

FREE SAMPLE

# Writing CQC Policies

A Practical Guide for  
Care Providers in England

**50 policies with worked examples**

Home care · Care homes · Supported living

**HeroDocs**

First edition, October 2026 · Legally checked as at 23/09/2026

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**Please read first.** This guide explains the law and CQC guidance in plain English. It is not legal advice. Every fact has a source tag like <sup>[S01]</sup>. You can check each one in the Sources list at the end of the chapter. Text without a source tag is our own advice.

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# Chapter 1: How to use this guide

## Who this guide is for

This guide is for anyone who has to write, own or check policies in a CQC-registered adult social care service in England:

- **Owners and people setting up a new service**, who need policies ready for CQC registration.
- **Registered managers**, who keep policies up to date and make sure staff follow them.
- **Nominated individuals and directors**, who oversee how the service is managed.
- **Quality and compliance leads**, who check policies against what CQC expects.

It covers three types of service: home care (also called domiciliary care), care homes, and supported living. It also has policies for care homes with nursing (Policy 48), people subject to the Mental Health Act (Policy 49) and home care for children (Policy 50).

## What this guide will and will not do

This guide takes you by the hand. For every policy it explains what the law says and what CQC looks for, then shows you a worked example of a good policy, with dos and don'ts and before-and-after wording. The examples use [square brackets] for the parts you need to change to fit your service. This guide will not write your policies for you. Never copy an example without changing it to fit your service. Policies only work when they describe how your own service really runs. <sup>[S33]</sup>

**Companion workbook.** The HeroDocs CQC Policy Workbook goes with this guide. It gives you a worksheet for each policy, so you can record the decisions for your own service.

## How each policy entry is laid out

Every policy in Chapter 6 follows the same pattern, so you always know where to look:

1. **In short:** the key points in a few lines.
2. **What this policy is for:** the questions your policy must answer.
3. **What the law says:** the regulation, explained simply.
4. **What CQC looks at:** now, and under the new framework.
5. **What inspectors found:** real examples from 2026 CQC reports.
6. **What to include:** the building blocks of your policy.
7. **Worked example:** sample wording in the 12-part template, ready to adapt.
8. **Dos and don'ts:** quick rules for writing this policy well.
9. **Weak and strong wording:** before-and-after examples.
10. **Tailor it to your service:** differences for home care, care homes and supported living.
11. **Questions to be ready for:** what an inspector may ask you.
12. **Common mistakes to avoid.**
13. **Checklist:** tick it off before you sign the policy.
14. **Sources for this policy.**

## How to read the source tags

We want you to be able to check everything we say.

- <sup>[S01]</sup>, <sup>[S47]</sup> **and so on** point to a source in the list at the end of each chapter and in Appendix D. Each one links to an official page, such as the law itself, CQC guidance, NICE guidance or a published CQC inspection report.
- **Text without a source tag** is our own advice. It is based on the sources and on good practice, but it is not a legal requirement.

## Keep it current

This edition was checked against the law and CQC guidance on the date at the top of this guide. CQC plans to bring in a new assessment framework (the way it checks and rates services) later in 2026. <sup>[S17 S87]</sup> It is testing a draft version in voluntary pilots from June to October 2026, alongside normal inspections. Pilot results do not affect any service's rating. <sup>[S88]</sup> In its August 2026 update, CQC said more work with each sector was planned for the autumn. <sup>[S89]</sup> The new framework

changes how CQC assesses services, not the regulations themselves, so this guide is built around the regulations. We will publish an update when CQC confirms the final framework.

**This guide is not legal advice.** If you are unsure how the law applies to your service, get advice from a qualified professional.

## Sources for this chapter

| ID  | Source                                                                            | Date               |
|-----|-----------------------------------------------------------------------------------|--------------------|
| S01 | Regulated Activities Regulations 2014, fundamental standards                      | Current            |
| S17 | CQC: Our improvement plans for 2026                                               | Updated 23/12/2025 |
| S33 | Dove Home Care Agency Limited, CQC inspection report (Home care)                  | 13/07/2026         |
| S47 | CQC guidance: Regulation 17 Good governance                                       | Updated 16/05/2025 |
| S87 | CQC: Priorities for delivering more assessments (May 2026 update)                 | 26/05/2026         |
| S88 | CQC: Piloting, testing and evaluation of new assessment method (June 2026 update) | 04/06/2026         |
| S89 | CQC: Rebuilding our regulatory approach and digital services (August 2026 update) | 27/08/2026         |

# Chapter 6:

# The policy library

This chapter gives you a guide to each of the 50 policies most adult social care services need. They include 5 extra policies mainly for home care (43 to 47) and 3 policies for specific services (48 to 50). The policies are listed roughly in the order of CQC's five key questions. Where a policy covers more than one key question, the main one comes first. Each entry follows the layout described in Chapter 1.

**Which policies do you need?** The columns show which services need each policy: home care (HC), care homes (CH) and supported living (SL). A filled dot (●) means core. An open dot (○) means needed only where relevant. A blank means it does not usually apply. <sup>[S01, S49]</sup> Policy 40 applies only if your provider is an organisation, such as a company or charity. If your provider is one person or a partnership, Regulation 4 applies instead. <sup>[S01]</sup>

| #  | Policy                                              | Key question   | Regulation     | HC | CH | SL |
|----|-----------------------------------------------------|----------------|----------------|----|----|----|
| 1  | Safeguarding adults                                 | Safe           | 13             | ●  | ●  | ●  |
| 2  | Whistleblowing and speaking up                      | Well-led, Safe | 17             | ●  | ●  | ●  |
| 3  | Medicines management                                | Safe           | 12             | ●  | ●  | ●  |
| 4  | Infection prevention and control                    | Safe           | 12             | ●  | ●  | ●  |
| 5  | Risk assessment and positive risk-taking            | Safe           | 12             | ●  | ●  | ●  |
| 6  | Incidents, accidents and near misses                | Safe, Well-led | 12, 17         | ●  | ●  | ●  |
| 7  | Falls prevention                                    | Safe           | 12             | ○  | ●  | ○  |
| 8  | Moving and handling                                 | Safe           | 12             | ●  | ●  | ●  |
| 9  | Restrictive practice and positive behaviour support | Safe           | 13             | ○  | ●  | ●  |
| 10 | Missed and late calls, and call monitoring          | Safe           | 12, 13, 17, 18 | ●  |    | ○  |
| 11 | Lone working and staff safety                       | Safe           | 17, 18         | ●  | ○  | ●  |
| 12 | Fire safety and evacuation                          | Safe           | 12, 15         | ○  | ●  | ○  |
| 13 | Premises, equipment and maintenance                 | Safe           | 15             |    | ●  | ○  |
| 14 | Business continuity and emergencies                 | Safe, Well-led | 12, 17, 18     | ●  | ●  | ●  |

