

## **Vajraloka Buddhist Meditation Centre Safeguarding adults policy 2020**

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Registered charity no: 514363

### **Introduction**

Triratna is a worldwide network of friends in the Buddhist life. This is for many of us a source of great richness, support and strength. However, it also carries a risk that we may fail to notice, question or act on behaviours of concern, out of naivety, loyalty to friends or lack of awareness; or an assumption that “it couldn’t happen here” or “they would never do a thing like that.”

This policy is an expression of the first ethical precept taught by the Buddha: to avoid harming living beings. It refers to law and good practice mainly in England and Wales.

### **The purpose of this policy**

This document is for Friends, Mitras and Order members involved in Vajraloka activities (and those of any outreach groups run by this centre) as employees, volunteers, leaders, teachers or parents.

It aims to provide

- Protection for adults attending Vajraloka activities, including those who may be “at risk” or vulnerable, 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 values**

*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 may take part in the life of our sangha.*

*The trustees of Vajraloka recognise their responsibility to Safeguard adults, including those who may be deemed to be “at risk” or “vulnerable”, visiting or involved in Vajraloka activities, as set out by the Charity Commission in its latest guidance: <https://www.gov.uk/guidance/safeguarding-duties-for-charity-trustees>*

**Kavaradhi is our Safeguarding officer.** [Vajraloka\\_safeguarding@protonmail.com](mailto:Vajraloka_safeguarding@protonmail.com) They are responsible for co-ordinating the protection of people at Vajraloka.

**Tejapushpa is our Safeguarding trustee.** They are 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. [tejapushpa@hotmail.com](mailto:tejapushpa@hotmail.com)

### **Who is an “adult”?**

In the United Kingdom an “adult” is a person who has passed their 18<sup>th</sup> birthday. We have a general duty of care to prevent or address harm (see page 5) to adults in the course of our activities, including adults who may be defined as “vulnerable” or “at risk”.

### **Who is an “adult at risk”?**

This is not currently well defined. However, the following is one widely-used definition:

A person aged 18 or over, who needs, or may need, community care services because they are frail or have a learning disability, physical disability, sight or hearing disability or mental health issues; and

cannot (or may not be able to) care for themselves, or take steps to protect themselves from significant harm or exploitation.

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 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.

### **What is ‘mental capacity’?**

Whether a person has mental capacity is a matter of specialist assessment and not for us to make. 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

### **Vulnerability can be variable**

As is made clear above in the reference to the vulnerability of those who have suffered grief and loss we recognise that many people who are generally emotionally and psychologically stable in most aspects of their lives may on occasion find themselves vulnerable or at risk. This may be because of illness, relationship breakdown or bereavement, or because their practice of meditation or Buddhism

has made them more sensitive and self-aware, particularly if they are new to Buddhism.

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 suicide or self-harm, or to pose a risk to others, we will alert our centre Safeguarding officer, who will refer to local mental health services and/or the police as appropriate, and consult with the Triratna Safeguarding Team if necessary.

[safeguarding@triratna.community](mailto:safeguarding@triratna.community)

### **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**

With anyone under 18, we will not engage in personal communication online or via social media.

### **DBS checks /security checks**

As rules on eligibility for DBS checks are complicated and change from time to time, our Safeguarding officer will check annually with external Safeguarding experts such as Thirtyone:eight ([www.thirtyoneeight.org](http://www.thirtyoneeight.org)) to ensure that anyone required to have an Enhanced DBS check or Enhanced DBS (with check of barred registers) has been checked. Any DBS certificate should be less than five years old.

The core team (Mitras or Order members, paid or voluntary) directly responsible for any of Vajraloka activities do not need to have an Enhanced DBS check with check of barred registers – since Vajraloka does not run any activities or event specifically intended and advertised for adults likely to be more vulnerable to influence, exploitation or mistreatment. We will keep this under review should this change.

### **Managing those who pose a risk to others**

There are 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 negotiate a behaviour contract setting out the terms of their continued participation in Vajraloka activities within agreed boundaries. (See the document 'Managing those who pose a risk'.) 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.

### **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 Vajraloka 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**

The 2014 Care Act identifies nine types of abuse, all of which have a psychological/emotional aspect.

1. physical abuse
2. sexual abuse
3. neglect and acts of omission
4. organisational abuse
5. self-neglect
6. modern slavery
7. domestic abuse
8. discriminatory abuse
9. financial or material abuse
10. Psychological abuse

### **Types of abuse, in more detail**

#### **Physical**

- Bodily assaults resulting in injuries e.g. hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate sanctions.
- Bodily impairment e.g. malnutrition, dehydration, failure to thrive
- Medical/healthcare maltreatment

#### **Sexual**

- Rape, incest, acts of indecency, sexual assault
- Sexual harassment or sexual acts to which the person has not

consented, or could not consent or to which they were pressured into consenting.

