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Brisdoc Safeguarding Standards & Training SOP

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1.2	Renuka Suriyaarachchi (Head of Nursing and AHPs.)	19/12/2025
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Introduction

BrisDoc recognises the importance of all staff, co-owners, self-employed staff and independent contractors having the required safeguarding competencies and knowledge relevant to their role that enable them to recognise, support, escalate and report any concerns regarding children and adults at risk.

Brisdoc will follow the Royal College of General Practice (RCGP) standards that are for all staff working in a general practice setting including urgent care and Out of Hours. The standards are for all-ages and apply to both child and adult safeguarding. It is important to note that both adult and child safeguarding knowledge and capabilities are equally necessary and expected for all staff in general practice, even if the staff member only works with adults.

https://www.rcgp.org.uk/learning-resources/safeguarding-standards-knowledge-capabilities

The following five areas of safeguarding are fundamental to effective safeguarding practice:

1) Professional safeguarding responsibilities
2) Identification of abuse and neglect
3) Responding to abuse and neglect
4) Documenting safeguarding concerns and information
5) Information sharing and multiagency working

This SOP is for all employed co-owners. This SOP will outline safeguarding training requirements, specifically in more detail, the level 3 safeguarding training. The SOP will clarify the process of how the safeguarding training and standards are evidenced within Brisdoc and how this is monitored and reported as an organisation.

Self-employed staff will follow the following guidance: https://www.radar-brisdoc.co.uk/wp-content/uploads/2021/03/Self-Employed-Independent-GP-Recruitment-SOP-version-15.3.pdf

Supporting Documentation

This SOP incorporates and refers to the following national and local guidance:

BNSSG (2024) guidance for all practice services

BNSSG (2025) safeguarding Team and Training

CQC (2024) Myth Buster 25 Safeguarding Adults at Risk

CQC (2024) Myth Buster 33 Safeguarding children

RCGP (2024) Level 3 safeguarding training and standards

RCN (2024) Adult Safeguarding: Roles and competencies for health care staff

RCN (2025) children and Young People: Roles and competencies for healthcare staff (under review)

All BrisDoc Co-Owners

The Bristol, North Somerset and South Gloucestershire (BNSSG) Integrated Care Board (ICB) suggested the following training for staff groups using RCGP standards:

LEVEL	STAFF GROUPS (NHS and non-NHS general practice settings)	SAFEGUARDING TRAINING REQUIREMENTS
Level 1	• Receptionists, administrative and secretarial staff (with the exception of manager/lead roles of these groups who will need level 2). • Volunteer staff.	Induction: • Safeguarding included in practice/organisation induction AND completion of relevant safeguarding level 1 eLearning updates. Annually: • Level 1 safeguarding update.

Level 2	• Practice managers (including deputy managers) and equivalent leadership roles. [ALSO SEE ADDITIONAL REQUIREMENTS FOR THIS GROUP]
	• Care navigators.
	• Reception managers.
	• Safeguarding administrators.
	• Managers/leads of administrative/secretarial teams.
	• Health care assistants, pharmacy technicians.
		Induction:
		• Safeguarding included in practice/organisation induction AND completion of relevant safeguarding level 2 eLearning updates.
		
		New to role - any current staff member moving into a level 2 role should, within one month of starting:
		• Complete relevant safeguarding level 2 eLearning modules.
		• Have a safeguarding induction with an appropriate senior leader e.g. practice manager/practice safeguarding lead depending on nature of role. This induction should include:
		  ○ discussion about the safeguarding structure, policies and procedures within the practice/organisation
		  ○ identification of any areas of professional development related to safeguarding.
		