| #  | Policy                                                  | Key question                      | Regulation             | HC | CH | SL |
|----|---------------------------------------------------------|-----------------------------------|------------------------|----|----|----|
| 15 | Recruitment and selection                               | Safe                              | 19                     | ●  | ●  | ●  |
| 16 | Staffing levels                                         | Safe                              | 18                     | ●  | ●  | ●  |
| 17 | Pressure ulcer prevention                               | Safe                              | 12                     | ●  | ●  | ○  |
| 18 | Assessing needs and care planning                       | Effective, Responsive             | 9                      | ●  | ●  | ●  |
| 19 | Consent and the Mental Capacity Act                     | Effective                         | 11                     | ●  | ●  | ●  |
| 20 | Deprivation of liberty                                  | Effective, Safe                   | 11, 13                 | ●  | ●  | ●  |
| 21 | Nutrition, hydration and swallowing difficulties        | Effective                         | 14                     | ○  | ●  | ●  |
| 22 | Training and induction                                  | Effective, Safe                   | 18                     | ●  | ●  | ●  |
| 23 | Supervision and appraisal                               | Effective, Safe, Caring, Well-led | 18                     | ●  | ●  | ●  |
| 24 | Oral health                                             | Effective                         | 9, 12                  | ○  | ●  | ○  |
| 25 | Working with other professionals and hospital transfers | Effective, Safe                   | 9, 12                  | ●  | ●  | ●  |
| 26 | Dignity, privacy and respect                            | Caring                            | 10                     | ●  | ●  | ●  |
| 27 | Equality, diversity and human rights                    | Caring, Responsive, Well-led      | 9, 10, 13              | ●  | ●  | ●  |
| 28 | Independence and choice                                 | Caring                            | 9, 10                  | ●  | ●  | ●  |
| 29 | Accessible information and communication                | Responsive                        | 9                      | ●  | ●  | ●  |
| 30 | Complaints, concerns and compliments                    | Responsive                        | 16                     | ●  | ●  | ●  |
| 31 | End of life care                                        | Responsive                        | 9, 9A (care homes), 11 | ●  | ●  | ○  |
| 32 | Visiting                                                | Caring                            | 9A                     |    | ●  |    |
| 33 | Moving from children's to adult services                | Responsive, Safe                  | 9, 11, 12              | ○  | ○  | ●  |
| 34 | Keeping housing and care separate                       | Caring, Safe, Well-led            | 9, 10, 12, 17          |    |    | ●  |

| #  | Policy                             | Key question   | Regulation       | HC | CH | SL |
|----|------------------------------------|----------------|------------------|----|----|----|
| 35 | People's money and property        | Safe           | 13, 15, 17       | ●  | ●  | ●  |
| 36 | Governance and quality assurance   | Well-led       | 17               | ●  | ●  | ●  |
| 37 | Records and data protection        | Well-led       | 17               | ●  | ●  | ●  |
| 38 | Duty of candour                    | Safe, Well-led | 20               | ●  | ●  | ●  |
| 39 | Notifications to CQC               | Well-led       | 2009 Regulations | ●  | ●  | ●  |
| 40 | Fit and proper persons (directors) | Well-led       | 5                | ●  | ●  | ●  |
| 41 | Displaying your CQC rating         | Well-led       | 20A              | ●  | ●  | ●  |
| 42 | Health and safety                  | Safe           | 12, 15, 17       | ●  | ●  | ●  |

### Extra policies mainly for home care:

| #  | Policy                                             | Key question | Regulation | HC | CH | SL |
|----|----------------------------------------------------|--------------|------------|----|----|----|
| 43 | No reply and unable to gain access (home care)     | Safe         | 12         | ●  |    | ○  |
| 44 | Key safes and access to people's homes (home care) | Caring, Safe | 10, 13, 17 | ●  |    | ○  |
| 45 | Live-in care                                       | Safe         | 12, 17, 18 | ○  |    |    |
| 46 | Delegated healthcare activities                    | Safe         | 11, 12     | ●  | ○  | ○  |
| 47 | Staff travel and driving for work (home care)      | Safe         | 17, 18     | ●  |    | ○  |

## Extra policies for specific services:

| #  | Policy                                                                                           | Key question              | Regulation     | HC | CH | SL |
|----|--------------------------------------------------------------------------------------------------|---------------------------|----------------|----|----|----|
| 48 | Nursing care and clinical oversight (care homes with nursing)                                    | Safe, Effective, Well-led | 12, 17, 18, 19 |    | ○  |    |
| 49 | People subject to the Mental Health Act (guardianship, community treatment orders and aftercare) | Safe, Effective           | 9, 11, 12, 13  | ○  | ○  | ○  |
| 50 | Home care for children and young people under 18                                                 | Safe, Effective           | 11, 13, 19     | ○  |    |    |

**Edition 1:** All 50 policies are written in the full format.

# Policy 1: Safeguarding adults

## In short

- Regulation 13 says people must be protected from abuse and improper treatment (such as discrimination, unnecessary restraint or degrading care). <sup>[S01]</sup>
- CQC expects a “zero tolerance” approach to abuse, unlawful discrimination and restraint. <sup>[S55]</sup>
- When you learn of a possible abuse, you must act straight away. <sup>[S01, S55]</sup>
- You must tell CQC about allegations of abuse. <sup>[S05]</sup>

## What this policy is for

Safeguarding means protecting people from abuse and neglect. Your safeguarding policy explains how you keep people safe. It should answer:

1. How do we prevent abuse?
2. How do staff recognise it, and who do they tell?
3. What happens, step by step, once a concern is raised?
4. How do we support the person?
5. How do we learn from it?

## What the law says

| The law (Regulation 13)                                                                                                                               | What it means day to day                                                                                                                                                                                                              |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>13(1): people must be protected from abuse and improper treatment</b>                                                                              | Safeguarding is everyone's job, with overall responsibility at board level or equivalent <sup>[S01, S55]</sup>                                                                                                                        |
| <b>13(2): systems must prevent abuse</b>                                                                                                              | Training at induction and refreshed over time, clear procedures, and staff who know their role <sup>[S01, S55]</sup>                                                                                                                  |
| <b>13(3): systems must investigate immediately</b>                                                                                                    | Act as soon as you are aware, following your local authority's safeguarding procedures <sup>[S01, S55]</sup>                                                                                                                          |
| <b>13(4): care must not be discriminatory, use unnecessary or disproportionate restraint, be degrading, or significantly disregard people's needs</b> | Examples of degrading care include leaving people in soiled sheets or on the toilet for long periods <sup>[S01, S55]</sup>                                                                                                            |
| <b>13(5): no one may be deprived of their liberty without lawful authority</b>                                                                        | Care homes use the Deprivation of Liberty Safeguards (DoLS). Other services need authorisation from the Court of Protection, the court that makes decisions for people who lack mental capacity. <sup>[S01, S55]</sup> See Policy 20. |

The law defines abuse as sexual offences, physical or psychological ill-treatment, theft or misuse of money or property, and neglect. <sup>[S01]</sup> Local authorities have their own safeguarding duties under the Care Act 2014. <sup>[S51]</sup> Under section 42, the local authority must make enquiries if it has reason to suspect that an adult:

- has needs for care and support
- is experiencing, or at risk of, abuse or neglect, and
- cannot protect themselves because of those needs. <sup>[S51]</sup>

The local authority, not your service, decides whether to make enquiries. <sup>[S51]</sup>

CQC can prosecute for breaches of 13(1) to 13(4) that lead to avoidable harm or significant risk of harm, without a warning notice first. <sup>[S01, S55]</sup>

## What CQC looks at

**Now:** the "Safeguarding" quality statement under Safe. <sup>[S11]</sup>

**Draft framework:** the "Safeguarding" key line of enquiry covers safeguarding and human rights, deprivation of liberty, bullying, harassment and discrimination, and sexual safety. <sup>[S19]</sup>

## What inspectors found in 2026

- A home care agency had not reported three incidents to the safeguarding authority or, where needed, CQC. <sup>[S36]</sup>
- At one care home, some incidents that may have been safeguarding concerns were not reported when they should have been. <sup>[S39]</sup>
- At another, leaders did not understand they had to tell CQC when they made a safeguarding referral. <sup>[S41]</sup>
- A supported living service did not always update people's support after safeguarding incidents. <sup>[S45]</sup>

## What to include

- **Roles:** who holds overall responsibility, who leads safeguarding day to day, and what every member of staff must do. <sup>[S55]</sup>
- **Types of abuse and improper treatment, and the signs to look for.** Describe each one simply. Include neglect, financial abuse, discrimination and unnecessary restraint. <sup>[S01, S55]</sup>
- **How to raise a concern,** including out of hours and if the concern is about a manager. <sup>[S55]</sup>
- **Your local authority's procedures and contact details,** including their timescales. <sup>[S55]</sup>
- **Supporting the person** who has experienced or reported abuse. <sup>[S55]</sup>
- **Telling CQC** about allegations of abuse. <sup>[S05]</sup>
- **Learning:** using incidents and complaints to spot possible abuse, and acting on the findings of any investigation. <sup>[S55]</sup>
- **Information for people who use the service** and their advocates on how to raise a concern. <sup>[S55]</sup>

# Worked example

This example shows the 12-part template filled in for safeguarding. Change everything in [square brackets].

