Safeguarding Policy

Alive Therapies

Policy owner / Safeguarding Lead	Company Director, Alive Therapies
Applies to	Psychotherapy, EMDR, Dance Movement Psychotherapy/body-mind work, supervision, training, movement/wellbeing work, autism assessment and associated online/in-person services for adults and young people.
Version	2.0
Last reviewed	August 2026
Next review	August 2027, or earlier following significant legal, regulatory, service or local safeguarding changes

Immediate danger or medical emergency

If a child or adult is in immediate danger, or urgent medical assistance is required, call 999. Alive Therapies is not an emergency or crisis service.

1. Purpose and commitment

Alive Therapies is committed to safeguarding and promoting the welfare of children, young people and adults at risk, and to providing services that respect dignity, autonomy, equality and human rights.

Safeguarding is a shared responsibility. Alive Therapies will take concerns about abuse, neglect, exploitation, significant harm or unsafe practice seriously and will respond proportionately, promptly and in accordance with applicable law, professional responsibilities and local safeguarding procedures.

This policy applies across Alive Therapies' clinical, assessment, supervision, training, movement/wellbeing and online work with adults and young people. It should be read alongside relevant confidentiality, privacy/data protection, complaints, consent, risk-management and professional practice arrangements.

2. Equality, inclusion and accessibility

Alive Therapies aims to provide a fair and inclusive service and will not unlawfully discriminate on the basis of protected characteristics. Individual communication, sensory, disability, cultural, language and access needs will be considered wherever reasonably practicable.

Safeguarding responses will be person-centred and anti-discriminatory. Particular care will be taken not to misinterpret neurodivergent communication, disability, trauma responses, cultural differences or communication difficulties as evidence either for or against a safeguarding concern.

A copy of this policy can be requested in an alternative accessible format. Where an interpreter, advocate or communication support is required, appropriate arrangements will be considered while maintaining confidentiality and safeguarding responsibilities.

3. Scope and terminology

For this policy, a child is anyone under 18 years of age.

For adult safeguarding, Alive Therapies uses the Care Act framework. Safeguarding duties are particularly relevant where an adult has care and support needs, is experiencing or at risk of abuse or neglect, and because of those needs is unable to protect themselves from that abuse, neglect or risk.

The term 'adult at risk' is used in this policy in preference to the older term 'vulnerable adult'. An adult may also require risk-management or other support even where the statutory adult-safeguarding threshold is not met.

4. Types of safeguarding concern

Safeguarding concerns may include, but are not limited to: physical abuse; sexual abuse; emotional or psychological abuse; neglect or acts of omission; domestic abuse and coercive control; financial or material abuse; discriminatory abuse; organisational abuse; modern slavery and exploitation; self-neglect; child criminal or sexual exploitation; harmful sexual behaviour; online abuse or exploitation; stalking/harassment; and concerns relating to radicalisation.

Safeguarding concerns can arise within families, intimate relationships, institutions, care settings, communities, workplaces or online. A person may experience more than one form of harm at the same time.

5. Safeguarding Lead and responsibilities

The Company Director acts as the Safeguarding Lead for Alive Therapies. Where other practitioners, associates, contractors or staff provide services through Alive Therapies, safeguarding remains a shared professional responsibility. Each practitioner is expected to understand this policy, work within their own professional scope and safeguarding responsibilities, maintain appropriate safeguarding knowledge/training, and raise concerns promptly.

The Safeguarding Lead is responsible for supporting decision-making, ensuring appropriate referrals/escalation, maintaining secure safeguarding records, reviewing incidents and updating this policy. Where the Safeguarding Lead is personally involved in a concern or allegation, independent professional advice and the appropriate external safeguarding route will be used.

6. Responding to a disclosure or concern

If a safeguarding concern arises, the practitioner will prioritise immediate safety and listen calmly and respectfully. The person will be taken seriously and will not be promised absolute confidentiality.

Practitioners should avoid investigative or leading questioning. Where possible, they should clarify only what is necessary to understand immediate safety and what action may be required. A factual record should be made as soon as practicable, including the person's own words where important, the date/time, relevant observations, decisions, consultation and actions taken.

Where safe and appropriate, the person will be involved in decisions about next steps. For adults, their wishes, desired outcomes, mental capacity and right to make decisions will be respected as far as possible. For children, the child's welfare is paramount and information may need to be shared without parental consent where seeking consent would increase risk or otherwise be inappropriate.