		Annually:
		• Level 2 safeguarding update

Level 3	• GPs, practice nurses, physician associates, nursing associates, pharmacists, paramedics, Advanced Care Practitioners, Advanced Nurse Practitioners, social prescribers, mental health workers, physiotherapists, podiatrists, dieticians and any similar ARRS (Additional Roles Reimbursement Scheme) roles.
	• Primary care network (PCN) safeguarding roles in England such as PCN safeguarding co-ordinators.
	• GP speciality trainees [who should refer to the specific safeguarding training requirements for the workplace based assessment (WBPA) part of the MRCGP exams]
		Induction:
		• Safeguarding included in practice/organisation induction.
		• Completion of relevant safeguarding level 3 eLearning updates (or provide evidence of prior completion) e.g. RCGP modules.
		• Meet with the practice/organisational safeguarding lead, their deputy, or other relevant senior leader within one month of starting their new role to:
		  ○ discuss the safeguarding structure, policies and procedures within the practice/organisation
		  ○ identify any areas of professional development need related to safeguarding.
		
		Annually:
		• Level 3 safeguarding update.
		• Completion of the Safeguarding Structured Reflective Template to demonstrate reflection and learning across the breadth of all the five areas of safeguarding knowledge and capabilities. This must include both child and adult safeguarding issues, even if a practitioner only works with adults.

	Practice Safeguarding Leads	These are **IN ADDITION TO LEVEL 3 TRAINING REQUIREMENTS** (Note that General Practice Safeguarding Leads **DO NOT** need Level 4 safeguarding training) Annually: • Safeguarding update. • Demonstrate regular attendance at the local practice safeguarding lead forums (if available in the locality). • Demonstrate an example of reflection/learning aligned with the practice/organisational role specific knowledge and capabilities.

Individual training requirements for safeguarding within BrisDoc roles are applied via the BrisDoc Development Hub.

Level 1 and 2 training is all on-line and is accessed via Brisdoc Development Hub page.

CQC Requirements for safeguarding

Adults at Risk safeguarding

All staff need to

- demonstrate their understanding of the definition of an adult at risk and the types of abuse they may be subject to
- show awareness of the internal arrangements for recording a safeguarding adult concern and how this is included within the practice's safeguarding adults policy
- show awareness of the external process for reporting the concern and how this is in line with local multi-agency policies and procedures.

Ensure awareness of the designated lead for safeguarding adults at risk.

The CQC need to see evidence that:

- the practice gives sufficient priority to safeguarding adults at risk
- staff take a proactive approach to safeguarding and focus on prevention and early identification
- staff take steps to protect people where there are known risks, respond appropriately to any signs or allegations of abuse, and work effectively with other organisations to implement protection plans
- there is active and appropriate engagement in local safeguarding procedures, and effective work with other relevant organisations

Child safeguarding

All healthcare staff must be competent to recognise abuse, clearly understand their responsibilities and take effective action appropriate to their role. GPs and managers have a responsibility to ensure that all practice staff have the knowledge and skills to be able to meet this requirement.

When we inspect we need to see that GPs and all other practice staff can demonstrate their competence in safeguarding children and young people at risk.

Each practice should have a designated lead for safeguarding children and young people. This key role in the practice:

- promotes good practice
- provides advice and support for fellow staff
- makes sure that fellow staff are suitably trained in safeguarding.

The CQC need to see evidence that:

- the practice gives sufficient priority to safeguarding children
- staff take a proactive approach to safeguarding and focus on prevention and early identification

- staff take steps to protect children and young people where there are known risks, respond appropriately to any signs or allegations of abuse, and work effectively with other organisations to implement protection plans
- there is active and appropriate engagement in local safeguarding procedures and effective work with other relevant organisations.

Level 1 and Level 2 Safeguarding Standards

Level 1

All Level 1 staff will complete Level 1 e-learning 3 yearly and watch an annual update video. All components will be accessed via the Development Hub.

Level 2

All Level 2 staff will complete Level 2 e-learning 3 yearly and watch an annual update video. All components will be accessed via the Development Hub.