## 1. Control box

|                  |                                                                               |
|------------------|-------------------------------------------------------------------------------|
| Policy           | Safeguarding adults                                                           |
| Version          | [1.0]                                                                         |
| Owner            | Registered manager                                                            |
| Approved by      | [Job title of director]                                                       |
| Approved on      | [DD/MM/YYYY]                                                                  |
| Next review      | [DD/MM/YYYY, no more than 12 months away]                                     |
| Services covered | [Home care / care home / supported living]                                    |
| Key question     | Safe                                                                          |
| Regulation       | Regulation 13 <sup>[S01]</sup>                                                |
| CQC framework    | Current: Safeguarding <sup>[S11]</sup> . Draft: Safeguarding <sup>[S19]</sup> |

## 2. Purpose

This policy explains how we protect the people we support from abuse and neglect, and what every member of staff must do if they are worried someone is being harmed.

## 3. Scope

This policy applies to everyone who works for [service name], including agency workers, volunteers, managers and directors.

## 4. The law and guidance

This policy helps us meet Regulation 13 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 <sup>[S01]</sup>. We follow the safeguarding procedures of [name of local authority] <sup>[S55]</sup> and the Care Act 2014 <sup>[S51]</sup>.

## 5. Definitions

**Abuse** includes physical and psychological harm, sexual abuse, theft or misuse of someone's money or property, and neglect <sup>[S01]</sup>. The law also protects people from **improper treatment**. This includes discrimination, restraint that is not needed, and treating someone in a degrading way <sup>[S01, S55]</sup>.

## 6. Roles and responsibilities

| Role                 | Responsibility                                                 |
|----------------------|----------------------------------------------------------------|
| [Director job title] | Holds overall responsibility for safeguarding <sup>[S55]</sup> |
| Registered manager   | Leads safeguarding day to day, makes referrals and tells CQC   |
| Senior care staff    | Support staff to raise concerns and keep people safe           |
| All staff            | Recognise, report and record concerns straight away            |

## 7. Policy statement

We do not tolerate abuse of any kind <sup>[S55]</sup>. We act on every concern straight away <sup>[S01]</sup>. We work with [name of local authority] and tell CQC about allegations of abuse <sup>[S05]</sup>. We support people who experience abuse and learn from every concern.

## 8. Procedure: what to do if you are worried

1. If someone is in immediate danger, call 999.
2. Make the person safe, if you can do this without putting yourself at risk.
3. Tell the manager on duty straight away. Out of hours, call the on-call manager on [phone number]. If your concern is about the manager, tell [director job title] on [phone number], or call [local authority] safeguarding on [phone number] (out of hours: [phone number]).
4. Write down what you saw or were told, using the person's own words, with the date and time. Do not ask leading questions.
5. Do not confront the person you are worried about, and do not investigate yourself.

### The registered manager will then:

1. Contact [local authority] safeguarding straight away, following their referral procedures and timescales <sup>[S55]</sup>. If you are unsure whether to refer, ask them and record their advice. Never decide on your own not to refer <sup>[S36, S39]</sup>.
2. Tell CQC about the allegation as soon as possible (the law says "without delay") <sup>[S03]</sup>, online or by email <sup>[S05]</sup>.
3. Record the concern in the safeguarding log.
4. Make sure the person is safe and supported <sup>[S55]</sup>.
5. Review the person's care plan and risk assessments <sup>[S45]</sup>.
6. If the concern is about a member of staff, follow [local authority]'s procedures for allegations about staff <sup>[S55]</sup>. Decide how to keep people safe while this happens, for example by changing that staff member's duties <sup>[S19]</sup>. If you remove a worker from work with adults because they harmed or might harm someone, you must refer them to the DBS. This also applies if they leave before you can remove them. Failing to refer without a good reason is a criminal offence <sup>[S166, S167, S168]</sup>.

## 9. Recording and reporting

All concerns are recorded in the safeguarding log, kept [where]. For each concern, the log shows what happened and when, who was involved, when [local authority] and CQC were told, and what we did and learned. Records are accurate, written at the time and stored securely <sup>[S01]</sup>.

## 10. Training and competence

All staff complete safeguarding training suited to their role during induction <sup>[S55]</sup>. They then do a refresher every [12 months]. Managers check understanding in supervision.

## 11. Monitoring and audit

The registered manager reviews the safeguarding log every month to look for patterns. [Director job title] reviews a summary every [quarter].

## 12. Related documents

Whistleblowing (Policy 2), Incidents (Policy 6), Restrictive practice (Policy 9), Deprivation of liberty (Policy 20), Duty of candour (Policy 38), Notifications to CQC (Policy 39), [local authority] safeguarding procedures.

## Dos and don'ts

| Do                                                               | Don't                                                                      |
|------------------------------------------------------------------|----------------------------------------------------------------------------|
| Name your local authority and give its safeguarding phone number | Write "report to the relevant authority" without saying who                |
| Give staff a route if the concern is about the manager           | Make the manager the only person staff can tell                            |
| Include telling CQC <sup>[S05]</sup>                             | Forget notifications. This was a repeated finding in 2026 <sup>[S41]</sup> |

| Do                                                       | Don't                                                      |
|----------------------------------------------------------|------------------------------------------------------------|
| Tell staff to write down exactly what they saw and heard | Ask staff to investigate or question the person themselves |
| Update care plans after every concern <sup>[S45]</sup>   | Close a concern without asking what you have learned       |
| Explain abuse in everyday words                          | Copy out the Care Act or the regulations                   |

## Weak and strong wording

| Weak                                              | Strong                                                                                                                                                  |
|---------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|
| "Staff should report any concerns appropriately." | "If you are worried someone is being harmed, tell the manager on duty straight away. If they are not available, call [phone number]."                   |
| "The service has a zero tolerance approach."      | "We do not tolerate abuse. Every concern is recorded, reported to [local authority] where needed, and reviewed by the registered manager the same day." |
| "Training will be provided."                      | "All staff complete safeguarding training during induction and a refresher every [12 months]."                                                          |

## Tailor it to your service

- **Home care:** cover live-in care and staff working alone in people's homes. <sup>[S33]</sup>
- **Care homes:** watch for "closed cultures", which the draft framework names under Safety culture. <sup>[S19]</sup>
- **Supported living:** if there is CCTV, think about consent and dignity. <sup>[S45]</sup> Reflect Right support, right care, right culture if you support autistic people or people with a learning disability. <sup>[S22]</sup>

## Questions to be ready for

- What would a care worker do if they saw a colleague being rough with someone?

- Show me your safeguarding log. Which of these did you report to the local authority and CQC? <sup>[S05, S55]</sup>
- What changed after your last safeguarding concern? <sup>[S55]</sup>

## Common mistakes to avoid

- Deciding internally not to refer a concern that should have gone to the local authority. <sup>[S36, S39]</sup>
- Forgetting to tell CQC. <sup>[S41]</sup>
- Not updating care plans after an incident. <sup>[S45]</sup>

## Checklist

- ☐ Overall responsibility sits at board level or equivalent. <sup>[S55]</sup>
- ☐ Types of abuse are described clearly, with examples. <sup>[S01, S55]</sup>
- ☐ Local authority procedures and contacts are included. <sup>[S55]</sup>
- ☐ Staff know how to raise concerns, including about managers. <sup>[S55]</sup>
- ☐ CQC notifications are covered. <sup>[S05]</sup>
- ☐ Training at induction and regular refreshers is set out. <sup>[S55]</sup>
- ☐ The person is supported and learning is recorded. <sup>[S55]</sup>

## Sources for this policy

S01, S03, S05, S11, S19, S22, S33, S36, S39, S41, S45, S51, S166, S167, S168 and **S55**: CQC guidance on Regulation 13 (updated 16/05/2025). Full links in Appendix D.

