



Buddhafield Safeguarding Adults Policy 2024

The legal structure of the central Buddhafield body is a private limited company that has applied for and been granted charitable status by the Charity Commission of England and Wales. Triratna Buddhafield is a company registered with Companies House, registration number 05157868.

The registered office of the company is:

Triratna Buddhafield
Henleaze House Business Centre
13 Harbury Road, Henleaze
Bristol
BS9 4PN
information@buddhafield.com
www.buddhafield.com
Registered charity no: 1108826

Chair of trustees

Name: Amaragita, Gabriela Pearse
Email address: amaragita@gmail.com

Companies own by Triratna Buddhafield

All policies also apply to these subsidiary companies.

- Samaya Project Ltd. (company number: 03984058) Incorporated 2nd May 2000 - trades as Buddhafield Events and runs the Buddhafield Festival.
- Buddhafield Trading Ltd. (company number: 03535723) Incorporated 26th March, 1998 - runs the Buddhafield Cafe.

Safeguarding officer

Kamalanandi, Jack Lyus
Email address: kamalanandi@buddhafield.com,
BuddhafieldSafeguarding@protonmail.com

Safeguarding trustee (interim)

Kamalanandi, Jack Lyus
Email address: kamalanandi@buddhafield.com,

Insurance details

Company/policy name: Buddhafield
Policy Number: 18226293
James Adams (Dip CII) Senior Account Broker
Arthur J. Gallagher, 9th Floor, AMP House, Dingwall Road, Croydon, CR0 2LX
Email address: James.Adams@ajg.com
Phone number: Direct: 0208 018 7457 Mobile: 07432 598 812



Although we do not run activities specifically for those with identifiable vulnerabilities, such as those who are carers or who live 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. At the Buddhafield festival and at some other events, we have eight-step and twelve-step recovery spaces.

Kamalanandi (Jack Lyus) is our Safeguarding officer. He is responsible for coordinating the protection of all children and adults who may be at risk at Buddhafield events and within the Buddhafield community. (See also our Safeguarding Children policy.) Kamalanandi is the Mandate Holder for Safeguarding; within the Buddhafield system of organisation, Safeguarding has its own "circle" comprised of a number of others who also have roles relating to safeguarding and ethical conduct.

Dr Utpaladhi Boak is our Safeguarding trustee

She is responsible for making sure Safeguarding is taken seriously by the trustees, is a standing item on the agenda at every trustee meeting, ensuring the trustees comply with their Safeguarding obligations as required by the Charity Commission.

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 who is vulnerable or "at risk"?

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 formally '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
- are suffering from bereavement, grief and/or loss
- through age or illness are dependent on other people to help them
- live with domestic abuse
- are homeless
- are refugees or asylum seekers and
- for any reason may be considered not to have 'mental capacity'. (See below.)

Whether or not a person is "at risk" or "vulnerable" in these cases will vary according to circumstances, and it should be noted that a person with a physical disability is not



necessarily vulnerable or at risk, though they could be. Each case must be judged on its own merits.

Definitions of abuse in adults

See Appendix 1.

Signs of abuse in adults

See Appendix 2.

What is 'mental capacity'?

See Appendix 3.

Vulnerability can be variable

Vulnerability and resilience can vary throughout a person's life. Many people who are generally emotionally and psychologically stable in most aspects of their lives and would not be formally classified as vulnerable or 'at risk' may, on occasion 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, or 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 officer if necessary: safeguarding@triratna.community or with external advisers such as Thirtyone:eight.



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 take great care at the start 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.)

(Responding to children online See *Buddhafield Child Protection Policy 2024.*)

DBS checks /security checks

The rules about eligibility for DBS checks are complex. 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 provides an advice line and online DBS service.

However, we note that DBS certificates

- apply to roles rather than persons and are not transferrable from another role elsewhere.
- should be less than three years old.
- the Charity Commission states that wherever an employee, volunteer or trustee is eligible for a DBS check a DBS check should be carried out. We are free to request these of any such person, but if it is impracticable to DBS check all of them we may focus on obtaining checks for those with responsibilities which render them likely to be seen by others as holding some degree of authority; For example:
 - our Chair and trustees
 - those working with our charity's money and finances
 - our Safeguarding officer
 - those who teach or lead and those who support them
- Where any volunteer or staff member is not DBS checked we will ensure that



other safeguarding measures are in place, for example:

- they have had Safeguarding training
- have read our Safeguarding policies and Child Protection Code of Conduct, had an opportunity to discuss them with the Safeguarding officer and have signed a document recording that they have read and agree to abide by them.
- They are supervised by those who are DBS-checked.