Level 3 Safeguarding standards

Brisdoc will comply with the Royal College of General Practice (RCGP) Level 3 training and standards. These are arranged into 5 areas of knowledge and capabilities:

1. Professional safeguarding responsibilities
2. Identification of abuse and neglect
    - Child abuse and neglect
    - Adult abuse
    - Mental Capacity
    - Domestic abuse
    - Supporting victims and survivors and abuse
    - Working with perpetrators of abuse
3. Responding to abuse and neglect
4. Documenting safeguarding concerns and information
5. Information sharing and multiagency working

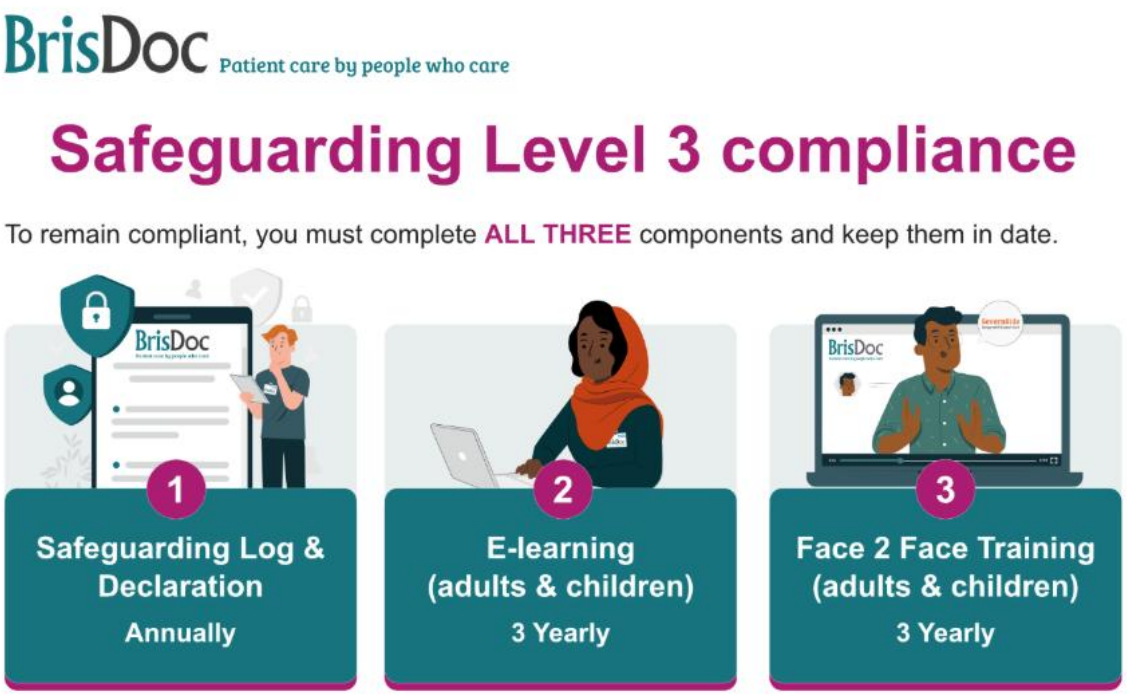
Brisdoc will base safeguarding training requirements based on the knowledge and capabilities stated on the RCGP training requirements standards.

These standards are for all GPs, Nurse and AHPs working in a general practice setting in the UK including Urgent Care and Out of Hours.

The standards introduce competency-based evaluation, recognising knowledge and capabilities in practice. Safeguarding learning should continually develop, and safeguarding training is not

to be viewed as a tick box exercise but **reflective safeguarding practice**. Brisdoc has moved away from a required number of hours of training but instead request clinicians document hours of reflective practice based on the standards. *This can include mandatory safeguarding training hours but more importantly include safeguarding practice, reflecting on safeguarding practice, professional safeguarding discussions and meetings.*

Level 3 Safeguarding Compliance



1. Safeguarding Log & Declaration

The Safeguarding Log is an individual clinician's record of safeguarding practice, activities and training. It is an excel spreadsheet that rolls annually collating the most up to date three years of activity. The log allows clinician to evidence the RCGP standards and reflective practice hours. Please see Appendix Two.

