

PSYCHIATRY UK SAFEGAURDING
ANNUAL REPORT 2025

Psychiatry UK Safeguarding Annual Report 2025



Foreword

Welcome to the first annual safeguarding report from Psychiatry UK. We hope you enjoy reading our report and are as excited as we are to take our safeguarding agenda to the next level. This report describes and highlights our achievements so far and what we intend to do in 2026. As a relatively new organisation we have had the privilege of defining and creating the safeguarding structure and agenda in 2025 and have been grateful for the support of our colleagues and Executive board in doing so. But we recognise that we have much more to do.

Psychiatry UK is a national provider of digital psychiatry services, delivering online assessment, diagnosis and treatment for a wide range of mental health conditions including ADHD, autism, anxiety, depression, addiction, memory loss and more.

Our mission is: To improve access to mental health care in the UK and to be part of the solution to the growing mental health crisis. We deliver on this mission by offering services that are:

- **Convenient** – Video assessments at a time that works for the patient
- **Accessible** – Available via computer, laptop, tablet or mobile
- **Adaptable** – Supporting a wide range of mental health needs
- **Confidential** – Patient information is always private and secure
- **Economic** – Excellent value compared to traditional face-to-face care
- **Tailored** – Choice from over 280 expert Consultant Psychiatrists

We believe that everyone should have access to psychiatric care when they need it the most. We are committed to providing the best possible care to our patients and are guided by our key values. The values that guide our mission are that we are **compassionate, ethical, expert and innovative**.

PUK recognises that one of the most important principles of safeguarding is that it is ‘everyone’s responsibility’. Safeguarding children, young people and adults cannot be done in isolation; it is only truly effective when we work collaboratively and protect all those at risk of harm, abuse, or neglect.

It should be recognised that safeguarding is complex and challenging and our plans for the year ahead are ambitious, but they are achievable. They are underpinned by our mission and values, to ensure our services are person-centred, accessible, adaptable, accountable and tailored to the people we care for.

We know that safeguarding support, supervision, and training, is key to prevent harm. Every person who enters our care should feel safe, supported, and have a positive experience. Safeguarding processes should be more than process; it must always be meaningful to the person experiencing the process. We will always aim to ensure that our patients will be fully involved and informed and decisions will be taken in partnership with the person, their families and carers.

Natasha Sloman
Executive lead for Safeguarding.

Introduction

Welcome to the first Safeguarding Annual Report 2025 Psychiatry UK (PUK), the executive team, our safeguarding leads, and managers are absolutely committed to leading safe services, where people are protected from harm. We have worked hard over the last year to ensure that our structures and governance identify those areas we need to focus on, what we are doing well and the experiences of those using our services. In 2025 we have achieved greater visibility of our services and our mock inspection aligned to Care Quality Commission (CQC) standards reviewed the internal safeguarding arrangements in detail. The intelligence we gleaned from this programme of work has led us to identify key quality priorities for the organisation.

Everybody has the right to be safe and free from abuse and protected from harm, no matter who they are, or what their circumstances. The term ‘safeguarding’ encompasses all activities to assist children, young people, and adults ‘at risk’ to live a life that is free from abuse and neglect and to enable independence, wellbeing, dignity, and choice. Safeguarding includes the early identification and/or prevention of harm, exploitation, and abuse by using national guidelines and local multi-agency procedures. It is essential that we disseminate ‘lessons learnt’ across our services and promote best practice from any serious incidents, to improve future service development and delivery for patients and employees.

As we move forward in 2026, we also recognise that more work is required to ensure that safeguarding processes are meaningful, person centred and that our employees are confident in reporting incidents internally and externally and managing the relationship with the local authority where relevant.

This report will provide:

- A declaration of assurance that PUK is fulfilling its duties and responsibilities in relation to promoting the welfare of children, young people, adults and their families or carers who come into contact with our services.
- An overview of safeguarding practices, progress and achievements across services.
- Assurance that PUK is meeting its statutory obligations and the required national standards regarding safeguarding.
- Outline future priorities and work plans for safeguarding and to demonstrate continuous improvement on the arrangements currently in place.

