 17 (good governance) and Regulation 19 (fit and proper persons employed). **Primary source:**

<https://www.legislation.gov.uk/ukSI/2014/2936/regulation/13> **Last reviewed:** 2026-06-10

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**Policy owner:** Registered Manager. **Safeguarding lead:** [name / role]. **Applies to:** all staff, workers, agency staff, bank staff, volunteers, contractors, students and visiting professionals working in or for the service.

## 1. What the regulation says

Service users must be protected from abuse and improper treatment in accordance with this regulation. (Reg 13(1) (the headline duty))

Systems and processes must be established and operated effectively to prevent abuse of service users. (Reg 13(2) (prevention systems))

Systems and processes must be established and operated effectively to investigate, immediately upon becoming aware of, any allegation or evidence of such abuse. (Reg 13(3) (investigation systems))

A service user must not be deprived of their liberty for the purpose of receiving care or treatment without lawful authority. (Reg 13(5) (lawful authority for deprivation of liberty))

any behaviour towards a service user that is an offence under the Sexual Offences Act 2003, (Reg 13(6)(a) (sexual offences))

ill-treatment (whether of a physical or psychological nature) of a service user, (Reg 13(6) (b) (ill-treatment))

theft, misuse or misappropriation of money or property belonging to a service user, or (Reg 13(6)(c) (theft / misuse / misappropriation))

neglect of a service user. (Reg 13(6)(d) (neglect))

The full text of the regulation is at

<https://www.legislation.gov.uk/ukxi/2014/2936/regulation/13>. Where this policy and the regulation diverge, the regulation wins.

## 2. Plain-English summary

Service users must be protected from abuse and improper treatment. You need effective systems to prevent abuse, and effective systems to investigate any allegation or evidence of abuse as soon as you become aware of it. Care must not be provided in a way that discriminates, uses disproportionate control or restraint, is degrading, or significantly disregards the service user's needs. Service users cannot be deprived of their liberty without lawful authority.

## 3. Purpose

The purpose of this policy is to make sure that [Service Name] protects children and young people from abuse, neglect, exploitation and avoidable harm.

Safeguarding children is everyone's responsibility. Staff must know how to recognise concerns, respond without delay, record clearly, escalate properly and work with local safeguarding partners.

This policy supports Regulation 13 safeguarding service users from abuse and improper treatment, Regulation 12 safe care and treatment, Regulation 17 good governance, Regulation 19 fit and proper persons employed, and statutory safeguarding guidance.

## 4. Policy warning

Any concern that a child is suffering, has suffered, or may be at risk of significant harm must be acted on immediately.

Staff must not wait for proof before raising a safeguarding concern.

A child safeguarding concern must not be treated only as a complaint, behaviour issue, family disagreement, data issue or internal HR matter. Safeguarding escalation must happen where the threshold is met or where staff are unsure and need advice.

Failure to report or escalation delay may place a child at further risk and may be treated as a serious conduct matter.

## **5. Scope**

This policy applies where the service:

- provides care, treatment or support to children or young people
- sees adults who are parents, carers or household members of children
- becomes aware of risk to a child through adult services
- provides services in homes where children may be present
- provides transport, diagnostics, clinical care, sexual health, dental, GP, private clinic, specialist doctor, community or domiciliary services
- receives information suggesting a child may be at risk

A child means anyone under the age of 18.

## **6. Principles**

The service will:

- put the child's welfare first
- listen to children and young people
- act without delay
- follow local safeguarding procedures
- share information lawfully where needed to protect a child
- keep clear records
- work with safeguarding partners
- support staff to raise concerns
- learn from safeguarding incidents and reviews
- make sure staff are suitable and trained for their role

## **7. Responsibilities**

All staff are responsible for recognising and reporting child safeguarding concerns.

The safeguarding lead is responsible for advising staff, supporting referrals, maintaining safeguarding records and monitoring learning.

The Registered Manager is responsible for ensuring that safeguarding systems work, concerns are escalated, staff are trained, referrals are made and actions are completed.

The provider or Nominated Individual is responsible for oversight of safeguarding governance and ensuring that safeguarding has sufficient priority and resources.

## **8. Types of abuse and harm**

Staff must be alert to:

- physical abuse
- emotional abuse
- sexual abuse
- neglect
- domestic abuse impact on children
- child sexual exploitation
- child criminal exploitation
- trafficking and modern slavery
- female genital mutilation
- forced marriage
- honour-based abuse
- online abuse
- bullying and cyberbullying
- radicalisation concerns
- fabricated or induced illness
- self-harm and suicide risk
- harmful sexual behaviour
- exploitation by peers or adults
- unsafe restraint or restrictive practice
- discriminatory abuse
- institutional or organisational abuse

This list is not exhaustive.