The Safeguarding Log allows clinicians to record the number of hours each safeguarding activity has taken – this is subjective as **reflective practice** within *safeguarding is not only attending a safeguarding training but putting the learning into practice, case discussions including MDTs and working with system partners and colleagues.*

Documenting Hours of safeguarding practice

- a minimum total of **8 hours** practice, training, reflective practice and training, education, learning, safeguarding activity related to **adult safeguarding** completed over the previous three years (inclusive of the current year).

- a minimum total of **12 hours** practice, training, reflective practice and training, education, learning, safeguarding activity related to **child safeguarding** completed over the previous three years (inclusive of the current year).
- All five RCGP standards recorded for adults and children on the safeguarding log.

The Safeguarding Log can be downloaded from the Training and Development Hub on Safeguarding Self-declaration and Overview. The completed Safeguarding Log can be emailed to the Clinical Administration Team or your Line Manager.

Self-declaration

This is a on the Development Hub and is a self-declaration module to state the Safeguarding Log is completed and clinicians are aware of the safeguarding lead for each service.

Please see Appendix B for an exemplar of the Safeguarding Log.

2. E-learning (adults and children)

This is a 3 yearly requirement. This is available on the Development Hub. There is adult safeguarding e-learning and children safeguarding e-learning. Both e-learnings need to complete for all level 3 roles.

E-learning completed for a different organisation will be acceptable. Please email the Workforce Support Team on workforcesupport@brisdoc.org.

3. Face to Face Training (adults and children)

This is a 3 yearly requirement. This is available to book on the Development Hub. There is a separate adult and child course run by a safeguarding trainer covering all aspects of safeguarding including updates and local procedure. Both courses need to be completed.

A face-to-face course completed by a different organisation for example Sirona or BNSSG will be acceptable. Please email the Workforce Support Team on workforcesupport@brisdoc.org.

Other E-learning that contributes to safeguarding Training Hours

Female Genital Mutilation

One yearly e-learning updates.

Mental Capacity

Three yearly e-learning updates.

Prevent

Three yearly e-learning updates.

Oliver McGowan

Three yearly e-learning / F2F updates.

Other Safeguarding Training

Please see Appendix One for examples of safeguarding resource for reflective practice and learning.

Nurse requirements for level 3 safeguarding

The RCN guidance has some variance and is included here for information only. Brisdoc acknowledge this variance and will follow RCGP standards as their guidance can be applied to all our clinicians.

The Royal College of Nursing (RCN) guidance states that a time-based approach for logging evidence of training hours for adults (2024) of a minimum total of **8 hours** training over three years (inclusive of the current year). The eight hours will consist of a blended mixture of safeguarding training resource with at least **50**% of training being participatory – face to face, virtual classrooms, webinars including case reflection, safeguarding supervision, safeguarding case management.

The Royal College of Nursing (RCN) guidance states a competency framework of five levels for children:

- Recognition

- Response

- Action and Expertise

- Leadership role and additional responsibility

- Strategic oversight and system response

The RCN Guidance for child safeguarding suggests a revalidation cycle (3 – 5 years) should consider competence in safeguarding children and young people and children and young

people in care, including all areas of experience, skills, and knowledge, with a relevant multi-agency working approach, and reflection across a range of adult learning activities.

Evidencing Level 3 Safeguarding Reflective Practice

Clinicians may wish to keep evidence of any safeguarding level 3 activities by keeping a portfolio of certificates, notes, logs, or a journal. The new standards highlight the importance of knowledge, capabilities and competency. This can be discussed with your line manager but there is no need to send these pieces of evidence to the People Team. A good resource to understand the standards is the RCGP Safeguarding Hub. There are also some useful templates to use in practice
Safeguarding case review
Safeguarding reflective practice

Sharing Training records between Employers

In the event of a clinician holding substantive post elsewhere and not within BrisDoc, it is the clinician's responsibility to share evidence by completing the Level 3 Safeguarding Overview and Resources Declaration and the Safeguarding Log annually. There is **no** need to repeat training.

A request can be sent by the Clinician to seek evidence if required. See Appendix Three - Email template to other employer requesting confirmation of Level 3 Safeguarding compliancy.

New Starters

Level 1 and Level 2

Individual line managers and People Team will ensure that safeguarding training is completed within probationary period.