# Policy 20:

## Deprivation of liberty

**The law changed on 02/06/2026.** The Supreme Court decided that the old “acid test” from the 2014 Cheshire West case was wrong. The new test takes effect immediately. Do not use any template written before June 2026 without updating it. The government has promised more interim guidance, so check for updates before you finalise this policy. <sup>[S08]</sup>

### In short

- No one may be deprived of their liberty for care without lawful authority (legal permission). <sup>[S01]</sup>
- Care homes use the Deprivation of Liberty Safeguards (DoLS), a legal process for getting the restrictions authorised. Other services, such as home care and supported living, need authorisation from the Court of Protection, the court that makes decisions for people who lack mental capacity. <sup>[S08, S55]</sup>
- Whether someone is deprived of their liberty (restricted, against their will, beyond what is normal for their setting) now depends on several factors, not one test. <sup>[S08]</sup>
- A person may lack capacity, which means they cannot make the decision about their care for themselves. They can still give valid consent to their arrangements if they understand their surroundings at a basic level and show they accept them. <sup>[S08]</sup>
- If in doubt, still refer. <sup>[S08]</sup>

## What this policy is for

It explains how you recognise when someone's care arrangements may deprive them of their liberty, how you get lawful authority, and how you keep reviewing it.

## What the law says

- **Regulation 13(5):** a person must not be deprived of their liberty for care or treatment without lawful authority. <sup>[S01]</sup>
- **CQC guidance:** hospitals and care homes must follow DoLS. Other services must make sure any deprivation of liberty is authorised by the Court of Protection. <sup>[S55]</sup>
- **The DoLS code of practice** is the 2008 code, republished on 02/06/2026. It explains the DoLS process, but it was written before the 2014 and 2026 judgments. Use the June 2026 test to decide whether there is a deprivation of liberty. <sup>[S08, S69]</sup>
- **You must tell CQC** the outcome of any DoLS request or Court of Protection application about a person you support, even if the local authority applied. You must also tell CQC if a request or application is withdrawn. Do not tell CQC when you apply. <sup>[S03, S05]</sup>

### What changed in June 2026: <sup>[S08, S173]</sup>

- The Cheshire West "acid test" (continuous supervision and control, and not free to leave) no longer decides the question on its own.
- You must look at the person's own situation, the type, length and effects of any restrictions, and how they are carried out. No single factor decides it.
- A person's wishes and feelings count for a lot. A person can give valid consent if they are aware of their surroundings, have a basic understanding, and can show they accept or are happy with the situation. If there is serious doubt, you cannot conclude they consent.
- Whether the person objects now matters.

## The factors to consider

The government lists these factors for the new assessment: <sup>[S08]</sup>

| Factor                    | Example questions                                                          |
|---------------------------|----------------------------------------------------------------------------|
| Type of restrictions      | Locked doors, physical control, supervision, sedating medicine, isolation? |
| Duration                  | How long do the restrictions last?                                         |
| Effects on the person     | How do they affect the person's life and wellbeing?                        |
| Manner                    | How are the restrictions carried out?                                      |
| Objection                 | Is the person objecting, in words or actions?                              |
| Comparison with detention | How far is this from being locked in a cell?                               |
| Normality                 | How normal are the arrangements for this setting?                          |
| Purpose                   | Is it for care and protection, not punishment?                             |

**Signs of objection include:** trying to leave, refusing or pushing away care, needing restraint or one-to-one care to manage behaviour, hiding medicine in food or drink (covert medicines) when the person objects to medicine, and sedating medicine that affects their ability to object. <sup>[S08]</sup>

**Going along with care (compliance) is not the same as agreeing to it (consent).**

Ask: how do we know what this person actually understands and wants? <sup>[S08]</sup>

## What CQC looks at

**Now:** "Consent to care and treatment" under Effective, and "Safeguarding" under Safe. <sup>[S11]</sup>

**Draft framework:** deprivation of liberty is listed under "Safeguarding". <sup>[S19]</sup>

## What inspectors found in 2026

- A care plan said someone had capacity, but they had a DoLS authorisation saying they lacked capacity. <sup>[S42]</sup>

## What to include

- What the June 2026 change means for your service. <sup>[S08]</sup>
- How staff spot restrictions and signs of objection. <sup>[S08]</sup>
- Who checks all the factors together (the multi-factor assessment), and how wishes and feelings are gathered. <sup>[S08]</sup>
- When to refer: to the local authority for DoLS (care homes) or for a Court of Protection application (other services). <sup>[S08, S55]</sup>
- What to do with existing authorisations. <sup>[S08]</sup>
- Standard authorisations (given by the local authority) and urgent authorisations (given by the care home itself while it waits), and their time limits. <sup>[S69]</sup>
- Telling CQC about outcomes. <sup>[S05]</sup>
- Reducing restrictions whenever possible. <sup>[S08]</sup>

## Worked example

Change everything in [square brackets].

### 1. Control box

|                                       |                                                                                                                                                                        |
|---------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Policy</b>                         | Deprivation of liberty                                                                                                                                                 |
| <b>Version / Owner</b>                | [1.0] / Registered manager                                                                                                                                             |
| <b>Approved by / on / Next review</b> | [Director job title] / [DD/MM/YYYY] / [DD/MM/YYYY, and when DHSC interim guidance is published]                                                                        |
| <b>Services covered</b>               | [Care home (DoLS) / home care or supported living (Court of Protection)]                                                                                               |
| <b>Key question / Regulation</b>      | Effective and Safe / Regulations 11 and 13(5) <sup>[S01]</sup>                                                                                                         |
| <b>CQC framework</b>                  | Current: Consent to care and treatment; Safeguarding <sup>[S11]</sup> .<br>Draft: Safeguarding <sup>[S19]</sup>                                                        |
| <b>Other law and guidance</b>         | Mental Capacity Act 2005 <sup>[S52]</sup> ; DoLS code of practice (2008, republished 02/06/2026) <sup>[S69]</sup> ; Supreme Court judgment 02/06/2026 <sup>[S08]</sup> |

## 2. Purpose

This policy makes sure no one we support is deprived of their liberty without lawful authority, and that we keep restrictions to the minimum.

## 3. Scope

This policy applies to everyone aged 18 and over whose care may involve restrictions on their freedom. DoLS (the Deprivation of Liberty Safeguards) apply only from age 18. For anyone younger, a deprivation of liberty needs another legal route, such as the Court of Protection or the High Court. Take advice, and see Policy 50 <sup>[S08, S69]</sup>.

## 4. The law and guidance

We follow Regulation 13(5) <sup>[S01]</sup>, the Mental Capacity Act 2005 <sup>[S52]</sup>, and the definition of deprivation of liberty set by the Supreme Court on 02/06/2026 <sup>[S08]</sup>.

## 5. Definitions

**Deprivation of liberty:** restrictions on a person, imposed against their will, that go beyond what is normal for their setting, judged by looking at several factors together <sup>[S08]</sup>. **Valid consent:** a person who is aware of their surroundings, has a basic understanding, and shows they accept their situation can consent even if they lack legal capacity <sup>[S08]</sup>. If there is serious doubt, you cannot conclude they consent <sup>[S08]</sup>.

## 6. Roles and responsibilities

| Role               | Responsibility                                                                                                  |
|--------------------|-----------------------------------------------------------------------------------------------------------------|
| Registered manager | Leads assessments, makes referrals, keeps a register of authorisations and tells CQC <sup>[S03, S05, S69]</sup> |
| All staff          | Report any sign that a person is objecting to their care or restrictions                                        |

## 7. Policy statement

We look at what each person wants and how restrictions affect them. We use the least restrictive care possible. If we are unsure, we refer.