## **9. Signs and indicators**

Possible indicators include:

- unexplained injuries
- inconsistent explanations
- fearfulness or withdrawal
- sexualised behaviour or language inappropriate for age
- poor hygiene or untreated health needs

- frequent missed appointments
- repeated injuries
- sudden behaviour change
- signs of neglect
- reluctance to go home
- anxiety around a particular adult
- disclosure by child
- disclosure by another person
- signs of coercion or exploitation
- concerning online activity
- parent or carer behaviour that raises concern
- domestic abuse in the household
- substance misuse or mental health crisis affecting care of the child

Staff must consider the whole picture, not single signs in isolation.

## **10. Responding to a disclosure**

If a child discloses abuse or harm, staff must:

- listen calmly
- take the child seriously
- reassure the child they were right to tell
- avoid shock or disbelief
- not promise secrecy
- explain that information may need to be shared to keep them safe
- avoid leading questions
- ask only what is necessary to clarify immediate safety
- record the child's words as accurately as possible
- report immediately to the safeguarding lead or Registered Manager
- call emergency services if the child is in immediate danger

Staff must not investigate the allegation themselves.

## **11. Immediate danger**

If a child is in immediate danger or needs urgent medical help, staff must call 999.

The staff member must then inform the safeguarding lead or Registered Manager as soon as possible.

Emergency action must not be delayed while seeking internal permission.

## **12. Internal reporting**

All child safeguarding concerns must be reported to the safeguarding lead or Registered Manager immediately.

Where the safeguarding lead or Registered Manager is unavailable, staff must follow the on-call or deputy arrangement.

Where internal reporting is not possible, or the staff member believes the concern is not being acted on, they must contact the local authority children's social care, police or NSPCC advice line as appropriate.

## **13. External referral**

The safeguarding lead or Registered Manager must decide whether to make a referral to local authority children's social care, police or another appropriate body.

A referral must be made where:

- a child may be suffering or at risk of significant harm
- abuse or neglect is suspected
- a child makes a disclosure of abuse
- there is concern about sexual exploitation, criminal exploitation, trafficking, FGM, forced marriage or serious violence
- the alleged abuser is a staff member, volunteer, contractor or professional
- staff are unsure but risk may be significant

The decision to refer, seek advice or not refer must be recorded with rationale.

## **14. Allegations against staff or people working for the service**

Any allegation that a staff member, volunteer, agency worker, contractor or professional has harmed a child, may have harmed a child, or may pose a risk to children must be escalated immediately.

The Registered Manager must consider:

- immediate protective action
- local authority designated officer or local equivalent route

- safeguarding referral
- police referral
- suspension or restriction from duties
- DBS referral duty
- professional-regulator referral
- CQC notification
- internal investigation process
- support for the child
- support for staff involved

Internal investigation must not interfere with police or safeguarding enquiries.

## **15. Information sharing**

The service will share information where necessary and lawful to protect a child.

Staff must not allow fear of data protection rules to prevent appropriate safeguarding action.

Only relevant information should be shared, with the right person, for the right reason, and recorded.

Where consent to share is not obtained, information may still be shared where this is necessary to protect a child or another person from harm.

## **16. Recording**

Safeguarding records must include:

- date and time of concern
- child's details where known
- factual description of concern
- child's own words where disclosed
- observations
- people present
- immediate action taken
- who was informed
- advice sought
- referral made or rationale for not referring
- reference numbers
- protective actions

- follow-up required
- outcome where known

Records must be factual, clear, dated, attributable and stored securely.

## **17. Children who attend with adults**

Where the service is primarily for adults, staff must still consider children's welfare.

Concerns may arise where:

- an adult patient or service user is a parent or carer
- domestic abuse is disclosed
- substance misuse affects parenting
- mental health crisis may affect a child
- unsafe home conditions are observed
- children are present during home visits
- a child appears neglected, frightened or at risk
- an adult discloses historical or current abuse involving a child
- an adult's behaviour creates risk to a child

Adult-focused services must not ignore child safeguarding risks.

## **18. Consent, confidentiality and young people**

Children and young people should be involved in decisions according to their age, understanding and circumstances.

Confidentiality must be explained clearly, including its limits.

