

ADULT SAFEGUARDING POLICY 2024

Introduction

The Birmingham Buddhist Centre is seeking to put into practice the key Buddhist ethical principles of kindness, generosity, contentment, truthfulness and awareness.

We work within an inter-agency framework guided by the best practice and policy guidelines of the Birmingham Safeguarding Board. It refers to law and good practice as defined in England and Wales.

The purpose of this policy

This policy is for Friends, Mitras and Order members involved in Birmingham Buddhist Centre activities (and those of any outreach groups run by this charity) as employees, volunteers, leaders or teachers, members of the general public attending our classes, as well as room-hire customers.

It aims to provide

- Protection for adults attending Birmingham Buddhist Centre activities, including those who may be at risk of harm or have care and support needs, and
- Protection for Friends, Mitras and Order members working with them.

It sets out

- information and practices contributing to the prevention of harm to adults.
- what to do if harm is suspected.

Our responsibilities

We have a duty of care to prevent or address harm to all adults in the course of our activities, including adults who may be at risk of harm or have care and support needs.

Although we do not run activities specifically for those with mental illness or addiction, we recognise that people who may be vulnerable in these ways do attend our events and take part in the life of our sangha.

The trustees of Birmingham Buddhist Centre recognise their responsibility to safeguard adults, including those who may be at risk of harm or have care and support needs visiting or involved in Birmingham Buddhist Centre activities, as set out by the Charity Commission in its latest guidance: <https://www.gov.uk/guidance/safeguarding-duties-for-charity-trustees>

Dharmashalin (Will Sullivan) is our Safeguarding Officer. He is responsible for co-ordinating the protection of children and adults at the Birmingham Buddhist Centre (See also our Safeguarding Children Policy.)

Pasannamati Frances Neal is our Safeguarding Trustee. She is responsible for making sure Safeguarding is taken seriously by the trustees and appears regularly on their agendas, ensuring the trustees comply with their Safeguarding obligations as required by the Charity Commission.

Principles

We recognise that:

- All adults, regardless of age, disability, gender, ethnicity, religious belief, sexual orientation or identity, have the right to equal protection from harm.

We will seek to safeguard adults at risk by:

- Valuing them, listening to and respecting them.
- Adopting safeguarding guidelines for staff and volunteers.
- Recruiting staff and volunteers safely, ensuring checks are made where necessary.
- Sharing information about concerns with agencies who need to know, and involving parents and children appropriately.
- Providing effective management for staff and volunteers through supervision, support and training.

Who is an adult?

For the purposes of this policy an “adult” is a person who has passed their 18th birthday regardless of the legal age of majority in any jurisdiction.

Who is an adult “at risk of harm” or with “care and support needs”?

The UK Care Act 2014 defines such a person as “any person who is aged 18 years or over and at risk of abuse or neglect because of their needs for care and or support”; i.e. they need care and support (whether or not the local authority is meeting any of those needs); and is experiencing, or at risk of, abuse or neglect; and as a result of those care and support needs, is unable to protect themselves from either the risk of, or the experience of, abuse or neglect”.

Adults who may be ‘at risk’ may also include those who

- have dementia
- have learning disabilities
- have mental health problems
- have drug, alcohol or substance dependency
- have physical or sensory disabilities
- have been bereaved, suffered grief and loss
- through age or illness are dependent on other people to help them
- live with domestic abuse
- are homeless

- are refugees or asylum seekers or
- for any reason may be considered not to have 'mental capacity' (see below)

Whether or not a person is at risk of harm" and/or has "care and support needs in these cases will vary according to circumstances, and it should be noted that a person with a physical disability is not necessarily at risk, though they could be. Each case must be judged on its own merits.

What is 'abuse'?

'Abuse' is not a legal term, but covers a number of ways in which a person may be deliberately harmed (legally or illegally), usually by someone who is in a position of power, trust or authority over them, or *who may be perceived by that person to be in a position of power, trust or authority over them*; for example by a Friend, Mitra or Order member who is helping to run Birmingham Buddhist Centre activities for those newer to such activities. The harm may be physical, psychological or emotional, or it may exploit the vulnerability of the person in more subtle ways.

However, harm can also occur less consciously, through naivety, idealism or lack of awareness.

Types of abuse (See Appendix 1 for fuller details)

Abuse can take many forms, including; physical abuse, domestic violence, sexual abuse, psychological abuse, financial or material abuse, modern slavery, discriminatory abuse, organisational abuse, neglect and acts of omission, self-neglect.