## 8. Procedure (summary)

1. When care starts, and whenever restrictions change, the registered manager reviews the person's restrictions against the factors in this policy <sup>[S08]</sup>.
2. Gather the person's wishes and feelings: what they say, how they behave, what they wanted before, and views from family and staff <sup>[S08]</sup>.
3. **Care homes:** a standard authorisation is the local authority's legal permission for a deprivation of liberty. Ask [local authority] for one as soon as a deprivation of liberty is likely within the next 28 days, or if there is any doubt <sup>[S08, S52, S55, S69]</sup>. If there is no one to consult about the person apart from paid staff, tell the local authority when you ask. It can then appoint an IMCA (an independent mental capacity advocate, who speaks up for the person) <sup>[S52, S69]</sup>.
4. **Care homes, if it cannot wait:** an urgent authorisation is a short-term authorisation that the care home gives itself. Use one only when the deprivation of liberty needs to start before you can get a standard authorisation. The registered manager gives it in writing, on behalf of the care home, for up to 7 days. They ask for the standard authorisation at the same time. Record why the urgent authorisation was needed. The local authority can extend it once, by up to 7 days, for exceptional reasons only <sup>[S52, S69]</sup>. Put a copy in the person's records. As soon as practicable, give a copy to the person, and to their IMCA if they have one. Also as soon as practicable, tell the person what the urgent authorisation means, and that they can challenge it in the Court of Protection. Tell them in person and in writing <sup>[S52, S69]</sup>.
5. **Home care and supported living:** you must make sure any deprivation of liberty is authorised by the Court of Protection, the court that makes decisions for people who lack mental capacity <sup>[S55, S69]</sup>. Tell the commissioning [local authority] (the one that arranges the person's care), so it can think about applying to the court <sup>[S08, S55]</sup>. If the NHS funds the care, for example through NHS continuing healthcare, tell the NHS body that funds it. If no one else arranges or funds the care, for

example if the person pays for it, get legal advice about applying.  
(Confirm local arrangements with your local authority.)

6. Once you know the outcome of a DoLS request or Court of Protection application, tell CQC. If a request or application is withdrawn, tell CQC when that happens. Include: the date and type of request or application; whether an urgent authorisation was used first; the outcome or the reason it was withdrawn; and the date of that outcome or withdrawal (Policy 39) <sup>[S03, S05]</sup>.
7. If a deprivation of liberty is no longer needed, end it straight away by changing the person's care. Then ask the local authority to review the authorisation and end it <sup>[S69]</sup>. You do not need a new review to reduce restrictions within an existing authorisation <sup>[S08]</sup>.
8. Existing authorisations stay in place until the local authority reviews them <sup>[S08]</sup>. Each one has an end date, of no more than 12 months. The registered manager tracks the end date, makes sure any conditions attached to the authorisation are met, and makes sure the person understands their rights. You must ask the local authority for a review if the person may no longer meet the requirements (the legal tests the authorisation is based on). You must also ask for a new authorisation in good time before the current one ends <sup>[S52, S69]</sup>.

## 9. Recording and reporting

Keep a register of every person with restrictions, the assessment, any referral, the outcome, and review dates. Record contact between the person and their relevant person's representative (the person appointed to keep in touch with them and represent and support them). If there is not enough contact, raise it with the representative, then tell the local authority <sup>[S69]</sup>.

## 10. Training and competence

At induction, we train staff, at a level suitable for their role, so they only use restrictions and restraint when necessary. We update this training at [intervals] <sup>[S55]</sup>. All staff are briefed on the June 2026 change. Managers complete updated training, such as NHS England's updated e-learning <sup>[S08]</sup>.

## 11. Monitoring and audit

The registered manager reviews the register every [month] and checks it matches care plans and capacity records <sup>[S42]</sup>. Any mismatch is put right straight away.

## 12. Related documents

Consent and the Mental Capacity Act (Policy 19), Restrictive practice (Policy 9), Notifications (Policy 39).

## Dos and don'ts

| Do                                                                                           | Don't                                                                       |
|----------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|
| Use the June 2026 factors <sup>[S08]</sup>                                                   | Rely on the old "acid test" alone                                           |
| Refer when in doubt <sup>[S08]</sup>                                                         | Decide on your own that someone is not deprived when the case is borderline |
| Look for objection in actions, not just words <sup>[S08]</sup>                               | Treat a quiet, compliant person as consenting                               |
| Keep existing authorisations until reviewed, and track their end dates <sup>[S08, S69]</sup> | Remove safeguards without the local authority's decision                    |
| Review when interim guidance is published <sup>[S08]</sup>                                   | Treat this policy as finished                                               |

## Weak and strong wording

| Weak                                       | Strong                                                                                                                                                          |
|--------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| "DoLS will be applied for where required." | "If [name]'s restrictions may deprive him of his liberty, or if we are unsure, the registered manager applies to [local authority] for a DoLS authorisation."   |
| "[Name] does not object."                  | "[Name] smiles and joins in activities, and has not tried to leave in the last [3 months]. His daughter says he has said he is happy here. Reviewed on [date]." |

## Tailor it to your service

- **Care homes:** DoLS applies. <sup>[S08, S55]</sup>
- **Home care and supported living:** Court of Protection applies. Work with the commissioning local authority. <sup>[S08, S55]</sup> In a person's own home, restrictions need to be greater before they count as a deprivation of liberty. <sup>[S08]</sup>

## Questions to be ready for

- How have you updated your approach since June 2026? <sup>[S08]</sup>
- Show me your register of authorisations and referrals. <sup>[S05]</sup>

## Common mistakes to avoid

- Using a pre-June 2026 template. <sup>[S08]</sup>
- Records that disagree with each other. <sup>[S42]</sup>

## Checklist

- ☐ Reflects the 02/06/2026 judgment. <sup>[S08]</sup>
- ☐ Factors and signs of objection listed. <sup>[S08]</sup>
- ☐ Correct route for your service: DoLS or Court of Protection. <sup>[S55]</sup>
- ☐ Notifications to CQC. <sup>[S05]</sup>
- ☐ Review date set for when interim guidance is published. <sup>[S08]</sup>

## Sources for this policy

S01, S03, S05, S11, S19, S42, S52, S55, S173, **S08:** GOV.UK, Supreme Court 2026 judgment on deprivation of liberty (updated 22/09/2026, read in full) and **S69:** DoLS code of practice (2008 code, republished 02/06/2026). Full links in Appendix D.

# You have reached the end of the free sample

This sample shows 2 of the 50 policies in **Writing CQC Policies: A Practical Guide for Care Providers in England**.

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# Writing CQC Policies

## A Practical Guide for Care Providers in England

**Policies that follow the law, and match how your service really works.**

This guide takes owners, registered managers and nominated individuals through 50 policies for home care, care homes and supported living. For each one, it explains what the law says and what CQC looks for. Then it shows a worked example, with dos and don'ts and before-and-after wording.

- 50 policies, each checked against the law and CQC guidance
- Real findings from 2026 CQC inspection reports
- A step-by-step chapter on registering with CQC
- Every fact traced to an official source you can check
- A companion workbook, with a worksheet for each policy

**Written by Samuel Cudjoe**

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FREE SAMPLE

# Writing CQC Policies Workbook

Worksheets for all 50 policies

**Checklists, trackers and deadlines**

Home care · Care homes · Supported living

**HeroDocs**

First edition, October 2026

# How to use this workbook

From the guide: Chapter 1 · Matches guide edition 1.0.6

This workbook goes with the guide “Writing CQC Policies: A Practical Guide for Care Providers in England”. The guide explains what each policy needs. The workbook is where you do the work for your own service.

It is for anyone who has to write, own or check policies in a CQC-registered adult social care service in England. That includes owners and people setting up a new service, registered managers, nominated individuals and directors, and quality and compliance leads.

It covers three types of service: home care (also called domiciliary care), care homes, and supported living. It also has policies for care homes with nursing (**Policy 48**), people subject to the Mental Health Act (**Policy 49**) and home care for children (**Policy 50**).

## Where to begin

- Start with your service profile. It shows which policies you need.
- Use the readiness tracker to see where you are now.
- Work on the policies in “Where to start” first. In our view they carry the highest risk.
- Read the policy in the guide before you fill in its worksheet. Each worksheet shows where to read.
- Never copy an example without changing it to fit your service. Policies only work when they describe how your own service really runs. <sup>[S33]</sup>
- Use the quick reference pages to find deadlines and who to tell. Check the policy in the guide before you act.