Staff must make clear that information may need to be shared where there is a risk of harm to the child or another person.

Where a young person seeks confidential care or advice, staff must follow applicable law, professional guidance and safeguarding procedures.

## **19. FGM, forced marriage and exploitation**

The service must act without delay where there is concern about female genital mutilation, forced marriage, child sexual exploitation, child criminal exploitation, trafficking, modern slavery or other serious harm.

Staff must know the local referral route and the urgent escalation route.

Where a mandatory reporting duty applies to a professional, the professional must comply with that duty and record the action taken.

## **20. Training**

All staff must receive safeguarding children training appropriate to their role.

Training must cover:

- signs of abuse and neglect
- how to respond to disclosure
- local safeguarding procedures
- escalation route
- information sharing
- record keeping
- professional curiosity
- children who attend with adults
- allegations against staff
- online and exploitation risks where relevant
- FGM and other specific risks where relevant

Training must be refreshed at intervals set by the service and role risk.

## **21. Safer recruitment**

The service must apply safer recruitment checks for roles involving work with children or access to children.

This includes:

- role risk assessment
- identity checks
- employment history
- references and conduct evidence
- DBS and barred-list checks where eligible
- qualifications
- professional registration where required
- induction
- supervision
- probation review

- ongoing fitness monitoring

Concerns about suitability to work with children must be acted on immediately.

## **22. Governance and learning**

The Registered Manager must review safeguarding children concerns through governance.

The review must consider:

- number and type of concerns
- timeliness of referrals
- quality of records
- staff confidence
- training compliance
- repeated themes
- allegations against staff
- links with incidents or complaints
- actions completed
- learning shared
- risk register updates

The service must implement learning from local and national safeguarding reviews where relevant.

## **23. Related policies**

This policy should be read with:

- Safeguarding Adults Policy
- Safe Recruitment Policy
- Whistleblowing and Raising Concerns Policy
- Incident Reporting, Investigation and Learning Policy
- Complaints Policy
- Professional Boundaries and Conduct Policy
- Chaperone Policy
- Consent Policy
- Record Keeping Policy
- Data Protection and Confidentiality Policy

- Staff Conduct and Disciplinary Policy
- CQC Statutory Notifications Policy
- Training, Competency and Mandatory Training Policy

## **24. Review**

This policy will be reviewed annually, or sooner following a safeguarding incident, local safeguarding procedure change, Working Together to Safeguard Children update, CQC finding, serious case review, child safeguarding practice review, allegation against staff or change in service model.

## **25. Sources and further reading**

This template is based on CQC's guidance for providers and managers, the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, and other topic-specific legislation and guidance listed below. It is a starting point for adaptation, not a substitute for legal, clinical, HR, safeguarding or specialist professional advice.

- Children Act 1989 (<https://www.legislation.gov.uk/ukpga/1989/41>)
- Children Act 2004 (<https://www.legislation.gov.uk/ukpga/2004/31>)
- Working Together to Safeguard Children 2026
- Local Safeguarding Children Partnership procedures
- Keeping Children Safe in Education 2025 (where education-adjacent)
- NSPCC
- CQC Regulation 13: Safeguarding service users from abuse and improper treatment
- Local authority designated officer (LADO) procedures
- Human Rights Act 1998 (<https://www.legislation.gov.uk/ukpga/1998/42>)
- Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (<https://www.legislation.gov.uk/uksi/2014/2936/regulation/13>)

## **26. When to seek further advice**

Seek specialist advice where the issue involves serious harm, safeguarding, deprivation of liberty, restraint, children, professional misconduct, controlled drugs, radiation, termination of pregnancy, infection outbreak, water safety, employment dismissal, DBS barring referral, or regulatory enforcement.

## **27. Document control**

| Version | Date       | Author            | Changes   |
|---------|------------|-------------------|---|
| v1      | 2026-06-10 | Verivius (sample) | Initial sample template, conformed to the Verivius policy standard. |

This sample policy template was issued by Verivius. It is a template, not a substitute for legal advice or the tenant's own policy-development process. Where this template and live law or regulator guidance diverge, the live source wins.

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An example for guidance, not a ready-to-use policy. This sample is deliberately generic and is not a finished policy. Before any service uses it, rewrite it around your own service, procedures, roles and local arrangements, and remove or replace anything you cannot actually provide (for example a reference to specific training you cannot access). It is guidance, not legal advice, and you are responsible for ensuring any policy you adopt is current.