

Brisdoc Safeguarding Training SOP

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Safeguarding Training SOP

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.

This SOP is for all employed co-owners. This SOP will outline safeguarding training requirements, specifically in more detail level 3 safeguarding training. The SOP will clarify the process of how the standards of training 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>

Training Requirements

Brisdoc will implement RCGP training requirements standards to evidence our safeguarding level 3 compliance in-line with Care Quality Commission (CQC) regulations and national guidelines.

The RCGP standards are applicable to all-ages and include both child and adult safeguarding.

These standards are for all GPs and clinicians working in a general practice setting in the UK including urgent care and Out of Hours.

The standards introduce competency-based assessment and in some publications have moved away from a requirement of a certain number of hours (please see note for Nurse requirement for level 3 safeguarding).

The focus of the standards is on demonstrating learning and the application of this in practice. The standards highlight the importance of multi-disciplinary team (MDT) working in a practice setting and the importance of all organisations engaging with local safeguarding partners and relevant authorities.

The standards are arranged into 5 areas of knowledge and capabilities:

- Responsibilities
- Identification of abuse and neglect
- Responding to Abuse and neglect
- Documenting
- Information sharing and multiagency working

Nurse requirements for level 3 safeguarding

The Royal College of Nursing (RCN) guidance states that a time-based approach for logging evidence of training hours continues.

Safeguarding Training SOP

The guidance for adult safeguarding suggests:

- a minimum total of **8 hours** training, education and learning related to adult safeguarding completed over the previous 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.

The Guidance for child safeguarding suggests:

- a minimum of **16 hours** of education, training and learning related to safeguarding and child protection completed over the previous three years (inclusive of the current year) on an annual basis.
- The sixteen hours will consist of a blended mixture of safeguarding training resource with at least **50%** of training being participatory.

BrisDoc recommends that **all** clinicians document the RCGP standards when documenting safeguarding activity and learning and complete hours compliant with the RCN recommendations for these actions.

Types of Training

See Appendix A for a comprehensive list of how to achieve the knowledge, capabilities and competencies.

All BrisDoc Co-Owners

The requirements for each level, and to whom they apply is detailed below :

Safeguarding Training SOP

LEVEL	STAFF GROUPS (NHS and non-NHS general practice settings)	SAFEGUARDING TRAINING REQUIREMENTS
Level 1	<ul style="list-style-type: none"> Receptionists, administrative and secretarial staff (with the exception of manager/lead roles of these groups who will need level 2). Volunteer staff. 	<p>Induction:</p> <ul style="list-style-type: none"> Safeguarding included in practice/organisation induction AND completion of relevant safeguarding level 1 eLearning updates. <p>Annually:</p> <ul style="list-style-type: none"> Level 1 safeguarding update.
Level 2	<ul style="list-style-type: none"> 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. 	<p>Induction:</p> <ul style="list-style-type: none"> Safeguarding included in practice/organisation induction AND completion of relevant safeguarding level 2 eLearning updates. <p>New to role - any current staff member moving into a level 2 role should, within one month of starting:</p> <ul style="list-style-type: none"> 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: <ul style="list-style-type: none"> discussion about the safeguarding structure, policies and procedures within the practice/organisation identification of any areas of professional development related to safeguarding. <p>Annually:</p> <ul style="list-style-type: none"> Level 2 safeguarding update
Level 3	<ul style="list-style-type: none"> 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 ] 	<p>Induction:</p> <ul style="list-style-type: none"> 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: <ul style="list-style-type: none"> discuss the safeguarding structure, policies and procedures within the practice/organisation identify any areas of professional development need related to safeguarding. <p>Annually:</p> <ul style="list-style-type: none"> 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 practitioner only works with adults.
	Practice Safeguarding Leads	<p>These are IN ADDITION TO LEVEL 3 TRAINING REQUIREMENTS (Note that General Practice Safeguarding Leads DO NOT need Level 4 safeguarding training)</p> <p>Annually:</p> <ul style="list-style-type: none"> 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 and also stated on [Radar Staff Training Matrix](#).

Level 1 and 2 training is all on-line and access via individual's Development Hub page.

Training Process - Level 3

Safeguarding Level 3 training will be accessed via the individual's Development Hub and consist of the following components:

Safeguarding Training SOP

Mandatory e-Learning

There are two parts to e-learning, both components need to be done annually and form mandatory safeguarding level 3 requirement:

- [Safeguarding Overview and Resources Declaration](#) on the Brisdoc Development Hub.
- Level 3 e-learning module for adults at Risk and children.

Safeguarding Log

The new Safeguarding Log will have a dual recording system of competencies and hours-based training to ensure that all thresholds for clinical national guidance are met. We therefore request all clinicians, GPs, Nurses and Allied Health Professionals to complete the Safeguarding Log fully in terms of competencies and hours.

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

The Log must be uploaded to development hub annually alongside the requirement to complete the declaration.

Evidencing Level 3 Safeguarding Training and Learning

CQC guidance states all clinicians need to demonstrate their competence for adults as follows:

- 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.

CQC guidance states all clinicians need to demonstrate their competence for children as follows:

- 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.

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.

The RCGP guidance states the following:

Safeguarding learning and reflection should, over time (for example over a revalidation cycle), be across the breadth of the five areas of knowledge and capabilities in the RCGP safeguarding standards.

Safeguarding Training SOP

- This could be demonstrated using the RCGP Safeguarding Reflective Practice - Structured Template and the RCGP Safeguarding Case Review - Structured Template. These completed templates could also support appraisal and revalidation.
- Practitioners should cover both children and adult safeguarding in their learning and reflection, including practitioners who only work with adults.