## How to fill it in

- On screen: type into the boxes. Square tick boxes, shown here as [ ], can hold more than one answer. Round buttons, shown here as ( ), take one answer only.
- On paper: print the printable version and write in the boxes.
- Keep a copy of each version you finish, with the date.

## About the facts in this workbook

- Every fact comes from the guide, with the same source codes, such as S01. The guide lists every source in Appendix D.
- Lines without a source code are the guide’s own good-practice advice, not the law.
- The workbook matches guide edition 1.0.6. The guide’s title page shows the date its law was checked.

**Important.** This workbook is not legal advice. If you are unsure how the law applies to your service, get advice from a qualified professional. You remain responsible for your policies and for what your service does.

**About this workbook.** Written by Samuel Cudjoe. © 2026 Hero Technologies Ltd. All rights reserved. Company No. 16934431. General enquiries: 020 3488 2679, [hello@herodocs.co](mailto:hello@herodocs.co)

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# Your service profile

From the guide: Chapter 2, Chapter 6 and Chapter 8 · Matches guide edition 1.0.6

Answer these questions first. Your answers show which policies you need and which parts of each worksheet apply to you.

## About your service

**What type of service do you run? Tick all that apply.**

- ☐ Home care
- ☐ Care home without nursing
- ☐ Care home with nursing
- ☐ Supported living

**Which regulated activities are you registered for, or applying for? Tick all that apply.**

- ☐ Personal care
- ☐ Accommodation for persons who require nursing or personal care
- ☐ Treatment of disease, disorder or injury

- Personal care: usually home care agencies and supported living services. <sup>[S48]</sup>
- Accommodation for persons who require nursing or personal care: usually care homes. <sup>[S49]</sup>
- Care homes with nursing that employ registered nurses are also likely to need Treatment of disease, disorder or injury. Check CQC's scope guidance before you apply. <sup>[S49]</sup> **See Policy 48.**
- If your care home also sends care workers into people's own homes, you must register for Personal care as well. <sup>[S48]</sup>

**Who do you support? Tick all that apply.**

- ☐ Adults (18 and over)
- ☐ Young adults (18 to 25) moving from children's services
- ☐ Children and young people under 18
- ☐ Autistic people or people with a learning disability
- ☐ People subject to the Mental Health Act

**Do you employ registered nurses?**

- ☐ Yes
- ☐ No

**Is your provider an organisation, such as a company or charity, or one person or a partnership?**

- ☐ An organisation
- ☐ One person or a partnership

## What your answers mean

- **Policy 40** applies only if your provider is an organisation, such as a company or charity. If your provider is one person or a partnership, Regulation 4 applies instead. <sup>[S01]</sup>
- Care homes with nursing that employ registered nurses: **see Policy 48.**
- Young adults (18 to 25) moving from children's services: **see Policy 33.**
- Children and young people under 18 (home care): **see Policy 50.**
- People subject to the Mental Health Act: **see Policy 49.**

- Autistic people and people with a learning disability: CQC expects your policies to reflect its Right support, right care, right culture guidance. It is issued under the law (statutory guidance).<sup>[S22]</sup> See **Policy 9** and Chapter 8.

## Which policies apply to you

The columns show which services need each policy: home care (HC), care homes (CH) and supported living (SL). A filled dot (●) means core. An open dot (○) means needed only where relevant. A blank means it does not usually apply.<sup>[S01, S49]</sup>

| #  | Policy                                                  | HC | CH | SL |
|----|---------------------------------------------------------|----|----|----|
| 1  | Safeguarding adults                                     | ●  | ●  | ●  |
| 2  | Whistleblowing and speaking up                          | ●  | ●  | ●  |
| 3  | Medicines management                                    | ●  | ●  | ●  |
| 4  | Infection prevention and control                        | ●  | ●  | ●  |
| 5  | Risk assessment and positive risk-taking                | ●  | ●  | ●  |
| 6  | Incidents, accidents and near misses                    | ●  | ●  | ●  |
| 7  | Falls prevention                                        | ○  | ●  | ○  |
| 8  | Moving and handling                                     | ●  | ●  | ●  |
| 9  | Restrictive practice and positive behaviour support     | ○  | ●  | ●  |
| 10 | Missed and late calls, and call monitoring              | ●  |    | ○  |
| 11 | Lone working and staff safety                           | ●  | ○  | ●  |
| 12 | Fire safety and evacuation                              | ○  | ●  | ○  |
| 13 | Premises, equipment and maintenance                     |    | ●  | ○  |
| 14 | Business continuity and emergencies                     | ●  | ●  | ●  |
| 15 | Recruitment and selection                               | ●  | ●  | ●  |
| 16 | Staffing levels                                         | ●  | ●  | ●  |
| 17 | Pressure ulcer prevention                               | ●  | ●  | ○  |
| 18 | Assessing needs and care planning                       | ●  | ●  | ●  |
| 19 | Consent and the Mental Capacity Act                     | ●  | ●  | ●  |
| 20 | Deprivation of liberty                                  | ●  | ●  | ●  |
| 21 | Nutrition, hydration and swallowing difficulties        | ○  | ●  | ●  |
| 22 | Training and induction                                  | ●  | ●  | ●  |
| 23 | Supervision and appraisal                               | ●  | ●  | ●  |
| 24 | Oral health                                             | ○  | ●  | ○  |
| 25 | Working with other professionals and hospital transfers | ●  | ●  | ●  |
| 26 | Dignity, privacy and respect                            | ●  | ●  | ●  |
| 27 | Equality, diversity and human rights                    | ●  | ●  | ●  |
| 28 | Independence and choice                                 | ●  | ●  | ●  |
| 29 | Accessible information and communication                | ●  | ●  | ●  |
| 30 | Complaints, concerns and compliments                    | ●  | ●  | ●  |

| #  | Policy                                                                                           | HC | CH | SL |
|----|--------------------------------------------------------------------------------------------------|----|----|----|
| 31 | End of life care                                                                                 | ●  | ●  | ○  |
| 32 | Visiting                                                                                         |    | ●  |    |
| 33 | Moving from children's to adult services                                                         | ○  | ○  | ●  |
| 34 | Keeping housing and care separate                                                                |    |    | ●  |
| 35 | People's money and property                                                                      | ●  | ●  | ●  |
| 36 | Governance and quality assurance                                                                 | ●  | ●  | ●  |
| 37 | Records and data protection                                                                      | ●  | ●  | ●  |
| 38 | Duty of candour                                                                                  | ●  | ●  | ●  |
| 39 | Notifications to CQC                                                                             | ●  | ●  | ●  |
| 40 | Fit and proper persons (directors)                                                               | ●  | ●  | ●  |
| 41 | Displaying your CQC rating                                                                       | ●  | ●  | ●  |
| 42 | Health and safety                                                                                | ●  | ●  | ●  |
| 43 | No reply and unable to gain access (home care)                                                   | ●  |    | ○  |
| 44 | Key safes and access to people's homes (home care)                                               | ●  |    | ○  |
| 45 | Live-in care                                                                                     | ○  |    |    |
| 46 | Delegated healthcare activities                                                                  | ●  | ○  | ○  |
| 47 | Staff travel and driving for work (home care)                                                    | ●  |    | ○  |
| 48 | Nursing care and clinical oversight (care homes with nursing)                                    |    | ○  |    |
| 49 | People subject to the Mental Health Act (guardianship, community treatment orders and aftercare) | ○  | ○  | ○  |
| 50 | Home care for children and young people under 18                                                 | ○  |    |    |

Each worksheet in Part 3 also has the guide's "Tailor it to your service" points for that policy.

# Policy readiness tracker

From the guide: Chapter 6 and Appendix C · Matches guide edition 1.0.6

Go through all 50 policies. Tick whether each applies to you and where it stands, then give it an owner and dates. Use your service profile to see which policies apply to your type of service.

