UK Board of Healthcare Chaplaincy

Safeguarding Policy

Version number:	2.0
First published:	June 2024
Date updated:	Sept 2025
Next review date:	1st Sept 2026
Policy prepared by:	Director of Governance and Risk
Policy owner:	Director of Governance and Risk
Policy approved by and date:	UKBHC Board 9th September 2025
Brief summary of changes since previous version:	Minor
Queries about the interpretation or application of this policy:	Contact Email: governance.lead@ukbhc.org.uk

Safeguarding Statement

The UKBHC seeks to safeguard the welfare of all people who come into contact with Healthcare Chaplains and its services. The UKBHC recognises and proclaims that, it is the responsibility of everyone who delivers spiritual care to prevent harm, be it physical, sexual, emotional or spiritual, and we will always seek to reduce risk. The UKBHC' s commitment to safeguarding reminds us that the ethos of spiritual care is the welfare and wellbeing of all people.

1.INTRODUCTION

1.1 The primary aim of the UKBHC is the safety and well-being of the public, which it achieves by setting high standards for the professional practice of healthcare chaplains/spiritual care professionals that are on the register.

1.2 Registrants/members are not employees of the UKBHC and, at the time of writing, 'The Register' is voluntary. Consequently, not all healthcare chaplains/spiritual care professionals are registered with the UKBHC. However, the most recent guidance from NHS England and NHS Scotland requires all chaplains/spiritual care professionals, whether registered or not, to work within the UKBHC Code of Conduct.

1.2 As a regulator both we and our registrants/members come into contact with people who are potentially at risk of harm or neglect, and we may be contacted by people who wish to raise concern about the conduct of UKBHC registrants/members.

2.FUNCTION

2.1 Adult and Child Protection legislation through the UK contains measures to identify and protect individuals at risk of harm. Although safe-guarding systems are different in each nation, they are all based on similar principles, legislation, and good practice, and they place a duty on the UKBHC to report any concerns or reports of harm in relation to adults and children.

2.2 Safe-guarding means protecting people from harm. This covers all forms of harm including, physical, emotional, sexual and financial harm and neglect[1].

[1] Nursing and Midwifery Council (2018)

2.3 This policy sets out the responsibilities of the board and registrants/members in respect of safeguarding (adults and children).

2.4 To meet its responsibilities, to promote good practice and to ensure safeguarding, all registrants/members are required to comply with this policy.

3. RESPONSIBILITY

3.1 The responsibility for safeguarding applies to all healthcare chaplains/spiritual care professionals (including volunteers) and in relation to this policy applies to all registrants/members.

3.2 The UKBHC has delegated primary responsibility for safeguarding to the Lead Officer for Governance & Risk. All safeguarding concerns or questions should be addressed to the Lead Officer for Governance & Risk in the first instance.

3.3 Safeguarding will be a standing item on the board agenda, and the policy will be reviewed annually and signed off in time for the PSA annual submission.

3.4 Employing organisations will have their own safeguarding policies, and registrants/members must follow the safeguarding policies and procedures laid down by their employing organisation.

4. DISCLOSURE & REPORTING

4.1 This policy recognises the significance of safeguarding both adult and children, and the obligation that is placed upon us to appropriate reporting and escalate any concerns. This is balanced with our obligations under the Data Protection Act (DPA) and the General Data Protection Regulations (GDPR).

4.2 As a regulator, the Health & Care Professions Council (HCPC) has powers to refer information to the Disclosure and Barring Service (DBS), AccessNI or Protection of Vulnerable Groups Scheme (PVGS).

4.3 All registrants/members who are subject to investigation under the UKBHC Safeguarding Policy and/or Complaints Policy will be automatically suspended from the Register pending the outcome of the investigation process. The registrant/member will be notified in writing.

By registering with the UKBHC, registrants/members agree that any investigation process in which there is an allegation upheld in full or in part, will be reported to appropriate bodies, including the Accredited Registers and other relevant

regulatory bodies necessary and declared by said registrant/member. In addition to regulatory bodies covered by the Information Sharing Protocol, reporting will extend to include the registrant/member's current employer (NHS, hospice, GP or other healthcare provider) or voluntary organisation, faith or belief organisation, or indeed any other regulatory body declared upon initial registration or submission of CPD Annual Return by the registrant/member in question.

Upon the outcome of any investigation processes in which an allegation is upheld in full or in part, depending on the outcome of the investigation and the consideration of deemed risk to public safety, the registrant/member may be re-instated or removed permanently from the UKBHC Register. The decision will be confirmed in writing to the individual.

If the issue is deemed to be of a serious or criminal nature, the registrant/member will be first reported to police in their local area for further investigation in conjunction with local policies and procedures.