Psychiatry UK services

PUK is the UK’s leading provider of digital psychiatry services, delivering online assessment, diagnosis, and treatment for a wide range of mental health conditions including ADHD, autism, anxiety, depression and more. It supports children, adolescents, and adults through both private pathways and NHS-funded care under the Right to Choose scheme. It operates with over three hundred consultant psychiatrists and provides more than 3,000 initial assessments each month. PUK is regulated by CQC.

As a digital healthcare provider, PUK is committed to improving access to mental health care by offering high-quality, confidential, flexible, and accessible services via secure video-based platforms.

Use of AI -Risk and Safeguarding

PUK has developed a bespoke application designed to assist our health professionals by scanning patient notes every ten minutes to identify key risks including Safeguarding. Software integrates these risks into the patient record, enabling clinicians to effectively monitor risk related information thereby improving patient care and safety. Relevant risk information is identified and extracted from patient notes - risk to self, risk to others, risk from others, risk to child and others as well as providing an explanation why particular information has been flagged

A task screening platform is monitored, and tasks are actioned where applicable or if further review is required by the liaison nurse team and safeguarding team.

This had improved patient safety by providing rapid contact with patients that may be at some risk and that need additional support and teams have been able focus on them.

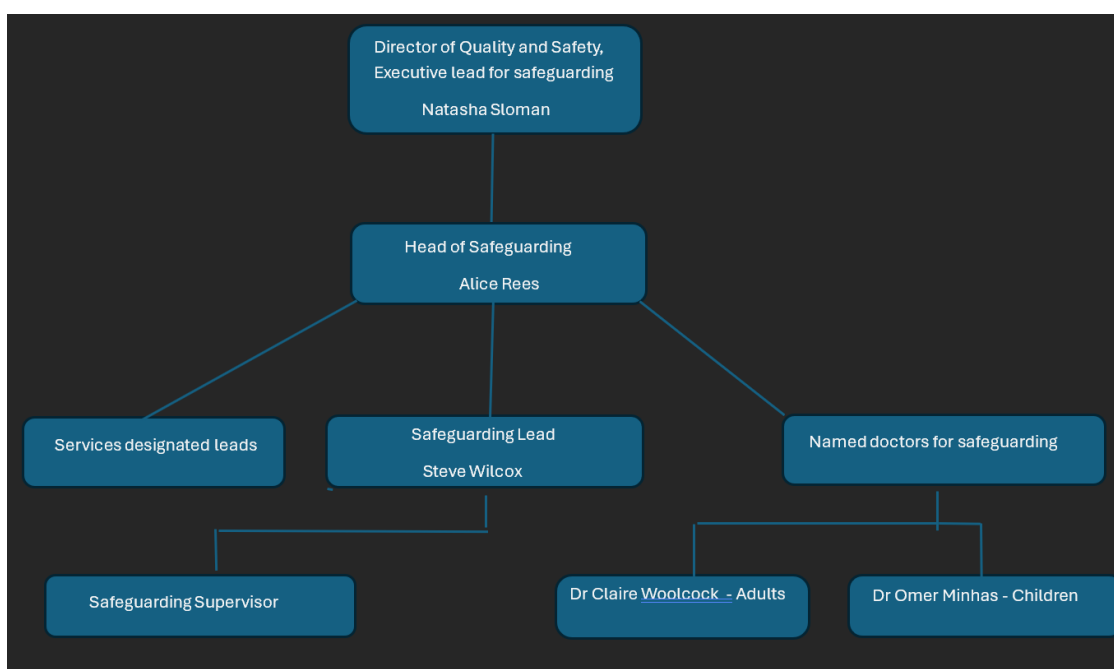
Our Safeguarding Structure

The safeguarding structure is led by the PUK Executive lead who reports to the Chief Executive Officer. The Executive lead is supported by the Head of Safeguarding, a safeguarding lead and nominated safeguarding officers who are accountable for safeguarding within their services.

Within the structure there are named doctors for children and adults. These align to our structure and are in line with the Royal College of Nursing's *Adult Safeguarding Roles and Competencies for Staff (2024)* and the Intercollegiate Document *Safeguarding Children and Young People in Care: Competencies for health care staff (2025)*. This structure ensures that our organisation is working within our statutory responsibilities.