This will include generic safeguarding information during the Brisdoc induction meeting and then further service specific safeguarding will be shared during induction period. For example, all new staff within Severnside will watch an induction video where information will be shared regarding safeguarding Lead and how to raise a safeguarding concern.

Level 3

The Clinical Administration Team will work with clinicians during their probationary period to ensure that safeguarding level 3 training is completed. This will include the safeguarding level 3 e-learning as mandatory before starting unsupervised shifts.

The level 3 Safeguarding Log must be completed within the probationary period, but ideally **before** clinicians begin unsupervised shifts. There may be extenuating circumstances which must be agreed with the line manager and / or Clinical Administration Team in advance.

Generic safeguarding information will be shared within the Brisdoc induction meeting and then further service specific safeguarding will be shared during induction period. For example, all new clinicians within Severnside will watch an induction video where information will be shared by the Safeguarding Lead about safeguarding process within Severnside.

Recording Safeguarding Reflective Practice and Training

Clinicians' Responsibility

It is the Clinicians' responsibility to meet the standards outlined in this SOP and be able to evidence the required capabilities, standards and training.

The evidence of this is the completion of the Safeguarding Log.

To clarify, safeguarding level 3 standards and training focuses on capabilities, practice and competence as well as education and training. It is a continual process of learning through reflective practice – and can all be recorded within your Safeguarding Log.

Monitoring Safeguarding Practice Hours for all clinicians

Line Manager Responsibility

This is a supportive process, ensuring clinicians understand the required Level 3 safeguarding training standards and signpost to resources.

Line Managers during their one to ones can have assurance of on-going safeguarding compliance by checking the Development Hub and having informal conversations via clinical discussions or a specific case review.

Line Manager should check compliance regularly but no less than annually.

People Team

The People Team will collate safeguarding compliance data from the development hub. Compliance of safeguarding Level 3 will be annual:

- Safeguarding Log with the requisite hours and Standards

- Safeguarding Overview and Resources Declaration indicating all standards are met

- 3 yearly completion of e-learning for adults and children.

- 3-yearly face to face sessions for adults and children safeguarding updates

Clinical Admin Team

The Clinical Admin Team are the main contact for all IUC clinicians. The Clinical Admin Team will ensure compliance of safeguarding level 3 for all clinicians as listed above in the People Team section. Any concerns regarding this will be escalated to the line manager.

In practice services the line manager performs this function as detailed in the line manager section above

Reporting

The People Team will produce reports for Safeguarding Training compliance. The People Team will provide this information to Line Managers and Safeguarding Leads. This performance will be monitored by the relevant boards.

Change Register

Date	Version	Author	Change Details
4th October 2023	1.0	RS & ND	New Appendix
August 2025	1.1	Renuka Suriyaarachchi	Amended and updated following RCGP (2024) guidance and further clarity including migration to Development Hub
May 2026	1.2	Renuka Suriyaarachchi	Further amendment following consultation with SG Leads across Brisdoc
September 2026	1.3	Renuka Suriyaarachchi / Rebecca Cooke	Update following review of Safeguarding compliance

Appendix One - Safeguarding Training Evidence List

Activity	Evidence for your own portfolio
Courses, Seminars, workshops	• Certificate/notice of attendance • Attendee list • Copy of the teaching material • Copy of any completed course assignments • Confirmation by an employer of participation
In-house development activities Clinical forums	• Certificate/notice of attendance • Attendee list • Copy of the teaching material • Copy of any completed course assignments • Confirmation by HR department or director of participation
Conferences, events	• Attendee list • Event programme • Confirmation letter or email • Copy of invitation to participate • Copy of speech

Specialist panels, forums, formal group meetings, system partner meetings
 	
MDT meetings
	• Agenda
	• Attendee list
	• Copy of
	  ○ any documents distributed at the meeting
	  ○ the minutes
	  ○ invitation to participate
	  ○ speech Lecturing, teaching and addressing meetings
	  ○ any signed formal agreements
	  ○ letter/e-mail authorising activity
	  ○ timetable
	  ○ speech