Signs of abuse

These are many and varied. Some have perfectly acceptable explanations. It is useful to bear in mind: (See Appendix 2 for a fuller list)

People who might abuse

Abuse may happen anywhere and may be carried out by anyone, e.g.:

- Order members, Mitras and Friends, whether financially supported or volunteering;
- People you consider good and trusted friends;
- Informal carers, family, friends, neighbours;
- Other users or room hire customers of the Birmingham Buddhist Centre;
- Strangers or visitors to the Birmingham Buddhist Centre.

Practical expression of our duty of care

You **MUST** report to the Buddhist Centre's Safeguarding Officer if you:

- Receive a disclosure of abuse.
- Suspect abuse is happening.
- Witness abuse or neglect.

What we will do if an adult alleges abuse

We understand that we need to

- stay calm.
- listen patiently.
- reassure the person they are doing the right thing by speaking up.
- clarify issues of confidentiality early on. We will make it clear we may have to discuss their concerns with others, on a strictly need-to-know basis, if at all possible with their permission (see below).
- explain what we are going to do.
- write a factual account of what we have seen and heard, immediately.

We will do our best to avoid

- appearing shocked, horrified, disgusted or angry.
- pressing the individual for details.
- making comments or judgments other than to show concern. Our responsibility is to take them seriously, not to decide whether what they are saying is true.
- promising to keep secrets.
- confronting any alleged perpetrator.
- risking contaminating the evidence by investigating matters ourselves.

What we will do next

- We understand that our first concern must be the safety and wellbeing of this person and that we must not be distracted from this by loyalty to the person who has been accused or a desire to maintain the good name of Triratna or our charity.
- If the person receiving the disclosure is not our Safeguarding Officer, they must tell the Safeguarding Officer *only*, who will coordinate the handling of the matter on behalf of the charity's trustees. However, if the Safeguarding Officer is not immediately available the matter should be communicated to the Chair of the charity, or the Safeguarding Trustee. If the person may be in immediate danger the Safeguarding Officer, Chair, Safeguarding Trustee or person receiving the disclosure will phone social services or police straight away. A telephone referral will be confirmed in writing within 24 hours.
- Normally the Safeguarding Officer will follow up any report. If for some reason that is not possible, contact the Birmingham safeguarding authorities via the Adults and Communities Social Worker Teams. They are also able to advise. E-mail: CSAdultSocialCare@birmingham.gov.uk, telephone 0121 303 1234 (out of hours emergencies 0121675 4806) or visit www.bsab.org/how-to-report-abuse.

If necessary, our Safeguarding Officer will contact Triratna's ECA Safeguarding Team for advice: safeguarding@triratna.community

- If a formal safeguarding alert is raised we will inform our insurers, Buddhist Insurance Scheme via the broker, CliveAdams. (clive_adams@ajg.com)
- NB These last two reports involve describing briefly the type of incident/concern and what is being done to address it. They do not need to include any personal details about those involved.
- We understand that every person has a legal right to privacy under the International Convention on Human Rights and data protection legislation; therefore if possible we need to get the person's consent to share the information they have given us, within the limits described here and below.
- However, it may be necessary, and therefore legally 'reasonable', to pass on information without their consent if a child is at risk of harm, the adult is at immediate risk of harm once they leave your company and/or a crime has been or is about to be committed.
- Meanwhile, the person receiving the disclosure will make detailed factual notes about the conversation/concern/incident as soon as possible, including time, date and location, and pass them to the charity's Safeguarding Officer (see 'Secure, confidential record-keeping' below). As far as possible what the person has said should be recorded in their own words, as these could be used in court.
- We understand that no sangha member should attempt to investigate a criminal allegation, that this is the job of the police and that to attempt this could prejudice a court case and put the parties in danger.

Finally, in England and Wales we understand that we may need to make a Serious Incident Report to the Charity Commission: <https://www.gov.uk/guidance/how-to-report-a-serious-incident-in-your-charity>. We will consult the ECA Safeguarding Team for guidance on this: safeguarding@triratna.community

Safeguarding Adults should be centred on five principles:

1. Person Centred - The adult concerned is at the heart of any investigation and action taken. Work and engage with the adult to manage the risk.
2. Risk Management – Think holistically, agree on the prioritised risks and document them. Be clear on the individual's roles and responsibilities and who the lead person for the case is. The situation should where possible be reviewed with the adult concerned, with specific timescales set out.
3. Information Sharing – Share information that is relevant, timely and proportional to the risk identified. This information must be shared in a secure way, on a need-to-know basis.
4. Defensible Decision Making – Safeguarding officers and trustees are accountable for decisions and actions taken and not taken. Record the reasons for decisions and demonstrate a proportionate approach.
5. Multi-Agency Best Practice – Talk to the right people and share information appropriately. Evidence shared decision making and keep communication with all relevant parties updated.