- Sexual abuse might also include exposure to pornographic materials, being made to witness sexual acts; also sexual harassment, with or without physical contact.
- Sexual contact of any kind with anyone under 16 is a crime. In the case of Order members “position of trust” law means sexual contact of any kind with anyone under 18 could be considered a crime.

### **Abuse through neglect**

- Ignoring medical or physical care needs
- Failure to provide access to appropriate health, social care or educational service
- The withholding of the necessities of life, such as medication, adequate nutrition and heating

### **Organisational abuse**

- Neglect or abuse within an institution (eg.hospital/care home) or care provided in own home.
- One-off incident or continuing ill-treatment
- Poor professional practice, policies or structure of an organization

### **Self neglect**

- Alcohol abuse
- Hoarding
- Drug abuse

### **Modern slavery**

Examples: working as housemaids, in brothels, cannabis farms, nail bars and agriculture against their will, unpaid

Some possible signs

- Physical appearance, inappropriate clothing.
- Isolation, not being allowed to travel alone; restricted freedom of movement.
- Poor living conditions, few possessions, no ID documents
- Unusual travel times – being dropped off early morning or late at night

*Modern Slavery Helpline (UK) 0800 0121 700*

### **Domestic abuse**

- Physical, psychological, sexual and financial abuse.
- ‘Honour’-based violence or forced marriage
- Involving intimate partner or family member
- Female Genital Mutilation (FGM)
- 16 year-olds can be defined as suffering domestic abuse.

Some signs and symptoms of domestic abuse

- Visible injuries or unexplained marks, scars or injuries
- Making ‘excuses’ for injuries
- Controlling and/or threatening relationships

### **Discriminatory abuse**

- Discrimination including gender, sexual orientation, race, disability, age, skin colour, language, culture, religion or belief, or politics
- Harassment
- Loss of self-esteem

- Not being able to access services or being excluded

### **Financial or material abuse**

- Misuse or theft of money
- Exploitation, pressure in connection with wills, property or inheritance
- Unexplained withdrawal of large sums of money
- Personal possessions going missing from home
- Extraordinary interest and involvement by the family/carer or friend in an individual's assets

### **Psychological/emotional**

- Threats of harm, controlling, intimidation, coercion, harassment, verbal abuse, enforced isolation or withdrawal from services or supportive networks.
- Humiliation
- Bullying, shouting or swearing

### **Signs of abuse**

#### **Physical**

NB Ageing processes can cause changes which are hard to distinguish from some aspects of physical assault e.g. skin bruising can occur due to blood vessels becoming fragile.

- A history of unexplained falls or minor injuries
- Bruising in well-protected areas, or clustered from repeated striking
- Finger marks
- Burns of unusual location or type
- Injuries found at different states of healing
- Injury shape similar to an object
- Injuries to head/face/scalp
- History of moving from doctor to doctor, or between social care agencies; reluctance to seek help
- Accounts which vary with time or are inconsistent with physical evidence
- Weight loss due to malnutrition; or rapid weight gain
- Ulcers, bed sores and being left in wet clothing
- Drowsiness due to too much medication; or lack of medication causing recurring crises/hospital admissions

#### **Sexual**

- Disclosure or partial disclosure (use of phrases such as 'It's a secret')
- Medical problems, e.g. genital infections, pregnancy, difficulty walking or sitting
- Disturbed behaviour e.g. depression, sudden withdrawal from activities, loss of previous skills, sleeplessness or nightmares, self-injury, showing fear or aggression to one particular person, inappropriately seductive behaviour, loss of appetite or difficulty in keeping food down.
- Unusual circumstances, such as, for example, two people found in a toilet/bathroom area, one of them distressed

#### **Signs of psychological or emotional vulnerability**

- Isolation
- Unkempt, unwashed appearance; smell
- Over meticulousness
- Inappropriate dress
- Withdrawnness, agitation, anxiety; not wanting to be touched

- Change in appetite
- Insomnia or need for excessive sleep
- Tearfulness
- Unexplained paranoia; excessive fears
- Low self-esteem
- Confusion

#### **Signs of neglect**

- Poor physical condition
- Clothing in poor condition
- Inadequate diet
- Untreated injuries or medical problems
- Failure to be given prescribed medication
- Poor personal hygiene

#### **Signs of financial or material vulnerability**

- Unexplained or sudden inability to pay bills
- Unexplained or sudden withdrawal of money from accounts
- Disparity between assets and satisfactory living conditions
- Unusual level of interest by family members and other people in the vulnerable person's financial assets

#### **Signs of discrimination**

- Lack of respect shown to an individual
- Substandard service offered to an individual
- Exclusion from rights afforded to others, such as health, education, criminal justice