**Policy 40** applies only if your provider is an organisation, such as a company or charity. If your provider is one person or a partnership, Regulation 4 applies instead. <sup>[S01]</sup>

## When to review (Appendix C):

- Every year: Review every policy; review your governance system as a whole; run feedback surveys (**Policy 36**). Review data protection and cyber security (**Policies 36 and 37**)
- When the law or CQC guidance changes: Update the affected policies straight away
- After a serious incident, complaint or inspection: Ask whether any policy needs to change
- When the NMC publishes a new Code: Review **Policy 48**
- When the revised Mental Health Act Code of Practice is published, or more of the Mental Health Act 2025 comes into force: Review **Policy 49**
- When Working Together to Safeguard Children or the DBS rules on work with children change: Review **Policy 50**
- When CQC changes its registration guidance, forms or supporting documents list: Before you apply to register, or to change your registration, check CQC's current pages and update Chapter 9's steps for your service (Chapter 9)
- When CQC publishes its final framework: Update the framework line in each policy's control box using Appendix A

| #  | Policy                                              | Applies to us         |                       | Status                |                       |                       | Owner                | Target date          | Review date          |
|----|-----------------------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------------------|----------------------|----------------------|
|    |                                                     | Yes                   | No                    | Have it               | Needs updating        | Missing               |                      |                      |                      |
| 1  | Safeguarding adults                                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 2  | Whistleblowing and speaking up                      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 3  | Medicines management                                | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 4  | Infection prevention and control                    | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 5  | Risk assessment and positive risk-taking            | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 6  | Incidents, accidents and near misses                | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 7  | Falls prevention                                    | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 8  | Moving and handling                                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 9  | Restrictive practice and positive behaviour support | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 10 | Missed and late calls, and call monitoring          | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 11 | Lone working and staff safety                       | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

# Policy 1: Safeguarding adults

From the guide: Policy 1, Safeguarding adults · Matches guide edition 1.0.6

**Key question:** Safe. **Regulation:** 13 <sup>[S01]</sup>

**CQC framework:** Current: Safeguarding <sup>[S11]</sup>. Draft: Safeguarding <sup>[S19]</sup>

**Applies to:** home care (core); care homes (core); supported living (core). <sup>[S01, S49]</sup>

**Version**

Example from the guide: 1.0

**Owner**

Example from the guide:  
Registered manager

**Approved by**

Example from the guide: Job title  
of director

**Approved on**

Example from the guide: DD/MM/YYYY

**Next review**

Example from the guide: DD/MM/YYYY, no more than  
12 months away

## Your decisions

Each box is one choice the guide leaves to you. The guide's words are shown with the choice as a gap.

**Services covered**

- ☐ Home care  
☐ Care home  
☐ Supported living

**This policy applies to everyone who works for \_\_\_\_, including agency workers, volunteers, managers and directors.**

In the guide: [service name]

**This policy helps us meet Regulation 13 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 <sup>[S01]</sup>. We follow the safeguarding procedures of \_\_\_\_ <sup>[S55]</sup> and the Care Act 2014 <sup>[S51]</sup>.**

In the guide: [name of local authority]

Use the same answer in: Policy statement; Procedure: what to do if you are worried, step 3; Procedure: what to do if you are worried, 'The registered manager will then', step 1; Procedure: what to do if you are worried, 'The registered manager will then', step 6; Recording and reporting; Related documents of the worked example.

**Role: \_\_\_\_ holds overall responsibility for safeguarding <sup>[S55]</sup>**

Example from the guide: Director job title

Use the same answer in: Procedure: what to do if you are worried, step 3; Monitoring and audit of the worked example.

In the guide: We do not tolerate abuse of any kind <sup>[S55]</sup>. We act on every concern straight away <sup>[S01]</sup>. We work with [name of local authority] and tell CQC about allegations of abuse <sup>[S05]</sup>. We support people who experience abuse and learn from every concern.

**Tell the manager on duty straight away. Out of hours, call the on-call manager on \_\_\_\_.**

In the guide: [phone number]

In the guide: Tell the manager on duty straight away. Out of hours, call the on-call manager on [phone number]. If your concern is about the manager, tell [director job title] on [phone number], or call [local authority] safeguarding on [phone number] (out of hours: [phone number]).

**Phone number (1 of 3):**

In the guide: [phone number]

**Phone number (2 of 3):**

In the guide: [phone number]

**Phone number (3 of 3):**

In the guide: [phone number]

In the guide: Contact [local authority] safeguarding straight away, following their referral procedures and timescales <sup>[S55]</sup>. If you are unsure whether to refer, ask them and record their advice. Never decide on your own not to refer <sup>[S36, S39]</sup>.

In the guide: If the concern is about a member of staff, follow [local authority]'s procedures for allegations about staff <sup>[S55]</sup>. Decide how to keep people safe while this happens, for example by changing that staff member's duties <sup>[S19]</sup>. If you remove a worker from work with adults because they harmed or might harm someone, you must refer them to the DBS. This also applies if they leave before you can remove them. Failing to refer without a good reason is a criminal offence <sup>[S166, S167, S168]</sup>.

In the guide: All concerns are recorded in the safeguarding log, kept [where]. For each concern, the log shows what happened and when, who was involved, when [local authority] and CQC were told, and what we did and learned. Records are accurate, written at the time and stored securely <sup>[S01]</sup>.

**All concerns are recorded in the safeguarding log, kept \_\_\_\_.**

In the guide: [where]

In the guide: All staff complete safeguarding training suited to their role during induction <sup>[S55]</sup>. They then do a refresher every [12 months]. Managers check understanding in supervision.

**All staff complete safeguarding training suited to their role during induction <sup>[S55]</sup>. They then do a refresher every \_\_\_\_.**

Example from the guide: 12 months

In the guide: The registered manager reviews the safeguarding log every month to look for patterns. [Director job title] reviews a summary every [quarter].

**How often:**

Example from the guide: quarter

In the guide: Whistleblowing (**Policy 2**), Incidents (**Policy 6**), Restrictive practice (**Policy 9**), Deprivation of liberty (**Policy 20**), Duty of candour (**Policy 38**), Notifications to CQC (**Policy 39**), [local authority] safeguarding procedures.

## Tailor it to your service

**Applies to: Home care.** Cover live-in care and staff working alone in people's homes. <sup>[S33]</sup>

**How will your service do this?**

**Applies to: Care homes.** Watch for "closed cultures", which the draft framework names under Safety culture. <sup>[S19]</sup>

**How will your service do this?**

**Applies to: Supported living.** If there is CCTV, think about consent and dignity. <sup>[S45]</sup> Reflect Right support, right care, right culture if you support autistic people or people with a learning disability. <sup>[S22]</sup>

**How will your service do this?**

## Key legal points to build in

These come from the guide. Make sure your policy includes each one.