What is ‘mental capacity’?

See Appendix 3.

Vulnerability can be variable

Vulnerability and resilience can vary throughout a person’s life. Many people are generally emotionally and psychologically stable in most aspects of their lives, but on occasion they may find themselves in a more vulnerable position, e.g. after a bereavement, serious illness, or breakdown of a relationship. They may be new to the practice of meditation and their practice may make them more sensitive.

For example, we will bear in mind that a person who is emotionally vulnerable for any reason may not be able to make balanced decisions regarding giving money or becoming more involved with Triratna, or entering into intimate relationships, whether friendship or relationships which are more romantic or sexual in nature. We will take great care to help each other avoid exploiting people in such everyday situations of vulnerability.

Protecting those with psychological disorders

We are aware that those attending our Centre and activities include adults experiencing psychological disorders ranging from mild to severe.

We recognise that as Buddhists we do not have the professional skills to diagnose or help people with psychological disorders and that they may not be helped solely by the kindness of Buddhists. In such cases we may need to advise them to seek professional help.

We are aware that for people with serious psychological disorders traditional Buddhist practices involving recognition of the illusion of self could be extremely dangerous. We may need to encourage them in traditional Buddhist practices involving the calming of body and mind, or to avoid meditation – altogether, or during periods of relapse.

Where we believe a person to be at risk of self harm or suicide we will encourage them to contact their GP, mental health team or to go to the accident and emergency department of the local hospital. If necessary we will make the contact on their behalf, with their permission. We will consult with Triratna’s ECA Safeguarding Team if necessary: safeguarding@triratna.community.

Where we consider there is immediate danger of a person harming themselves or others we will contact emergency services, without their permission if necessary.

Protecting those with psychological disorders - online

Buddhism and meditation are increasingly taught using online media. In person it is *relatively* easy to notice where a person may have compromised mental health; online it is much more difficult.

We recognise that among those seeking *individual* online guidance from members of the Triratna Buddhist Order there may be some reporting meditation experiences which are an indication of serious psychological disorder.

In engaging in *individual* guidance online by email, blog, social media or text we will try to establish with local Order members the identity, location and suitability of the participant, and which local Order members are available locally to support them *in person* and gaining permission to contact those Order members if we believe they are at risk. (This does not apply where the participant is an Order member and therefore well known to us.)

DBS checks /security checks

If in any doubt about the requirements for DBS checks our Safeguarding Officer will check with external Safeguarding experts such as Thirtyone:eight (www.thirtyoneeight.org) to ensure that anyone required to have a DBS check has been checked, and to the correct level. Thirtyone:eight provide an advice line and online DBS service.

The Buddhist Centre will complete enhanced DBS checks on Trustees and those working with children. For other members of staff and those leading classes and activities we will complete basic DBS checks as these people are in positions of actual or perceived authority.

Where any volunteer or staff member is not DBS-checked we must be able to demonstrate that they

- Are supervised by a person who is DBS-checked.
- Have read the charity's Safeguarding Policies and Child Protection Code of Conduct, and had an opportunity to discuss them with the Safeguarding Officer.
- Have signed a document recording that they have read and agree to abide by them.

The core team (Mitras or Order members, paid or voluntary) directly responsible for any Birmingham Buddhist Centre activity or event specifically intended and advertised for adults likely to be more vulnerable to influence, exploitation or mistreatment can and therefore must have an enhanced DBS check with a check of Barred Registers. At present we do not run any such activities but will keep this under review in case this should change.

DBS certificates apply to roles rather than persons and are not transferable from another role elsewhere.

It is regarded as good practice that any DBS certificate should be less than three years old.

Managing those who pose a risk to others

There may be cases where it is known that a person attending our activities is likely to pose a risk to others (for example, a person who is known to have a previous criminal conviction for sexual or other violent offences, or someone who is under investigation for possible sexual or other violent offences).

Such a person will be asked by the Safeguarding Officer to agree a behaviour contract setting out the terms of their continued participation at Birmingham Buddhist Centre

activities within agreed boundaries and based on a risk assessment carried out by an Order member with professional experience in risk assessment. If our Safeguarding Officer is not qualified to do this we will ask for help from the ECA Safeguarding Team or another professionally qualified Order member. (See the document 'Managing those who pose a risk 2023'.)