Learning and reflection across the five areas of safeguarding knowledge and capabilities could include:

- Safeguarding case discussion. The Safeguarding Case Review - Structured Template could be used to demonstrate case reflection (individual reflection or case-based discussion)
- Regular attendance at practice/organisational safeguarding meetings with reflection on learning and impact on practice
- Example of documenting safeguarding concerns and information and how risks were dealt with
- Example of information sharing or involvement in multi-agency working with reflection on good practice and/or areas for development
- Reading and/or online learning with reflection on impact on practice
- Attendance on a safeguarding update/course with reflection on learning
- Safeguarding CPD activities with reflection on learning and impact on practice
- Safeguarding quality improvement activities
- Safeguarding significant events with reflection on learning and impact on practice
- Participation in statutory reviews and quality improvement activities or learning and impact on practice that may have resulted from this
- Multi-agency safeguarding training or learning events with reflection on learning and impact on practice

Further information can be found on the [RCGP resources](#).

Training Offers

BrisDoc offers several different level 3 safeguarding training opportunities including face to face sessions and online learning. These are currently set out in the Development Hub.

It is the responsibility of the Clinician to ensure they undertake a variety of level 3 safeguarding learning (both participatory and self-directed) to meet the RCGP standards outlined. This must include knowledge and capabilities for both adult and child safeguarding even if a practitioner only works with adults.

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

Safeguarding Training SOP

New Starters

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 in advance.

Recording Safeguarding Training & Learning

Clinicians' Responsibility

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

The evidence of this is the completion of mandatory Safeguarding Level 3 training as described in the Training Process -Level 3 within this SOP. Clinicians may keep documents evidencing these competencies using the following templates provided by RCGP:

Structured template for [reflective practice](#)

Structured template for [case review](#)

To clarify, safeguarding level 3 training focuses on capabilities and competence as well as education. It is a continual process of learning through practice as well as training and evidence of these learnings that need to be updated at least annually on the Safeguarding Log.

The Safeguarding Log must be uploaded on to the BrisDoc Developmental Hub. Alternatively, the Safeguarding Log can be sent to the People Team for uploading using the following email address workwithus@brisdoc.org.

Monitoring Safeguarding Training 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.

Safeguarding Training SOP

People Team

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

- Safeguarding Log with the requisite hours and Standards
- Safeguarding Overview and Resources Declaration indicating all standards are met
- Completion of e-learning for adults and children.

Internal audits by sample will be carried out by the People Team to ensure all hour and competencies complete.

Clinical Admin Team

The Clinical Admin Team are the main contact for all 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.

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.

Safeguarding Training SOP

Appendix 1 - Safeguarding Training Evidence List

Activity	Training Type	Suggested Evidence
Courses, Seminars, workshops	Participatory	<ul style="list-style-type: none"> • 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	Participatory	<ul style="list-style-type: none"> • Certificate/notice of attendance • Attendee list • Copy of the teaching material • Copy of any completed course assignments
Clinical forums		<ul style="list-style-type: none"> • Confirmation by HR department or director of participation
Conferences, events	Participatory	<ul style="list-style-type: none"> • 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	Participatory	<ul style="list-style-type: none"> • Agenda • Attendee list • Copy of <ul style="list-style-type: none"> ○ 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
MDT meetings		
Relevant work-based meetings	Participatory	<ul style="list-style-type: none"> • Agenda • Attendee list • Copy of <ul style="list-style-type: none"> ○ 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	Participatory	<ul style="list-style-type: none"> • Copy of any signed agreements • Copy of letter/e-mail authorising/requesting/agreeing to activity • Copy of timetable

Safeguarding Training SOP

Project work	Participatory	<ul style="list-style-type: none"> 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	Participatory	<p>Evidence of participation including:</p> <ul style="list-style-type: none"> signed letters, notes, observations and practice related outcomes
Participation in clinical audits	Participatory	<p>Evidence of participation and role including</p> <ul style="list-style-type: none"> signed letters, notes, observations and outcome
Structured professional clinical supervision	Participatory	<p>Evidence of supervision including:</p> <ul style="list-style-type: none"> signed letters, notes, observations and practice related outcomes
Visits	Participatory	<p>Evidence of participation including:</p> <ul style="list-style-type: none"> signed letters, notes, observations and outcomes
E-Learning	Self-directed	<ul style="list-style-type: none"> Learning for Health
Safeguarding Policy	Self-directed	<ul style="list-style-type: none"> Induction and revisiting Policy annually
Reading	Self-directed	<ul style="list-style-type: none"> Use self-evidence sheet and confirm: <ul style="list-style-type: none"> exact book/chapter/article/section read author publisher and date published page numbers.
Reviewing books & articles	Self-directed	<ul style="list-style-type: none"> 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: <ul style="list-style-type: none"> exact book/chapter/article/section read author publisher and date published page numbers.
Research	Self-directed	<ul style="list-style-type: none"> 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

Safeguarding Training SOP

Writing books, articles, papers, documents	Self-directed	<ul style="list-style-type: none">• Copy of any signed formal agreements• 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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Safeguarding Training SOP

Appendix 2 – Safeguarding Log

Please see the development hub. Be mindful when formatting dates on the log.

Safeguarding Training SOP

Appendix 3 - 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]

Safeguarding Training SOP

Change Register

Date	Version	Author	Change Details
19/12/2025	1.0	Renuka Suriyaarachchi	New SOP created from Safeguarding policy.
16/01/2026	1.1	Renuka Suriyaarachchi	Add RCGP website for competencies

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 \(under review\)](#)