7. Confidentiality and information sharing

Confidentiality is fundamental to psychotherapy and assessment, but it is not absolute. Information may be shared without consent where this is necessary and proportionate to protect a child or adult from serious harm, where there is a safeguarding duty, where another person may be at risk, where required by law, or in other circumstances permitted by professional and legal obligations.

Where practicable and safe, Alive Therapies will explain what information needs to be shared, with whom and why. Only relevant information will be shared, and the rationale for sharing - or for deciding not to share - will be recorded.

Safeguarding records and communications will be handled in accordance with UK data-protection law, professional requirements and Alive Therapies' privacy arrangements.

8. Children and young people

Concerns about a child will be considered in accordance with current statutory safeguarding guidance, including Working Together to Safeguard Children 2026, and the procedures of the safeguarding partnership/local authority for the area in which the child is located.

If a child is in immediate danger, 999 should be called. Where a child may be at risk of harm but the situation is not an emergency, Alive Therapies will contact the relevant local authority children's social care service/Multi-Agency Safeguarding Hub or equivalent. If the child is outside Southampton, the referral will normally be made to the safeguarding service responsible for the child's location.

Where a child discloses abuse, the practitioner will listen, avoid investigating, make a contemporaneous record and take appropriate safeguarding action. Parents/carers will normally be involved where appropriate, unless doing so could place the child or another person at greater risk, compromise an investigation or otherwise be contrary to safeguarding advice.

9. Adults at risk

Adult safeguarding practice will be guided by the Care Act 2014 and current Care and Support Statutory Guidance, including the principles of empowerment, prevention, proportionality, protection, partnership and accountability.

Where possible, safeguarding action will be undertaken with the adult's knowledge and consent and will seek to understand what outcomes matter to them. However, information may need to be shared without consent where there is serious risk, coercion, concerns about mental capacity, risk to other people, a crime or other legal/professional basis for disclosure.

Where the statutory safeguarding threshold does not appear to be met, Alive Therapies may still consider other proportionate responses, such as risk planning, GP/healthcare liaison with consent, signposting, social-care referral or other appropriate support.

10. Mental capacity

Adults are presumed to have capacity unless established otherwise. Capacity is decision-specific and time-specific. Where there is reason to doubt an adult's capacity in relation to a safeguarding decision, the principles of the Mental Capacity Act 2005 and its Code of Practice will inform decision-making.

A person should not be treated as lacking capacity merely because they make a decision that others consider unwise. Where an adult lacks relevant capacity, decisions must be made in accordance with the applicable legal framework and in the person's best interests, using the least restrictive option.

11. Self-harm, suicide and serious risk

Thoughts of self-harm or suicide are not automatically an adult-safeguarding matter, but they require appropriate clinical risk assessment and response. Alive Therapies will consider immediacy, intent, plans, access to means, protective factors, capacity, safeguarding factors and risk to others, and will take proportionate action.

Where there is an immediate threat to life or serious injury, emergency services should be contacted. Where urgent mental-health or medical support is required, the practitioner will support access to appropriate NHS/emergency services. Confidentiality may be overridden where necessary and proportionate to prevent serious harm.

12. Online and remote work

Safeguarding responsibilities apply equally to online and in-person work. At the outset of remote clinical or assessment work, Alive Therapies may obtain the client's current location and appropriate emergency/contact information where clinically necessary, so that assistance can be sought if an urgent safeguarding or medical situation arises.

If a safeguarding concern emerges while a client is in another part of the UK, Alive Therapies will normally contact the relevant safeguarding or emergency service for the person's current location. Clients are responsible for informing the practitioner if their location materially changes during remote work where this affects emergency planning.

13. Adult autism assessments and other assessments

Safeguarding remains active throughout the adult autism assessment pathway, including screening, clinical/developmental interviews, ADOS-2, ADI-R or ACIA, feedback and associated communication. The same safeguarding principles apply to any other assessment work undertaken through Alive Therapies.

Assessment information may reveal current or historic abuse, exploitation, self-neglect, domestic abuse, serious risk or concerns about another child or adult. Such information will be considered under this policy rather than being treated solely as diagnostic history.

The limits of confidentiality are explained as part of informed consent. Where safeguarding action is required, the assessment may be paused or adapted if necessary to prioritise safety. A safeguarding concern does not in itself determine an autism diagnostic outcome, and diagnostic formulation and safeguarding decision-making will be recorded separately.