The Head of Safeguarding strives to ensure all safeguarding processes are robust, effective and responsive. This enables us to achieve compliance against all our safeguarding standards. But more importantly we ensure that the person at risk of or suffering neglect, harm or abuse always remain at the centre of all we do.

Safeguarding structure



Our statutory responsibilities

Psychiatry UK are required to:

Work within key pieces of legislation for adults and children across England, these statutory responsibilities are core to our safeguarding policies, procedures, and practices within all our services.

The Care Act 2014 established the legal framework for safeguarding adults outlining statutory requirements; It places a duty on each Local Authority to establish a Safeguarding Adult Board (SAB) and specifies the responsibilities of the Local Authority and connected partners with whom they work, to protect adults at risk of abuse or neglect.

The statutory guidance for The Care Act 2014 describes adult safeguarding as:

“Protecting an adult’s right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time, making sure that the adult’s wellbeing is promoted including where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action. This must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear, or unrealistic about their personal circumstances

The Children Act 1989 provides the legislative framework for child protection in England, and the Children Act 2004 encouraged partnerships between agencies and created more accountability by placing statutory obligation for named agencies and individuals to co-operate to safeguard children and promote their welfare. Section 11 of the Act makes clear to whom this duty applies and indicates that they must ‘*make arrangements for ensuring that their functions are discharged, having regard to the need to safeguard and promote welfare of children*’

Working Together to Safeguard Children is statutory guidance that provides children’s safeguarding with a legal framework, setting out the responsibilities of Local Authorities and their partners. From a statutory perspective the three legally required bodies are: Local Authority, Police and CCG (now known as Integrated Care Boards, or ICB’s) ‘Working together’ promoted the importance of safeguarding children being ‘*everyone’s responsibility*’.

Additionally, our safeguarding systems and policies ensure that we carry out the requirements of The Counterterrorism and Security Act 2015 and the Prevent Statutory Duty.

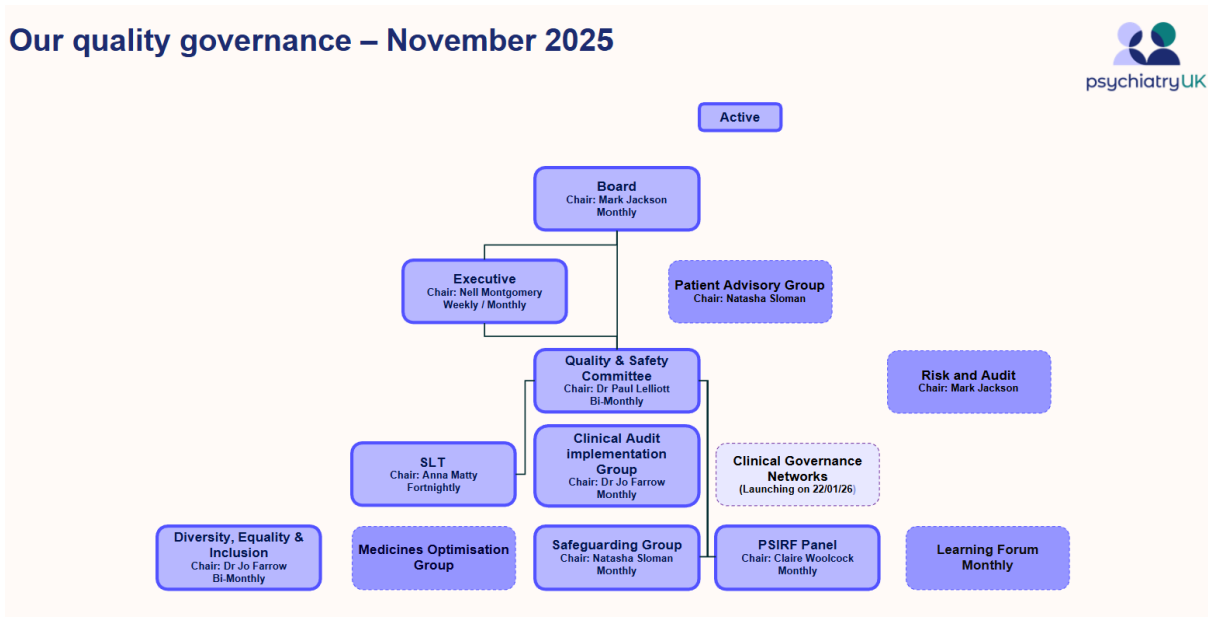
In addition to the requirements of legislation, PUK as a registered provider with the CQC in England must have regard for the Regulations as established under the Health and Social Care Act 2008. PUK adheres to Regulation 13, which mandates zero tolerance of abuse, unlawful discrimination, neglect, degrading treatment, or improper restraint. ‘*Providers must have robust systems to prevent and respond to safeguarding concerns, ensure proper investigation, and take immediate action to protect individuals from harm*’.