Relevant work-based meetings	• Agenda
	• Attendee list
	• Copy of
	  ○ any documents distributed at the meeting
	  ○ the minutes
	  ○ invitation to participate
	  ○ speech
	  ○ induction materials for new staff
	• Confirmation by HR department or director of your participation/attendance

Coaching, mentoring	• Copy of any signed agreements • Copy of letter/e-mail authorising/requesting/agreeing to activity • Copy of timetable
Project work	• Copy of the project proposal • Written detail of the research required

	• Copy of the project report • Confirmation by HR department or director of your participation
Acting as expert witness	Evidence of participation including: • signed letters, • notes, observations and • practice related outcomes
Participation in clinical audits	Evidence of participation and role including • signed letters, • notes, observations and • outcome
Structured professional clinical supervision	Evidence of supervision including: • signed letters, • notes, • observations and • practice related outcomes
Visits	Evidence of participation including: • signed letters, • notes, • observations and • outcomes
E-Learning	• Learning for Health
Safeguarding Policy	• Induction and revisiting Policy annually
Reading	• Use self-evidence sheet and confirm: ○ exact book/chapter/article/section read ○ author ○ publisher and date published ○ page numbers.
Reviewing books & articles	• Copy of any signed formal agreements • Copy of letter/e-mail authorising activity • Confirmation by HR department or director of your participation/attendance • Use self-evidence sheet and confirm: ○ exact book/chapter/article/section read ○ author ○ publisher and date published ○ page numbers.
Research	• Copy of the research proposal • Any written instructions/requests received • Copy of any funding applications • Copy of any documentation distributed as part of the research – i.e., consultation document • Confirmation by HR department or director of your participation/attendance
Writing books, articles,	• Copy of any signed formal agreements

papers, documents	• Copy of letter/e-mail requesting/authorising the writing of the piece • Copy of the document – dated and signed by yourself and a witness

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Appendix Two – Safeguarding Log

Name:

Role: *'Link GP's and newly qualified practitioners must demonstrate 16hrs safeguarding children training*

Deadline 23/11/2025

hrs or more	0	Compulsory Safeguarding hours not fulfilled
torg 4 hrs or more	0	

Competencies	Missing:
0	Responsibilities; Identification of abuse and neglect; Responding to abuse and neglect; Documenting; Information sharing and multiagency working

Level 3 Safeguarding Adults - Training Log

Date	Type of Development / Training	Brief summary	Type of verification document	Length of time - hrs	Responsibilities	Identification of abuse and neglect	Responding to abuse and neglect	Documenting	Information sharing and multiagency working

'Link GP's and newly qualified practitioners must demonstrate 16hrs (for newly qualified practitioners some of these hrs may come from training completed as

hrs or more	0	Compulsory Safeguarding hours not fulfilled
Participatorg 8 hrs or more	0	

Competencies	Missing:
0	Responsibilities; Identification of abuse and neglect; Responding to abuse and neglect; Documenting; Information sharing and multiagency working

Level 3 Safeguarding Children - Training Log

Date	Type of Development / Training	Brief summary	Type of verification document	Length of time - hrs	Responsibilities	Identification of abuse and neglect	Responding to abuse and neglect	Documenting	Information sharing and multiagency working

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Appendix Three - E-mail to primary employed

Email template to other employer requesting confirmation of Level 3 Safeguarding compliancy.

Subject: Request for evidence of Safeguarding Compliancy

Dear [Employer's Name],

I am writing to kindly request evidence of level 3 safeguarding compliancy during my employment at [Company Name] from [start date] to [end date/present]. This information will serve as a testament to my commitment to maintaining high professional standards which I wish to share with my [new/additional] employer, BrisDoc Healthcare Services.

If possible, I would appreciate it if you could send the requested evidence to my email address at [your NHS email address].

Please feel free to contact me at [your phone number] or [your NHS email address] if you require any additional information or have any questions regarding this request.

Many thanks in advance,

[your name]