- **13(1): people must be protected from abuse and improper treatment.** Safeguarding is everyone's job, with overall responsibility at board level or equivalent <sup>[S01, S55]</sup>
- **13(2): systems must prevent abuse.** Training at induction and refreshed over time, clear procedures, and staff who know their role <sup>[S01, S55]</sup>
- **13(3): systems must investigate immediately.** Act as soon as you are aware, following your local authority's safeguarding procedures <sup>[S01, S55]</sup>
- **13(4): care must not be discriminatory, use unnecessary or disproportionate restraint, be degrading, or significantly disregard people's needs.** Examples of degrading care include leaving people in soiled sheets or on the toilet for long periods <sup>[S01, S55]</sup>
- **13(5): no one may be deprived of their liberty without lawful authority.** Care homes use the Deprivation of Liberty Safeguards (DoLS). Other services need authorisation from the Court of Protection, the court that makes decisions for people who lack mental capacity. <sup>[S01, S55]</sup> See Policy 20.
- The law defines abuse as sexual offences, physical or psychological ill-treatment, theft or misuse of money or property, and neglect. <sup>[S01]</sup>
- Local authorities have their own safeguarding duties under the Care Act 2014. <sup>[S51]</sup>

**Under section 42, the local authority must make enquiries if it has reason to suspect that an adult:**

- has needs for care and support
- is experiencing, or at risk of, abuse or neglect, and
- cannot protect themselves because of those needs. <sup>[S51]</sup>
- CQC can prosecute for breaches of 13(1) to 13(4) that lead to avoidable harm or significant risk of harm, without a warning notice first. <sup>[S01, S55]</sup>

## Questions an inspector may ask

**What would a care worker do if they saw a colleague being rough with someone?**

Our answer

Where our evidence is kept

**Show me your safeguarding log. Which of these did you report to the local authority and CQC?** <sup>[S05, S55]</sup>

Our answer

Where our evidence is kept

**What changed after your last safeguarding concern?** <sup>[S55]</sup>

Our answer

Where our evidence is kept

Checklist

- ☐ Overall responsibility sits at board level or equivalent. <sup>[S55]</sup>
- ☐ Types of abuse are described clearly, with examples. <sup>[S01, S55]</sup>
- ☐ Local authority procedures and contacts are included. <sup>[S55]</sup>
- ☐ Staff know how to raise concerns, including about managers. <sup>[S55]</sup>
- ☐ CQC notifications are covered. <sup>[S05]</sup>
- ☐ Training at induction and regular refreshers is set out. <sup>[S55]</sup>
- ☐ The person is supported and learning is recorded. <sup>[S55]</sup>

Actions

| What needs doing | Who | By when |
|------------------|-----|---------|
|                  |     |         |
|                  |     |         |
|                  |     |         |
|                  |     |         |
|                  |     |         |

Read more

In the guide, Policy 1: In short; What the law says; Worked example.

# Policy 20: Deprivation of liberty

From the guide: Policy 20, Deprivation of liberty · Matches guide edition 1.0.6

**Key question:** Effective and Safe. **Regulations:** 11 and 13(5) <sup>[S01]</sup>

**CQC framework:** Current: Consent to care and treatment; Safeguarding <sup>[S11]</sup>. Draft: Safeguarding <sup>[S19]</sup>

**Other law and guidance:** Mental Capacity Act 2005 <sup>[S52]</sup>; DoLS code of practice (2008, republished 02/06/2026) <sup>[S69]</sup>; Supreme Court judgment 02/06/2026 <sup>[S08]</sup>

**Applies to:** home care (core); care homes (core); supported living (core). <sup>[S01, S49]</sup>

**Version**

Example from the guide: 1.0

**Owner**

Example from the guide:  
Registered manager

**Approved by**

Example from the guide: Director  
job title

**Approved on**

Example from the guide: DD/MM/YYYY

**Next review**

Example from the guide: DD/MM/YYYY, and when DHSC  
interim guidance is published

## Your decisions

Each box is one choice the guide leaves to you. The guide's words are shown with the choice as a gap.

### Services covered

- ☐ Care home (DoLS)
- ☐ Home care or supported living (Court of Protection)

In the guide: Care homes: a standard authorisation is the local authority's legal permission for a deprivation of liberty. Ask [local authority] for one as soon as a deprivation of liberty is likely within the next 28 days, or if there is any doubt <sup>[S08, S52, S55, S69]</sup>. If there is no one to consult about the person apart from paid staff, tell the local authority when you ask. It can then appoint an IMCA (an independent mental capacity advocate, who speaks up for the person) <sup>[S52, S69]</sup>.

**Care homes: a standard authorisation is the local authority's legal permission for a deprivation of liberty. Ask \_\_\_\_ for one as soon as a deprivation of liberty is likely within the next 28 days, or if there is any doubt** <sup>[S08, S52, S55, S69]</sup>.

In the guide: [local authority]

In the guide: Home care and supported living: you must make sure any deprivation of liberty is authorised by the Court of Protection, the court that makes decisions for people who lack mental capacity <sup>[S55, S69]</sup>. Tell the commissioning [local authority] (the one that arranges the person's care), so it can think about applying to the court <sup>[S08, S55]</sup>. If the NHS funds the care, for example through NHS continuing healthcare, tell the NHS body that funds it. If no one else arranges or funds the care, for example if the person pays for it, get legal advice about applying. (Confirm local arrangements with your local authority.)

**Home care and supported living: you must make sure any deprivation of liberty is authorised by the Court of Protection, the court that makes decisions for people who lack mental capacity <sup>[S55, S69]</sup>. Tell the commissioning \_\_\_\_ (the one that arranges the person's care), so it can think about applying to the court <sup>[S08, S55]</sup>.**

In the guide: [local authority]

In the guide: At induction, we train staff, at a level suitable for their role, so they only use restrictions and restraint when necessary. We update this training at [intervals] <sup>[S55]</sup>. All staff are briefed on the June 2026 change. Managers complete updated training, such as NHS England's updated e-learning <sup>[S08]</sup>.

**At induction, we train staff, at a level suitable for their role, so they only use restrictions and restraint when necessary. We update this training at \_\_\_\_ <sup>[S55]</sup>.**

In the guide: [intervals]

In the guide: The registered manager reviews the register every [month] and checks it matches care plans and capacity records <sup>[S42]</sup>. Any mismatch is put right straight away.

**The registered manager reviews the register every \_\_\_\_ and checks it matches care plans and capacity records <sup>[S42]</sup>.**

Example from the guide: month

## Tailor it to your service

**Applies to:** Care homes. DoLS applies. <sup>[S08, S55]</sup>

**How will your service do this?**

**Applies to:** Home care and supported living. Court of Protection applies. Work with the commissioning local authority. <sup>[S08, S55]</sup> In a person's own home, restrictions need to be greater before they count as a deprivation of liberty. <sup>[S08]</sup>

**How will your service do this?**

## Key legal points to build in

These come from the guide. Make sure your policy includes each one.

- **Regulation 13(5):** a person must not be deprived of their liberty for care or treatment without lawful authority. <sup>[S01]</sup>
- **You must tell CQC** the outcome of any DoLS request or Court of Protection application about a person you support, even if the local authority applied. You must also tell CQC if a request or application is withdrawn. Do not tell CQC when you apply. <sup>[S03, S05]</sup>

### What changed in June 2026: <sup>[S08, S173]</sup>

- The Cheshire West “acid test” (continuous supervision and control, and not free to leave) no longer decides the question on its own.
- You must look at the person's own situation, the type, length and effects of any restrictions, and how they are carried out. No single factor decides it.
- A person's wishes and feelings count for a lot. A person can give valid consent if they are aware of their surroundings, have a basic understanding, and can show they accept or are happy with the situation. If there is serious doubt, you cannot conclude they consent.
- Whether the person objects now matters.

## What CQC also expects

These come from the guide. They are CQC guidance, not law. Make sure your policy covers each one.

- **CQC guidance:** hospitals and care homes must follow DoLS. Other services must make sure any deprivation of liberty is authorised by the Court of Protection. <sup>[S55]</sup>

## Questions an inspector may ask

**How have you updated your approach since June 2026?** <sup>[S08]</sup>

Our answer

Where our evidence is kept

**Show me your register of authorisations and referrals.** <sup>[S05]</sup>

Our answer

Where our evidence is kept

Checklist

- ☐ Reflects the 02/06/2026 judgment. <sup>[S08]</sup>
- ☐ Factors and signs of objection listed. <sup>[S08]</sup>
- ☐ Correct route for your service: DoLS or Court of Protection. <sup>[S55]</sup>
- ☐ Notifications to CQC. <sup>[S05]</sup>
- ☐ Review date set for when interim guidance is published. <sup>[S08]</sup>

Actions

| What needs doing | Who | By when |
|------------------|-----|---------|
|                  |     |         |
|                  |     |         |
|                  |     |         |
|                  |     |         |
|                  |     |         |

Read more

In the guide, Policy 20: In short; What the law says; The factors to consider; Worked example.

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- Forms and records, including registration readiness

**Written by Samuel Cudjoe**

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