We will ensure that appropriate actions in line with our legal responsibilities are implemented to reduce the potential for abuse and/or neglect occurring. PUK is fully committed to its responsibilities outlined in Regulation 13 Safeguarding service users from abuse and improper treatment (Health and Social Care Act 2008 (Regulated Activities) Regulations 2014).

What have we achieved in 2025 achievements and outcomes

In 2025 we established the first of our quarterly national safeguarding committee and have increased the frequency to bimonthly (every two months). This is set out in our overarching governance framework below. This committee has focused on reviewing incident trends, receiving national updates, reviewing, and monitoring training and supervision arrangements for key safeguarding staff. It is chaired by the Psychiatry UK Executive lead for safeguarding.

Our quality governance – November 2025



PUK Executive board receives information and assurances through several channels outlined in the governance framework above: namely but not limited to, information and data from the services within PUK, intelligence from internal and external visits and other sources on information. The bimonthly national safeguarding committee has oversight from the Quality and Safety Committee (QSC). The QSC was established in 2025 with the aim of continuously improving the safety and quality of our services, care and treatment, and the experience of those we care for.

PUK was inspected by the CQC in February 2025 and was rated good overall. In terms of safeguarding, the report stated that *'The service had effective systems in place to keep people safe. Staff understood how to protect patients from abuse and followed clear safeguarding processes. Staff used a digital system to report incidents and safeguarding concerns, which was easy to use and supported timely action'*.

We have used clinical audits to assess that the care we provide is safe and in line with best practice and standards. Twice yearly audits are undertaken of the safeguarding standards and presented to PUK QSC.

Safeguarding was a key area of focus within our internal review methodology. Information we obtained from this review has informed our quality priorities for 2026

We have supported frontline staff to focus on completing relevant training and are pleased to report high levels of compliance overall.

We prioritised the patient voice through an opt-in system and proactive outreach. We engage directly with patients to gain a deeper understanding of their experiences and to integrate their insights into

service improvements, fostering a more responsive and patient-centred approach to care. Drawing on the expertise of lived experience professionals from LENS, we have adopted a co-production approach to refine and optimise the patient pathway.

We have incorporated the lived experience into internal reviews providing the patient perspective and offering practical recommendations to enhance service delivery.

We have leadership and organisational accountability, notably having executive leads for; Safeguarding children and adults, Prevent, and managing allegations against staff.

We have enhanced our governance systems, including a suite of policies which support local multi agency safeguarding procedures, namely, safer recruitment, managing allegations against people in a position of trust, whistleblowing, and disciplinary. We commenced a review of all safeguarding policies to ensure that policies meet the needs of services within PUK and are in line with the required regulation.

We have established a just and learning culture to ensure continuous improvement and development of the lessons learned framework.

We enhanced patient communication support, actioning support requests and reducing waiting times, to ensure a timely response to raised safeguarding concerns.

2025/2026 Key priorities

- We must sustain and develop a culture of safeguarding within our services and continue to support our frontline staff, so they can make every contact count and to prevent all forms of neglect, exploitation, abuse, and violence.
- As a relatively new organisation the PUK safeguarding structure needs to be fully embedded.
- We will work on improving the quality of the data we receive which will enable us to better analyse themes and trends and to share learning. This will be through but not limited to, updates on best practice and legislation changes. We will focus more on safeguarding lessons learned to raise awareness across the services.
- We will further develop the voice and lived experience of those in our services and the care experienced in Psychiatry UK, creating a new approach to ensuring that the people who use our services are fully involved.
- We will ensure the lived experience is incorporated fully, providing the patient perspective and offering practical recommendations to enhance service delivery.
- We will review communication and information with patients to ensure it is personalised and adapted to individual needs and supports patient centred care.
- We will continue to enhance our approach to safeguarding supervision arrangements for those leads working in our adult and children's services. This will support our colleagues facing complex situations and ensure we share learning and best practice.