14. Professional boundaries, touch and body-based work

Some Alive Therapies services may involve movement, embodied/body-mind approaches or, where specifically agreed, within the practitioner's competence and clinically appropriate, therapeutic touch/bodywork. Consent is specific and ongoing and may be withdrawn at any time. The purpose and nature of any touch will be explained, alternatives will be available, and professional boundaries will be maintained.

Any concern about inappropriate touch, sexualised behaviour, boundary violation, exploitation or abuse by a practitioner will be treated seriously and managed through the appropriate safeguarding, complaints, professional and/or statutory route.

15. Allegations or concerns about a practitioner

Any allegation that a person working or volunteering with children has harmed a child, may have harmed a child, may have committed an offence against or related to a child, may pose a risk of harm to children, or may be unsuitable to work with children will be addressed promptly. Where the relevant threshold is met, the Local Authority Designated Officer (LADO) for the area will be notified in accordance with local procedures and required timescales. For Southampton, current guidance requires referral within one working day.

Concerns about a practitioner working with adults will be considered under safeguarding, professional-regulatory, complaints, police and/or employer/contracting arrangements as appropriate. A concern involving the Company Director will not be investigated solely by the person who is the subject of the concern.

16. Safer recruitment, DBS and professional standing

Alive Therapies will ensure that DBS checks are obtained at the level legally appropriate to the role and regulated activity being undertaken, including barred-list checks where the role is eligible. DBS certificates do not have a fixed statutory expiry date; checks will therefore be reviewed or renewed in accordance with role, contracting-body, insurer and safeguarding requirements, and the DBS Update Service may be used where appropriate.

Professional registration/accreditation, qualifications, identity, references and relevant training will be checked where appropriate for practitioners working under Alive Therapies. Any duty to make a referral to the Disclosure and Barring Service or a professional regulator will be considered where applicable.

17. Recording, consultation and defensible decision-making

Safeguarding records will distinguish fact, direct quotation, observation, professional opinion and information received from others. Records should include the concern, immediate risk, wishes/consent where relevant, capacity considerations, consultation, decisions, referrals, information shared, reasons and follow-up.

Practitioners are expected to seek supervision, safeguarding consultation or advice where appropriate, while not delaying urgent protective action. Where a referral does not result in the expected response and concern remains, Alive Therapies will follow up and use local professional-challenge/escalation arrangements where appropriate.

18. Local safeguarding contacts - Southampton

These details are included because Alive Therapies is based in the Southampton area. Where the person at risk is located elsewhere, the relevant local authority/safeguarding service for that area should normally be contacted.

Emergency: 999.

Children - Southampton Children's Resource Service / MASH:
Professionals: 023 8083 2300.
Members of the public: 023 8083 3004.
Out of hours: 023 8023 3344.

Adults - Southampton Adult Social Care:
General safeguarding contact: 023 8083 3003.
Professional safeguarding advice/referral line: 023 8083 4307.
Out of hours: 023 8023 3344.

Southampton LADO - allegations about people in a position of trust working with children:
023 8091 5535 / 07500 952 037; lado@southampton.gov.uk.

Contact details and local procedures can change. Current local-authority information must be checked at the time a referral, consultation or allegation notification is required.

19. Training, review and quality assurance

Practitioners working through Alive Therapies are expected to maintain safeguarding knowledge appropriate to their role and client group. Safeguarding learning will be reviewed through CPD, supervision/consultation, reflection on incidents and changes in legislation or statutory/local guidance.

This policy will be reviewed at least annually and sooner where there is a significant change in law, statutory guidance, professional standards, local safeguarding arrangements or Alive Therapies' scope of work.

20. Key legislation and guidance

- Children Act 1989 and Children Act 2004.
- Working Together to Safeguard Children 2026 (Department for Education).
- Care Act 2014 and current Care and Support Statutory Guidance, Chapter 14: Safeguarding.
- Mental Capacity Act 2005 and Code of Practice.
- Safeguarding Vulnerable Groups Act 2006 and relevant amendments/current regulated-activity guidance.
- Data Protection Act 2018 and UK GDPR.
- Current Southampton Children and Adults Safeguarding Partnership / Southampton City Council procedures, and the relevant local safeguarding procedures where a client is located outside Southampton.
- Relevant professional ethical, safeguarding, confidentiality and conduct requirements applicable to each practitioner.

Website note

This policy explains Alive Therapies' safeguarding approach and procedures. It is not intended to provide emergency support or replace statutory safeguarding procedures. If you believe someone is in immediate danger, call 999.