#### **Other signs of abuse**

- Controlling relationships
- Inappropriate use of restraint
- Sensory deprivation e.g. spectacles or hearing aid
- Denial of visitors or phone calls
- Failure to ensure privacy or personal dignity
- Lack of personal clothing or possessions

#### **People who might abuse**

Abuse may happen anywhere and may be carried out by anyone, eg:

- Order members, Mitras and Friends, whether financially supported or volunteering
- Parents
- People you consider good and trusted friends
- Informal carers, family, friends, neighbours
- Other users or tenants of Vajraloka
- Strangers or visitors to Vajraloka

#### **If you have a concern**

All allegations or suspicions should be taken seriously and reported to Vajraloka's Safeguarding officer: Akashapala [vajraloka\\_safeguarding@protonmail.com](mailto:vajraloka_safeguarding@protonmail.com)

#### **What to do if an adult alleges abuse**

**Do**

- stay calm.
- listen patiently.
- reassure the person they are doing the right thing by telling you.
- clarify issues of confidentiality early on. Make it clear that you 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 you are going to do.
- write a factual account of what you have seen and heard, immediately.

#### **Do not**

- appear shocked, horrified, disgusted or angry.
- press the individual for details.
- make comments or judgments other than to show concern. Your responsibility is to take them seriously, not to decide whether what they are saying is true.
- promise to keep secrets.
- confront the alleged perpetrator.
- risk contaminating the evidence by investigating matters yourself.

#### **What to do next**

- Your first concern is the safety and wellbeing of the person bringing the allegation. Do not be distracted from this by loyalty to the person who has been accused or your desire to maintain the good name of Triratna or your centre.
- If you are not the Safeguarding officer, tell the Safeguarding officer *only*. They will co-ordinate the handling of the matter on behalf of the charity's trustees. However, if this is not possible and you think the person is in immediate danger phone social services or police straight away. A telephone referral should be confirmed in writing within 24 hours. If necessary, the Safeguarding officer should contact the Triratna Safeguarding team for advice as to what to do next: [safeguarding@trinatna.community](mailto:safeguarding@trinatna.community)
- Every person has a legal right to privacy under the International Convention on Human Rights and data protection legislation; therefore if possible you need to get the person's consent to share the information they have given you, within the limits described here and below.
- However, if necessary it is legal to pass on information without their consent if you believe they are at risk of significant harm.
- Meanwhile, make detailed factual notes about the conversation/concern/incident as soon as possible, including time, date and location. Give them to the Safeguarding officer. (See 'Secure, confidential record-keeping' below.)
- No sangha member should attempt to investigate a criminal allegation. This is the job of the police and to attempt this could prejudice a court case and put the person in danger. Finally, if the allegation may be criminal, without giving personal details of those involved you should email the Charity Commission that there has been a serious Safeguarding incident, that your charity has addressed it according to your Safeguarding policies and the police have been informed. <https://www.gov.uk/guidance/how-to-report-a-serious-incident-in-your-charity>

#### **Who else needs to know?**

Confidentiality, sharing information only on a need-to-know basis, is very important. Under data

protection legislation nobody has a right to know about the matter – except, for Safeguarding purposes, with those in a position to prevent further harm, and your Chair, who holds ultimate responsibility for the governance of the charity. For example, where there is a criminal allegation against a mitra it would be justifiable for the Safeguarding officer, Chair and mitra convenor to know about it. Normally it is illegal to share personal information about a person without that person's permission in writing; however, where there are Safeguarding concerns it may be necessary, and therefore legally justifiable, to report without consent, for the prevention of harm.

This is not a matter of concealment but is intended to protect all concerned from further harm. It will also protect your 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 can be stored on the charity's computer, only if in a password protected section accessible only to the Safeguarding officer and one or two others approved by our trustees.

If this is not practicable, we will keep them on an external hard drive or memory stick. To guard against loss in case the files, hard drive or memory stick become corrupted these can be backed up to another hard drive or memory stick and/or printed off. Any such memory sticks, hard drives and paper copies will be stored in a locked cabinet, box or drawer accessible only to the Safeguarding officer and one or two others approved by our trustees. 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.

### **Reviewing our policies annually**

All our Safeguarding policies will be reviewed by the trustees and Safeguarding officer annually and the review recorded in the minutes of their meetings.

## **Vajraloka Buddhist Meditation Centre**

**Chair's name and email address**  
**Rijumitra**

**Chair's signature**

Sgd

**Safeguarding officer's name and email address**

Kavaradhi

[vajraloka\\_safeguarding@protonmail.com](mailto:vajraloka_safeguarding@protonmail.com)

**Safeguarding officer's signature**

Sgd

**Date 15 April 2026**

This document will be reviewed annually by the Safeguarding officer and trustees of Vajraloka Buddhist Meditation Centre

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