DBS for working with adults at risk

- The core team (Mitras or Order members, paid or voluntary) directly responsible for any activity or event specifically intended and advertised for adults likely to be more vulnerable to influence, exploitation or mistreatment must have an Enhanced DBS check with a check of Barred Registers.
- Although we do not run activities specifically for those with identifiable vulnerabilities, such as those who are carers or who live 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. At the Buddhafield festival and at some other events, we have eight-step and twelve-step recovery spaces.

DBS checks for addiction recovery meetings

However, it has been agreed with the DBS Service by the 12-Step Movement that no DBS checks are needed for 12-Step meetings. This applies only to meetings run formally as 12-step meetings because they are co-facilitated by the participants and have no leadership. Where 12-step meetings take place on our premises, we will take care to clarify that Mitras and Order members taking part in such meetings are not seen as leading and do not behave as such and that these meetings are self-help groups held on our premises.

DBS checks may be required for those leading 8-Step meetings or other recovery programmes which are not part of the 12-Step Movement, and which are run as part of our programme of activities.

DBS checks are not required for those running general activities which adults with mental health difficulties or in addiction recovery (for example) may happen to attend.

Managing those who pose a risk to others

There may be cases where it is known that a person attending our activities may pose a risk to others (for example, a person who is known to have a previous criminal conviction for sexual or other violent offences, who is on the UK Sex Offender Register, 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 in our activities within



agreed boundaries and based on a formal risk assessment. This should be provided by the person's probation/police supervising officer or other external professional or an Order member with professional experience in risk assessment. If necessary, our Safeguarding officer will consult with Thirtyone:eight and/or ask the ECA Safeguarding officer to put us in touch with a 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.

We will consult with Triratna's ECA Safeguarding officer if necessary: safeguarding@triratna.community or with external advisers such as Thirtyone:eight.

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*. This could be a volunteer, workshop leader, vendor, spiritual teacher, healer, bodyworker, Mitra or member of the Triratna Buddhist Order who is helping to run Buddhafield events. 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.

Signs of abuse

See Appendix 2.

If you have a concern

All allegations or suspicions should be taken seriously and reported to our Safeguarding officer: Kamalanandi
email: BuddhafieldSafeguarding@protonmail.com

If a person over 18 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 well-being 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.

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.

If the adult alleging abuse is not formally vulnerable or 'at risk' and their complaint may be criminal, it is up to them to report to the police if they wish to, though we will offer them help and support to do this.

If the person is formally vulnerable or 'at risk' we may report on their behalf, though with their permission *if possible*.

Whether or not formally vulnerable or 'at risk', 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.

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

It may be necessary, and therefore legally 'reasonable', to pass on information without the adult's consent if a child is at risk of harm, they may be at immediate risk of harm once they leave your company and/or a crime has been or is about to be committed; also if what is disclosed indicates that there is also a risk of harm



to a child.

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.

In England and Wales, 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>. The Charity Commission has stated that it is always better to report than not.

We will report to our insurers any situation or incident that we consider might lead to a claim under our insurance policy.

UK charities insured by the Buddhist Insurance Scheme should report to the broker, Clive Adams. (See page 1.)

NB These last two points involve reporting briefly the type of incident/concern and what is being done to address it. They should not include any personal details identifying those involved.

We will consult with Triratna's ECA Safeguarding officer if necessary: safeguarding@triratna.community or with external advisers such as Thirtyone:eight.

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 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



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, and the withholding of the necessities of life, such as medication, adequate nutrition and heating.

Self-neglect – this covers a wide range of behaviours neglecting to care for one's personal hygiene, health or surroundings and includes behaviours 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 overuse 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 &/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 relationships including psychological, physical, sexual, financial, and 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, 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 of 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 complaint 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 a decision
- retain information
- weigh up information
- communicate their decision

About matters such as:

- finance
- social care
- medical treatment