Where it is felt that the charity does not have the resources to manage this relationship safely, we reserve the right to ask the person not to attend our activities.

Lettings/hire outs

Our charity rents or lends premises for activities which are not activities of our charity, even if they are led/run by a member of our sangha or members of our sangha take part. We understand that there is joint responsibility on our charity and those renting/using our premises for the Safeguarding of children and adults taking part in such activities, but that our trustees bear ultimate responsibility for the Safeguarding in all activities on our premises. This includes self-organised meetings of sangha members which are not seen as activities run by the charity; e.g. chapter meetings and GFR meetings.

Therefore we will ask any organisation or individual using our premises to sign a lettings agreement which says they have read our Safeguarding policies and agree to abide by them, or that they have shown us their own Safeguarding policy, in which case their policy should be compatible with our own policy and should be written to an equal or higher standard.

The Carers Project is run as part of a consortium of organisations under the umbrella of Forward Carers. Any safeguarding concern involving a carer would also need to be raised with Georgina Gabriel (Designated Safeguarding Lead - DSL - for Forward Carers.) She can be contacted for consultation, advice and support and is responsible for supporting partners with appropriate training. As DSL she also has a duty to ensure Forward Carers, its partners and all contracted bodies are compliant with safeguarding regulations. georgina.gabriel@forwardcarers.org.uk

If you have a concern

All allegations or suspicions should be taken seriously and reported to our Safeguarding officer: Dharmashalin@gmail.com (07779 148172)

Who else needs to know?

We understand that confidentiality, sharing information only on a need-to-know basis, is very important. Under data protection legislation nobody has a right to know about a case – except, for Safeguarding purposes, those in a position to prevent further harm, and our Chair, who holds ultimate responsibility for the governance of the charity. For example, where there is a criminal allegation against a Mitra it could be justifiable for the Safeguarding Officer, Safeguarding Trustee, Chair and relevant Mitra Convenor to know about it.

This is not a matter of concealment but is intended to protect all concerned from further harm. It will also protect our sangha from fear, rumour and disharmony which will make it much harder to deal with the matter effectively without causing further harm.

Secure, confidential record-keeping

We understand our responsibility for secure and careful record-keeping. Our Safeguarding Officer will keep a detailed log of all Safeguarding-related incidents as well as conversations, actions and the reasoning behind them. These are recorded in a secure online location, with password protection known only to the Safeguarding officers and Chair. We understand that such records must not be stored on individuals' own private computers.

We also understand that under data protection law we need to word our records in a form we would be happy for the subjects to read if they ask to, as is their legal right. This means notes should be factual and respectful, free of interpretations and value-judgements.

Keeping confidential records

We understand that because many abuse cases come to light 30 or more years later our insurers may require us to keep our logs for up to 50 years. (This is a requirement of the UK's Buddhist Insurance Scheme.)

If our charity closes down, we will give our records to another Triratna Buddhist Centre/charity to keep with their own confidential Safeguarding logs.

Training

The Safeguarding Officer will organise annual safeguarding training for employees, class leaders, event organisers and volunteer supporters.

Reviewing our policies annually

All our safeguarding policies will be reviewed by the Safeguarding Officer and trustees annually, with the reviews recorded in the minutes of their meetings.

Publication of this policy

This policy will be communicated to all employees, class leaders, event organisers and volunteer supporters and made available at the Buddhist Centre. Its existence and whereabouts will also be made known to those attending residential events organised by the Buddhist Centre elsewhere.

Chair of Trustees

Maitrisara (Pippa Bobbett) - Maitrisara1@gmail.com

Safeguarding officer

Dharmashalin (Will Sullivan) - Dharmashalin@gmail.com

Safeguarding Trustee

Pasannamati Frances Neal - pasannamati@hotmail.com

Last reviewed August 2023

This Birmingham Buddhist Centre Adult Safeguarding policy is to be read in conjunction with the

- *Birmingham Buddhist Centre Child Protection Policy 2022*
- *Birmingham Buddhist Centre Child Protection Code of Conduct 2022*

Appendices

Appendix 1: Definitions of abuse in adults

Physical abuse – including assault, hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions.

Domestic violence – including psychological, physical, sexual, financial, emotional abuse; so called ‘honour-based’ violence.

Sexual abuse – including rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting.

Psychological abuse – including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks.

Financial or material abuse – including theft, fraud, internet scamming, coercion in relation to an adult’s financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.