Successes and achievements 2025 and key priorities for 2026

What we have achieved in 2025	Priorities for 2026
A new Director of Quality & Safety and a Quality & Safety Committee were established to provide senior leadership for safeguarding and quality assurance.	Further cultural development where staff are aware of their personal responsibilities for safeguarding and information sharing and reporting.
The appointment of Executive lead for Safeguarding and a Head of Safeguarding to lead on oversight and assurance that PUK is working within its legislative and statutory responsibilities and adhering to its regulatory requirements.	To continue to improve incident recording quality, content, and accuracy to provide enhanced data availability for developing greater understanding of themes, trends and for shared learning from safeguarding incidents through a redesigned RADAR safeguarding module.
The implementation of bi-monthly safeguarding meetings led by the Executive lead for safeguarding as a key element of the overarching PUK governance structure.	To embed learning from safeguarding incidents across the services through several mediums including bulletins and monthly forums.
Development of a new Contact Strategy and live chat system, opening a new contact centre resulting in an 83% improvement in actioned support requests and reduced queue times—ensuring timely responses to safeguarding concerns raised by patients or families.	To ensure staff are competent in fulfilling the safeguarding agenda through training compliance to the required levels consistently, working across our services enabling them to deliver high quality safe care, reduce risk and raise concerns when required.
PUK implemented the RADAR Quality Management System to enhance management of complaints, incidents, audits, and information governance events, to contribute to stronger safeguarding oversight.	To recruit to permanent roles to reduce contractor reliance and provide care continuity, consistency and reduce risk of safeguarding incidents.
Key operational improvements made to reduce safeguarding-related vulnerabilities associated with delayed access to care resulting in a reduction in the wait times for patients to be assessed by automation of referral and risk assessments and enabling quicker responses to high-risk cases.	To strengthen the provision of staff supervision to provide a focus on safeguarding and ensure new starters have safeguarding supervision supporting workforce retention.
The improvement of training towards required levels to ensure staff work within the roles and competencies, required to execute their responsibilities for	To enable our safeguarding workforce to remain resilient by ensuring that all Safeguarding leads are effectively supported with a supervision structure regionally.

safeguarding including a tailored workshop for those at the Executive level to understand their roles and responsibilities.	
The provision of additional oversight and assurance from ‘external visitors’ such as experts by experience organisation LENS that can flag concerns and be an additional resource for patients to raise concerns.	The establishment of a lead for safeguarding in our patient facing services trained to Level 4 within the overall safeguarding structure who ensure that all safeguarding processes are robust, effective, and responsive.
The development of a culture of learning embedding safeguarding lessons learned and shared	To support the structured feedback with patients and their families and carers to understand peoples experience of safety and identify and embed learning
Appointment of a new Freedom to Speak up Guardian and expansion of ways that staff can raise concerns anonymously.	To educate staff to understand vulnerabilities of those in our care and to raise safeguarding concerns and the associated impact on co-production of care plans and documentation to keep people safe.
Development of a new education Hub for safeguarding for staff to refer to and encompassing access to knowledge, policy, guidance and relevant subject matter.	To establishment of a lead for safeguarding in all services trained to Level 4 within the overall safeguarding structure who ensure that all safeguarding processes are robust, effective, and responsive.
Development of an assurance framework providing PUK oversight against Regulation 13; Safeguarding service users from abuse and improper treatment. Health and social care Act 2008 (Regulated Activities) Regulation 1014	To ensure that the PUK has a full data set that can be analysed to provide a narrative that is a precise representation of Safeguarding monthly. This data will support analysis to identify themes, trends, learning and growth for the organisation.