If an investigation matter is concluded with no allegations upheld against the registrant/member in question, they will be re-admitted to the Register at the registration status which they previously held immediately before the investigation began subject to the consideration of the board of directors and indeed the wishes of the individual registrant/member. This decision will be formally issued in writing.

5. OPERATIONAL SYSTEM

5.1 All registrants/members must follow local procedures and guidance when they receive information about, or suspect, a safeguarding issue concerning an adult or child at risk.

5.2 Following any report to UKBHC, the Lead Officer for Governance & Risk will share information with the appropriate agencies where there is a reason to suspect a child or adult is at risk or is experiencing harm.

5.3 If harm or abuse is suspected or witnessed, or is reported to you, you must immediately report it to the Lead Officer for Governance & Risk by email: governance.lead@ukbhc.org.uk

5.4 Following any report to UKBHC in relation to the behaviour or conduct of a registrant/member; the Lead Officer for Governance & Risk will share information with the appropriate agencies including the employing organisation.

5.5 Where there is a potential employee conduct issue or legal process, the UKBHC may conduct a parallel investigation in relation to a registrant/member being safe and fit to practice. The process for this is set out in Appendix 1.

5.6 The Lead Officer for Governance & Risk will keep an appropriate, contemporaneous record of any safeguarding concerns raised, including an accurate record of any decisions to escalate concerns and the supporting evidence for doing so.

6. RISK MANAGEMENT

6.1 The Board will:

- Publish the UKBHC statement on safeguarding on its website.
- Promote openness and transparency amongst registrants/members in respect of safeguarding.
- Ensure that there are robust referral, reporting and escalation processes in place
- Publish any disciplinary outcomes on its register so that anyone checking on a registrant/member's safety and fitness to practice, can clearly see if a sanction has been imposed.

6.2 Registrants/Members will:

- On application provide evidence of an appropriate "Disclosure" certificate.
- Confirm annually when renewing their registration that their local mandatory safeguarding training is up to date.
- Comply with their local safeguarding policies and procedures at all times
- Inform the UKBHC within five (5) working days if any safeguarding concerns are raised against them[2]

[2] UKBHC Lead Officer for Governance & Risk will be advised of any concerns and be responsible for reporting any ongoing cases/outcomes from allegations to the board.

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Appendix 1

This procedure will apply to all registrants and members of the UKBHC, regardless of position or role.

The aim of these procedures is to ensure that:

- Children and adults are protected and supported following any allegation that they may have been harmed by a Registered Healthcare Chaplain/Spiritual Care Professional or a member of the UKBHC
- There is a fair, consistent and robust response to any safeguarding allegation made
- An appropriate level of investigation into concerns in relation to a registrant/member being safe and fit to practice
- The UKBHC acts in accordance with legislation and guidance.

An allegation about a current or historical incident may be made when a registrant/member has:

- Behaved in a way that has harmed an individual or might lead to an individual being harmed
- Possibly committed or is planning to commit a criminal offence against an individual
- Behaved towards an individual in a way that indicates s/he is or would be unsuitable to work with children or an adult at risk.

The responsibility for overseeing safeguarding allegations and appointing an investigating officer lies with, the Lead Officer for Governance & Risk. If they are unavailable or the allegation is against the Lead Officer for Governance & Risk the board Chair will nominate another board member to undertake this role. If the Lead Officer for Governance & Risk decides that independence is necessary to undertake an investigation, an independent person, external to the UKBHC will be identified by the Lead Officer for Governance & Risk to carry this out.

The Lead Officer for Governance & Risk will oversee the co-ordination and management of all allegations and must be notified of every allegation.

On receiving a safe-guarding allegation, an initial plan will be agreed with the Lead Officer for Governance & Risk, the lead for professional conduct and the registrar within 24 hours, which includes:

- The actions to be taken to address any immediate safety of any relevant child/ren or adult at risk involved
- The criteria for referral to the employing organisation

- The criteria for referral to children's social care, adult social care and/or the police
- What information, if any, to share with the individual who is the subject of the safeguarding allegation, and when to do so
- Whether any immediate decision must be taken about suspension of the individual subject to the allegation, pending further enquiries and/or investigation
- Arrangements of support for the person who is the subject of the safeguarding allegation.

All decisions and the reasons for them will be recorded electronically.

Should an external investigation and/or police investigation be required, this will be undertaken before any internal UKBHC procedures are actioned. This does not apply to a decision to suspend a registrant/member from the Register.

At the conclusion of any external investigations, the Lead Officer for Governance & Risk and the Registrar will formally review the outcome and determine any further action required. Following completion of the internal investigation the Lead Officer for Governance & Risk will complete a report detailing the relevant information, their actions and any recommendations.