Modern slavery – encompasses slavery, human trafficking, forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.

Discriminatory abuse – including forms of harassment, slurs or similar treatment; because of race, gender and gender identity, age, disability, sexual orientation or religion.

Organisational abuse – including neglect and poor care practice within an Institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one's own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.

Neglect and acts of omission – including ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating.

Self-neglect – this covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding. Incidents of abuse may be one-off or multiple, and affect one person or more.

Appendix 2: Signs of abuse in adults

Physical abuse

- History of unexplained falls, fractures, bruises, burns, minor injuries.
- Signs of under or over use of medication and/or medical problems left unattended.
- Any injuries not consistent with the explanation given for them
- Bruising and discolouration - particularly if there is a lot of bruising of different ages

and in places not normally exposed to falls, rough games, etc.

- Recurring injuries without plausible explanation
- Loss of hair, loss of weight and change of appetite
- Person flinches at physical contact and/or keeps fully covered, even in hot weather;
- Person appears frightened or subdued in the presence of a particular person or

people

Domestic violence

- Unexplained injuries or 'excuses' for marks or scars
- Controlling and/or threatening relationship including psychological, physical, sexual,

financial, emotional abuse; so called 'honour-based' violence and Female Genital Mutilation.

Sexual abuse

- Pregnancy in a woman who lacks mental capacity or is unable to consent to sexual intercourse
- Unexplained change in behaviour or sexually explicit behaviour
- Torn, stained or bloody underwear and/or unusual difficulty in walking or sitting
- Infections or sexually transmitted diseases
- Full or partial disclosures or hints of sexual abuse
- Self-harming
- Emotional distress
- Mood changes
- Disturbed sleep patterns
- Psychological abuse
- Alteration in psychological state e.g. withdrawn, agitated, anxious, tearful
- Intimidated or subdued in the presence of a carer
- Fearful, flinching or frightened of making choices or expressing wishes
- Unexplained paranoia
- Changes in mood, attitude and behaviour, excessive fear or anxiety
- Changes in sleep pattern or persistent tiredness
- Loss of appetite
- Helplessness or passivity
- Confusion or disorientation
- Implausible stories and attention seeking behaviour
- Low self-esteem

Financial or material abuse

- Disparity between assets and living conditions
- Unexplained withdrawals from accounts or disappearance of financial documents or loss of money

- Sudden inability to pay bills, getting into debt
- Carers or professionals fail to account for expenses incurred on a person's behalf
- Recent changes of deeds or title to property
- Missing personal belongings
- Inappropriate granting and/or use of Power of Attorney

Modern slavery

- Physical appearance; unkempt, inappropriate clothing, malnourished
- Movement monitored, rarely alone, travel early or late at night to facilitate working hours
- Few personal possessions or ID documents
- Fear of seeking help or trusting people

Discriminatory abuse

- Inappropriate remarks, comments or lack of respect
- Poor quality or avoidance care
- Low self-esteem
- Withdrawn
- Anger
- Person puts themselves down in terms of their gender or sexuality
- Abuse may be observed in conversations or reports by the person of how they perceive themselves

Institutional Abuse

- Low self-esteem
- Withdrawn
- Anger
- Person puts themselves down in terms of their gender or sexuality
- Abuse may be observed in conversations or reports by the person of how they

perceive themselves

- No confidence in complaints procedures for staff or service users.
- Neglectful or poor professional practice.

Neglect and acts of omission

- Deteriorating despite apparent care
- Poor home conditions, clothing or care and support.
- Lack of medication or medical intervention

Self-neglect

- Hoarding inside or outside a property
- Neglecting personal hygiene or medical needs
- Person looking unkempt or dirty and has poor personal hygiene
- Person is malnourished, has sudden or continuous weight loss and is dehydrated –
- constant hunger, stealing or gorging on food
- Person is dressed inappropriately for the weather conditions
- Dirt, urine or faecal smells
- Home environment does not meet basic needs (for example heating or lighting)
- Depression

Appendix 3: What is 'mental capacity'?

Whether a person has mental capacity is a matter of specialist assessment by social and mental health services. However, it may be useful to know something about it.

Mental capacity is the ability to make a particular decision. An adult *may* be at risk if they are unable to make a decision due to illness, disability, poor mental health, dementia, a learning disability or something else that may impair their judgment.

A person may be deemed to be 'without capacity' if they cannot:

- understand the decision
- retain the information



- weigh up the information
- communicate their decision

About matters such as

- finance
- social care
- medical treatment