Training

PUK continues to demonstrate on-going commitment to safeguarding training, ensuring all staff receive the required levels of safeguarding training under guidance of the Royal College of Nursing's *Adult Safeguarding Roles and Competencies for Staff* (2024) and the Intercollegiate Document *Safeguarding Children and Young People in Care: Competencies for health care staff* (2025). The current safeguarding training is designed to ensure that every member of staff is aware of their safeguarding responsibilities, is able to recognise abuse and knows the correct route to act upon that concern.

Safeguarding training levels and compliance are reviewed at the bimonthly Safeguarding Committee and quarterly at the Quality and Safety Committee. executive board. It is used to inform monthly performance meetings.

PUK compliance target for 2025 was 85%; this has been reviewed for 2026 and will be 90% considering contractual requirements.

Primary Role	Staff No's	SG Adults Level 2	SG Child Level 2	SG Adults Level 3	SG Child Level 3	Prevent
All clinical staff across services	622	97%	93.5%	54%	70%	97%
		SG Adult Level 1	SG Child Level 2			
Admin	243	95%	96%			93%

Incidents: Trends and themes

Psychiatry UK is not confident that there is a full and accurate picture of the number of safeguarding concerns raised in 2025. This is due to the changing reporting systems used during 2025. Internal reviews flagged issues with access to the reporting systems and concerns around the incident cycle - from timeliness and quality of reporting and investigation, through to learning the lessons and closing the loop. Consequently, data for 2025 may not accurately state the full position of safeguarding in the organisation during this period. The main reported themes have been incidents of domestic abuse, medication errors, and neglect.

By September 2025 the Executive Lead and Head of Safeguarding concluded that that RADAR system safeguarding module in its existing format was not meeting the needs of the organisation. A new reporting module for safeguarding was commissioned in November 2025 to be fully functional by February 2026.

Data in Table 1 demonstrates the number of concerns raised from two different sources in 2025. Staff utilised a Safeguarding button on the patient record system to share concern details with the safeguarding team and AI generated concerns were raised to the Safeguarding team from a screening form. In total 8094 concerns were raised in 2025. 6112 were AI generated.

Table 2 identifies if safeguarding concerns raised required action from the safeguarding team. In 2541 instances there was positive action taken by the safeguarding team. Due to limitations of data available it has not been possible to breakdown the categories of actions.

It is confirmed that 16 concerns were referred to the patient's local authority for investigation.

Table 1. Source of Safeguarding concerns raised

	source_label	Button	Screening Form	Totals
year_month				
2025-01		135	335	470
2025-02		258	256	514
2025-03		120	554	674
2025-04		128	891	1,019
2025-05		119	688	807
2025-06		146	397	543
2025-07		126	597	723
2025-08		127	534	661
2025-09		130	503	633
2025-10		201	373	574
2025-11		232	388	620
2025-12		260	596	856
	Totals	1,982	6,112	8,094

Table 2. Breakdown of response to concerns raised in 2025

	source_label	Action not applicable	Action taken	No action required	Totals
year_month					
2025-01		79	239	304	622
2025-02		59	420	1,493	1,972
2025-03		111	285	290	686
2025-04		97	250	290	637
2025-05		58	183	267	508
2025-06		127	289	305	721
2025-07		108	218	217	543
2025-08		86	155	203	444
2025-09		108	135	237	480
2025-10		73	168	195	436
2025-11		50	133	115	298
2025-12		5	66	66	137
	Totals	961	2,541	3,982	7,484

Conclusion

Whilst safeguarding agenda can be a challenging area for all services, Psychiatry UK continues to respond to national developments. This annual report demonstrates that safeguarding people at risk remains a significant priority for our organisation and offers assurance that much has been achieved and delivered in 2025. We will continue to meet our statutory duties, as well as proactively developing safeguarding provision and implementing learning from incidents and concerns into everyday practice.

However, we recognise there is much more to achieve and to this end the development and delivery of the future priorities will help ensure that our services are fully engaged in the effective prevention of and response to safeguarding concerns. The underpinning message remains the same, in that safeguarding is everyone's business irrespective of role or position. *It is everyone's responsibility to safeguard and protect the most vulnerable adults and children in our society. The child and adult at risk must remain at the centre and be the motivation of our actions.*

Alice Rees
Head of Safeguarding

